



TRUTH,
RECONCILIATION
AND REPARATIONS
COMMISSION

THE GAMBIA

REPORT

VOLUME 9

**PRESIDENT'S ALTERNATIVE
TREATMENT PROGRAMME**

REPORT

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TREATMENT PROGRAMME**

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A. INTRODUCTION

1. The President's Alternative Treatment Programme was initiated by former President **Yahya Abdul Aziz Jemus Junkung Jammeh (Yahya A.J.J. Jammeh)**, claiming to cure people living with HIV/AIDS (PLHIV) and other ailments. The purpose of the public hearings on the HIV/AIDS treatment programme was "to investigate those claims, the treatment that he purported to have made to persons who submitted to that treatment, with a view to determining whether there were any human rights violations that were occasioned in that treatment".¹
2. For this report, it is important to detail the science of HIV/AIDS and have an in-depth understanding of the disease and ways to contain and manage the health of persons living with the disease. To this end, Dr. Assan Jaye, a leading expert on HIV/AIDS² at the national, regional and global levels, was invited to educate the TRRC on the subject and other doctors who participated in the programme. Dr. Tamsir Mbowe, Dr. Malick Njie, Dr. Mariatou Jallow and the laboratory technicians were invited to testify before the Commission to increase understanding about the programme, how it worked and its outcomes.
3. Due to the sensitive nature of the issues surrounding HIV/AIDS, such as the stigma and discrimination that PLHIV have to contend with and matters of confidentiality, it was difficult to get witnesses to testify publicly or even privately. The Chair of the TRRC alluded to this in his remarks made on July 6, 2020 that this was due to the social stigma associated with HIV/AIDS.

B. ABOUT HIV/AIDS

4. Dr. Assan Jaye told the Commission that HIV is a virus transmitted through contact with bodily fluids such as blood, semen, vaginal fluids and breast milk.³ He further explained that *The Gambia had two (2) types of HIV infections known as HIV 1 and HIV 2⁴, that HIV 2 was rare to find except in lusophone countries such as Guinea Bissau, which caused a cohort to be established to understand better how people living with HIV2 had long term non-progression.* These Studies were done in The Gambia, and it was discovered that certain components of the immune system were responsible for fighting HIV and were able to inform other countries that worked on HIV 1.

¹ (525) TRRC 15/7/2020 FATOU JATTA - YouTube, Essa Faal, Lead Counsel, Opening Statement.

² Dr. Assan Jaye, is head of Research, Training and Career Development at the Medical Research Council (MRC), The Gambia. He joined the MRC in 1993 as a Rockefeller early postdoctoral research trainee. In 1998 he was appointed as an International Senior Scientist and group leader for HIV Immunology in the then viral Diseases Programme. He later led the programme as interim head in 2008. In 2016, he was one of 38 International Scientists recognized as a Fellow by the Academy of Sciences (AAS), a pan African organization headquartered in Nairobi, Kenya. In 2015 he was elected Fellow for excelling in the field of medical research and outstanding contribution to the advancement of sciences in Africa. In March 2016 he was appointed as the Senior Manager, Research and Training and Career Development. Since 2011, Dr. Jaye has been seconded to the University of Cheikh Anta Diop in Dakar Senegal to head a West African Research Collaboration Network.

³ Center for Disease Control (CDC). (2017). About HIV/AIDS. Retrieved from <https://www.cdc.gov/hiv/basics/whatishiv.html>

⁴ HIV-1 and HIV-2 have many similarities including their intracellular replication pathways, transmission modes and clinical effects leading to acquired immune deficiency syndrome (AIDS). However, HIV-2 is less likely to progress into AIDS because of its lower transmissibility. Thus, individuals infected with HIV-2 mostly remain non-progressors for a long period of time, while patients infected by HIV-1 progress faster and contract AIDS. Available at: <https://www.news-medical.net/health/HIV-1-versus-HIV-2-Whats-the-Difference.aspx>

5. Once HIV is contracted, the body's immune system begins to develop antibodies to attack the virus. HIV directly attacks CD4 cells in the body, which are cells that the body uses to protect itself from pathogens, infections and illnesses.⁵ Consequently, disease progression can be measured by the number of CD4 cells in the body as well as through evaluating the amount of virus in the blood, known as the viral load.⁶
6. On average, a healthy person has a CD4 count of 500 to 1,500 cells per cubic millimeter of blood.⁷ As HIV infection progresses in the body, the CD4 count drops. Once it drops as low as 200 cells per cubic millimeter of blood, the disease reaches a level where it is classified as Acquired Immunodeficiency Syndrome (AIDS).⁸ The ability to monitor viral load and CD4 levels are paramount in disease detection and treatment, however, but this is made complicated by the discovery of Latent HIV Reservoir. This is demonstrated in a study by Chun and Fauci (1999) in which people receiving treatment for HIV were able to successfully lessen their viral load to undetectable levels and were asymptomatic, but rebounded into a diseased state immediately after halting the medically recognized treatment, *antiretroviral therapy (ART)*.⁹
7. There are many types of procedures for testing for HIV and the most common is the enzyme-linked immunosorbent assay (ELISA) test.¹⁰ This is used to diagnose HIV by looking for antibodies in blood samples. Through this test, HIV can be detected in persons who are asymptomatic. This test is more likely to be given in many countries due to limited resources and restricted access to HIV p24 antigen testing and molecular assays.¹¹
8. Additionally, while the p24 antigen is usually not detectable after five to six weeks from exposure to HIV, the HIV antibody can be detected as early as two weeks in some. Antibodies produced in a person's blood remain there for the rest of that person's life.¹² Newly developed fourth-generation HIV tests allow simultaneous detection of the HIV p14 antigen and HIV antibodies.¹³
9. Using this combination of tests, HIV infections can be detected days before antibody seroconversion, which is the change in an HIV-negative to HIV-positive test result based solely on the presence of antibodies. ¹⁴
10. Early detection of HIV in a patient is imperative and crucial to enable the person to start treatment and prevent transmission, as a large proportion of transmission occurs in the early phase of infection.¹⁵ The amount of time for HIV to develop into AIDS varies for each

5 Ibid footnote 1
6 Fauci, A. S. (2003). HIV and AIDS: 20 years of science. *Nature Medicine*, 9(7), 839–843. <https://doi.org/10.1038/nm0703-839>
7 National Institute of Health. (2017). HIV Treatment. Retrieved from <https://aidsinfo.nih.gov/understanding-hiv-aids/fact-sheets/21/51/hiv-treatment-the-basics>
8 Ibid.
9 Chun, T. W., & Fauci, A. S. (1999). Latent reservoirs of HIV: Obstacles to the eradication of virus. *Proceedings of the National Academy of Sciences of the United States of America*, 96(20), 10958–10961.
10 Fauci, HIV and AIDS
11 Constantine, N. T., Zink, H. (2005). HIV testing technologies after two decades of evolution. *Indian J Med Res* 121, pp 519-538. Retrieved from <http://medind.nic.in/iby/t05/i4/iby05i4p519.pdf>
12 Tooley, L. (2010). Detecting HIV earlier: Advances in HIV Testing. Retrieved from <https://www.catie.ca/en/pif/august-2010/detecting-hiv-earlier-advances-hiv-testing>
13 Urío, L. J., Mohamed, M. A., Mghamba, J., Abade, A. Aboud, S. (2015). Evaluation of HIV antigen/antibody combination ELISAs for diagnosis of HIV infection in Dar Es Salaam, Tanzania. *Pan African Medical Journals*. 20, 196. doi:10.11604/pamj.2015.20.196.4934
14 Fearon. *The Laboratory Diagnosis*
15 UNAIDS. (2018). Accelerating towards 90-90-90 Retrieved from <https://www.unaids.org/en/resources/presscentre/feature-stories/2018/july/90-90-00-targets-workshop>

individual. Most people infected with HIV and are not receiving treatment present HIV symptoms within five to ten years.¹⁶

11. In the 2000s, a drug was discovered known as antiretroviral therapy (ART). For clinicians to make informed treatment decisions for HIV-infected individuals and increase the life expectancy of those patients, treatment should commence as soon as one tests positive for HIV.¹⁷ Guidelines published by the World Health Organization (WHO) in 2015 recommended that “antiretroviral therapy should be initiated in everyone living with HIV at any CD4 cell count”.¹⁸ According to Dr. Jaye the drug was a game-changer and once a PLHIV was taking it and stuck to their drugs, they could live a productive life¹⁹. He further elucidated that the drug could help a person have their viral loads drop to a level that could be classed as undetectable, at which level the virus cannot be transmitted. In short, “*the discovery of the drug moved HIV from a death sentence and made HIV a manageable chronic illness such as diabetes*”²⁰
12. Despite barriers, ART has been largely successful, measurable by the extension of the life expectancy of a person living with HIV. In 1981, an AIDS patient had a life expectancy of one to two years, however, in 2018 an early diagnosis still allows for an average of 53 more years.²¹ Strict adherence to the ART drug regimen is critical because incorrect usage can increase viral loads and drug resistance to first-line treatment.²² If ART (further referred to as ARV) is stopped for three months or longer, the risk of developing AIDS or dying more than doubles.²³

C. LEGAL FRAMEWORK

13. For better comprehension and appreciation, and to avoid misinterpretations, some of the terminologies used in this report are defined in the context of the report's subject matter.

D. DEFINITIONS

HUMAN IMMUNOLOGY VIRUS

14. Human Immunology Virus, commonly referred to as HIV, is a virus that attacks cells in the immune system (the body's natural defence against illnesses). The virus destroys a type of whiteblood cell in the immune system called a T-helper cell, also referred to as a CD4 cell, and uses these cells to make copies of itself.

16 WHO. (2016). Consolidated guidelines on the use of antiretroviral drugs for treating and preventing HIV infection. Geneva. Retrieved from <https://www.ncbi.nlm.nih.gov/books/NBK374294/>
17 Fauci, A. S. (2003). HIV and AIDS: 20 years of science. *Nature Medicine*, 9(7), 839–843. <https://doi.org/10.1038/nm0703-839>; Teeraananchai, S., Kerr, S.J., Amin, J., Ruxrungtham, K., Law, M.G. (2017). Life expectancy of HIV-positive people after starting combination antiretroviral therapy: a meta-analysis. *HIV Med*, 18(4), 256-266
18 Urío et al. Evaluation of HIV antigen/antibody
19 Witness Testimony 14th October 2020 (534-535)
20 Witness testimony, 14th October 2020 para 987 -990
21 Ibid.
22 Cohen, M., Smith, M., Muessig, K., Hallett, T, Powers, K., Powers, K. (2013) Antiretroviral treatment of HIV-1 prevents transmission of HIV-1: where do we go from here?. *Lancet* 383(9903). [http://doi.org/10.1016/S0140-6736\(13\)61998-4](http://doi.org/10.1016/S0140-6736(13)61998-4); WHO. (2016). Consolidated guidelines on the use of antiretroviral drugs for treating and preventing HIV infection. Geneva. Retrieved from <https://www.ncbi.nlm.nih.gov/books/NBK374294/>
23 Holkmann Olsen C., Mocroft, A., Kirk, O., Vella, S., Blaxhult, A., Clumeck, N., Fisher, M., et al. (2007). Interruption of combination antiretroviral therapy and risk of clinical disease progression to AIDS or death. *HIV Medicine* 8(2), 96-104. doi:10.1111/j.1468-1293.2007.00436.x

Dr. Jaye told the Commission that *there are two major problems with HIV:*

- a. *Its ability to integrate into the DNA of a person. When it integrates into the DNA, it has the ability to hide itself for a long period and that is the reason why it is always one step ahead of the immune response of the body – the soldiers. The soldiers are responsible for doing the surveillance and attacking.*
 - b. *It can mutate when it comes out in bits, meaning it changes its sequences.²⁴*
13. As HIV destroys more CD4 cells and makes more copies of itself, it gradually weakens a person's immune system. This means that someone who has HIV and is not taking treatment will find it harder and harder to fight off infections and diseases.²⁵

2.1.2. ACQUIRED IMMUNODEFICIENCY SYNDROME

14. Acquired Immunodeficiency Syndrome, commonly referred to as AIDS, is a chronic illness caused by the human immunodeficiency virus (HIV). A person is said to have AIDS when their immune system is too weak to fight off infection and they develop certain symptoms and illnesses known as 'opportunistic infections.' This is the last stage of HIV which is when the infection is very advanced and if left untreated, will lead to death.
15. Although there is no cure for HIV, people living with HIV can enjoy long and healthy lives with the right treatment and support. To do this, it is especially important to commit to taking treatment correctly²⁶.

2.1.3 CD4 CELL/CD4 COUNT

16. CD4 cells are white blood cells that fight infection. CD4 cell count is an indicator of immune function in patients living with HIV. CD4 cell counts are obtained from blood work as part of laboratory monitoring for HIV infection.
17. CD4 cell counts are usually measured when diagnosed with HIV at baseline, then every 3 to 6 months during the first two years or until your CD4 count increases above 300 cells/mm³.
18. Normally, a CD4 cell count should be between 500-1600 per microliter (ul). HIV Patients should be monitored every three months, as indicated by **Dr. Assan Jaye**,²⁷ a practice that was adopted at the Medical Research Council (MRC). People living with HIV should take their treatment medication regularly to keep their count high²⁸.

24 Testimony of Dr Assan Jaye 14th October 2020 line 379-384

25 Global information and education on HIV/AIDS <https://www.avert.org/about-hiv-aids/what-hiv-aids>

26 Ibda

27 Statement to TRRC

28 ibda

2.1.4 VIRAL LOAD/ VIRAL LOAD TEST

19. Viral load refers to the amount of HIV in an infected person's blood. A high viral load may indicate a recent HIV transmission or HIV that is untreated or uncontrolled. Viral loads are generally highest for a period right after contracting HIV. They decrease as the body's immune system fights against HIV but then increase again over time as CD4 cells die off. A viral load can be millions of copies per mL of blood, especially when the virus is first contracted.
20. **Dr. Assan Jaye** educated the Commission by stating that Plasma Viral Load (PVL) is the quantitative number of virus copies that are left circulating in the blood as the virus begins to multiply from its hiding place (viral replication). The higher the multiplication rate, the higher the virus particles in their blood. When a person begins treatment, the suppression of the viral replication is signaled by the reducing level of the plasma viral load. There is an inverse relationship between the level of PVL and the CD4 cell count. While the viral load is going down, the CD4 count increases because fewer viruses attack the CD4 count. That is what indicates whether a treatment is effective or ineffective. PVL is measured in the laboratory by quantitative RNA Polymerase Chain reaction (PCR). In brief, RNA is extracted from the blood and Reverse Transcriptase PCR (RT-PCR) is performed using specific long terminal repeat (LTR) oligonucleotide primer sequences in an RT-PCR molecular assay. Products of amplification are quantified by chemiluminescence and the level of sensitivity is between 50-100 copies per millilitre (mL).

2.1.5 UNDETECTABLE VIRAL LOAD

21. An *undetectable viral load* is where antiretroviral treatment (ART) has reduced a person's HIV status to such small quantities that standard blood tests can no longer detect it. Dr. Assan Jaye told the Commission that one is undetectable when the virus load is less than 50 copies/mL. People living with HIV who have an undetectable viral load cannot pass HIV on through sex. Being undetectable does not mean your HIV is cured; it simply means the disease cannot be transmitted.

2.1.6 ANTI-RETROVIRAL THERAPY (ART/ARV)

22. Antiretroviral Therapy is a treatment that suppresses or stops a retrovirus. One of the retroviruses is the Human Immunodeficiency Virus (HIV) which is responsible for causing AIDS. Retroviruses are so named simply because they carry their genetic information in the form of RNA rather than DNA.²⁹ The ART/ARV effectively controls the spread of the disease and enhances the lifespan of people living with the disease. Once a person living with HIV maintains their regular intake of ART/ARV, their HIV status becomes as manageable as any chronic disease.

29 https://www.medicinenet.com/antiretroviral_therapy_art/definition.htm (Accessed 5th July, 2021)

2.2 APPLICABLE NATIONAL LAWS

2.2.1 THE 1997 CONSTITUTION OF THE GAMBIA

22. The 1997 Constitution of The Gambia is the supreme law of the land. Chapter IV provides for the Protection of Fundamental Rights and Freedoms, which guarantees the respect and upholding of human rights and fundamental freedoms without discrimination. Section 21 of the Constitution guarantees freedom from inhumane treatment and states that no person shall be subjected to torture or inhumane and degrading punishment or other treatment.
23. Section 216 (4) provides that the State shall endeavor to facilitate equal access to clean and safe water, adequate health and medical services, habitable shelter, sufficient food and security to all persons.

2.2.2 THE HIV AND AIDS PREVENTION & CONTROL ACT 2015 (OMNIBUS LAWS)

The HIV and AIDS Prevention & Control Act 2015 was established through a review of the model law for HIV and AIDS in The Gambia (2007), as well as the incorporation of comments of UNAIDS. It spells out the legal framework for coping with HIV and AIDS in The Gambia. The Act was passed by former President **Yahya Jammeh** on April 2, 2015. It provides for HIV/AIDS prevention, implementation of control measures and proper treatment for people living with the virus.

- *It provides for the manner in which the dissemination of information concerning people living with HIV and AIDS should be conducted.*
- *It also provides for a consequence for the dissemination of erroneous or false information on HIV and AIDS.*
- *This Act prohibits discrimination against persons who have or are perceived to have been infected with HIV and AIDS and also penalizes the willful transmission of HIV.*

2.3 NATIONAL POLICY ON THE MANAGEMENT, PREVENTION AND CONTROL OF HIV AND AIDS

2.3.1 NATIONAL POLICY GUIDELINES ON HIV AND AIDS, 2014-2020Q

This document was put in place to expand and strengthen HIV/AIDS counselling & testing and prevent mother-to-child transmission. It was also established to support and broaden Anti-Retroviral Therapy (ART), expand the care and support services for People Living with HIV/AIDS and as well support sentinel surveillance and research in HIV/AIDS. It also seeks to intensify information, education and communication interventions on HIV/AIDS.³⁰

The policy also highlights fundamental guidelines to be implemented and adhered to. Additionally, it aims at protecting the enjoyment and protection of the rights of persons living

30 National Health Policy- 2012-2020- Ministry of Health and Social Welfare, page 22

with HIV and AIDS and by establishing practical means and mechanisms through which high standards of prevention, treatment, care and support services can be accorded to people with HIV and AIDS. For instance, it provides for the means of ensuring implementation and adherence to the following fundamental rights:

- *Right to non-discrimination and equality before the Law: seeks to ensure adherence to and implementation of human rights; prevents discrimination based on one's HIV and AIDS status. It thus tasks the State to enact laws or strengthen anti-discrimination and related laws also to prevent stigmatization.³¹*
- *Right to privacy: seeks to ensure the strict observance of confidentiality and informed consent, and that information on the status of people living with HIV and AIDS is held in strict confidence. The only exception to this is that disclosure to an endangered third party would only be made where the law permits the same, and doing otherwise will constitute a violation of their right to privacy.³²*
- *Right to liberty and security of person; right to freedom of movement: seeks to ensure that persons with HIV and AIDS will not have their freedom of movement restricted based on their status, as the Principle of Quarantine does not apply to them. Essentially, no one has the right or authority to keep them as prisoners for whatever reason.³³*
- *Right to education: seeks to ensure that no one is denied access to education on the basis of their HIV and AIDS status.*
- *Right to the highest attainable standard of physical and mental health: seeks to ensure that people living with HIV and AIDS have access to quality healthcare and the requisites to maintain a good standard of health.³⁴*

2.3.2 INTERNATIONAL GUIDELINES ON HIV/AIDS AND HUMAN RIGHTS

The promotion and protection of human rights are essential to the response to HIV/AIDS. Therefore, negating the rights of people living with HIV and AIDS and those affected by the illness endangers not only their well-being but their very lives. Consequently, the development and application of the following guidelines or principles could provide an international framework for discussion of human rights considerations at the national, regional and international levels to arrive at a more comprehensive understanding of the complex relationship between the public health rationale and the human rights rationale of HIV/AIDS. In particular, governments could benefit from guidelines that clearly outline how human rights standards apply in the area of HIV/AIDS and indicate concrete and specific measures, both in terms of legislation and practice that should be undertaken.³⁵

31 National Policy Guidelines on HIV and AIDS, page 31
 32 National Policy Guidelines on HIV and AIDS, page 31
 33 National Policy Guidelines on HIV and AIDS, page 31
 34 National Policy Guidelines on HIV and AIDS, page 32
 35 AIDS and Human Rights, page 9

2.3.3 THE AFRICAN CHARTER ON HUMAN AND PEOPLE'S RIGHTS IN RELATIONS TO HIV AND AIDS

Although the African Charter (to which The Gambia is a signatory) does not mention HIV/AIDS, there are still substantive provisions which may apply to the violation of persons' human rights as a result of their HIV/AIDS status. The African Commission's responsibility to hear cases of rights violations by state parties to the Charter is also applicable to the aforementioned circumstances. \

Article 1 of the African Charter unambiguously provides that state parties to the Charter shall recognize the rights, duties and freedoms enshrined therein and shall undertake to adopt legislative or other measures to give effect to them.³⁶

2.3.4 CONVENTION AGAINST TORTURE, AND OTHER CRUEL, INHUMANE OR DEGRADING TREATMENT OR PUNISHMENT;

In light of the above international instruments, key human rights with examples of their specific application in the HIV/AIDS context are: -

Nondiscrimination and equality before the law, e.g. eliminating discrimination against people living with HIV/AIDS in the areas of health care, employment, education, immigration, international travel and housing.

Right to health, e.g. ensuring equal and adequate access to the means of prevention, treatment and care, such as for vulnerable populations with lower social and legal status, (e.g. women and children).

Right to privacy, both informational and physical, e.g. ensuring confidentiality of HIV test results, and prohibiting mandatory or compulsory testing.

Right to education and information, e.g. ensuring equal and adequate access to prevention education and information, such as targeted material for ethnic minorities.

Freedom from inhumane, degrading treatment or punishment, e.g. prohibiting automatic isolation of HIV-positive prisoners; autonomy, liberty and security of the person, e.g. prohibiting HIV testing or research without informed consent, and prohibiting detention or quarantine solely on the basis of HIV status.

Sharing in scientific advancement and its benefits, e.g. ensuring equal and adequate access to a safe blood supply and universal infection control protocols or treatment drugs.

The right to work, e.g. prohibiting dismissal of staff solely on the basis of their HIV status.

Freedom of expression, assembly and association, e.g. ensuring availability of registration for groups of people living with HIV/AIDS, such as sex workers or men who have sex with men; - participation in political and cultural life, e.g. ensuring the participation of persons living with HIV/AIDS in the formulation, implementation and evaluation of policy.³⁷

36 The African Human Rights Law Journal, HIV/AIDS and human rights: The role of the African Commission on Human and Peoples' Rights: BY Sabelo Gumedze, Lecturer in Public Law, School of Law, University of the North, page 12
37 Handbook for Legislators on HIV/AIDS, Law and Human Rights: Action to Combat HIV/AIDS in View of its Devastating

2.3.5 INTERNATIONAL COVENANT ON ECONOMIC, SOCIAL AND CULTURAL RIGHTS

The above covenant recognizes the inherent dignity and of the equal and inalienable rights of individuals through state obligations, of which persons living with HIV and AIDS could immensely benefit from. Adherence to said obligations and its implementation will also help control, prevent and cater for HIV and AIDS. As such, the following obligations provided for by this covenant will go a long way in the control in according the human dignity of persons of HIV and AIDS patients:

ARTICLE 3: The States Parties to the present Covenant undertake to ensure the equal right of men and women to the enjoyment of all economic, social and cultural rights set forth in the present Covenant.

ARTICLE 11 (1): The States Parties to the present Covenant recognize the right of everyone to an adequate standard of living for himself and his family, including adequate food, clothing and housing, and to the continuous improvement of living conditions. The States Parties will take appropriate steps to ensure the realization of this right, recognizing to this effect the essential importance of international cooperation based on free consent.

ARTICLE 12 (1) AND (2) (A-D): The States Parties to the present Covenant recognize the right of everyone to the enjoyment of the highest attainable standard of physical and mental health.

The steps to be taken by the States Parties to the present Covenant to achieve the full realization of this right shall include those necessary for:

- (a) *The provision for the reduction of the stillbirth-rate and of infant mortality and for the healthy development of the child;*
- (b) *The improvement of all aspects of environmental and industrial hygiene;*
- (c) *The prevention, treatment and control of epidemic, endemic, occupational and other diseases;*
- (d) *The creation of conditions which would assure all medical service and medical attention in the event of sickness.*

2.3.6 INTERNATIONAL COVENANT ON CIVIL AND POLITICAL RIGHTS

6: Every human being has the inherent right to life. This right shall be protected by law. No one shall be arbitrarily deprived of his life.

Article 7: No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment. In particular, no one shall be subjected without his free consent to medical or scientific experimentation.

Article 8: No one shall be held in slavery; slavery and the slave-trade in all their forms shall be prohibited.

Human, Economic and Social Impact, page 26-27

Article 8(1): No one shall be held in servitude.

Article 8 (3) (a): No one shall be required to perform forced or compulsory labour

3. MANDATE AND METHODOLOGY

28. The Commission under Section 2 (a) has the mandate to investigate human rights violations such as sexual and gender-based violence and inhumane and degrading treatment. The theme on Presidential Alternative Treatment Program was in the 2018 thematic investigation plan of the Commission titled “*President Yahya Jammeh’s false medical treatment Programmes.*” The Commission found it important to investigate former President **Yahya Jammeh’s** Alternative Treatment Programme which he established after claiming to have powers to cure several diseases and medical conditions. The Commission focused more particularly on the HIV/AIDS cure/treatment and limited the theme to “*The False Claims of a Cure for HIV/AIDS by former President Yahya Jammeh.*”
29. The TRRC formulated an investigative plan to guide the process of the investigations, considering the need for a sensitive approach to be adopted. The investigation method considered the nature and health status of the victims of the Presidential Alternative Treatment Programme and the need to protect them. As a result, the Commission assigned two investigators to lead investigations on the theme. This approach was adopted to accommodate the needs of the victims and guarantee them confidentiality to protect them from revictimization.
30. The investigators assigned this role were one male and one female. This arrangement was found necessary because it had been observed during previous thematic investigations that the majority of victims feel more comfortable talking to TRRC staff of the same gender.
31. The Research and Investigation Unit of the TRRC made a request to the Transitional Justice & Human Rights Project³⁸ office for technical assistance on the PATP investigations and had a consultant identified by AIDS-Free world. The Consultant³⁹ had experience with the PATP as she had previously conducted research with AIDS-Free World on the impact President **Yahya Jammeh’s** Aids treatment had on the health of persons that entered into the treatment programme. The investigators worked with the consultant and conducted interviews, but the consultant was unable to attend interviews with victims due to concerns about confidentiality. The consultant was only privy to redacted information.
32. The investigators prioritized gathering evidence to compare the victims’ health conditions before entering the treatment programme and after they were discharged. This information was imperative because given that former President **Yahya Jammeh** had claimed that his treatment was a ‘cure,’ a decline in the health status of a beneficiary would challenge that claim. It was also important that a comparison was made because one of the conditions of the PATP was for all participants to stop conventional medication such as ARVs which are significant to sustaining the health of people living with HIV/AIDS.
33. The first victim contacted by the investigators was **Fatou Jatta**, who was a member of the first batch of the PATP. **Fatou Jatta** is an activist on HIV/AIDS awareness and a member

³⁸ The UN agencies UNDP and OHCHR provided funding to the TRRC with funding from the UN peacebuilding Fund (PBF).

³⁹ Ms Michelle Adeniyi, Masters in Global Health from Eck Institute for Global health at the University of Notre Dame.

of the first support group of persons living with HIV/AIDS in The Gambia, known as Santa Yallah Support Society. She assisted the investigators with contacting and bringing together victims. At first, the victims were reluctant to discuss the PATP as they believed they would be obliged to testify before the Commission. The investigators were able to explain the mandate of the Commission and emphasize that the TRRC is a victim-centered Commission and testimonies are voluntary for victims.

34. Many of the participants were very sceptical of the investigators’ assurances because former President Jammeh had made similar promises i.e., they would not appear on TV and that their statements would remain confidential. Most of the victims’ concerns were centered around a fear of stigma. Many were scared for their lives and those of their children. The Commission allowed the victims to choose how to share their stories. Some of them therefore testified as protected witnesses and others in closed sessions. Only one witness testified publicly. Some victims also submitted written statements and felt that was sufficient as they did not want to testify due to fear of stigma. All these were relevant and assisted the Commission to reach the findings contained in this report.
35. Under *Section 14 (2)*, the Commission is required to adopt a child and gender-sensitive approach in investigations of cases involving children and women. The PATP had children and women, which caused the Commission to set up mechanisms to address their needs. The Commission even went further to include men for purposes of this theme. This was particularly relevant due to the claims of sexual abuse during the treatment process and the fact that both male and female participants of the programme experienced unwanted exposure of their bodies.

The Commission learnt that most victims of the PATP were being discriminated against and faced further stigmatisation. Most of them were not protected and found it practically impossible to get housing. To address this issue and enable the victims to assist the TRRC, the Victim Support Unit of the TRRC, exercising its mandate under Section 13 of the Act, responded to the needs of the victims by providing livelihood support for them.

The investigators gradually gained their victims’ confidence, allowing them to more comfortably share their experiences and their victimisations under the PATP. However, the investigators still faced challenges as only eight victims showed up at the next meeting at the Santa Yallah Secretariat; of the eight, the violations against three could not be attributed to the PATP.

Upon taking the victims’ statements, the investigators followed the leads obtained and contacted identified doctors, nurses, lab technicians, and medical interns who were at some point part of the PATP team and also obtained their statements.

The investigators contacted every person, organisation or institute that was named in a statement. The Gambia Radio and Television Services (GRTS) was contacted because they recorded treatment sessions. The investigators found out that the late former Director-General of GRTS, **Modou Sanyang**, was exclusively in charge of GRTS engagement with PATP. **Sanyang** was the coordinator and gave directives to GRTS staff on what content to work on. As a State Broadcaster, GRTS aired PATP promotional programmes on both television and radio in Gambian languages: Mandinka, Fula, Jola, Serahuli and Wolof.

The UNAIDS office was contacted, but due to institutional policies, Staff of the UN were prohibited from providing statements. Rose St Clair Charles, then a UNAIDS volunteer, was also contacted, however, she was reluctant to give a statement.

36. Due to the low turnout, the investigators wrote to the National Aids Secretariat requesting the names and contact details of all HIV/AIDS support societies in The Gambia. Once this was received, the team reached out to them, requesting an audience. Unfortunately, most of the phone numbers were inactive. Nevertheless the team visited the societies. Many support society leaders explained that their members did not want to meet us or even provide statements. They further explained that they themselves were unable to confirm which of their members underwent the PATP.
37. Having ascertained the involvement of medical staff, the investigators requested an audience with Chief Medical Doctors of all named hospitals to request medical documents and establish the link between the hospitals and the PATP. The investigators were able to obtain one medical record and that was that of **Fatou Jatta**. The other hospitals, such as RVTH, claimed that the deplorable manual record-keeping system caused many difficulties with retrieving medical records. All Chief Medical Doctors claimed that there was no link between their hospitals and PATP and that the only relationship was the medical care of patients referred from PATP to their hospitals.
38. The investigators could not reach the most relevant nurses, such as **Nyima Badjie** and the Cuban doctors who worked with former President **Yahya Jammeh** on implementing the PATP. The investigators were able to obtain statements from lab technicians and some doctors who were with **Yahya Jammeh** during the PATP, such as **Dr. Tamsir Mbowe**, **Dr. Malick Njie** and **Dr. Mariatou Jallow**.
39. Since there were no physical records, the investigators reached out to lab technicians and Hospitals in Senegal, Morocco and Egypt, where the blood samples of PATP victims were allegedly sent. Letters and phone calls were also made to the Ministries of Health in Egypt and Morocco, but all to no avail. The only response received was from Senegal. They committed to testify before the Commission. However, during the hearing of the PATP theme, they declined to testify.
40. The Commission ensured that the investigations exhausted all possible means of gathering information on this theme. The most significant challenges faced were:
 - *Investigators could not visit Kanilai Clinic to see if any evidence was available inside, including medical records, test results and samples of the herbal mixture given.*
 - *Ndeban clinic, a PATP centre was shut down therefore the investigators were unable to do a site search to try and obtain relevant documents.*
 - *The investigators could not acquire unedited footage of treatment from GRTS, which might have revealed more details of abuse or human rights violations and other adverse outcomes of PATP.*
 - *The investigators could not review MoH financial records to see if any funds spent on PATP were meant for other health programmes.*

- *The investigators could not look at records for undisclosed sources of funding for PATP.*

41. However, the Commission was able to hear and determine the human rights violations committed against Persons Living With HIV/AIDS based on victims' testimonies and written statements.

4. YAHYA JAMMEH'S PROCLAMATION ON CURE FOR HIV/AIDS

Yahya Jammeh wanted to be a doctor because he felt something was missing in his life and wanted to stoke his self-esteem. Further, **Yahya Jammeh** was trying to bolster his legitimacy by portraying himself as having mystical powers and the ability to treat conditions that others could not...
*I never thought he would go to the extent of practicing what he preached*⁴⁰.

- Dr. Assan Jaye

Scientist /Immunologist- Medical Research Council (MRC)

The Gambia

4. In January 2007, former President **Yahya Jammeh**, made a public declaration that he had received a "mandate from God" to create a cure for HIV⁴¹/AIDS⁴² in the form of herbal treatment. **Yahya Jammeh** further announced that he discovered this cure from seven herbs found in the Qur'an.⁴³ The whole world was astonished by the declaration because the scientific world had done many studies since discovering HIV/AIDS and could not come up with a cure and up to date, there is no cure for HIV/AIDS.
5. Following this declaration, **Yahya Jammeh** took the bold step of establishing the The Presidential Alternative Treatment Programme (PATP) by which avenue he introduced a fake, fraudulent and bogus treatment, stating that the herbs he had mixed into a concoction could cure HIV/AIDS within three (3) days.
6. The scientific world knows HIV/AIDS as a virus that attacks cells in the body that fight infections and diseases. Further that HIV/AIDS is transmitted through contact with bodily fluids such as blood, semen, vaginal fluids and breast milk⁴⁴. Once infected with HIV, the person should get treatment immediately because it could develop into AIDS if left untreated.
7. **Yahya Jammeh** did not consider the serious nature of the disease and went ahead to administer his fraudulent treatment on persons living with HIV/AIDS with little or no opposition because the treatment was associated with the incredible power and influence he had as the President of the nation. In addition to this, he got rid of anyone who dared raise an eyebrow.

40 Witness testimony, 14th October 2020 para 855 - 866

41 Means Human Immunodeficiency Virus

42 Means Acquired Immune Deficiency Syndrome

43 Gambia's President claims he has a cure for AIDS," NBC News. 2007. Available at http://www.nbcnews.com/id/17244005/ns/health-aids/t/gambias-president-claims-he-has-cure-aids/#.W84uY_ZFw2w.

44 Centre for Disease Control (CDC). 2017. About HIV/AIDS. <http://www.cdc/hiv/basics/whatishiv/html>

8. Ms. Fadzai Gwaradzimba, a UN representative, was given 48 hours to leave The Gambia (*persona non grata*) for saying that ‘claims of cures for AIDS could encourage sufferers of the disease to engage in risky behavior and make the AIDS problem in Africa worse.’ Interestingly, in her comment, she did not directly mention the **Yahya Jammeh** cure, but he still made her leave the country. This sent a loud message that no one should question his HIV/AIDS cure.
9. Following his declaration and setting up the PATP, **Yahya Jammeh** rolled out his fraudulent treatment. He requested for 10 (Ten) HIV patients from Santa Yallah Group, a support group for people living with HIV, to administer his unfounded and scientifically unproven cure to them.⁴⁵
10. According to witness testimonies of the first and second batch, they were not given the choice to decline or told that it would be publicly shown on the national TV, Gambia Radio and Television Services (GRTS). The witnesses said the treatment involved applying something that looked like a green paste having a menthol scent, coupled with an application of a gray-colored solution, which he sprinkled on peoples’ skin. They were also made to drink a brownish tea-like liquid. Further, people under treatment at the time were told by **Yahya Jammeh** to refrain from drinking alcohol, tea and coffee, eating kola nuts and having sexual intercourse.⁴⁶
11. Additionally, these people were specifically ordered by **Yahya Jammeh** to stop taking their antiretroviral drugs, which weakened their immune systems and made them more prone to infections. This prompted a lot of concern nationally and internationally, especially among public health workers, as it posed grave health risks to the people living with HIV.⁴⁷ The concerns were because his remedies were never scientifically proven and tested, yet, he vigorously promoted and forcefully administered it to the people he subjected to the treatment.
12. An interesting thing to note is that to cover up his unfounded claim, **Yahya Jammeh** blatantly refused to subject his cure to scientific testing for safety and efficacy. Instead, he sent the blood samples of his first ten patients to a laboratory in Senegal to prove that the PATP cure worked.
13. Even though the results only showed the Cluster Differentiation 4 (CD4) levels of the patients, he argued that these levels were proof of effectiveness. To debunk his baseless argument, officials at the Senegalese university who conducted the testing publicly refuted **Yahya Jammeh**’s claim, explaining that no conclusion of the effectiveness of his herbal cure had been made,⁴⁸ stating that it was dishonest of the Gambian government, as it was then governed by **Yahya Jammeh**, to use their results in such a manner. *It should be of great significance to note that **Yahya Jammeh** has no medical training, not A CERTIFIED DOCTOR OR A DOCTOR IN MEDICAL RESEARCH. **Yahya Jammeh** held a High School Diploma and claimed to be from a family well known in The Gambia for herbal remedies.*⁴⁹

45 Testimony of Fatou Jatta 15th July 2019, on the Presidential Alternative Treatment Programme, from line 281-288

46 AP/Herald. Available at: <http://www.monterherald.com/mld/monetary/living/health/16746554.html>

47 Witness Testimonies at the Truth Reconciliation and Reparations Commission.

48 Serrano A. “Gambia’s AIDS “cure” causes alarm,” CBS News. 2007. Available at <https://www.cbsnews.com/news/gambias-aids-cure-causes-alarm>.

49 Pa Nderry M’ Bai . Gambia: The untold dictator **Yahya Jammeh**’s story. 2012.

14. **Yahya Jammeh** claimed that his PATP cure could eradicate HIV from the body in just three days. When introducing his PATP cure in 2007, the number of people living with HIV in the Gambia was 8,000⁵⁰. Sadly, however, in 2018, this number rose to 21,000 due to his disastrous negligence.⁵¹
15. It is also important to point out that the cohort of the PATP patients constituted people who willingly subscribed to the PATP and those who joined under duress. The PATP patient cohorts were grouped according to their date of arrival in the programme.
16. They were also strictly instructed to participate in the programme, warned against discontinuing and prohibited from taking their antiretroviral medication.⁵² Furthermore, patients were also forbidden from eating or drinking anything outside the PATP facilities and from receiving visitors.⁵³
17. Another disheartening discovery from witness testimonies is that the names, faces, CD4 counts, and viral loads of patients were published on an official website promoting and providing information about the programme without prior consent.⁵⁴
18. Unfortunately, for far too long, the absence of local and international opposition to **Yahya Jammeh**’s purported claims enabled him to continue to lead a *health dictatorship* in a political environment that lacked protection mechanisms for people living with HIV.⁵⁵
19. **Yahya Jammeh**’s PATP could be described as a *health dictatorship* that resulted in the violation of patients’ right to health and other human rights, as will be discussed later. This amounts to a complete disregard for medical ethics, including denying full disclosure and information about the PATP cure. It also undermined patient autonomy and confidentiality. Additionally, he shaped a climate of fear that intimidated health care workers and policy personnel working on HIV, thereby affecting the quality of health care services for people living with HIV.

4.1 TESTIMONY OF PARTICIPANTS ADMITTED INTO THE PATP

20. On 15th July 2020, the Commission heard from a witness on the PATP. The essence of this theme was to inquire on the promise made by **Yahya Jammeh** that his cure would free persons living with HIV/AIDS from the virus after three days of undergoing his treatment programme. It was important for the Commission to investigate the PATP to establish whether People living with HIV were forcibly admitted in the programme to determine the human rights violations that were committed. The Commission’s first witness was a survivor of the treatment programme; she was brave to appear in a public hearing setting.

50 UNAIDS. Trend of HIV infections. 2018. Available at <http://aidsinfo.unaids.org>.

51 United Nations Population Fund. The state of world population 2018. New York: United Nations Population Fund; 2018. p. 149. [Google Scholar]

52 Witness Testimonies at the Truth, Reconciliation and Reparations Commissions on the Presidential Alternative Treatment Programme

53 Cassidy R., Leach M. “Science, politics and the presidential AIDS cure,” African Affairs. 2009; 108 (433):559. [Google Scholar]

54 See Presidential Alternative Treatment Programme. Available at <http://qanet.gm/statehouse/patp.htm>.

55 Bosha,S.L., Adeniyi,M., Ivan,J., Ghiaseddin, R Minteh., Barrow,L.F & Kuye, R.(2019). The impact of the Presidential Alternative Treatment Programme on people living with HIV and the Gambian HIV response.

4.1.1 TESTIMONY OF FATOU JATTA

21. **Fatou** is the first Gambian woman to declare her HIV status in The Gambia. She contracted HIV in 1995, and at the time of her diagnosis, she was not exhibiting any sign of ill health, nor was she unwell. She looked healthy and that no one could have known that she was HIV positive. After her diagnosis, the witness registered at the Medical Research Council (MRC) in The Gambia, where she received HIV counseling. She was advised that there was *no cure at the time, but that medication was available as a treatment*. She needed to look after herself by eating well and avoiding stress and once she maintained this habit, she would continue to maintain good health. **Fatou** followed all the instructions she was given at MRC and went to all her appointments and took all her medicines as directed.⁵⁶ Given that her health was in good condition, she only needed to be given prophylaxis such as paracetamols, septrin and multi-vitamins to maintain a healthy life and prevent deterioration.
22. **Fatou** became an activist and worked with people living with HIV/AIDS and became a member of a support group for people living with HIV/AIDS called *Santa Yallah Support society*. While attending sensitisation activities for Santa Yallah and giving testimonies about her HIV status, people would say that *the government is paying her to declare that she was HIV positive because she was looking healthy*. The Gambian people viewed HIV/AIDS as a death sentence, although people with the virus can live for many years as long as they take their medication and practice a healthy lifestyle.⁵⁷
23. **Fatou** declared her status because she found it necessary to tell the public that people can have and live with HIV and AIDS and this made many that she came in contact with to test and know their status, which helped many maintain good health. She also stated that a person living with HIV could be just like any person living with diabetes once a healthy lifestyle is maintained and the prescribed medication is taken regularly.⁵⁸
24. In the year 2006, during a routine visit to the Santa Yallah Support Centre in the same year, Rose Clare informed her that people living with HIV/AIDS were invited to State House by then president **Yahya Jammeh**. The invitation was honored by members from Santa Yallah and another support group called *Nyaniya Kilin Support Society*.
25. After the meeting at State House with **Yahya Jammeh**, Rose mentioned to **Fatou** that **Yahya Jammeh** had asked her, *“All these beautiful women, do you really believe that they have HIV/AIDS?”* Rose said, *“Yes, it is true, Sir, all of them have HIV/AIDS.”*
26. **Fatou** testified that at the time of their visit, they were all looking beautiful and healthy, and realistically it was hard for anyone to believe that they were or could be HIV positive. This was the same observation and comment by then President, **Yahya Jammeh**.
27. Sometime after the visit with the President, she found *“herbs in big Evian bottles ... medicines that cure HIV and AIDS”* at the Santa Yallah center with no indication as to who sent them. However, it was highly suspected that **Yahya Jammeh** had sent them, but at that time, he had not made a declaration nor made it known that he could cure HIV/AIDS. She did not experiment with the so-called herbal cure.

56 Testimony of Fatou Jatta, 15th July 2020 Line 92 to 93
 57 Testimony of Fatou Jatta, 15th July 2020 Line 161-176
 58 Testimony of Fatou Jatta 15th July 2020 Line 177-186

28. **Fatou** testified that on the 18th of January 2007, **Rose Clare** called her on the phone and said, *“Fatou, I have a problem”* *“I received a call from the Vice President **Isatou Njie Saidy** to Santa Yallah that the President **Yahya Jammeh** said he wants me to select ten (10) individuals at Santa Yallah because tomorrow he was going to start treating HIV AIDS”*.
29. **Fatou** at this point, knew that **Yahya Jammeh** knew the persons living with HIV/AIDS that he wanted for his treatment because he had met and identified them during their visit at State House. Later that same day, on the 8 pm news, **Fatou** heard an announcement that *President **Yahya Jammeh** would start providing treatment for HIV/AIDS at McCarthy Square the following day*.
30. The Commission watched a video in which **Yahya Jammeh** was seen saying, *“ I can treat HIV, I can get rid of the virus in the body of the human being, and that is what I do. **Yahya Jammeh** continued to say “I feel a great burden, a big sense of responsibility because they have all their hopes in me. If I fail, I would have failed them, I would have disappointed them, and the consequences would be very drastic for me as a person. So, it is not fun, coming out and treating these people is not fun. Somebody is lying down there knowing that maybe the guy has a few months to live; there are people coming in very bad conditions and lying down there. Knowing that they only have their hope in me is a big burden morally, spiritually, and psychologically. So, it is not something that anyone would do just for fun or just for mischief. I am not a President that makes mischief in the world.”*⁵⁹
31. On 19th of January 2007, **Fatou** and others were picked up in the morning from the Santa Yallah Centre and taken to State House to the office of the then Vice President, **Dr. Isatou Njie Saidy**. On arrival, they met **Dr. Malick Njie**, the Minister of Health, who recorded their information such as name, age, sex, the type of HIV, and when they were diagnosed. **Fatou** said there was no briefing about the programme before being summoned to attend State House, nor was their consent sought.
32. **Fatou** believed that the visit to State House would consist of consultation, after which they would return home before any further action was taken. *“For me personally, while I was going, I took it as normal consultation just as you would go to meet a doctor and he would see you after, after which he would ... release you to go home...”* At no point was consent requested or given for the treatment, nor was there use of the usual protocol upon admission to the hospitals. They were also police guards, *“we were guarded until the day we were released...whichever side you look, you see soldiers guarding as if you are locked up in prison, or you were under custody.”*⁶⁰
33. President **Yahya Jammeh** welcomed the participants to the treatment programme and placed his rules. **Yahya Jammeh** stated that if anyone was taking ARV medication, they need to stop taking it, that there shall be no smoking, no chewing of Kola nuts and no drinking of *“attaya.”*
34. **Fatou** testified that they were filmed by personnel of the national TV, Gambia Radio and Television Services (GRTS). Some of the ladies wanted to cover their faces so that they would not be filmed, but **Dr. Malick Njie** indicated that there was no need for them to do so

59 Breakthrough part 1, video recording is exhibit 146 of the records of the Commission.
 60 Testimony of Fatou Jatta 15th July 2020 Lines 555-556

- as *“the President is just going to take it and use it as a reference, but he could not play it on television.”* This made the women comfortable and no longer found the need to hide their identities.
35. No nurses were present on the first day of admission; only **Dr. Malick Njie** was present. Therefore, there was no adequate medical supervision, nor was the usual protocol for admitting patients observed.
 36. **Yahya Jammeh** conducted the treatment himself and had the treatment sessions in a place known as the *“Glasshouse.”* **Fatou** was asked to undress and given a towel to wrap around her body. **Yahya Jammeh** asked her to open her hands and he poured into it *“spiritual water.”*⁶¹ **Yahya Jammeh** recited verses from the Quran and then requested that **Fatou** rub it over her face.
 37. **Fatou** was then asked to lay down on a stretcher; **Yahya Jammeh** took an oil-like looking substance and started to rub it all over the body, including her private parts.⁶² After that, **Fatou** was made to drink a concoction.
 38. **Fatou** described the effect of the concoction, *“... After I drank it, I went outside and sat down, and the whole world was turning around. I began to feel unconscious. I could not look. I could not sit up straight.... There was one stretcher outside, and they asked me to lie on it. I think that started around 12.00 when I drank that medicine and it went up to 5.00 pm. I could not do anything. I used to hear people speaking, but I could not respond because I was weak, very weak, and that was the day my trouble started.”*⁶³
 39. **Fatou** suffered a loss of appetite. She frequently vomited and was generally unwell. *“I suffered a lot....my health suffered a setback because I was not eating and I was under constant stress.”* Her condition did raise some concerns. **Fatou** heard **Dr. Malick Njie** ask the President (**Yahya Jammeh**), *“Sir, can we take her to the hospital?”* and his response was, *“No, no, no, she would get up.”*⁶⁴
 40. During the treatment, **Fatou** was not allowed access to her family, which caused her and her family great stress. **Fatou** was admitted into the programme with her adopted son who was HIV positive. She was unable to meet his needs as she was debilitated.
 41. During the treatment programme, **Yahya Jammeh** claimed that there were witches and wizards amongst the participants, and he was determined to flush them out, using smoke and blankets. **Fatou** stated that *“He takes powder of that medicine .. and takes one big blanket and covers you with it, no matter how strong you are, you would not be brave enough to take the blanket off your body until their time. The soldiers were standing holding their guns when they removed the blankets... you inhaled the smoke, and you have lost control...”* All of this took place while they were being filmed. The impact of the concoction caused strange reactions by some of the participants. This was used as further proof to accused persons of being involved in witchcraft. *“There were some who were urinating on themselves where they sat.”*⁶⁵

61 Testimony of Fatou Jatta 15th July 2020, Line 395
 62 Testimony of Fatou Jatta, 15th July 2020, Lines 408-410
 63 Testimony of Fatou Jatta, 15th July 2020, Lines 420-425
 64 Testimony Fatou Jatta 15th July 2020 Lines 449-450
 65 Testimony of Fatou Jatta 15th July 2020, Lines 866-878

42. After undergoing the treatment at State House, the participants were taken to Kanifing Hospital for admission. On most occasions, **Fatou** said they would be at the State House until 2 am before being taken back to Kanifing Hospital.
43. **Fatou** spoke about the pain experienced by people with HIV and AIDS from social stigma *“I believe that stigma and discrimination...kills”*. She appealed to the public to treat HIV and AIDS like any other disease⁶⁶.
44. **Fatou** testified that the treatment was deceptive and fraudulent. She and others were told that the HIV virus was undetectable after their samples were sent to Dakar and Morocco for testing. When the samples were being taken, they would call the patients and take their samples, but in the course of taking their samples, they would take the samples of others who were not patients but were working at the centre.⁶⁷ **Dr. Tamsir Mbowe**, the Director General would be the one to receive and inform patients of their results.
45. **Fatou** had HIV for 11 years before being dragged into the PATP, and she had never used ARV before joining the PATP. However, after she participated in the PATP, her health deteriorated to the point that she left the PATP and went back to MRC, she was put on ARV to get her to a healthy state.
46. **Fatou** testified that **Yahya Jammeh** used to hold discharge ceremonies. At these ceremonies, **Dr. Tamsir Mbowe** would read out blood test results to indicate those results were undetectable. **Yahya Jammeh** would declare that those persons are now cured and free from HIV/AIDS. During these ceremonies, one of the participants would be expected to speak positively about the treatment, and she stated that on one occasion, she gave a statement and was instructed to give positive accounts about the treatment and how it worked. As this happened, former President **Yahya Jammeh** would be seated and be the dictator he was. No one would dare say something contrary after Jammeh had stated that people were cured and free from the virus.
47. **Fatou** told the Commission that many people died due to the fake and unproven treatment which had adverse effects on their health. From Exhibit 146, the witness identified persons 1 to 7 as people who died during the treatment programme and persons 8 and 9 as people who died immediately after the treatment programme.
48. **Fatou** stated that **Yahya Jammeh** sang to the world that he could cure HIV/AIDS in three days but failed to prove this. All the patients in the programme spent more than three days and were there for several months, and she and many others are still living with HIV and or AIDS.

4.1.2 TESTIMONY OF MA83

49. **MA38** was diagnosed with HIV and AIDS shortly after she was involved in a vehicle accident in 2004. Her leg was seriously wounded, resulting in heavy bleeding, requiring her to get a blood transfusion at the Serekunda General Hospital. She disclosed that she might have contracted the virus through the transfusion, and she was an expectant mother at the time of the accident. After being transferred there to deliver her baby, the doctors neglected the pregnancy at the Banjul Hospital and instead focused on her wounded leg. Consequently,

66 Testimony of Fatou Jatta 15th July 2020 Lines 1135 -1139
 67 Testimony of Fatou Jatta 15th July 2020 Lines 932-937

her baby did not get proper antenatal care. After she had the baby and breastfed him for a year, he also contracted the virus. Nonetheless, after she was aware of her status and the baby's, she and the baby were put on Septrin, Beco, and antibiotics, and at that point, they were very healthy. She was motivated to join a support group called **Allah Tentu**, where she would sensitize people about the virus and offer other related support, such as skills training and valuable events for the kids that tested positive through the help of UNDP, NASS, and Action Aid.⁶⁸

50. **MA83** first heard about the Presidential Alternative Treatment Programme (PATP) through a friend of hers who told her that former President **Yahya Jammeh** announced on TV that he could cure HIV and AIDS. That Santa Yallah support group had joined, and they should join too. She registered for the programme with her son two days later at the Serekunda General Hospital when she heard the news. When they got there, their vitals were checked, and their blood samples were taken. Even before their results came out, they were asked to go to the State House to start the treatment without giving them any form of explanation on the procedure of the administration of the treatment. When she got to the State House, **Yahya Jammeh**, **Dr. Tamsir Mbowe**, **Dr. Mariatou Jallow**, and **Dr. Malick Njie** were present. **Yahya Jammeh** told them that they would be cured within a week and released after that, which was never the case. They were asked to strip naked and given towels to cover up while an ointment was rubbed on them, including their genitals. Afterward, she was given a concoction to drink and was asked to feed it to her son too, but he refused and she was thus asked to cajole him. She explained that one of the concoctions was called Chakri, and it upset their stomachs. The other one was called Jinneh, which got them highly intoxicated and put them in a drunken state.⁶⁹
51. **MA83** informed the Commission that her health and that of her son deteriorated seriously during the programme. Her son fell ill and was hospitalised after **Yahya Jammeh** asked him to be taken to the children's ward. She was exposed to the whole world as **Yahya Jammeh** aired the video recordings of their treatment on national TV. According to her, it was aired on Aljazeera and CNN without their consent. In addition, she testified that many people got ill and died. She was expelled from the programme after it was alleged that she invited some white British to get information about the PATP. She added that most people died because after they left the programme, they were ashamed to go to any hospital to get conventional treatment, despite their deteriorated health conditions, after being shown on TV as cured of the virus. She was able to identify a list containing person one to person seven marked Exhibit 147, who died after the PATP.⁷⁰ She stated that she knew that person one and four in Exhibit 146, being the protected information sheet of **Fatou Jatta**, died during the programme as stated in line two of her protected information sheet marked Exhibit 147.⁷¹
52. **MA83** concluded that after her expulsion from the PATP, her health deteriorated to the extent that she was put on Antiretroviral drugs after returning to Hands On Care to receive treatment. Instead of being cured, she and her son's health conditions worsened. The treatment programme was all false and it caused a lot of hardship for her and her children, especially the young one, who is now being stigmatized by his father. The programme had brought her

68 Testimony of MK83, 20th July 2020 Lines 58-295
 69 Testimony of MK83, 20th July 2020 Lines 296-556
 70 Witness Testimony MK83, 20th July 2020 Lines 557-699
 71 Witness Testimony MK83, 20th July 2020 Lines - 557-699

hardship to a point where she is unable to pay her rent and she resorted to begging in the streets to feed herself and her kids.⁷²

4.1.3 TESTIMONY OF ME64

53. **ME64** was first diagnosed with HIV 1 and 2 at the Fajikunda Hospital and later at the Medical Research Center (MRC) for confirmation. However, he said he then went to the Brikama Health Centre for treatment. **Dr. Saihou Sabally** was personally responsible for taking his vitals and giving him paracetamol and seprin to help reduce the prevalence of the virus in his system. His health condition at the time was excellent as he was on conventional medical treatment.⁷³
54. Concerning the Presidential Alternative Treatment Programme (PATP), ME64 stated that he first heard about it on National TV when Fatou Jatta, a patient of HIV and AIDS, and four other members of the PATP from the Forth Batch testified that **Yahya Jammeh** could cure HIV and AIDS. He also heard former President **Yahya Jammeh** say on TV that he could cure HIV and AIDS and other related diseases. Consequently, he was inspired to join the treatment programme because of the declaration made by the President.⁷⁴
55. After **ME64** joined the Fifth Batch of over 100 patients of the programme, he was admitted at the Serekunda General Hospital with his batch mates as their base. He, however, said that they used to go to State House and sometimes Kanilai to drink the concoctions prepared by **Yahya Jammeh** and that while they were in the programme, **Yahya Jammeh** prohibited them from drinking any conventional medicine. There were three concoctions they used to drink, one of which was called **Chakri** and was very bitter and nauseating. The second one was called **Omo**, and it used to upset their stomachs and ache their bodies, while the third one was light but made them feel very bad and uncomfortable anytime they drank it. Essentially, all the concoctions were very unpleasant, and they made them unhealthy. He testified that his health problems started the moment he began drinking the concoctions from **Yahya Jammeh**.⁷⁵
56. **ME64** further stated that **Dr. Mbowe** was assisting **Yahya Jammeh** and was part of the PATP as a Senior Doctor, responsible for the treatment, while Ansumana Jammeh, a relative of **Yahya Jammeh**, was in charge of the concoctions. Other nurses, such as **Awa Njie**, **Aunty Nyima Badjie**, and others, assisted **Yahya Jammeh** in administering his treatment programme.
57. Even though some people claimed to have been cured, **ME64** said they were still very sick and that they lied just to be released so that they could go back to their homes. They were promised that they would be cured and return home after two weeks but were instead made to stay for six months and were not allowed to go out, not even to visit their loved ones, as they were held there against their will. He further stated that their health conditions deteriorated significantly to the extent that many died during the programme.

72 Witness Testimony MK83, 20th July 2020 Lines 558-690
 73 Witness Testimony ME64, 20th July 2020 Lines 58-108
 74 Testimony of ME64, 20th July 2020 Lines 109-197
 75 Testimony of ME64, 20th July 2020 Lines 198-333

58. **ME64** also testified that the PATP was joined by many foreign nationals, all of whom joined, believing that they would be cured, as proclaimed and promised by **Yahya Jammeh**. Foreign nationals hailed from countries like Senegal, Guinea Conakry, Mali, and Malawi. However, most of them later left the programme when they noticed a deterioration in their health and were very disappointed by **Yahya Jammeh** as their expectations were shattered. **ME64** was discharged after a ceremony was held in Kanilai by **Yahya Jammeh** and his associates and that he and his other mates were declared cured and released to go home. He added that the former Vice President, **Aja Isatou Njie Saidu** was also in attendance of said ceremony and that although he was declared cured, he knew it was a big hoax but all he wanted was to be released from the treatment programme as it was like a prison to him.⁷⁶
59. Pertaining to **ME64**'s health condition post-PATP and its impact on him and his family, he testified that he developed severe body ache, frequent high body temperatures, and pimples all over his face. After he got discharged from the so-called treatment, his health got so bad that he went back to Brikama Health Center to have his conventional treatment again instead of just taking Septrin and Paracetamol, similar to when he had begun receiving treatment at the Brikama Health Center. In addition, he was put on Antiretroviral drugs.
60. He and his wife started finding it hard to sustain themselves and the family, given that his wife was also HIV positive and had enrolled in the PATP even before he did. Her health declined after she left the PATP. In a nutshell, **ME64** declared that the PATP was a big lie and no one was ever cured, including all those who said they were, out of fear of being dealt with by **Yahya Jammeh**. He added that he never challenged the programme's authenticity because he was also afraid of **Yahya Jammeh**. He expressed that he and his wife were painfully deceived by **Yahya Jammeh** and lured into joining the false and fraudulent programme.⁷⁷

4.1.4 TESTIMONY OF MH49

61. **MH49** tested positive for HIV and AIDS and was told by the hospital that she contracted it from her husband, as he had already been diagnosed with the virus. She and her husband were given the same medicines at the hospital: septrin, multivitamins, and Beco.
70. Before her enrolment in the PATP, she was told by her doctor at the Brikama Health Centre that the cure for the said virus does not exist, but the medicines she and her husband were being given at the time could help prolong their lives and make them live healthy and safe. She and her husband were healthy enough to go about their daily activities. However, she later heard on the radio that the President, **Yahya Jammeh**, said he could cure *TB*, Asthma, and Diabetics and this was what inspired her and her husband to join the treatment.
80. **MH49** and her husband went to Kanilai. Their personal details were taken by **Dr. Tamsir Mbowe** and they became participants in the second batch of the treatment programme. They were never informed about the procedure for administering the treatment to them nor were they told how long it would take. The second time they went to Kanilai for the treatment, they were taken to State House where the treatment was first administered to herself and her husband. They were stripped naked and only given a tiny towel to cover their private areas while **Yahya Jammeh** massaged them all over, especially their private areas. **MH49** said

the ointment rubbed on them was a mixture of shea butter and garlic. They were also given concoctions. The concoctions were either brown watery like drink or white milky texture to drink after they were massaged.

81. **MH49** expressed it was a great betrayal by former President **Yahya Jammeh** and his enablers that they were never notified about video recordings, picture taking, and strangers' presence during the treatment nor was their consent for the same obtained. Even while they had their meals, videos and pictures were being taken.
82. No one from the treatment was allowed to go home or have visitors, except for the few times that her oldest son went to see her and her husband briefly, and there were always guards at the gate round the clock. To crown it all, everyone enrolled in the PATP was prohibited from taking the medication prescribed to them by their respective doctors, which were meant to keep them safe and healthy.
83. After drinking the concoctions at Kanilai, on **Yahya Jammeh's** instructions, they were sometimes forced to pick cashew nuts in their drunken state at his plantation. They were also forced to wake up in the early morning hours, as early as 2 am, to dance while they were fatigued and sleepy and would return to State House around 4 am to sleep.
84. **MH49** stated that many people passed away during the treatment, and while she is unable to ascribe their deaths to the treatment, one could reasonably conclude that it might have been a result of the same. After three months into the programme, she was informed by **Dr. Tamsir Mbowe** that she was undetectable while her husband was not. She added that their stay in the programme was extended for another three months without their consent. .
85. **MH49** also disclosed that even while she was diagnosed as undetectable, she was still forced to continue taking the treatment, and at that point people started dying (7). There was not much improvement seen in her health and her husband's despite being told that she had become undetectable. She realised that the treatment was a big fraud. She also stated that she and her husband were subsequently released after six months of the programme.
86. After she and her husband were discharged from the PATP, they were still not cured, forcing them to go back to their previous clinic at the Brikama Health Centre, where they were denied treatment because they willingly abandoned their treatment despite all the risks involved. She added that she and her husband had to go to one of the health facilities in Banjul, Poly Clinic, where her husband was previously being treated with Septrin, Multivitamins, and Beco. On his return, he was put on Antiretroviral drugs.
87. She concluded that the PATP caused her family great hardship. It kept the 8, 9 and 10-year-old children that she and her husband were forced to leave behind from completing their schooling.

4.1.5 TESTIMONY OF MC73

88. **MC73** testified that in 1996, after his return to Leeds to pursue his Masters in International Health and Epidemiology, he fell ill and attended the Leeds Infirmary, which was part of the University. The Physician on duty suggested that he take an HIV and AIDS test, which he said he agreed to do at the GOM Clinic at the Leeds Infirmary. He was concerned but he

⁷⁶ Witness Testimony ME64, 20th July 2020 Lines 334-503
⁷⁷ Testimony of ME64, 20th July 2020 Lines 504-575

took the test, and during the pre-counseling, he was informed that he was HIV positive. He was very disappointed and lost hope when he was told about his status. However, he was offered counseling through a support group called DayBreak. They gave him all the social and nutritional assistance he needed, he also received dietary counseling at his house to keep himself healthy. With such support, **MC73** was able to complete his Masters programme successfully. Sometime after he knew about his status, his wife was supported to join him in Leeds so he could break the news to her, which he added was very important to him. Because he was considered healthy, he was not given any drugs but was advised to have a good diet, maintain a steady mind, and stay healthy.⁷⁸

89. When he returned home, **MC73** mostly kept to himself and did not attempt to access any health treatment services available, from 1997 to 2005. However, after he met a man named Lamin Mako Ceesay (an activist in a support group for people living with HIV and AIDS) and noticing how weak he was, he decided to join Hands On Care in 2005. He was placed on ARV. He acknowledged that if he had accessed treatment at the right time through the use of prophylactic medications, he would not have started ARV that soon. His failure to access treatment earlier than he did affected his health; as a result, his activities were also affected. Nonetheless, he was referred by Hands On Care to a support group called Nyaniya Kiling, a group with 30 individuals living with HIV and AIDS, encouraging people to disclose their status and also educating society about HIV and AID⁷⁹
90. Nyaniya Kiling provided him with psychosocial support and provided daily nutrition for the executive and some members who would go to them from time to time. They would also provide transport refunds during group meetings. Within the treatment, Hands On Care would give them food in the form of rice, sugar, beans, and other ingredients. **MC73** stated that from 2007 up until the time of his testimony, there were about 11 support groups in The Gambia, namely Santa Yalla, Nyaniya Kiling, Allahtantu, Kubajara, Chamorie, Faandema, Juwolonmora, and Mutapolar – the Womens’ Wing, to name a few.⁸⁰
91. Regarding his admission into the PATP, **MC73** testified that in January 2007, he attended an HIV and AIDS UNDP-related meeting of about 20 people. While at this meeting, a lady called Rose Claire from Santa Yallah Support Group told them (HIV/AIDS patients) that former President **Yahya Jammeh** instructed her to collect 10 of them to start his HIV and AIDS cure, which he called the Presidential Alternative Treatment Programme. Two people were selected from Nyaniya Kiling, one from Allatantu, and seven from Santa Yallah for the first batch of patients. He was part of this first batch.
92. They were not told anything about the programme, but he believed **Yahya Jammeh**’s proclamation to cure the said virus given that he was the Head of State. It never crossed his mind that a whole President would lie to the people like that. When he got to the State House, he was told by the soldiers on guard that **Yahya Jammeh** was expecting him and the other patients. He also saw the former Vice President, **Aja Isatou Njie Saidu**, who escorted them to a particular spot within the State House premises around a peculiar octagon-shaped building made of wood and glass, meant for their treatment programme. After being seated, **Aja Isatou Njie Saidu**, in a very jubilant manner, told them that they were there because

78 Testimony of MC73 22nd July 2020 Lines 50-83.
 79 Testimony of MC73 22nd July 2020 Lines 85-110
 80 Testimony of MC 22nd July 2020 Lines 112- 184

Yahya Jammeh said he could cure HIV/AIDS. From his observation, **MC73** noted the reason for **Aja Isatou Njie**’s excitement was that what could not have been done anywhere in the world was happening in The Gambia, that is, being able to cure HIV and AIDS.⁸¹

93. **Yahya Jammeh** joined them later and told them why they were there. Then Minister of Health, Malick Njie also known as Pachak was there, Musa Jammeh whom **Yahya Jammeh** often referred to as Maliya was there as well. **Yahya Jammeh**’s ADC Colonel Gano was always around, so were some Cuban Doctors and local nurses headed by one Nyima. He told the Commission that the Press, headed by the then State House Photographer Gassama – who was taking pictures, and the Gambia Radio and Television Services (GRTS) were also present. **Yahya Jammeh** told them that he could cure HIV and AIDS. For the cure to be successful, they had to stop taking their antiretroviral drugs, drinking Attaya (green tea) or alcohol, smoking, and avoid sexual intercourse with their partners. With all that said, **Yahya Jammeh** did not tell them how long the treatment was to last nor did he take them through the procedure of administering the treatment.⁸²
94. **MC73** added that the crew from GRTS later started taking pictures and videos, and this came as a surprise to them because they did not know about any broadcast. They started hiding and covering their faces, but when **Dr Malick Njie** assured them that the coverage was just for their personal use and not to be broadcasted, they believed him given his position. When asked why they were covering their faces, the witness said HIV comes with a lot of stigma and discrimination and that if HIV were to be any other disease, he would personally be gladly sitting and speaking to the whole world about his status.
95. **MC73** revealed that after joining the programme, he realized that **Yahya Jammeh** had made a public declaration in which he said he could cure HIV and AIDS in just three days. The first day they went to see **Yahya Jammeh** at the beginning of the programme, they were never asked whether they were willing to submit themselves to the programme or not and said treatment was administered to them without their consent. However, after **Yahya Jammeh** realized that this was a mistake, they were given consent forms to sign only after weeks into the programme. Before this, however, **Yahya Jammeh** and the nurses went into the glasshouse and called them in one after the other to give them concoctions to drink.
96. To administer the treatment, **Yahya Jammeh** asked the patients to undress and lie on a couch with a towel covering them; both men and women were required to undress. **Yahya Jammeh** would then stand over them, pull out the Quran and utter certain incantations before applying some liquid, an oily substance, and massaging them. After that, nurses and any doctor around would join him to complete the massage process. The massage part of the treatment was the funniest part to him and that was the point he started losing hope from the viewpoint of his educational background. HIV has no relationship with muscles, as it is a blood borne disease. When he saw himself being massaged, he knew straight away that **Yahya Jammeh** lacked the knowledge of what HIV/AIDS is, but he just had to submit himself to the treatment helplessly. He expressed that the massage experience was very intrusive and disgusting, given that their entire bodies were massaged, including their genitals.⁸³

81 Testimony of MC73 22nd July 2020,Line 187-247
 82 Testimony of MC73 22nd July 2020 Line 253-282
 83 Testimony of MC73 22nd July 2020 Line 341-362

97. After the face and body massage, they would be called in one after the other to take a smelly concoction that looked like shea butter mixed with some black substance. When presented with the testimonies of witnesses who testified before him that they could perceive the smell of garlic from the concoction given to them by **Yahya Jammeh**, MC73 confirmed the same. After the intrusive massage, they were given another concoction to drink and that it was yellowish, bitter and with a nictitating effect. His expectation from the treatment was that they would be given a spoonful of medicine without any hazard.⁸⁴
98. MC73 revealed that in addition to the people present with them at State House, Doctor Mbowe subsequently joined them. The first day they went to the State House, it was around 9 in the morning and they stayed until 2 in the afternoon, after which they were released to go to their various homes. He then told the Commission that another thing that baffled him about the programme was the lack of proper planning, as they randomly jumped from one activity to the other. Suddenly, they were taken from State House to the Serekunda General Hospital without prior notice, and while on the journey, they were not even informed where they were being taken. When they got there, they were told that they would only spend the night there and would be returned to the State House in the evening. However, they were made to spend seven months at the said hospital, and Malick Njie, then Minister of Health, was in charge of logistics and was present throughout. When they returned to State House, the same treatment was administered to them, after which their blood samples were collected three months into the programme. The environment at State House was very uncomfortable because many guards were moving around and the atmosphere was not very friendly. He mentioned that what he found odd about the PATP was that there were some State House soldiers whose blood samples were also taken even though their HIV status was unknown.⁸⁵
99. MC73 also testified that Rose Clair, who was responsible for mobilizing and buying them food, was later expelled from The Gambia by **Yahya Jammeh**. He lost confidence and trust in her months into the programme. The reason for her expulsion, as rumored, was that **Yahya Jammeh** accused her of sending remnants of the concoctions for testing from the towels used to clean the table on which the patients laid to be massaged. There were two other concoctions given to them, one of which they nicknamed *Ginneh*. It was brownish and it got them intoxicated. After drinking it, they would be confused, making them do outrageous acts such as urinating openly. He added that it made them lose consciousness and that diarrhea was a common thing there. The other one was called *Chakiri*. It was milky and made them puke but anyone who puked was forced to retake it, so they had to force themselves to swallow it. They started taking the *Ginneh* a week into the programme and the Chakri on their fourth night in. **Yahya Jammeh**'s cousin, Ansumana Jammeh, assisted Jammeh in administering the medications and he subsequently officially handed over the treatment to him.⁸⁶
100. It was also disclosed before the Commission by MC73 that **Yahya Jammeh** knew all about the side effects of his concoctions but treated them as something normal. He added that if **Yahya Jammeh** was a qualified doctor, he would have taken the sight effects they were facing very seriously. **Yahya Jammeh** would ask them each morning what the colour of their defecation was, which was very disrespectful and utterly embarrassing. Some came out

84 Testimony of MC73 22nd July 2020 Line 364-387

85 Testimony of MC73 22nd July 2020 Line 388-478

86 Testimony of MC73 22nd July 2020 Line 479-567

- yellow and that green was unacceptable. Later in the Programme, Doctor Mbowe replaced the former Minister Malick Njie. The Cuban doctors were tasked to take their temperatures, they got worried about their health, and you could tell their concern from their eyes. He could tell the Cuban doctors felt the PATP was unworthy and unprofessional on their part to take part in. The Cubans later withdrew from the programme, while Doctor Mbowe and the rest continued.⁸⁷
101. MC73 was at some point made the Spokesperson of his group by **Yahya Jammeh** because **Yahya Jammeh** observed that he was well behaved and highly educated. Regardless of being the spokesperson of the patients, from the day he observed how the treatment was being conducted, he knew it was not authentic but he helplessly accepted the responsibility. He added that a BBC journalist also observed that **Yahya Jammeh** used the words cure and treatment interchangeably. Jammeh was confused about the difference between cure and treatment. When a video recording was played before MC73 in which he said the treatment was good, he told the Commission that all he said in that video (that the treatment improved his health) were totally false. He later left the PATP and resigned as President of The Gambia Network of Aids Support Society (GAMNAS) immediately after leaving the PATP, even after a \$10,000.00 grant was given to him by West Africa Treatment Group (WATAG). He handed back all the money to them to show his regret for lying about the success of the PATP. Essentially, all MC 73 said in the breakthrough video about the said treatment was false. When asked why he made such false statements, MC73 informed the Commission that the atmosphere at the time was like hell and total captivity; they were being monitored even while urinating; they slept at night with armed men present; and would be promptly ordered to go to Banjul because **Yahya Jammeh** was going to be there and they did not dare to miss it.⁸⁸
102. MC73 told the Commission that the slightest incident of vomiting meant punishment by being forcibly made to drink the concoctions again. He referred to a lady who passed away during the programme, Fatou Ceesay, a singer. She was virtually dragged to the isolation unit in the hospital, where she subsequently died. Before her death, even after crying and repeatedly saying that she was well, she was dragged to the isolation room and left to die. Considering this, he felt he had no choice but to lie about the treatment to save himself. He strongly felt that his life would be at risk if he had said anything bad or contrary to what **Yahya Jammeh** wanted to hear.⁸⁹
103. MC73 stated that samples were taken from them and sent to Senegal at Cheikh Anta Diop University. The results showed progress, according to **Yahya Jammeh**. However, the same university wrote a letter to State House refuting that the said samples indicated any progress or success as **Yahya Jammeh** had claimed. He added that it was not even clear which blood sample belonged to whom, so he could tell that the results were utterly false. Their blood samples were later taken to Morocco for testing and after they were brought back, Doctor Mbowe would read the results to them openly instead of giving them each their results to read and keep. Regardless, he already knew that all the results were falsified anyway. MC73 revealed to the Commission that about 15 patients died because of the PATP. He mentioned a few examples: Dampha, a very ambitious and industrious man, a Sarahuleh (a tribe in The

87 Testimony of MC73 22nd July 2020 Lines 567-616

88 Testimony of MC73 22nd July 2020 Lines 616-705

89 Testimony of MC73 22nd July 2020 Lines 706-714

Gambia) lady, a very prosperous businesswoman, and Fatou Ceesay, who was brutally and inhumanly treated, as earlier mentioned.⁹⁰

104. He also testified that all the media coverage made of the programme was broadcasted on national television without their consent and knowledge. They only got to know about being shown on TV after receiving calls from their friends and family members. It was a challenging and embarrassing moment for them, given the societal stigma attached to the virus. After seven months into the programme, he was discharged through a graduation ceremony in Kanilai, in which false claims of the treatment were broadcast. There were no plans to help them reintegrate into society. During his time, no one was officially discharged except for MA38, who was suspected of being an informer and was said to have had strange visitors during the programme.⁹¹
105. Finally, MC73 told the Commission that he lost his job due to the PATP and mostly isolated himself when he got discharged. However, he managed to go back to Hands on Care for the conventional treatment. When he returned to the said clinic, the doctor told him that it would not have been good for him if he had stayed at the PATP any longer. He said he was put on second line drugs due to his severely deteriorated health condition after his discharge from the PATP. The programme negatively impacted his life and his family's, to the extent that after his HIV and AIDS status was broadcasted on national TV, his daughter's suitors all disappeared, thinking that she might have the virus like he does. He spent most of his time in the bush alone, trying to deal with the stigma and the stress of his deteriorated health condition due to the bogus and fraudulent alternative treatment programme of the former president of the Republic of The Gambia, **Yahya Jammeh**.

4.1.6 TESTIMONY OF MD59

106. **MD59** testified that he was diagnosed with HIV/AIDS in 2008 at Bijilo Clinic. He was referred to MRC, where he confirmed that he had HIV/AIDS and he had a high viral load with a CD4⁹² at 40. In essence, he explained that having such a high viral load meant that he was very sick at the time. He was put on Antiretroviral Drugs as a form of treatment meant to suppress the sickness to keep it from growing. He was informed that “there is no cure for AIDS, the conventional medicine is not to cure it, it can only control it.”⁹³
107. In 2010 **MD59** was transferred to Hands On Care in Brikama, where **Dr. Sabally** was in charge of his treatment. He received support from Hands On Care, as they used to give him transport refunds and occasionally give him provisions and some form of counseling. He told the Commission that he lived a very healthy life due to this treatment and support.⁹⁴
108. **MD59** told the Commission that he first heard about the treatment programme in 2007, when **Yahya Jammeh** made his proclamation that he could cure HIV and AIDS. And during the

90 Testimony of MC73 22nd July 2020 Lines 714-778
 91 Testimony of MC73 22nd July 2020 Line 778-847
 92 CD4 (Cluster Differentiation 4The) count is a test that measures how many CD4 cells you have in your blood. [These are a type of white blood cell, called T-cells that move throughout your body to find and destroy bacteria, viruses, and other invading germs.](#)
 93 Testimony of MD 59, 20th July 2020 lines 88 -97
 94 Testimony of MD 59, 20th July 2020 Lines 104-124

proclamation, **Yahya Jammeh** mentioned that patients would be fully cured of the virus after receiving the treatment and would also never have Malaria or headaches. He joined the treatment programme because he was told that HIV/AIDS virus could only be managed, but he wanted a cure instead. Thus, **Yahya Jammeh's** proclamation to cure HIV/AIDS is what made him join the programme. He added that he believed the proclamation because former President **Yahya Jammeh** made it. He could not imagine a man of his caliber ever misleading people about such and if **Yahya Jammeh** knew that he could not cure HIV and AIDS and still went ahead through deceit, it would be equivalent to wanting to kill them (patients of HIV and AIDS).

109. After applying to be enrolled in the treatment programme in 2008, he was asked to leave his telephone number and state his virus type. They promised to call him when they needed him. However, he only got enrolled after six years of waiting in line due to the popularity of the programme. There were people from Senegal, Guinea Conakry, and Guinea Bissau. At the time he went to register, the treatment was being done at the Serekunda General Hospital. **Lamin Jatta, Doctor Mbowe**, some Cuban doctors and a man with the surname **Jawara** used to assist **Yahya Jammeh** in administering the treatment.⁹⁵
110. In 2015, **MD59** was invited to commence treatment at the Ndemban Clinic in Bakau. He was part of the 8th batch. He was admitted as an outpatient, and unlike the other batches, batch was the first to be treated in such a manner. They would get the concoctions from the said clinic and return to their various homes to drink them. **Ansumana Jammeh** (the head of the Clinic and a relative to the former President), **Lamin Jatta** (who used to give them their medicine), and **Aunty Nyima Badjie** (responsible for those with *asthma and hypotension only, as part of the PATP*) were the ones assisting **Yahya Jammeh** at Ndemban Clinic while he was an outpatient.⁹⁶
111. He also mentioned that at the time of his so-called treatment, **Yahya Jammeh** was not going to the clinic nor did he administer any treatment as he did with previous batches. The reason for this was that **Yahya Jammeh** said he had already trained his assistants, so there was no need for him to be going there to administer the treatment.⁹⁷
112. **MD59** further testified that he and his batchmates were given two concoctions. One was brown, while the other looked like a “Churai Gerteh”(peanut porridge). They were given to them in a teacup twice a day, one at 7:30 in the morning and the other an hour later. He described the concoctions as very smelly and sticky after fermenting for three days. The treatment went on for slightly over six months, although it was to last for only six months. He also stated that there were times he would take the concoction, provided in 5 litre containers by **Yahya Jammeh**.⁹⁸
113. **MD59** was not allowed to take any form of conventional treatment while he was at the PATP. Consequently, he developed constant diarrhea, anemia, low blood pressure, fungal infection in his mouth, ulcer, and even had difficulty swallowing food. He experienced a loss of appetite. He revealed that **Yahya Jammeh's** treatment made him very sick and that he was much healthier and better cared for at the clinic he registered with before joining the

95 Testimony of MD 59, 20th July 2020 Lines 129-209
 96 Witness Testimony MD 59, 20th July 2020 Lines 209-255
 97 Witness Testimony MD 59, 20th July 2020 Lines 255-263
 98 Witness Testimony MD 59, 20th July 2020 Lines 263-356

PATP. His health massively deteriorated. He stated that **Yahya Jammeh** stopped making his concoctions during the programme because of the 2016 Presidential election preparations. He prioritized his political agenda over their health. This caused more harm to him and his batchmates. Ironically, the people responsible for the administration and day-to-day operations of the Ndemban Clinic, some of whom are mentioned above, resorted to the conventional HIV/AIDS treatment for him. This was also because in addition to being an AIDS patient, he had also developed other illnesses during the cause of the so-called treatment by **Yahya Jammeh**.⁹⁹

114. As the situation worsened at Ndemban Clinic with the PATP and realization dawned that the said treatment programme was a scam and was not helpful, he decided to go back to Hands On Care to receive better treatment. He informed **Lamin Jatta** and **Aunty Nyima Badjie** about his decision but was discouraged by **Lamin Jatta** from going back to Hands On Care. Hands on Care would not accept him back and instead recommended that he go to the Serekunda General Hospital. The reason for the recommendation, according to **MD59**, was because the hospital was at that point giving Anti-Retroviral drugs. **MD59** added that this hospital was initially used for **Yahya Jammeh**'s Alternative Treatment but later transformed into a conventional treatment center.¹⁰⁰
115. **MD59** eventually went to the Serekunda General Hospital and was received and treated just like any other patient going there for the first time because they did not have his medical records at the time. After the hospital confirmed his HIV/AIDS status, he was put on ARVS. However, when he went back to the conventional treatment, instead of going back to taking one tablet a day, he was put on two a day. Even at that, he said the medicine was not helping him get better, and instead of suppressing the virus, it became resistant to the drug.¹⁰¹
116. In his pursuit to improve his health, he said he returned to Hands On Care. Upon his arrival, the medical personnel were very worried about his deteriorated medical condition. His CD4 went as low as 7, meaning that he was extremely sick. Doctor Sabally from MRC informed him that his condition got worse because he stopped taking his medicines during the period he switched to **Yahya Jammeh**'s unconventional treatment programme. The virus had become resistant to conventional medicines. Hands On Care put him on the same drugs they gave him before, only that this time, the drugs were tripled. **MD59** expressed that he regained his health since he went back to the conventional treatment. Notwithstanding, **Yahya Jammeh**'s treatment negatively impacted his health and personal life. He still has an ulcer, although he does not get attacks, his fungal infection is yet to clear and that he is jobless.¹⁰²
117. **MD59** concluded that if he had the opportunity to stand before former President **Yahya Jammeh** to address him on his bogus Alternative Treatment Programme, he would tell him that he lied to the entire world about his treatment programme, he was not trying to cure people but to kill them.¹⁰³

99 Testimony of MD 59, 20th July 2020 Line 356-424
 100 Testimony of MD 59, 20th July 2020 Line 425-450
 101 Testimony of MD 59, 20th July 2020 lines 453-462
 102 Testimony of MD 59, 20th July 2020 Lines 468-518
 103 Testimony of MD 59, 20th July 2020 Lines 530

3.0.6 TESTIMONY OF MK83

118. MK83 learned about his HIV status after his wife got sick and was diagnosed with the virus. He was asked to take a test, given the likelihood that he had also contracted the virus. When he took his test at the General Hospital in Banjul (Royal Victoria Hospital), the result came out positive so he started conventional treatment with one Tijan Baldeh, who was his personal doctor at the said hospital. At this time, he was very healthy.¹⁰⁴
119. MK83 at some point heard about former President **Yahya Jammeh**'s declaration that he could cure HIV/AIDS on the radio. He later learnt about the Presidential Alternative Treatment Programme (PATP) on national television. He added that despite hearing such information, he still went on with his conventional treatment, as he had no means to join the programme at the time. However, this changed when he met with Doctor Mbowe at the Banjul Hospital and told him about his HIV status, seeking to be admitted to the programme.¹⁰⁵
120. According to **MK83**, Doctor Mbowe told him when they met, "...we have already cured many people who had already gone home" and asked him, "don't you watch TV? Haven't you seen Ousman Sowe and others like Kebba Janneh on television who were already cured, and they were released to go home? All these people were cured and they went home and many others" Finally, Dr Mbowe said to him, "Ok, you can come, there will be no problem, you will be able to enroll (sic)". Essentially, he joined the PATP because he was assured that **Yahya Jammeh** had the cure for HIV and AIDS and that he had cured so many people and discharged some as claimed by Doctor Mbowe.¹⁰⁶
121. **MK83** further testified that Dr. Mbowe asked him to go to the Serekunda General Hospital for his name to be registered as a member of the Programme. He asked his doctor, Tijan Baldeh, to write him a referral letter. **Tijan Baldeh** after much reluctance wrote the referral letter out of fear that **Yahya Jammeh** was involved. He was admitted and the person in charge of the programme at the time he did was **Dr. Mbowe**. The nurses who were there to assist in the programme were also under him. In his batch, there were approximately 50 people. Before they were registered, their names and blood samples were taken. This was before they were given any treatment, and that their test results were never given to them.¹⁰⁷ All registered patients were admitted at the Serekunda General Hospital even before the hospital was officially opened to the general public. They were not allowed to leave the hospital premises and there were Paramilitary Officers guarding everywhere. Although they were admitted at the Serekunda General Hospital, they had a bus that would take them to State House, where **Yahya Jammeh** and his assistants would administer the treatment to them in a glasshouse. The witness revealed to the Commission that they were given about five different concoctions to drink. One was called *chakri*, the other one was *ginneh*, he could recall another one called *kubejara*, and one called *omo*. The concoctions were mixed in their presence. They were each given a big cup to drink the concoctions each morning and evening, and **Yahya Jammeh** stopped them from taking conventional medicine.
122. **MK38** stated that **Yahya Jammeh** would also ask them to strip naked and cover parts of their bodies with a towel for them to be massaged all over. He would then ask them to say, "La Ilaha Ilal-Lah Muhamadur Rasulul-Lah Salla-Lahu Alaihi Wa Salam." **Yahya Jammeh**'s

104 Testimony of MK83 22nd July 2020 Lines 86-133
 105 Testimony of MK83 22nd July 2020 Lines 133-172
 106 Testimony of MK83 22nd July 2020 Lines 173-185
 107 Testimony of MK83 22nd July 2020 Lines -298

cousin Ansumana Bojang used to assist **Yahya Jammeh** in administering the treatment and **Yahya Jammeh** was not present all the time. The witness stated that after drinking the concoctions, they suffered a lot, as it used to make them vomit, and they would be there from 10 AM till late at night. The concoction called Omo made their stomachs upset like a “standpipe”, the Jinneh made them dizzy and put them in a drunken state.¹⁰⁸ At some point, a lot of them got fed up and wanted to leave the programme. **Yahya Jammeh** said to them that whoever stops the treatment and leaves, wherever they go, he will send soldiers after them and bring them back, and it will not be good for them.¹⁰⁹ **MK38** was therefore stuck in the programme for one year and five months.¹¹⁰

123. **MK38** stated that his batch was international, comprising people who came from other countries hoping to be cured. Including people from Guinea Conakry, the United Kingdom, Saudi, Nigeria, Malawi and Mauritania. However, many foreign patients abandoned the treatment and went back to their countries when they realized that the treatment did not help their health and au contraire, made them even sicker. Many patients died during the programme. He testified that one Ousman Kujabie, who was declared cured by **Yahya Jammeh**, died shortly after being discharged from the programme. A Guinean from the United Kingdom and two other patients from Saudi Arabia also died. So did one Malick Jeng and several other women.¹¹¹

124. In his statement, **MK38** disclosed that his health deteriorated severely during the programme. He got discharged with some other people, and they were all told by **Yahya Jammeh** and **Dr. Tamsir Mbowe** that they had been cured. However, this statement was false, as his health condition had worsened and he still had the virus. He added that shortly after he left the programme, he was sick to the extent that he got paralyzed. He had to go back to the same hospital in Banjul where he used to have his conventional treatment to continue it. He was later referred to a physiotherapist after he had a scan because his bones hurt a lot. He was informed by the doctors who did the scan that his aching bones and paralysis were all a result of some sort of food he used to take. After some recollection, he realized that they were referring to the concoctions given to him by **Yahya Jammeh**. **MK38** said the PATP did not cure him at all and that it cured no one. All it did was cause more harm than good to his health and personal life. He is no longer able to work.¹¹²

4.1.7 TESTIMONY OF MF52

125. **MF52** testified before the Commission that he was diagnosed with HIV in 2006 at RVTH while working as a Prison Officer in Mile II. He later made a proposition to be transferred to another clinic different from the one in Banjul because people began to recognise him at the hospital when he went there to escort prisoners. He was eventually referred to Hands On Care in Brikama, where **Dr. Sabally** was in charge of his medical affairs. He was able to keep his status from people, but this changed the moment he joined the Presidential Alternative Treatment Programme in 2008.¹¹³

108 Testimony of MK83 22nd July 2020 Lines 298-400
 109 Testimony of MK83 22nd July 2020 Lines e 405-406
 110 Testimony of MK83 22nd July 2020 Line 410
 111 Testimony of MK83 22nd July 2020 Lines 427-458
 112 Testimony of MK83 22nd July 2020 Lines 458- 570
 113 Testimony of MF52 21th July 2020 Lines 217-248

126. **MF52** heard of the treatment on the radio and also watched it on TV. It was declared that **Yahya Jammeh** could cure HIV and AIDS and he even saw some of his patients giving testimonies of being treated on National TV. He relied on the declaration, as a result of which he got admitted into the Fifth Batch of approximately 100 patients at the Serekunda General Hospital. He was never briefed on how the treatment would be administered to him nor was he told how long the treatment was going to last.¹¹⁴

127. In narrating how the treatment was administered to them by **Yahya Jammeh** and his assistants and its side effects on them, **MF52** revealed that they were given three different types of concoctions to drink in the morning and evening. The concoctions were the *chakri*, *jinneh*, and *omo*, given to them at the glasshouse in the State House. The concoctions were very hard to drink and one of their side effects was that it used to make them vomit. They used to be massaged with a balm that looked like shea butter by **Yahya Jammeh** after drinking their concoctions. He shared that the concoctions were so bad that about ten people died from drinking them. Some of them were so sick that they had to be taken to the hospital but died regardless. Alarmingly, despite their poor health, they were made to work on **Yahya Jammeh’s** farm in Kanilai.¹¹⁵

128. Before he commenced treatment at the Alternative Programme, he only took Septrin, Beco and multivitamins and had a very good diet. He was very healthy at the time and even used to do exercises. After he got enrolled into the PATP and got discharged, his health condition is now such that he takes ARV.¹¹⁶

129. On the impact the PATP has had on him, **MF52** testified that he developed headaches, fever, body aches, to the extent that he had to go to a clinic dubbed Sonko Jileng in Banjul. There he was retested for HIV and the result came out positive, contrary to what **Yahya Jammeh** told him before he got discharged from the programme. The programme worsened his health instead of curing him and no one got cured by the treatment. The PATP negatively affected his family, as it has put him in a situation where he can no longer work and provide for his family like he used to.¹¹⁷

4.1.8 TESTIMONY OF MB15

130. **MB15** testified before the Commission that she knew about her HIV and AIDS status when she went to the hospital for her prenatal visit. After her status was discovered, she was put on septrin to ensure that the virus would not affect the unborn baby. Nevertheless, a month after she gave birth, her baby died and she believes that her baby died as a result of the virus. However, she continued taking septrin, she felt no pain in her body and had a relatively healthy life.¹¹⁸

131. **MB15** also told the Commission that she heard about the declaration made by Ex-President **Yahya Jammeh** that he could cure HIV and AIDS within two weeks in 2007. She saw several HIV/AIDS patients on TV being declared cured by **Yahya Jammeh**. As a result of

114 Testimony of MF52 21th July 2020 Lines 248-333
 115 Testimony of MF52 21th July 2020 Lines 356-477
 116 Testimony of MF52 21th July 2020 Lines 485-506
 117 Testimony of MF52 21th July 2020 Lines 524-571
 118 Testimony of MB 15 21th July 2020 Lines 49-90

the said declaration by **Yahya Jammeh**, she joined the programme despite being told that the cure for HIV and AIDS does not exist. She joined the programme because it was shown on TV that **Yahya Jammeh** cured people of the virus and she also wanted to be cured. She said that she believed in the declaration as it was made by the Head of State, **Yahya Jammeh** as he then was, and that her belief was based on the status and position he held as President.¹¹⁹

132. After her registration and enrolment into the treatment programme with the help of **Dr Tamsir Mbowe** in the 4th Batch, **MB15** was asked to report to the Serrekunda General Hospital and was later transported to Kanilai with other patients that ranged from the 1st to the 4th Batch. She also stated that while being transported to Kanilai, they were videoed, their names being called one after the other, without their consent. Some paramilitary officers guarded them to ensure that no one left. She remarked that being videoed was a breach of her privacy, as she did not want to be seen by the public in that manner, given the stigma attached to the virus. Because she was never allowed to leave the treatment programme, she spent six months there.¹²⁰
133. **MB15** state that they were given concoctions to drink, after which **Yahya Jammeh** would ask them to strip naked and have them massaged with a mixture of something that looked like shea butter and garlic. The mixture had a foul smell and that each time they were being treated, **Dr Tamsir Mbowe** and some nurses would be present to assist **Yahya Jammeh**. **Yahya Jammeh's** security apparatus would also be present at the scene. They drank the concoctions and had their naked bodies massaged for three months. During this period, they were never allowed to bathe with soap. She affirmed a video recording played before the Commission, showing **Yahya Jammeh** touching patients all over their breasts, buttocks, private parts, and eyes with an ointment he mixed. **MB15** said she felt uncomfortable being touched in that manner by a man who is not her husband.¹²¹
134. Describing the concoctions, **MB15** told the Commission that the first one they were given was bitter and looked clear like water, the second one given to them was called *jinneh*, it was reddish with a thick consistency and had an intoxicating, nauseating effect. She said it smelled like something fermented for four years, like water kept in a bottle for six months. It tasted very salty and gave some of them blurry vision. Another concoction identified by **MB15** was what they called the *omo*. A particular one made them nauseous and gave them diarrhea. Another, called *chakri*, was tough to swallow, it looked like sawdust and was dry.¹²²
135. **MB15** further revealed to the Commission that when one of the women got seriously ill during the course of the treatment programme, **Yahya Jammeh** accused certain people within their group of being witches and wizards who were trying to sabotage his HIV/AIDS Treatment. He then gave them an herb called Kubejara to drink and made them inhale smoky leaves. Nine individuals lost consciousness due to its intoxicating effect and **Yahya Jammeh** used that opportunity to identify them as witches and wizards. She opined that the actual cause of the woman's sickness was because she used to be on ARV before joining the alternative treatment and all the concoctions **Yahya Jammeh** gave them got her sick. She stated that **Yahya Jammeh's** unconventional treatment, coupled with the fact that they were prohibited from taking ARV drugs and septrin, caused the death of many. Of the people

119 Testimony of MB 15 21th July 2020 lines 90-157
 120 Testimony of MB 15 21th July 2020 lines 157-325
 121 Testimony of MB 15 21th July 2020 lines 325-564
 122 Testimony of MB 15 21th July 2020 lines 564-684

Yahya Jammeh accused of being witches and wizards, some were expelled. Some were isolated and neglected as a form of punishment and were left to suffer until they eventually died.¹²³

136. **Yahya Jammeh's** alternative treatment, as revealed by **MB15**, harmed the patients. She testified that due to the treatment administered to them, some of them got blurred visions while others developed asthma. Instead of being cured by **Yahya Jammeh**, as he promised, their health conditions worsened, and some of them only said they were cured so that they could be released to go home. Even in their deteriorated conditions, they would be forced to work on **Yahya Jammeh's** farm in Kanilai, cook their meals and wash their clothes. Another impact she revealed is that because they used to vomit profusely, it caused them to bleed, and their internal organs were damaged.¹²⁴
137. **MB15** was finally released a few days after **Yahya Jammeh's** son's naming ceremony. A graduation ceremony was organized for them and was aired on national TV. They called their names one after the other, during which they would each be asked to say whether they were cured or not. And of course, they all responded affirmatively so they could go home and because **Yahya Jammeh** already told the public that they were cured. **MB15** went back to taking ARVs because she was weak after the treatment, to the extent that she could no longer work to earn a living.¹²⁵

4.1.9 TESTIMONY OF MJ94

138. **MJ94** testified before the Commission that he got diagnosed with HIV while he was abroad in 1998. After discovering his status, he was advised by the doctor to return to The Gambia and be closer to his family. On his return, he went to MRC and was referred to **Dr Sahiou Sabally** at MRC Gum Clinic, where he was also confirmed to be HIV positive. He was put on Beco, multivitamins, Septrin, and Paracetamol because ARV was not available in the country at the time. Because he was close to his family during that time, he felt very safe and comfortable and was well cared for. He was also part of a support group called Santa Yallah, where he gave and received moral support which was helpful¹²⁶ Through the support he received, he was motivated to take up an executive position in the support group and sensitize people on the virus to eradicate the unjust stigma, discrimination and misconceptions surrounding the virus. He said that some people even thought that those who had the virus at the time were not Gambian.¹²⁷
139. Asked how he first heard of the PATP, **MJ94** testified that although **Yahya Jammeh** made the declaration that he could cure HIV and AIDS in 2007, he could confirm that **Yahya Jammeh** secretly started in 2006 at the Santa Yallah Support Group base. He said he came to know about the secret treatment because he saw empty bottles of avian with some remnants of concoctions at Santa Yallah. When he asked the coordinator, **Rose Claire** – a UN volunteer, what the concoctions were for, she said they are HIV medicine.¹²⁸ When he asked her who

123 Testimony of MB 15 21th July 2020 lines 684-782
 124 Testimony of MB 15 21th July 2020 lines 684-914
 125 Testimony of MB15 21th July 2020 lines 684-1047
 126 Testimony of MJ 94, 12th October 2020 Lines 76-183
 127 Testimony of MJ 94, 12th October 2020 Lines 183-252
 128 Testimony of MJ 94, 12th October 2020 Line 310

made the concoctions, she told him that *the person said that their name should not be mentioned*. Then told her, “*But you know that I do not take local herbs,*” and her response was, “*Yes, I am aware, it is not for you but others.*”¹²⁹

140. **Rose Claire** did not answer when **MJ94** asked who made the concoctions until after the Presidential Alternative Treatment Programme started in 2007. He was informed about the programme at Santa Yallah. Rose told him that they were waiting for him and that she got a call from the office of the President through the Vice President’s Office to inform them that **Yahya Jammeh** had the cure for HIV and AIDS and needed ten members of the group for the treatment to be administered to them. **MJ94** stated that he joined the programme because he had already been identified by **Yahya Jammeh** as a person living with HIV/AIDS. In addition to that, he held the belief that for a President to make such an announcement, he must have found some sort of cure for HIV/AIDS.¹³⁰
141. Before joining the Alternative Treatment Programme, **MJ94**’s health was stable with the medicine that was given to him by MRC. When he got to the State House he was received by the former **Vice President Aja Isatou Njie Saidu** and some military personnel. At the glasshouse, **Yahya Jammeh** gave them concoctions but they were not given any prior briefing about how the treatment would be administered. They drank the concoction and went back to the Serekunda General Hospital, which was newly completed. **MJ94** also explained that his consent for the treatment to be administered to him was never sought.¹³¹ He was merely asked to undress and lie on a bed where **Yahya Jammeh** and the nurses assisting him massaged a mixture of herbs that looked like shea butter with a mint-like smell all over his body, including his private areas. This procedure was also performed on the four women he was with in the programme. After the massage, the concoctions given to them to drink gave him diarrhea.¹³² **MJ94** told the Commission that his diarrhea was so severe and frequent that **Yahya Jammeh** put up an award for the person that had it most frequently and awarded him the prize money. He added that he had to bear such behavior from **Yahya Jammeh** for he was the President and did whatever he liked.¹³³ **MJ94** at some point asked the security guards to be allowed to go home, but their response was that he should ask **Yahya Jammeh** himself. In Addition to being prohibited from leaving, he said **Yahya Jammeh** instructed them not to receive food from outside, drink *attaya* (green tea) or coffee, or chew kola nuts. They were also instructed not to have sexual intercourse with their partners.
142. **MJ94** revealed that sometimes they were transported in a bus from the Serekunda General Hospital to Kanilai, during which journey they were mixed with tuberculosis patients. **MJ94** developed TB and another type of ailment he pleaded not to share with the general public. He became so sick that he was taken to a Military Clinic in Banjul at the private ward to be given treatment, because **Yahya Jammeh** was unable to treat his sickness. As his condition worsened, he pleaded to be allowed to go home to be adequately cared for by his family. This request was denied, and he got so sick that his mother, sister, and younger brother came to be with him at the clinic. He was unable to wash his clothes, bathe himself or walk on his own. When his request to go home was denied, he decided to stop taking **Yahya Jammeh**’s medicine and stuck to conventional treatment. When he did so, his diarrhea and the other undisclosed ailment stopped and he eventually started walking on his own again.¹³⁴

129 Testimony of MJ 94, 12th October 2020 Lines 312
 130 Testimony of MJ 94, 12th October 2020 Lines 312-379
 131 Testimony of MJ 94, 12th October 2020 Line 461
 132 Testimony of MJ 94, 12th October 2020 Line 490
 133 Testimony of MJ94, 12th October 2020 Line 490-593
 134 Testimony of MJ 94, 12th October 2020 -Line (593-630)

143. When **MJ94** got discharged by his TB doctor, he had to go back to the Serekunda Hospital to continue the Alternative Treatment Programme because **Yahya Jammeh** had not discharged him. He was afraid to leave without his consent. After he got back to said programme, his health and many others’ deteriorated until several of them died during and after the programme. He advanced that those who were declared cured and released eventually died for failing to return to the conventional treatment. **MJ94** also stated that when **Yahya Jammeh** announced that he could cure the virus, MRC, which was responsible for the treatment response to HIV and AIDS, packed all their HIV and AIDS-related equipment and took them away to avoid problems with **Yahya Jammeh**. They could only test their CD4 counts and not their viral loads as they used to every six months before the PATP. The viral load testing machine is no longer available in The Gambia.¹³⁵
144. **MJ94** testified that the treatment administered to him harmed. After the programme he experienced severe fevers and his viral load went up. He started going to IDC in Banjul and continued taking conventional medicine because he was sick. Even before he was discharged, when he went for TB treatment, his health had deteriorated so badly that he was weighing 24 KG and this made him sad. Other nationalities were part of the programme and just like him, none of them was ever cured. When he went back to taking ARVs, his condition improved such that he tested undetectable and was able to marry. As it stands, he lives comfortably with the virus.¹³⁶

4.2 PERSONS ASSOCIATED WITH THE PATP

4.2.1 TESTIMONY OF DR. TAMSIR MBOWE

145. **Dr. Mbowe** told the commission that he started his medical studies in 1985 at the University of Ife in Nigeria. He left for the Soviet Union to complete his medical programme at the University of Lugansk in Ukraine. After completing his diploma at Lugansk, he proceeded to Korle Bu Teaching Hospital in Ghana, where he stayed for two years. In 1996, he went to The University of Dublin in Ireland to complete his postgraduate in Obstetrics and Gynaecology. He returned home in 1998 and began working under the Obstetrics and Gynaecology department at the RVH Hospital as it then was. He then became LM (Licensed Medical Practitioner to Deliver), Chief Medical Director and later Director of Health Services. He was Minister of Health from 2004 – 2007 with superintendency over the National HIV policy¹³⁷ and Director General of the PATP.
146. **Dr. Mbowe** accepted the authority of the President as “his boss” and as an authority in this “cure.” He stated “*my relationship to Yahya Jammeh is personal.*” **Yahya Jammeh** told him that he had herbs that would cure HIV/AIDS – “*I will eliminate the virus, I will cure the virus*”– and that the treatment would take three days. He maintains that “*the programme is true; the treatment is true...*”¹³⁸

135 Testimony of MJ 94, 12th October 2020 Lines Line 633-793
 136 Testimony of MJ 94, 12th October 2020 Lines Line 793-932
 137 Testimony of MJ 94, 12th October 2020 Lines 323
 138 Testimony of Dr Tamsir Mbowe 21st October 2020- Line 1030

147. He accepts that he had overall responsibility for health as a government minister but that his boss was the President¹³⁹. He did not question former President **Yahya Jammeh**'s authority. **Yahya Jammeh** told him that he would never disclose what was in the potion¹⁴⁰ and that he was okay with that. He also expressed that he was not concerned about confidentiality issues such as video recording patients because they were **Yahya Jammeh**'s patients.¹⁴¹
148. **Dr. Mbowe** was the Director-General of the programme and his role was to “*help him clinically by monitoring the patients and ensuring their wellbeing.*” He also carried out another role “*...screening the patients, helping in selecting the patients and then when the results come; I analyze the results...*”¹⁴² He added that “*the nurses report to me and then I report to the President...*”¹⁴³
149. **Dr. Mbowe**'s knowledge of the programme appeared to be slim. He saw other doctors from different countries who spoke to **Yahya Jammeh** and advised him but he was not a party to those conversations.¹⁴⁴
150. Despite being Minister of Health and Director of the PATP, he claimed to be ignorant of events which took place, such as the UN representative's statements and why **Yahya Jammeh** expelled her.¹⁴⁵ He also added that he had not read the National Aids Policy.¹⁴⁶
151. **Dr. Mbowe** helped administer the treatment. He said, “*I used to help him give medications to the patients, and I used to help him to apply the medication on the patients. This is the topical application*”¹⁴⁷. He also supervised the collection of samples but denied arranging for the testing himself.¹⁴⁸ He admits to having had no baseline information about the treatment.¹⁴⁹ **Dr. Mbowe** admits that samples were taken not just from patients but also from others present who were not patients, claiming it was a way of protecting the data and safeguarding the treatment.¹⁵⁰
152. According to **Dr. Mbowe**, all documentation and records were handed over to the President.¹⁵¹ He seemed to see nothing irregular in that. “*Sometimes we make copies... to compare or we request from him... the document.*”¹⁵² He felt no obligation to take records beyond that¹⁵³. He said that he relied on memory.
153. Video evidence shows **Dr. Mbowe** reporting the results, however, he admits to the inaccuracy of these as there was no baseline and nothing to compare them with. He seemed unaware that some of the patients were actually in good health before the programme and that some had begun to experience side effects such as diarrhea. More video evidence showed **Dr. Mbowe** discharging patients from the programme who were deemed ‘undetectable’/cured.

139 Testimony of Dr Tamsir Mbowe 21st October 2020- Line 327
 140 Testimony of Dr Tamsir Mbowe 21st October 2020-Line 2980
 141 Testimony of Dr Tamsir Mbowe 21st October 2020- Line 2993
 142 Testimony Dr Tamsir Mbowe 21st October 2020- Line 966
 143 Testimony Dr Tamsir Mbowe 21st October 2020-Line 974
 144 Testimony Dr Tamsir Mbowe 21st October 2020- Line 932
 145 Testimony Dr Tamsir Mbowe 21st October 2020- Line 1051
 146 Testimony Dr Tamsir Mbowe 21st October 2020- Line 129
 147 Testimony Dr Tamsir Mbowe 21st October 2020- Line 1143
 148 Testimony Dr Tamsir Mbowe 21st October 2020- Line 1169
 149 Testimony Dr Tamsir Mbowe 21st October 2020- Line 1271
 150 Testimony Dr Tamsir Mbowe 21st October 2020-Line 2850
 151 Testimony of Dr Tamsir Mbowe 21st October 2020- Line 1308
 152 Testimony of Dr Tamsir Mbowe 21st October 2020- Line 1366
 153 Testimony of Dr Tamsir Mbowe 21st October 2020- Line 1477

154. **Dr. Mbowe** helped administer the concoction, the content of which he did not know. He was satisfied that the President knew what he was doing and defended this position by saying, “*Even the drugs I am using in my clinic, I don't know where they come from.*”¹⁵⁴
155. **Yahya Jammeh** said he was using “*seven to twenty different types of medications.*”¹⁵⁵ “It is only **Yahya Jammeh** who knows this medication.”¹⁵⁶
156. The witness admitted that no one was cured in the three days **Yahya Jammeh** claimed that it would take to cure them.
157. **Dr. Mbowe** believed categorically in **Yahya Jammeh**'s treatment.¹⁵⁷ He objected to its being called fraudulent, “*This programme was true, ... the medical herbs, they have the potency to eliminate the HIV/AIDS virus from the human system based on laboratory test results.*”¹⁵⁸
158. In the first batch, there were ten people who died during the treatment and 21 who died after the treatment.¹⁵⁹
159. **Dr. Mbowe** refutes the suggestion that people died from the programme because of the PATP¹⁶⁰. He suggested that they may have contracted other illnesses.¹⁶¹ He unwillingly accepted that the cure did not work on those patients who contracted TB.¹⁶² He also claimed that those who were still showing signs of HIV/AIDS could have been reinfected.¹⁶³ He equally denies sexual assault.¹⁶⁴
160. **Dr. Mbowe** does not believe in the supremacy of conventional medicine. He stated that at the time of introducing the programme, patients with HIV and AIDS were condemned to die. He said that despite the existence of ARV, many were dying.¹⁶⁵
161. He is a firm believer in traditional medicine.¹⁶⁶ “*Conventional medicine can say 'yes there is no cure' but cannot say that traditional medicine does not have a cure.*” **Dr. Mbowe** is of the view that traditional medicine is far better than conventional medicine in some cases. He maintains that what **Yahya Jammeh**'s programme did was blend the conventional and the traditional, making it a good thing.¹⁶⁷
162. **Dr. Mbowe** claimed that participants volunteered to participate in the programme – “*All the patients volunteered to come and join the Presidential Treatment*”, although he accepts, they were guarded. “*There was a Military and a PIU Unit there...sorry, only Military, not PIU.*”¹⁶⁸ In his statement, **Dr. Mbowe** stated that “*The session usually lasts for many hours per day. I barely had any sleep during the first six months of the first year because it was a marathon. The patients were not allowed any visitors from family...They were guarded like Presidents.*”

154 Testimony of Dr Tamsir Mbowe 21st October 2020- Line 451
 155 Testimony of Dr Tamsir Mbowe 21st October 2020- Line 1627
 156 Testimony of Dr Tamsir Mbowe 21st October 2020- Line 1642
 157 Testimony of Dr Tamsir Mbowe 21st October 2020- Line 1745
 158 Testimony of Dr Tamsir Mbowe 21st October 2020- Line 1951
 159 Testimony of Dr Tamsir Mbowe 21st October 2020- Line 3227
 160 Testimony of Dr Tamsir Mbowe 21st October 2020- Line 2542
 161 Testimony of Dr Tamsir Mbowe 21st October 2020- Line 2074
 162 Testimony of Dr Tamsir Mbowe 21st October 2020- Line 2147
 163 Testimony of Dr Tamsir Mbowe 21st October 2020- Line 2360
 164 Testimony of Dr Tamsir Mbowe 21st October 2020- Line 1913
 165 Testimony of Dr Tamsir Mbowe 21st October 2020- Line 337
 166 Testimony of Dr Tamsir Mbowe 21st October 2020- Line 408
 167 Testimony of Dr Tamsir Mbowe 21st October 2020- Line 828-832
 168 Testimony of Dr Tamsir Mbowe 21st October 2020- Line 594-59

*If personnel were not part of the treatment programme, they were not permitted to talk to the patients. It was a heavily guarded place.*¹⁶⁹

163. **Dr. Mbowe** refuted the suggestion that the patients were unlawfully detained. He said that he did not agree – “... *if you agree to those terms and conditions, you agreed to it. No one is forcing you to agree to any terms or any conditions of any form or mode of treatment*”, although he admits that he has not seen any document signed by them.¹⁷⁰
164. The health status of individual patients deteriorated because they were required to abandon the MRC and other health centers.¹⁷¹ Indeed, Dr Mbowe overlooking and participating in PATP, he helped to undermine the HIV and AIDS programme nationwide, and this will have affected others affected by HIV and AIDS.
165. **Dr. Mbowe** seems to suggest that he is not bound by any Codes of Conduct or medical ethics. “*As a Medical Doctor, I can practice traditional medicine if I want to, I can practice conventional medicine, I can practice surgical medicine.*”¹⁷² He later accepted that The Gambia Medical Council requires doctors to register with them and have a code of conduct.

4.2.2 TESTIMONY OF ANSUMANA JAMMEH

166. **Ansumana Jammeh** (now deceased), told the commission that he is a relative of **Yahya Jammeh**. He took orders from **Yahya Jammeh** and was loyal to him.¹⁷³ He was summoned by Yahya A.J.J. Jammeh to State House and given a role in the PATP, where he worked for the duration of the programme from 2007 to 2017.¹⁷⁴ He worked under the supervision of **Dr. Mbowe** and his role was primarily to pound leaves used to make the concoction and helped administer them to the patients.¹⁷⁵ He also helped to make other concoctions named Chakri and Omo.¹⁷⁶
167. **Ansumana** reluctantly admitted that **Yahya Jammeh** also administered the medication himself. He denied any knowledge of **Yahya Jammeh** massaging the patients and touching their private parts. Video evidence had to be presented several times during the hearing to show that he was present when the activities he denied knowledge of occurred. He denied massaging the female patients and that they were held captive.¹⁷⁷ He insisted that they were allowed family visits.¹⁷⁸ He contradicted people who said that they were not cured, calling them liars. He equally refused to acknowledge the number of deaths during the programme until faced with the evidence.¹⁷⁹ He claimed to have not seen patients suffering from vomiting and diarrhea after drinking the concoctions.¹⁸⁰

169 Testimony of Dr Tamsir Mbowe 21st October 2020- Line 616
 170 Testimony of Dr Tamsir Mbowe 21st October 2020- Line 687-693
 171 Testimony of Dr Tamsir Mbowe 21st October 2020- Line 1864
 172 Testimony of Dr Tamsir Mbowe 21st October 2020- Line 711
 173 Testimony of Ansumana Jammeh 20th October 2020 Line 73
 174 Testimony of Ansumana Jammeh 20th October 2020 Line 165
 175 Testimony of Ansumana Jammeh 20th October 2020 Line 190
 176 Testimony of Ansumana Jammeh 20th October 2020 Line 22
 177 Testimony of Ansumana Jammeh 20th October 2020 Line 28
 178 Testimony of Ansumana Jammeh 20th October 2020 Line 29
 179 Testimony of Ansumana Jammeh 20th October 2020 Line 53
 180 Testimony of Ansumana Jammeh 20th October 2020 Line 23

168. **Ansumana** also revealed that after preparing the concoction to be served to the patients, he would drink it as well, and in fact, it became his tea which he drank every day.¹⁸¹ He contradicted people who said the concoction was harmful by saying it has many benefits, including relieving body pain and curing stomach ache.¹⁸² He was reluctant to admit that the concoction was useless and instead insisted on the benefits he believed it had.¹⁸³
169. All of the above potentially caused further harm to people who are already living with the consequences of physical and psychological harm they endured due to their forced involvement in the PATP.

4.2.3 TESTIMONY OF DR. MARIATOU JALLOW

170. **Dr. Mariatou Jallow** testified before the Commission that the first time she heard about said PATP, she was on a mission abroad for a malaria control programme. The news got to her from The Gambia that former President **Yaya Jammeh** declared that he could cure HIV and AIDS within three days and that blood samples were being collected to be sent for testing outside of The Gambia. Upon hearing this information, she said she was thrilled and hoped that it was true because the illness had no cure – it would have been a miracle. She testified that they were all waiting for the results on the 3rd day after the treatment commenced. **Yahya Jammeh** had promised to cure the patients but the results did not come out, not even a week after. She then said that when he returned from Zanzibar, she saw patients being massaged on national TV and given concoctions to drink. She added that what surprised her about the whole thing was that in medical practice, the status of patients should not be disclosed to anyone, not even to close relatives, talk less of announcing it to the whole world without prior consent. She expressed and confirmed that such an act by Jammeh was a violation of all known principles of privacy and a breach of confidentiality of a person's medical information.¹⁸⁴
171. Dr. Mariatou Jallow was asked whether the way the treatment was administered complied with medical ethics, particularly the public display of persons, especially women, being treated in the manner in which Jammeh treated them. She responded that in the medical profession, even when a female patient is to be examined, there needs to be another woman present as chaperon. She also expressed that seeing the utter disregard of the principles that underpin her medical practice was very embarrassing to witness, but she did not have the power to change it, as Jammeh was the leader of the nation at the time. It was not right for him to do such a thing. 186
172. Regarding her involvement, **Dr. Mariatou Jallow** testified that she was more of an observer than a participant, as she only partially participated as the Director of Health and Services. She further stated that she was invited to observe the treatment administered to the patients. She also received invitations to chair some of the discharge ceremonies of the treatment. The witness stated that what she observed was that the patients were massaged by **Yahya Jammeh** and with some help from nurses and **Dr. Mbowe**. She added that they were also given concoctions to drink. Additionally, **Dr. Mariatou** affirmed that the presence and

181 Testimony of Ansumana Jammeh 20th October 2020 Lines 346-351
 182 Testimony of Ansumana Jammeh 20th October 2020 Lines 355-361
 183 Testimony of Ansumana Jammeh 20th October 2020 Lines 366-369
 184 Testimony of Dr Mariatou Jallow 23rd July, 2020, lines 51-125

participation of doctors in the process convinced observers and patients of the veracity of the programme, it gave it a stamp of approval.¹⁸⁵

173. **Dr. Mariatou** further testified that the entire programme was shrouded in secrecy, as she was never seen the patients alone, not even at State House. She also confirmed that they were guarded, and no one was allowed to have access to them, not even their family members. She stated that keeping the patients amounted to unlawful detention and that it is not in line with their practice to keep a patient in the hospital against the patient's wish. It is standard procedure to tell them how the treatment would be administered and obtain their consent. **Dr. Mariatou** testified that **Yahya Jammeh's** proclamation to cure HIV and AIDS was debunked by the international science community through the media such as Reuters. A Professor from Senegal said the same that the cure was false. Dr Maristou believed the same, the cure was false¹⁸⁶
174. After **Dr. Mariatou** was shown a discharge ceremony video in which she said life and hope were restored and was confronted with this piece of evidence, she said she only said it out of fear of what **Yahya Jammeh** might have done to her. That what she said was a gross overstatement because she knew it was all a lie. She also told the Commission that if she did not do this she could have been framed, arrested, and sent to prison, or worse – she could have been made to disappear. She went on to say that **Yahya Jammeh** asked a UNDP staff member to leave the country within 24 hours for speaking against his alternative treatment. As such, she said she was afraid to speak against it even though it was all a hoax.¹⁸⁷
175. **Dr Mariatou Jallow** revealed that before the government terminated her employment, she had worked in Bafrow, Brikama Clinic and SOS. She came across some of the HIV and AIDS patients that were enrolled in **Yahya Jammeh's** treatment programme and they had gone back to the conventional treatment because their health had gotten worse as a result of the programme. She confirmed that the patients most affected were those who were on prophylaxis before joining the PATP. The witness carried on by saying that **Yahya Jammeh** should never have done the Alternative Treatment and that all his claims were utterly false. He never cured anyone of HIV or AIDS.¹⁸⁸

4.2.4 TESTIMONY OF DR. MALICK NJIE

176. **Dr. Malick** testified that he worked as Captain in the Gambia Army after returning home in 1985 but spent most of his free time practicing General Medicine as Medical Officer in Royal Victoria Hospital (RVH). He worked under the Department of Obstetrics and Gynecology as Registrar and was promoted to Senior Registrar, Head of Department and then Deputy Chief Medical Director.
177. About **Yahya Jammeh's** visit to RVH, **Dr. Malick Njie** testified that in November 2006, **Yahya Jammeh** visited the hospital, claiming to be checking on a boy he calls his son at the Accident and Emergency Unit. **Dr. Malick Njie** stated that before seeing the boy, **Yahya Jammeh** told him that he could cure HIV and AIDS and proposed to start a treatment programme at the hospital, which **Dr. Malick Njie** declined. He added that he told **Yahya**

Jammeh that the cure for the said virus does not exist and that the Act which established the hospital is clear on who is qualified to practice medicine, and clearly, he (**Yahya Jammeh**) was not one of them.

178. **Dr. Malick Njie** explained that despite the conversation he had with **Yahya Jammeh**, **Yahya Jammeh** went ahead and had a press conference at the hospital gate. He invited him and the media to speak on the cure of the virus. After the interview, **Dr. Malick Njie** revealed that he escorted **Yahya Jammeh** to the State House gate opposite the hospital's Accident and Emergency Unit entrance. Before they dispersed, the former President gifted him D70, 000 which he willingly accepted and shared with his colleagues.
179. **Dr. Malick Njie** further testified on matters relating to a cabinet meeting at State House to which he was invited. He said the meeting took place after the press conference at the hospital gate. In attendance were Cabinet Ministers, the Ambassadors of Taiwan and Cuba, and a United Nations Volunteer (UNV) named Rose from a support group called Santa Yallah. It was at this meeting that **Yahya Jammeh** declared that he could cure HIV and AIDS, and shortly after this meeting, **Yahya Jammeh** established the Presidential Alternative Treatment Programme.
180. Concerning his role in the PATP, **Dr. Malick Njie** told the Commission that he was only asked by **Yahya Jammeh** to observe the entire treatment process of the 9 HIV-positive patients selected and to conduct a HIV/AIDS test after the administration of treatment — all the results would come out negative after three days. All he did was observe and test the patients' blood samples after the purported treatment.
181. During the programme he observed that the treatments were different for each day and that at one time, **Yahya Jammeh** would circle a patient while holding the Quran and reciting something. Instead of the three days **Yahya Jammeh** said he would cure the virus, he finished the purported treatment after five days.
182. **Dr. Malick Njie** told the Commission that he observed that **Yahya Jammeh** did not give a full body massage to the patients with the ointments. He only massaged their faces, legs and breasts but with a towel covering their breasts and private areas. They were also given concoctions to drink after each massage. Moreover, he noted that **Yahya Jammeh** asked the patients to stop taking their antiretroviral drugs for the duration of the treatment and asked them to stay at the treatment center to complete the programme. He provided food and shelter for them.
183. **Dr. Malick Njie** stated that **Yahya Jammeh** had given prior notice to the patients that the treatment process would be televised, and that even though he asked the patients not to go home, **Yahya Jammeh** never forced anyone to stay against their will.
184. After he observed the treatment procedure, which took five days contrary to the three days within which **Yahya Jammeh** had promised to complete treating the first badge, he was asked by **Yahya Jammeh** to conduct another HIV test on the blood samples of the nine patients. All nine still tested positive after he conducted the tests contrary to **Yahya Jammeh's** declaration that they would all come out negative.

185 Testimony of Dr Mariatou Jallow 23rd July, 2020, lines 149-393
 186 Testimony of Dr Mariatou Jallow 23rd July, 2020, lines 393-535
 187 Testimony of Dr Mariatou Jallow 23rd July, 2020, lines 535-712
 188 Testimony of Dr Malick Njie 23rd July, 2020, lines 712-753

185. **Dr. Malick Njie** also revealed that **Yahya Jammeh's** reaction to his failed cure was that he had better herbal medicine and was going to give a stronger dose for the treatment to be effective. **Dr. Malick Njie** stated that he had another conversation concerning **Yahya Jammeh's** claim to cure HIV and AIDS. He reiterated to him that there is no cure for the virus. He further educated **Yahya Jammeh** on the science involved in HIV/AIDS, which revolved around Virology and Immunology. He informed him that since the virus cannot be cured, people living with the virus are put on antiretroviral drugs to help with their Cluster Differentiation 4 and make them live healthy and safe.
186. He reiterated that **Yahya Jammeh** could not cure HIV and AIDS and that he did not participate in the treatment, save for testing patients' blood samples. He also said that **Yahya Jammeh** knew he could not cure the virus but was more than determined to proceed. It was to his surprise when after the first badge of patients, he traveled out of the country, came back and was told by **Yahya Jammeh** that he had established the Presidential Alternative Treatment Programme and appointed **Dr. Tamsir Mbowe** as the Director-General.

4.2.5 TESTIMONY OF LANDING MOMODOU FAAL

187. **Landing Momodou Faal** testified in an open session before the Commission. He narrated that he worked for a United Nations Project Office in Banjul. At the end of his contract, he worked in virology as Lab Assistant at the Royal Victoria's Teaching Hospital Laboratory in Banjul. **Landing Momodou** furthered his studies and acquired a diploma in a 2-year Biological Science course at the Medical Research Council. He went to Cameroon for another course and obtained a Bachelor of Science degree in 2015. Then he got a promotion at the hospital as Lab Technician and Head of the Laboratory at the Infectious Diseases Unit, dealing with HIV/AIDS patients. He stated that this was his area of expertise and he acquired a wide range of experience.¹⁸⁹
188. Regarding his involvement in the Presidential Alternative Treatment Programme (PATP) **Landing Momodou** told the Commission that in 2007, he was authorized by his supervisor, Professor Nyan, to conduct tests on the blood samples given to them by **Abdoulie Bachilly**, who was also a Lab Technician and part of the PATP. He added that this was a very abnormal procedure. He said he was chosen to take the samples of patients from **Yahya Jammeh's** treatment programme due to his role in taking Cluster Differentiation 4 (CD4). The test is meant to check the immune system and find out the number of viral loads in a person's body. He also stated that when he was handpicked to take part in the PATP, **Dr. Malick Njie** was the head of the hospital.¹⁹⁰
189. **Landing Momodou** explained the normal standards and procedures when they conducted the tests for patients from the PATP. He stated that the receptionist would give the patients a form to fill and give them code numbers for identification purposes. After this, upon request by the patients, their blood samples would be tested. He stated that **Yahya Jammeh** would send in blood samples for him to test their viral loads at random without knowing to whom they belonged. He added that his supervisor would instruct him to conduct the tests regardless. He also stated that they would always be guided by Standard Operational Procedures when conducting blood tests. With **Yahya Jammeh's** patients, the application

189 Testimony of Abdoulie Sahiou Batchilly 23rd July 2020- Line 51-275
190 Testimony of Abdoulie Sahiou Batchilly 23rd July 2020- Line 258-482

- of the rules of procedure were flouted; this was abnormal and unethical in his professional opinion. He feared not only being sacked but harmed by **Yahya Jammeh** if he refused to conduct the blood tests. He also mentioned that at some point, blood samples were still being taken to the hospital but were not given to him. Also, he said sometime during the programme, samples were taken to Senegal, Morocco and Egypt to be tested.¹⁹¹
190. **Landing Momodou** also testified that he knew about the declaration by former President **Yahya A.J.J. Jammeh** that he could cure HIV/AIDS. However this statement was totally false, as there was no cure for HIV. He said the treatment could only be achieved by taking antiretroviral drugs and other HIV/AIDS-related medicines. From his medical perspective, **Yahya Jammeh's** claim to cure the virus was a hoax and impossible. He was very uncomfortable that he was the one who conducted the blood tests to monitor viral loads for the PATP. There were times that **Dr. Tamsir Mbowe**, who was the head of the PATP, would read out the viral loads of the patients, claiming that because they were low, the patients were therefore cured.
191. He explained that when **Dr. Tamsir Mbowe** said the viral loads were undetectable in the patients, implying that because they were undetectable, the patients no longer had HIV/AIDS in their bodies. It should be understood that being undetectable and being negative are entirely two different things. That even when a person is undetectable, they would still have to continue to use their antiretroviral and that when tested again, they would still test positive. Thus, it was very deceitful of **Yahya Jammeh** and his enablers, including **Dr. Tamsir Mbowe**, to read results of patients with low viral loads being undetectable as being cured when in actual fact, they were reading out CD4 counts and not viral loads. Only an antibody test could determine whether a person is HIV/AIDS negative or positive. **Yahya Jammeh** avoided the antibody tests and used the viral loads to deceive people.
192. In his conclusion, **Landing Momodou** stated that he could not verify the authenticity of the blood samples given to him by **Abdoulie Bachilly** from the 1st, 2nd, 3rd, 4th or 5th batches of patients from the PATP. He said this was because there were no names and there was no way he could identify which blood sample belonged to whom and that he was not even sure about the HIV and AIDS status of the patients **Abdoulie Bachilly** claimed to belong to patients from the treatment programme. He said that the results were not authentic and that the entire programme was a hoax.¹⁹²

4.2.6 TESTIMONY OF ABDOULIE SAIHOU BATCHILLY

193. **Abdoulie Saihou Batchilly** stated that he was born on 14th August 1967 in Basse Santa Su. He attended the Koba Kunda Primary School from 1977 to 1980 and later attended BSTS Secondary School from 1980 to 1981. After that, he went to Nusrat High School from 1981 to 1986 and then proceeded to Plateau State in Nigeria to study as a Laboratory Technician until 2004. He obtained his Masters Degree from the University of Hull in 2004. Before his Masters Degree, **Abdoulie** worked at Family Planning then proceeded to work for the RVTH in the laboratory.

191 Testimony of Abdoulie Sahiou Batchilly 23rd July 2020- Line 485-614
192 Testimony of Abdoulie Sahiou Batchilly 23rd July 2020- Line 615-946

194. Regarding his role at RVTH, **Abdoulie** told the Commission that he was at first a Lab Assistant. After his studies in Nigeria, he became a Laboratory Technician and further worked at RVTH where he was given an additional responsibility to monitor the Presidential Alternative Treatment Program (PATP) and this was very unexpected and challenging for him. Then former President **Yahya Jammeh** told him that he cures HIV and AIDS.
195. Concerning **Abdoulie's** role in the PATP, he testified that he was initially given blood samples by **Dr Tamsirr Mbowe** and **Dr Malick Njie** at RVTH to determine whether there were still antibodies in the said blood samples with serial numbers. He however highlighted that he did not know who took the samples or whom they belonged to. He said the first time he conducted the tests, which took about 15 minutes, all the blood samples remained positive. The morning after the incident, he was called to answer to former President Jammeh at the State House. The former President asked to be alone with him.
196. He stated that he was left with **Yahya Jammeh** who asked him to run the tests for the third time. He then suggested that the blood samples be taken to MRC for collaborative reasons because RVTH did not have adequate facilities to conduct the same. Jammeh's reaction to his proposition was that if anybody from MRC got close to said samples, he would close down MRC. He threatened to deal with him if he took the samples anywhere near MRC. As a result of this incident, he recommended that the samples be taken to Senegal. They were eventually taken to a laboratory headed by Professor Souleymane Mboup.
197. Before giving an account of what happened in Senegal, **Abdoulie** also confirmed to the Commission that if a test was conducted in December 2006 and the result is HIV positive, but the viral loads become undetectable, and this individual is on antiretroviral, one would expect that the viral load would still remain undetectable. He was unsure if the samples he collected were from the same people who provided the first samples. He also confirmed that some of those patients tested were not yet on ARV's because their viral loads were already very low at that time.
198. He participated in conducting the tests on the samples, which took them three days. He added that the results showed that some samples had undetectable viral loads, which Jammeh used to tell the world that his treatment worked and that he could cure the virus. However, **Abdoulie** revealed to the Commission that he specifically told the President **Yahya Jammeh**, in the presence of **Dr Tamsirr Mbowe**, that if a person has undetectable viral loads, it does not mean that the person is cured, that in essence, those patients are still HIV Positive despite the undetectable viral loads. Additionally, he testified that even Professor Souleymane Mboup rebutted **Yahya Jammeh's** false claim of curing HIV and AIDS based on his inclusive results of the samples.
199. In his summary, **Abdoulie** stated that he did all he could to eliminate or minimize the damage going on, but it was beyond his control. He was in a hostile environment with clouds of uncertainty on whether The 1997 Constitution which is meant to protect him from any interference in executing his duties without fear or favour was indeed capable of doing so. However, in hindsight, he should have done more to uphold the principles of care. The health governing bodies should be able to determine the quality and standard of care required without interference. There should be an increase in health awareness and more

public support for higher health standards of care in our communities. He firmly concluded that Jammeh was in control of all data from the purported treatment program. He firmly believes that Jammeh's claim of curing HIV/AIDS was absolutely false, and his projection of results claiming to be true, were bogus.

4.2.7 TESTIMONY OF AWA NDOW

200. **Awa Ndow** stated that she goes by the name **Awa Njie**, she was born on 29th December 1975 in Dippa Kunda. She attended Bakoteh Primary School from 1982 to 1989, after which she went to Latrikunda Junior Secondary School and completed it in 1993. Upon completing her secondary education, she became a volunteer at The Gambia Red Cross Society following her first aid training. She was later taken from the Red Cross Society to Edward Francis Small Teaching Hospital, volunteering as a Phlebotomist.¹⁹³ Her supervisor and Head of Department was **Pa Jaye**. After volunteering for six months at RVTH as a Phlebotomist, she was hired as an **internal bench trainer**, closely working under her supervisor.¹⁹⁴
0201. **Awa Ndow** told the Commission that upon receipt of a patient, they would come with a request form, the content of which would include an address, age and clinical data. She added that the patient's blood sample would be collected after confirming the details contained in said form. She said that the rationale behind having that information about a patient before taking the sample from them was to verify the patient's identity, adding that it was the standard procedure adopted at the lab during that time. The patients she saw were general patients that would go to the hospital. She worked in that department from 1996 to 2007.¹⁹⁵
202. **Awa Ndow** further testified that she proceeded to do her Laboratory Assistant Course in the hospital and acquired a certificate to that effect. When she completed the course, she was posted to Blood Bank as a Laboratory Assistant under supervision. She cleaned her benches every morning, assisted her boss, counseled blood donors and also performed the procedure on bleeding donors. They would test and counsel the potential blood donor before any blood donation was drawn. The testing included HIV, hepatitis and other diseases or infections that could harm the patient receiving the blood. She would seek consent before any blood withdrawal. One **Mam Jarra** was her boss under whom she worked for about three years from 2007. She was then transferred to the Hematology Lab. General work was done at the Hematology Lab, such as grouping, malaria tests and cross-matching after bleeding donors to see whether the patients are compatible.¹⁹⁶
203. In 2009, **Awa Ndow** said she received a call from the then Minister of Health, **Dr. Malick Njie**, who informed her that **Abdoulie Batchilly** wrote a letter to the former President Yaya Jammeh that he needs an Assistant. She was identified to assist **Batchilly**. She further stated that she was requested to join the Presidential Treatment Alternative Program (PATP). **Abdoulie Batchilly** was the one collecting blood samples at the PATP.¹⁹⁷

193 [Phlebotomists take samples of blood for testing. The blood samples may be needed to learn more about a particular patient, or they may be used in research. Phlebotomists also collect blood from donors for those in need of blood transfusions. Most blood is taken from veins, but phlebotomists must also learn how to draw blood from capillaries. They use capillary sampling when a small amount of blood is needed. It comes from the finger, heel, or ear lobe. They sometimes handle other types of specimens, such as urine, sputum, stool, and hair. Available on: <https://www.webmd.com/a-to-z-guides/what-is-a-phlebotomist>](https://www.webmd.com/a-to-z-guides/what-is-a-phlebotomist)

194 Testimony of Awa Ndow 13th October 2020 lines 43-92

195 Testimony of Awa Ndow 13th October 2020 lines 93-105

196 Testimony of Awa Ndow 13th October 2020 lines 108-150

197 Testimony of Awa Ndow 13th October 2020 lines Line 154-163

204. In response to the question whether she knew at the time she was called to join the PATP what it was all about, she stated that she indeed knew what it was about, because she had watched on TV around 2007 the proclamation made by Jammeh that he could cure HIV/AIDS. When she received the call from the Ministry of Health, she was told that her role at the PATP would be to collect blood samples of the patients. She worked at the Hematology Department at RVTH. Her immediate boss at the said department was **Landing Faal**. He was aware of her transfer from the Hematology Department to the PATP. She noted that the transfer was not formal. It was based on a telephone exchange. Even though she was unhappy with the transfer, she did not have the luxury to question the request as it was conveyed through the Minister for Health.¹⁹⁸
205. **Awa Ndow** narrated that the Thursday following her transfer, she received a call informing her that **Batchilly** would pick her up to do the 4th batch of treatment at Kanilai. When she arrived in Kanilai, **Batchilly** took her to **Nyima Badjie**, the nurse in charge, and told her that she would be assisting him in sample collection. The day after they arrived in Kanilai, the treatment with the President commenced. She went with **Batchilly** to observe the treatment process. She observed patients being massaged and given some concoctions to drink.¹⁹⁹
206. When told by Counsel that the Commission had received evidence that patients were almost naked while being massaged, **Awa Ndow** testified that she noticed they were given towels to cover parts of their bodies. She stated that she did not see any adverse effects such as patients vomiting or looking weak after taking medicine but this was because she was far from the place where the treatment was being administered. **Awa Ndow** also said that she did not collect any blood samples that Friday. She was only there to observe and get an idea about the treatment process. She would assist **Batchilly** in collecting samples for the CV4 counts whenever they got a new batch. Whenever they discharged a patient, she would also assist in collecting their blood samples. After the patients received the treatment and **Jammeh** departed that Friday, they all went back to their various places.²⁰⁰
207. Prior to **Awa Ndow's** transfer to the Presidential Alternative Treatment at RVTH, she worked with HIV/AIDS Patients at the Sample Collection Room. It was a general room where all kinds of patients were received. She highlighted the fact that she did not collect blood samples from the HIV/AIDS patients the second time she went to Kanilai, she was called upon to test their blood samples when needed. She was never provided with any baseline information about the patients, save for their names, ages, addresses and statuses. On whether she received any document confirming the status of the patients before collecting their sample, she testified that upon receipt of the patients' list, some would provide medical papers attached to it, while others had none. Some patients would tell her their status and she would take some test kits and confirm their status before drawing samples. This only applied to those who did not provide their HIV/AIDS status results.
208. She continued in her testimony that after confirming the status of the patients, she would then take their samples for the CD4 count to determine the amount of virus in their body, given that they were required to know whether their CD4 counts were high or not. Those with low counts would not take the treatment. She had no idea why this was, but she guessed it was simply a criterion. **Dr. Tamsir Mbowe** was responsible for determining the criteria

198 Testimony of Awa Ndow 13th October 2020 lines 155-200
 199 Testimony of Awa Ndow 13th October 2020 lines 101-245
 200 Testimony of Awa Ndow 13th October 2020 lines Line 102-267

- as he was the Director-General of the programme. After collecting the samples from the first batch of patients, she took them to the Public Health and Research Lab at Kotu, where **Momodou Lamin Jarju** and **Alphonse** were in charge at the time. This lab is associated with RVTH.²⁰¹
209. **Awa Ndow** explained that with HIV/AIDS patients, they would conduct a CD4 and Viral Load test. The CD4 is a white blood cell that helps the immune system, while the Viral Load is the amount of virus in the body. For an HIV patient, the more beneficial status test is the **Antigen-Antibody**, which is different from the CD4 count and the Viral Load because it is the test to determine if a person is HIV positive or not. She also stated that at the start of the treatment, beyond the CD4 test, she did not conduct the Antigen tests. The Viral Load tests were conducted in Egypt because there was no Viral Load machine in The Gambia. Only the CD4 counts tested in their lab. She told the Commission that there was a unique number given to every patient. Each blood sample tube was given the corresponding number for each patient. Once a person is HIV/AIDS positive, they remain positive.²⁰²
210. Asked what the Presidential Alternative Treatment was about, she stated that **Yahya Jammeh** created it to cure HIV/AIDS. She believes it was a joke because in her opinion, **Jammeh's** treatment was bogus. She re-emphasized that once a person tests positive for the virus, they always remain so. If those individuals were tested again, they would still be positive, except perhaps that Viral Load is undetectable. However, if the Antigen-Antibody test is conducted on them, they would still be positive.²⁰³ She added that five trips were made to Egypt for testing. Each time the results came out, not more than 15 patients came out undetectable. She also told the Commission that none of those test results that came out as undetectable were ever tested for the Antigen-Antibody. No one could tell which individuals' test results were taken to Egypt for their CD4 counts and Viral Loads to be tested. She also revealed that she worked with some patients from the 3rd, 4th and 5th batches – approximately 80 people. She was not sure if all the people she was drawing blood from were HIV positive.²⁰⁴
211. **Awa Ndow** added that there was nothing usual about the Alternative Treatment Programme. There were many abnormalities with the entire administration of it. “The entire system or records of the patients was prone to manipulation.²⁰⁵ She however was unsure whether some people who were not HIV positive were added to the 5th batch as testified to by **Fatou Jatta** and **Fatoumatta Barry** although she would not rule it out, given that the system was prone to manipulation.²⁰⁶
212. On her personal view about the Presidential Alternative Treatment, she stated that with her little knowledge in medicine, she knew that HIV could not be cured. However, the patients should not be blamed. The Head of State exploited their vulnerability due to their health status by proclaiming that he could cure HIV/AIDS. People rushed to be admitted in the so-called treatment. Perhaps the patient would only later get to the point of the realization that his treatment was a fraud.²⁰⁷

201 Testimony of Awa Ndow 13th October 2020 lines 330-372
 202 Testimony of Awa Ndow 13th October 2020 lines 67-807
 203 Testimony of Awa Ndow 13th October 2020 lines 808-855
 204 Testimony of Awa Ndow 13th October 2020 lines Line 837-853
 205 Testimony of Awa Ndow 13th October 2020 lines 963-975
 206 Testimony of Awa Ndow 13th October 2020 lines 989-1008
 207 Testimony of Awa Ndow 13th October 2020 lines 1013-1019

213. **Awa Ndow** also told the Commission that in 2012, they stopped going to Egypt and allowed patients to go collect their medicine from the treatment center. She also added that her remuneration for her assistance was D1000 and that she was still doing her job at RVTH. She did not notice any deaths while at the treatment program because she did not stay with the patients. Some of the patients used to get very sick. When that happened, some nurses tended to them at the **Infection Disease Control, Pediatrics Unit** at RVTH with medicines different from the ones Jammeh used to give them.²⁰⁸
214. In conclusion, **Awa Ndow** testified that she no longer had the records of patients because they were taken from her under Jammeh’s instructions. She noticed inconsistencies in the way records were kept – there were loads of credibility gaps.²⁰⁹ She added that the purported treatment program was in no way valid, as people still tested positive after the treatment was administered to them. From her lab experience and personal observation, the treatment program was fraudulent. She confirmed to the Commission that Yaya Jammeh never cured HIV/AIDS as he claimed.

4.3 EXPERT WITNESSES

TESTIMONY OF DR. ADAMA AHMADOU SALLAH

215. **Dr. Adama Ahmadou Sallah** testified as an expert witness on general medicine, including the clinical aspects of HIV/AIDS. He told the Commission that he is a fellow of the Swedish College of Pediatrics and would easily be ranked as one of the most senior fellows in the sub-region. During his final year of specialization in pediatrics, he did a post-graduate diploma in medicine concurrently and ended up with a post-graduate diploma in tropical diseases. He returned home in 1982 and became the first Gambian pediatrician to work in The Gambia. He established a private clinic called Lamtoro Medical Centre in Kololi. In terms of capacity, it was possibly the biggest private medical investment in The Gambia. He mentioned that he was one of those who established the clinical face of medical training in the country. He served as Chair of the Royal Victoria Hospital, where he oversaw the transition from General to Teaching Hospital. He became the Registrar of the Medical and Dental Council for The Gambia. During his term as Registrar, he was given the honor to rewrite the Code of Conduct and Ethics of The Gambia. The West Africa Health Organization (WAHO) adopted the Code of Conduct of The Gambia as the model code of conduct binding anglophone countries in West Africa.²¹⁰
216. Regarding the Presidential Alternative Treatment Program (PATP), **Dr. Sallah** stated that his colleagues and himself saw it as a system of customary therapy. There was no reaction from them at the onset, but as the programme continued, it gradually developed into what looked like conventional medicines because it had both an Outpatient and Inpatient facility. Laboratory investigation and application of treatment were largely concoctions. It also included some therapeutic modalities like giving vitamins and other medications to strengthen the patient’s nutritional status. More importantly, there was the involvement of doctors who are trained in conventional medicine. He stated that the modality of the programme was a reflection of Conventional Medicine and ought to have been brought under the Regulatory Authority and the Medical Services Act.²¹¹

208 Testimony of Awa Ndow 13th October 2020 lines 1050-1060
 209 Testimony of Awa Ndow 13th October 2020 lines 1205-1221
 210 Testimony of Dr Adama A. Sallah 19th October 2020- Lines 153-252
 211 Testimony of Dr Adama A. Sallah 19th October 2020- Lines 480-495

217. He pointed out that the programme got to a stage where it began endangering the lives and health of patients. For example, one had to forgo the only known effective treatment: the Highly Active Antiretroviral Therapy (HAART) and other therapies of comorbidities²¹² and just concentrate on the concoctions. **Dr. Sallah** went on to give a detailed explanation of HAART. According to him, they started with very simple drugs to treat AIDS, like ATC. They had the Nucleoside Reverse Transcriptase Inhibitor and eventually the Non-Nucleoside Reverse Transcriptase Inhibitor. **Dr. Sallah** explained that the concoction was bogus and fraudulent as it had no basis in scientific fact.²¹³
218. **Dr. Sallah** testified that the promise of a cure in the context of HIV/AIDS remains elusive because you can never eliminate the virus from the human body; you can reduce the Viral Load to a level where it is controllable or manageable. The patient would feel much better and live an active and productive life, but that does not mean that the disease is cured. This is why it is fundamental for the patient to take antiretroviral for life, just like other chronic conditions like diabetes and hypertension. Additionally, management of the viral infection goes beyond just attacking the virus. Because of the suppressed immune system, comorbidities would develop, opportunistic infections most notably. These are infections that, under normal circumstances, the body can, to a large extent, resist, but when the immune system is broken down, they occur more frequently. An example is pneumocystis carinii pneumonia (PCP), a dreadful, opportunistic lung infection in immunosuppressed populations, primarily patients with advanced HIV infections.²¹⁴
219. **Dr. Sallah** declared that the management of HIV/AIDS is a complex medical business and requires different types of expertise. In essence, the claim that just one concoction would serve as a panacea for all these manifestations of HIV/AIDS, according to him, is not only nonsensical but scary and tantamount to a total lack of understanding of the pathophysiology that is involved in the HIV process. He stated that **Yahya A.J.J. Jammeh’s** claim was bogus and fraudulent. When the Lead Counsel asked **Dr. Sallah** to explain why he believes **Yahya Jammeh’s** claim was bogus, he responded that to make a claim that has no scientific basis, involving managing people with a severe and deadly disease – something that the whole world rejects, is fraudulent.
220. He reinforced this view by stating that to claim that the virus can be eliminated is incorrect because the tests that were at their disposal usually measure the viral load, that is, the plasma viruses circulating in the body and also the CD4 count in the subset of T-Lymphocyte that are involved in the HIV process. As long as one has the viruses hiding in the Cell Genome in the DNA, which is hard to measure except in laboratory conditions using special equipment and technique called Proviral Load, the virus is always in the DNA or cells. He stated that elimination of the virus, therefore, is a bogus claim because it is impossible to attain.²¹⁵
221. **Dr. Sallah** quoted section 41(2) of the Code of Conduct of Medical Practitioners, which states that “*It is not authorized for any person to perform any customary system of therapeutics which is dangerous to life or health.*” He said it was the responsibility of the Director of Health Services at the time and the Minister of Health by extension, to have taken the

212 means “the simultaneous presence of two or more diseases or medical conditions in a patient
 213 Testimony of Dr Adama A. Sallah 19th October 2020- Line 518-530
 214 Witness Testimony Dr Adama A. Sallah 19th October 2020- Line 535-547
 215 Testimony of Dr Adama A. Sallah 19th October 2020- Line (579-592)

necessary steps to advise him to discontinue the treatment programme. If he insisted, they should have proceeded with the necessary provisions of the law against him. He, however, acknowledged that we lived in a dictatorship at the time which was characterized by fear, and going against the Yahya A.J.J. Jammeh would attract serious consequences.²¹⁶ He went on to say that judging from the way he was acting and handling the patients, to the extent of going to the Accident and Emergency Unit of the Edward Francis Teaching Hospital to apply some form of management modality in the presence of the international press, one adduced that he was a de facto medical practitioner. He recalled when Yahya A.J.J. Jammeh came with a reporter from Aljazeera to the hospital. There was an HIV/AIDS patient who was lying down, claiming that he was suffering from real pain. Yahya A.J.J. Jammeh wore gloves and asked the patient if he was suffering from severe pain and the patient responded in the affirmative. Dr. Sallah said he saw it on TV when Yahya A.J.J. Jammeh made certain strokes on the patient's chest down to the abdomen and asked the patient within a few seconds if the pain disappeared and the patient said, "Yes sir, it is gone." and the journalist asked, "Just like that?" Dr. Sallah added that if you understand the mechanism of pain, how it is generally and how it is sustained, there was no way an action like that could relieve the pain instantaneously like that. He believes the patient's response was out of fear because the head of state claimed to be a 'big healer.' In the presence of the international press, he doubts if the patient would say otherwise as that would amount to a serious embarrassment to the President and only God knows what the consequences would have been.²¹⁷

222. He explained that the patient's information disclosed to the physician should be guarded with utmost secrecy because it is privileged information. It constitutes professional misconduct and is objectionable to reveal such information, especially if it were done recklessly. He said such information can only be divulged in certain circumstances, such as when it is prescribed by law or demanded by a court of competent jurisdiction and when it poses a threat of harm to a third party. Under these circumstances, one can divulge the information but it should be explained to the patient the nature of the information disseminated, its contents, and the possible consequences. Dr. Sallah also believes that public interest is another exemption. For example, if one has a very contagious disease, if the information isn't decimated, there is a risk of it spreading and causing harm to the members of the public. There is a risk of serious harm to a third party.

223. Dr. Sallah was asked by Lead Counsel if showing publicly infected people being treated was in the public interest. He responded by saying the public has a right to information, but the privacy and confidentiality of the patient must be respected. He added that it should have been conducted in a manner that even if it is justifiable, the patient cannot be identified. He alluded to a possible scenario of a family man with HIV shown on TV and wherever he passes, fingers are pointed at him – it would be a disaster, a serious embarrassment for his family, which would be beyond repair. He believes that this was a serious misstep. If the patients are at risk of stigmatization, the required regulatory mechanism should protect them against stigmatization and discrimination. Yahya A.J.J. Jammeh abdicated his responsibility in that regard.²¹⁸

216 Testimony of Dr Adama A. Sallah 19th October 2020-Line (654-664)
 217 Testimony of Dr Adama A. Sallah 19th October 2020- Line (677-693)
 218 Testimony of Dr Adama A. Sallah 19th October 2020- Line 698-727

224. Dr. Sallah explained further that he had problems with the way patients were received into the treatment programme and ordered to begin treatment. There is a provision that even if you suspect that a patient has HIV before you test them, you give them pre-test counselling then, of course, you seek informed consent for the test and after the test, you do post-test counselling. It is wrong and a gross dereliction of duty to parade people on TV and show them to the whole world without informed consent or counselling. When asked about the manner in which people were publicly exposed wearing nothing other than a towel draped around the private parts of their bodies, Dr. Sallah said this said act is explicitly stated in the code of conduct. The patient has the right to appropriate privacy. When a doctor is examining a patient, it should be done in such a manner that they are not necessarily exposed. Of course, HIV is a condition that can affect the whole body so it is justifiable for a doctor to conduct a whole-body examination, but that is no business for the non-doctors or onlookers. The code of conduct goes further to say that if you are going to examine a person of the opposite sex, it is advisable to have a chaperone of the same sex as the patient present to prevent allegations of impropriety.²¹⁹

225. Dr. Sallah advanced that Section 39 of the Code of Conduct of Medical Practitioners in The Gambia applies to Yahya A.J.J. Jammeh in the sense that although he did not openly declare that he is a medical doctor or registered medical practitioner, he acted in a manner that can be reasonably interpreted as presenting himself as a medical practitioner. This provision of the Act states that if you pretend to be a doctor, you present yourself as a doctor or you claim to be a doctor and you are not registered by the council, then you have committed an offence. He believes that this section of the Act should be applied to the PATP.²²⁰ Yahya A.J.J. Jammeh had no certified training in the practice of medicine, so practicing in a manner that endangers the lives of people and health by all definitions is unlawful and the provisions of the Act, which is the law, categorically condemn that kind of behaviour. In a nutshell, what he was doing was illegal. Anyone who aided and abetted him in what he was doing was de facto also carrying out an unlawful activity. It constitutes an objectionable behaviour that is not compatible with what the profession expects from any practitioner. He stated the public and the patient must be safeguarded from the type of activities carried out by Yahya A.J.J. Jammeh in his PATP and even a trained medical doctor if he is shown to be incompetent and unethical, the profession is duty bound to distance itself from them. He said that verification of opinions as provided by the Act not only applies to people trying to practice outside the profession but even within the profession. If there is any claim by any colleague or by any scientist for that matter, before you accept it as sacrosanct, you have to personally verify it to ascertain that the claim is correct or it is generally acceptable by the profession.²²¹

226. Dr. Sallah went on to say that the promise of a cure to HIV/AIDS is elusive as there is no cure; there is control, but there is no cure. So discharging them on the assumption that they have been cured is wrong. If the patient is given the impression that they have been cured, that is risky business because it could lead to the patient neglecting medication. This would ultimately result in the death of the patient.²²²

227. Dr. Sallah asserted that the doctors working under the PATP should have reported the programme to the Medical Council without fear, favour or ill-will because it was an outright

219 Testimony of Dr Adama A. Sallah 19th October 2020- Line 728-747
 220 Testimony of Dr Adama A. Sallah 19th 20th October 2020- Line 794-800
 221 Testimony of Dr Adama A. Sallah 19th October 2020- Line 849-871
 222 Testimony of Dr Adama A. Sallah 19th October 2020- Line 875-881

dangerous therapeutic intervention. It should have been brought to the attention of the regulatory authority. It was a breach of professional conduct on the side of doctors who participated in it. He mentioned that a Practitioner should be a person of integrity and truthful and honest. Whatever they say or do should be based on facts. He said if a Practitioner reaches a level where he realizes is beyond his knowledge or competence, he is duty bound to refer to someone else who has better proficiency or experience in that area.

228. He added that given the complexity of the disease and the many different comorbidities and organ system failures or derangements, preferably, it should be a combination of an Infectious Disease Specialist and a Physician who can effectively carry out treatment for HIV/AIDS. If there is no Infectious Disease Specialist, then maybe the Physician is the best to take care of people living with HIV/AIDS. A complete cure of the disease is impossible. The virus hides in the cell's genus. Eliminating the virus effectively means that you have to kill those cells, which will mean killing the patient. It must be remembered that the virus has the same DNA as the cell. It prefers to stay there to the extent possible. If you eliminate the virus, you eliminate the individual and that defeats the whole purpose of treatment.²²³ The only effective treatment in terms of HIV infection is Highly Active Antiretroviral Treatment (HAART). He said it is a combination of the different classes of drugs. Different institutions might have different variations. The HAART is the most effective treatment for the virus currently available. Discussing a cure is superfluous and does not apply because it is just a hypothesis; in practice, it is not achievable.²²⁴
229. Dr. Sallah asserted that the PATP was pointless and was a waste of time, energy, resources and resulted in unnecessary physical and psychological trauma and loss of lives.²²⁵ He concluded by acknowledging that the PATP was bogus, fraudulent and lacked scientific basis and should have been nipped in the bud when it started.²²⁶

TESTIMONY OF DR. JAYE

230. **Dr. Assan Jaye** is an expert in HIV treatment specializing mainly in immunology. It was important for the Commission to hear his testimony to better understand what HIV is and how it was dealt with in The Gambia until former President **Yahya Jammeh** made his “*breakthrough*” declaration, and its impact on HIV/AIDS treatment in The Gambia. In 1993, he joined MRC as a postdoctoral fellow. He worked in immunology because there was a measles outbreak in The Gambia. There had to be a study on how the immune system responded. After five (5) years, he proceeded to study HIV infections.
231. Dr. Jaye told the Commission that The Gambia had two (2) types of HIV infections known as HIV 1 and HIV 2.²²⁷ HIV 2 was rare except in Portuguese colonies such as Guinea Bissau, which caused a cohort to be established to understand better how people living with HIV2 had long-term non-progression. These studies were done in The Gambia and it was discovered

223 Testimony of Dr Adama A. Sallah 19th October 2020 Line 989-1007

224 Testimony of Dr Adama A. Sallah 19th October 2020 Line 1014-1027

225 Testimony of Dr Adama A. Sallah 19th October 2020 Line 1081-1085

226 Testimony of Dr Adama A. Sallah 19th October 2020 Line 1173-1175

227 HIV-1 and HIV-2 have many similarities including their intracellular replication pathways, transmission modes and clinical effects leading to acquired immune deficiency syndrome (AIDS). However, HIV-2 is less likely to progress into AIDS because of its lower transmissibility. Thus, individuals infected with HIV-2 mostly remain non-progressors for a long period of time, while patients infected by HIV-1 progress faster and contract AIDS. Available at: <https://www.news-medical.net/health/HIV-1-versus-HIV-2-Whats-the-Difference.aspx>

that certain components of the immune system were responsible for fighting HIV and were able to inform other countries that worked on HIV 1. Dr. Jaye stated that this discovery was so important that it led him to be elected as a fellow in the African Academy of Sciences. Dr. Jaye became an international scientist due to his excellent work and achievements and was appointed directly by the Medical Research Council (MRC) office in the United Kingdom. In 1998, he became a scientist specialized in immunology and was in charge of HIV and measles immunology research.

232. Dr. Jaye told the Commission that HIV was discovered in 1980/81 and it is a special retrovirus as it had two (2) positive-strand RNA in its genome. Dr. Jaye explained to the Commission how it was believed that HIV 1 jumped from chimpanzees to humans in Central Africa in 1931 and HIV2 jumped from Sooty Mangabey SIV (Simian Immunodeficiency Virus) monkeys to people in Guinea Bissau in 1940. He stated that with HIV 2, the two (2) RNA could integrate itself into the human's DNA. The Lead Counsel pointed out that this explanation goes to the heart of the issue as to whether there is a cure for HIV or if there could only be a treatment. **Dr. Jaye** responded by saying, “Exactly” and that a cure could not exist.
233. In The Gambia, an epidemiological survey was conducted, which revealed persons living with HIV. In 1983, Professor Hilton Whittle, **Dr. Jay's** mentor, built a cohort in Guinea Bissau. He joined the cohort in 1993 when it started to develop and grew to about 1600 members comprising about 800 HIV 1, 450 HIV 2. The rest were people with dual infections, meaning that they are infected with both HIV 1 and HIV 2.
234. **Dr. Jaye** explained the problem of drug resistance in the bodies of persons living with HIV and how in 1998, the Gambia Ethics Committee and the MRC Ethics Committee approved a trial of the combination of discovered drugs called **Combivir**. also drew the Commission's attention to the fact that it was important to get approval from the Ethics Committees in The Gambia to conduct any research, including clinical trials. He further stated that it is important to get approval from the Ethics Committee as internationally, no medical research is supposed to be done without approval being obtained. This is because the ethical practice from recruitment of patients, informed consent, method of drug delivery, the scope of patient care and follow-ups has to be scrutinized to ensure that it adheres to the recognized medical standards.
235. **Dr. Jaye** told the Commission that the *practice of medicine is anchored on a solid ethical foundation to be observed by all medical practitioners*. Dr. Jaye continued that the study was carried out as a clinical trial, and it became suboptimal in the sense that the patients became resistant to the drug and the virus mutated and changed its sequences. There was only one drug at the time and clinicians had difficulty managing HIV because beside the drug, the patients need good counselling and advice on adherence and follow-ups. To achieve the necessary results and make the treatment a success, MRC and its cohorts recruited many field workers and trained them to follow up and give nutritional support and counseling, especially for those who were progressing to stages 3 and 4. They would collect samples from patients at their own cost every three months to test and monitor their CD4 counts and viral load, which was very costly. MRC was able to do the viral load assessments through the Reverse Transcriptase PCR mechanism based on certain primers selected and had the capacity to detect the pro-viral load test, which is the DNA itself in the cell.

236. In 2000 a second-class drug for the treatment of HIV was found and was combined with the other classes of drugs. This combination, known as **HAART**, became the game-changer for the MRC unit and the world. This is when HIV was declared a manageable infection and could be managed like a chronic illness like diabetes. Patients would have to stay on their drugs for the rest of their lives and they would have a productive life. He further said that HIV/AIDS, which was a death sentence, has been reduced by medicine to a disease that one can live with for a long time and have a productive and good quality of life, with the adherence to the rules of the medicine.
237. Dr. Jaye stated that the drugs could make the viral load drop to a level that it becomes undetectable and that at this point, the disease cannot be transmitted to another person. He also stressed that the **HAART treatment was not a cure for HIV/AIDS**, as it only allowed the medical world to make the disease manageable. Dr. Jaye also told the Commission that because of the discovery of these drugs, recently in clinical research for HIV/AIDS, there has been a discovery known as **PrEP Pre-Exposure Prophylaxis** for vulnerable people such as men having sex with men. The new drug is known as Cabotegravir and a single injection given every 3 to 4 months to a member of a vulnerable population can protect the person if exposed to one who is a viral spreader of HIV.
238. Dr. Jaye told the Commission that HAART was proven to be effective sometime in 2004 and was shortly available in The Gambia with support from the Global Fund, established to facilitate funding to African countries. The drug became accessible for free for Gambians living with HIV/AIDS. MRC developed a protocol long before HAART. It was feasible for the HAART treatment to be incorporated into that system and MRC would treat patients referred by the Treatment Eligibility Committee.
239. Dr. Jaye became Interim Head of the Programme and was part of the team that built a cohort of 1600 patients with HIV 1 and HIV 2. His research was directed towards understanding why HIV 2 did not progress as quickly in humans as HIV 1.
240. During Dr. Jaye’s testimony, the Lead Counsel stated that it was important for Dr. Jaye to briefly explain to the Commission the difference between HIV and AIDS. Dr. Jaye explained that being infected with HIV does not necessarily mean that you have AIDS. The difference is that HIV infection comes in four stages. Stage 1 is where the person is asymptomatic, but there could be what is known as Lymphadenopathy.²²⁸ You can see a seemingly healthy person who is HIV positive.
241. Stage 1 is an asymptomatic period. In Stage 2, the infection starts. It is still not AIDS, but the patient starts having more recurrent respiratory or maybe digestive infections, resulting in diarrhea. At this point, one may not have AIDS because one’s CD4 count is still strong – not below 315. At Stage 3, the CD4 count goes down and there is a weight loss of more than 10% of your presumed or measured body weight, accompanied by severe diarrhea. Stage 4 is known as HIV wasting – one looks very sick. The patient is completely emaciated and potentially, if you do other tests, it will show concurrent TB, hepatitis or other confections, this is stage 4 and it is AIDS. Stages 3 and 4 are potentially the AIDS-defining clinical stages and difference between HIV and AIDS.

²²⁸ Lymphadenopathy or adenopathy is a disease of the lymph nodes, in which they are abnormal in size or consistency. Lymphadenopathy of an inflammatory type (the most common type) is lymphadenitis, producing swollen or enlarged lymph nodes

242. Dr. Jaye adopted a crucial point from his written testimony after he was quoted by Lead Counsel, in which he said, “*MRC Gambia had a HIV cohort of 1600 HIV-1 infected individuals as of 2005. These were clinically taken by MRC HIV clinical staff. Clinical visits entailed monitoring CD4 count, plasma viral load testing, counseling, adherence to therapy, and periodic field worker visits. There was a good relationship between field workers and patients to a level where we encouraged support groups. The patients created one support group called Santa Yallah where there is peer support and nutritional support within them.*” Dr. Jaye, therefore, testified that this was how they managed HIV in The Gambia to the extent that 90% of the patients had suppressed viral loads with increased CD4 count. They were doing very well. The treatment was undoubtedly very successful and that there was no need to change their treatment approach or invite any form of intervention. The drugs they were using prolonged the lives of those who participated in the programme. He emphasized that *whatever treatment approach one intends to use, it would have to be based on scientific evidence only.*
243. Dr. Jaye further confirmed before the Commission that the effectiveness of the **ARVs** were not to be doubted. Dr. Jaye additionally adopted Line 12 of his statement to wit “*it is important to note that once a person gets HIV-1 or dual infection there is no other treatment other than ARVs which should be taken for life*” and “*That was why we placed so much emphasis on adherence of treatment and field followers because patients get tired from taking medication every day and no longer want to take it,*” adding that “*When patients viral loads would come up, it would be as a result of drug-resistant mutations which is triggered by suboptimal intake of the ARVs. We then would have to implement second-line therapy to save the patient*”. He also said that the “*multitude choice of drug combinations makes it possible to manage HIV patients adequately for them to have a long quality of life, hence a gigantic step from the days when HIV was regarded as a death sentence.*” “*The infection became rather a manageable chronic disease which allows the patients to have a productive life.*”²²⁹ This was the situation in 2005.
244. He told the Commission that **Yahya Jammeh** organized a cabinet meeting and invited the press, declaring to the whole world that he could cure HIV/AIDS and diseases such as hypertension and asthma. This pronouncement came as a surprise to him and his colleagues in the HIV/AIDS treatment Programme and it had them very worried. Their worry was comforted by the initial thought that perhaps the said pronouncement was just political rhetoric, as **Yahya Jammeh** was known for making proclamations. However, their worry became profound when they were informed that he is on the verge of organizing a treatment clinic and soon after started PATP.
245. Dr. Jaye also testified that **Yahya Jammeh** once said in an interview that he wanted to be a doctor. His hypothesis on the said proclamation and the establishment of the treatment programme was that it was for **Yahya Jammeh** to fulfil his ambition and uplift his self-esteem. **Dr. Jaye** also told the Commission that another aspect of his hypothesis is that **Yahya Jammeh** sought to strengthen his power by claiming mystical abilities, purporting to cure the incurable as far as the practice of medicine is concerned. He further expressed the view that **Yahya Jammeh** abdicated his responsibility and mandate given to him by the people in pursuing his alternative treatment programme. It eventually led to the destruction of their HAART treatment programme.

²²⁹ Testimony of Dr Assan Jaye 14th October 2020- Line (794-781).

246. Dr. Jaye’s testimony was that the proclamation made by **Yahya Jammeh** that he could cure HIV and AIDS in 3 days was understood to be one of his rhetoric that he would make without really thinking thoroughly. He could tell that **Yahya Jammeh** would never be able to treat HIV/AIDS, not to talk of curing it. He also expressed to the Commission that as he earlier explained about the Pathogenesis of the said virus, it could scientifically and be reasonably concluded that HIV/AIDS is not curable. It is impossible to cure HIV and AIDS because of a rare Genome RNA.²³⁰ In essence, Dr. Jaye stated that **Yahya Jammeh**’s proclamation to cure HIV and AIDS was a false statement. The only cure for HIV/AIDS that ever existed happened by accident in Germany. It happened as a result of a stem cell transplantation for a bone marrow on a patient who was HIV positive. He quickly added that such a cure is not practical.
247. Dr. Jaye was of the view that **Yahya Jammeh**’s proclamation and the institutionalization of his purported treatment programme was sad, given that they were the ones mandated to conduct research. They worked tirelessly to build the cohort, after which they were required to treat the patients. When **Yahya Jammeh** established the PATP, they were convinced that they would not clash with him because **Yahya Jammeh** was interested in treating unconventionally while they were doing research and helping patients with conventional treatment. But given the prevailing circumstance, they were left with no choice but to close the cohort, as they could not stop or convince their members from moving to the PATP.
248. Due to the unfortunate turn of events, Dr. Jaye and his team were left with no other choice but to give their members discharge forms to sign. They counselled the members that were being lured into joining the PATP about the potential risks involved before letting them move. At that time, they had 500 patients on the treatment scheme out of 1600 cohort members. As such, they were forced to discharge the remaining patients. Prior to the disastrous PATP, Dr. Jaye stated that 90% of the patients in the HAART Treatment Programme enjoyed very high CD4 counts and significant viral load suppression. Sadly, upon hearing about the PATP, most of their patients were lured into joining the PATP.
249. When asked about his thoughts on the impact of **Yahya Jammeh**’s position as President on the victims who went to the programme, Dr. Jaye shared that a president falsely proclaiming cure to people who are sick is tantamount to the exploitation of their vulnerability by virtue of his position as president.²³¹ He added that a sick person, especially when it comes to serious illnesses such as HIV and AIDS, is prone to be psychologically affected, making that person inevitably vulnerable. As such, he added that whenever such a person hears of a cure, be it true or false, they will, no matter what, cave in and try the programme. This, therefore, is the underlying problem of **Yahya Jammeh**’s criminality. He confirmed that the lure of a ‘cure’ was compounded by the aura of the presidency.²³²
250. Dr. Jaye informed the Commission that some of the patients who returned to their cohort shortly after joining the PATP stated that **Yahya Jammeh**’s treatment was bogus. They

230 This has double stranded and normally RNAs are single but this one has a positive strand alongside it. It therefore enables it to integrate into the host DNA itself and that is how HIV becomes successful. That RNA is accompanied with enzyme proteins that will enable it to employ a mechanism to integrate into the host cells itself and at the cell itself is in the DNA of the cell where it integrates and becomes part of that DNA to start multiplying. So if one wants to cure the virus, it means eliminating the virus to get to that virus where it is hiding but you cannot touch that virus without touching the DNA. This means that the person’s cells would be destroyed and cause their death. Available from Line 996-879

231 Testimony of Dr Assan Jaye 14th October 2020- line (1051-1052)

232 Testimony of Dr Assan Jaye 14th October 2020- line (1053-1059)

- saw no improvement and fortunately for them, they were not severely affected due to their early return. A sizable number of patients stayed with PATP before returning to the HAART treatment. By the time they went back to the programme, their conditions had severely deteriorated. They had no other choice but to admit them back into the programme and restart the entire treatment and therapy for them.²³³ The worst impact the PATP had on HIV patients was death. Dr. Jaye testified that some of the patients died. In Line 19 of his written statement, he stated, “*We were close to the patients, and we knew that they had died. That was the sad thing about it because these were people that we had managed to a good level of health, but unfortunately, the president shortened their lives.*”²³⁴ He stated that some of the patients who returned to their cohort eventually died despite efforts to save them. They had stayed at the PATP for so long without conventional medicine; this made their system deteriorate and their CD4 count low.²³⁵
251. When asked about their treatment programme at MRC after what **Yahya Jammeh** did and its impact on the patients, Dr. Jaye narrated that they eventually had to close the HIV Clinic at MRC. They later requested funding from London to transfer the rest of the cohort to RVTH (Hands on Care) because this unit was being managed by one of their experienced medical doctors who was taking care of the AIDS patients at MRC. After they transferred the cohort, their research continued in Senegal, putting the Gambia at a total loss. He also highlighted that Global Fund never withdrew their funding for the remaining cohort despite everything they went through.
252. Dr. Jaye told the Commission that **Yahya Jammeh** threatened anyone who spoke against his bogus treatment. This included some members of UDP and an international diplomat whom he declared a *persona non grata*. Additionally, he said that **Yahya Jammeh** threatened the international community, saying that he was waiting for those who think they are international scientists to say something against his treatment. Dr. Jaye also thinks **Yahya Jammeh** was referring to him when he said, “*those who think they are Gambian experts and are in Senegal*”, given that he was the Gambian scientist who moved to Senegal.²³⁶
253. The Commission also received clarification from Dr. Jaye that **Yahya Jammeh**’s reliance on the fabricated test result from the University of Cheikh Anta Diop was denied by Professor Souleymane Mboup. To further substantiate this statement, Dr. Jaye testified that Professor Souleymane Mboup wrote a letter denying testing any blood samples and that he was never approached to monitor or evaluate **Yahya Jammeh**’s so-called treatment programme. It was only a lab technician from RVTH who approached him to train him to take HIV tests. He added that the Standard Newspaper published an article in which Dr. Saja Taal, the then Editor, wrote an editorial castigating Souleymane Mboup. The conflicting statements show that **Yahya Jammeh** had no framework to evaluate his purported treatment programme. For this and many other reasons, as mentioned in his statement, the PATP was bogus and seen as a joke by the international community.
254. In conclusion, Dr. Jaye stated that the PATP was bogus, false, and exploitation of the vulnerabilities of people in dire need. He further confirmed that he was a quack, criminal

233 Testimony of Dr Assan Jaye 14th October 2020- line (1097-1001)

234 Testimony of Dr Assan Jaye 14th October 2020- line (1103-1105)

235 Testimony- of Dr Assan Jaye 14th October 2020- line (1120-1126)

236 Testimony of Dr Assan Jaye 14th October 2020- Line (1187-1180)

and fraudulent. People who were not supposed to die died. He further confirmed that the people's hopes were dashed, especially at a time when there was an effective treatment for HIV/AIDS. The biggest disappointment is that the father of the nation manned this disaster.

4.4 INDEPENDENT WITNESS

TESTIMONY OF LAMIN GANO

255. On 13th October 2020, **Lamin Gano** testified before the Commission on matters concerning the PATP and his role as an ADC (*aide de camp*) to President **Yahya Jammeh**. Lamin testified on **Yahya Jammeh's** treatment of people he claimed to be possessed by Jinn, the claim of Jammeh that he could cure these diseases - particularly HIV, the sources of his medicine, his experience tasting some of the mixtures, the recommendations he made for people to go through the treatment, **Jammeh's** approach and methods, the issue of witchcraft and whether **Yahya Jammeh** was either a miraculous healer, a quack or a charlatan.
256. **Lamin** told the Commission that he served as the ADC of **Yahya Jammeh** for eighteen months (18) from December 2006 to May 2008. He explained that the role of the ADC was to be a personal assistant to the VIP (Jammeh) and see to any administrative issues around the office. This often meant that Lamin was around **Yahya Jammeh** from the moment he stepped out of his home to go to the State House to the moment he retired back home.
257. In January 2007, **Yahya Jammeh** convened a cabinet meeting broadcasted by GRTS and declared that he had the means to treat HIV and AIDS by a breakthrough. Following the announcement, **Yahya Jammeh** began his treatment process immediately. Lamin told the Commission that there was an enclave about 100 meters from **Yahya Jammeh's** residence where he treated the patients with concoctions he prepared himself. Lamin informed the Commission that **Yahya Jammeh** not only claimed he could cure HIV/AIDS but also hypertension, infertility, asthma and even "Jinn possessions." **Lamin** explained an incident when **Yahya Jammeh** treated patients who fainted around him. He would say that they were possessed by Jinns. He would pray over them and rub an unknown substance on them until they recovered.
258. *"That issue (devil and jinn possessions) emerged during the treatment of these four (4) main areas. People will come to the treatment center sometimes some people when they get close to him they will like faint or collapse and then he will say that it's a jinn and then he knows how to deal with the jinns and then he will recite some verses and he will hold the Quran in his hands and then also rub some water or whatever it is unto these patients until they recover back to normality."*²³⁷
259. **Lamin** also explained the method used by **Yahya Jammeh** in treating asthma and infertility patients. **Yahya Jammeh** would give the patients a concoction prepared by him to drink. Lamin also partook in drinking the concoctions. Consuming the medicine caused him to develop dark spots and aches around his fingernails. When he informed **Yahya Jammeh**, he was told that it was the "kulli" leaving his system.

237 Testimony of Lamin Gano, 13th October 2020 lines 510- 515.

260. **Lamin**, in his testimony, told the Commission that he was impressed by **Yahya Jammeh's** treatments enough to recommend his mother and cousin to go and receive treatment for hypertension. According to Lamin, he had no reason to doubt Jammeh at the time. Jammeh claimed that one glass or bottle of his concoction could permanently cure hypertension. Contrary to **Lamin's** belief, his mother and cousin are still alive and still hypertensive. In fact, **Lamin's** cousin suffered a stroke months before due to hypertension. The concoctions did not rid them of hypertension.
261. **Lamin** also testified on the HIV and AIDS treatments received by patients. He told the Commission that Jammeh claimed to cure the virus in three days, but some patients remained in his treatment facility for indefinite periods. Lamin admitted to the Commission that the patients for **Yahya Jammeh** were taken to Ndemban Clinic in Bakau. They were forcefully hospitalized under security and were not allowed to leave unless **Yahya Jammeh** discharged them.
262. Lamin further testified that some HIV/AIDS treatment patients used to vomit after ingesting the concoction. When that happened, Jammeh would force them to drink another dose of the medicine and continued to do so until they kept the mixture down.
263. Regarding the origins of the PATP, he stated that Saihou Jallow, former Armed Forces Captain, informed him that Jammeh had purportedly gained his knowledge of the treatment from his grandfather. The latter allegedly had the cure for HIV/AIDS. Lamin further explained that the concoctions used to treat the patients were about three different varieties. He used to drink different types of concoctions because Jammeh claimed they were broad-spectrum medicines that could cure a wide variety of ailments. These concoctions were taken liberally and without prescription.
264. *"...there was an officer (Saihou Jallow) at the State House who said that it was his grandfather or his relative in Niimi who had discovered this treatment for HIV and AIDS. He said that this old man treated a person with AIDS in Niimi, so he said when the information was given to President Jammeh, he took ownership of that medicine that was based on the statement of someone who was serving at the State House at that time."*²³⁸
265. Lamin noted that Jammeh never told him where he acquired his knowledge of the cure for HIV/ AIDS. As far as he knew, the "jinns" Jammeh worked with guided him to that knowledge, this and knowledge inherited from his family.
266. Lamin also testified that Jammeh's purported cure for HIV and AIDS was never submitted to the labs for scientific research. It was never tested and proven to be the cure. Additionally, he remembered Jammeh during an interview with an Al Jazeera reporter saying, *"if Coca-cola does not reveal its secret, he will not reveal his to anyone."*²³⁹

238 Testimony of Lamin Gano, 13th October 2020, lines 744- 749.
239 Testimony of Lamin Gano, 13th October 2020, Lines 820- 821.

5. ANALYSIS OF EVIDENCE

267. Presidents mandate from Allah and creation of the PATP

“I can treat HIV, I can get rid of the virus in the body of the human being and that is what I do.....I feel a great burden, a big sense of responsibility because they have all their hopes in me. If I fail, I would have failed them, I would have disappointed them and the consequences would be very drastic for me as a person. So, it is not fun, coming out and treating these people is not fun. Somebody lying down there knowing that maybe the guy has few months to live, there are people coming in very bad conditions and lying down there, knowing that they only have their hope in me is a big burden morally, spiritually and psychologically. So, it is not something that anyone could do just for fun or just for mischief. I am not a President that makes mischief in the world.”²⁴⁰

- **Yahya Jammeh**
former President of The Gambia

5.1.1 DECLARATION OF MANDATE TO CURE HIV/AIDS AND THE PRESIDENTIAL ALTERNATIVE TREATMENT PROGRAMME

268. From the evidence received by the Commission, former President **Yahya Jammeh** made a declaration on 18th January 2007 that *he had a mandate from Allah to cure HIV/AIDS*. The cure was based on seven herbs from the Quran, hence making the treatment Islamic. Over the years, **Yahya Jammeh** imagined himself as a person who had a special connection with Allah and that Allah sent him abilities that made him superior to others. The claim of **Yahya Jammeh** having the mandate to cure HIV/AIDS was bogus and a lie. With this fake image, **Yahya Jammeh** created the Presidential Alternative Treatment Programme (PATP), which introduced a *fake and fraudulent “HIV/AIDS cure”*. The Commission heard that **Yahya Jammeh** operated the PATP from 2007 to 2016 when he was removed from the country, having lost the presidential election.

269. The Commission heard from Fatou Jatta and MJ 94 that prior to **Yahya Jammeh** making his declaration, he tried to test his herbal treatment by secretly sending bottles of the concoction to Santa Yallah Secretariat to be used by the members. Fatou and MJ94 told the Commission that they did not use the concoction as medical experts had told them that most herbal medications cause diarrhoea, which is dangerous for people living with HIV and can also make them sick and that it might cost them their lives. MJ94 told the Commission that some of the other members of Santa Yallah took the herbal medication, but he could not tell the Commission the effect it had on them.²⁴¹ **Yahya Jammeh** must have gained courage from this instance to make the declaration of his mandate.

270. The Commission heard evidence that **Yahya Jammeh** did not subject his cure to any

240 Alazeera interview, President **Yahya Jammeh** claims he can cure AIDS and Asthma exhibit 146A of the records of the Commission

241 Testimony of MJ94 12th October 2020 Lines 311-330, Testimony of Fatou Jatta 15th July 2020 lines 261-272

scientific proof. HIV/AIDS being a global disease, it is imperative for the World Health Organisation (WHO) to be involved and the cure is tested for approval. Testing is vital because any herbal medicine must be safe for use by human beings. The issue of testing was not an option for **Yahya Jammeh**. The reluctance to test the cure and forcing its use on humans without complying with the national standard for drug testing was a violation of the policies of the Ministry of Health and Section 9 of the HIV and AIDS Prevention Act 2015. Even though the Act was passed in 2015, **Yahya Jammeh** was fully aware of the draft Bill and HIV Policies but refused to adhere to them. He continued to mislead people into believing in his ability to cure incurable diseases. Most of the witnesses attested that they willingly joined the treatment program because of the belief they had in **Yahya Jammeh**. A testimony from protected witness MC73 mentioned that he “believed **Yahya Jammeh**’s proclamation to cure the said virus given that he was the Head of State and it never crossed his mind that he would tell a whole lie to the people like that.”²⁴² ME64, also a protected witness, told the Commission that he heard **Yahya Jammeh** say on TV that he could cure HIV/AIDS and other related illnesses. Consequently, he was inspired to join the program because the president made the declaration.²⁴³

271. The Commission noted from the witness testimonies that the PATP was widely advertised through national television. The Commission heard from witnesses that having seen participants on the said national television giving excellent reviews and testimonies on the PATP, they were persuaded to join the programme. The Commission did not hear much criticism of the PATP by both national and international stakeholders. The Commission heard that **Yahya Jammeh**’s bogus and unproven cure faced little opposition, encouraging more people to join the treatment programme because they considered it safe. Witnesses like MD59 told the Commission that even though they were told by MRC that there was no cure and that the ARV medication was keeping them healthy and fit, the declaration issued by **Yahya Jammeh**, the President of the country and the most influential and powerful man in the country, convinced them that **Yahya Jammeh could cure HIV**.²⁴⁴ Dr. Assan Jaye told the Commission that this was the first time he had seen such a powerful person making such a claim to his people. He further went on to say that it was irresponsible for **Yahya Jammeh** to do so because he was the President and the leader of the whole nation, he had the responsibility to protect the life of everyone, and in so doing but endangered the lives of people living with HIV/AIDS.²⁴⁵

272. The witnesses indicated further that even though they were told that there was no cure, *they wanted to be cured and did not believe that a man of such calibre and standing as **Yahya Jammeh** would lie to his Gambian people that he claimed to love so much and the whole world that he had a cure*. So even though **Yahya Jammeh** had no medical training, just the bogus fact that he came from a family with so-called healing powers managed to get people to join his fake and fraudulent treatment programme to be cured of the HIV/AIDS virus.

273. Dr. Sallah, an expert witness, told the Commission that HIV/AIDS is a complex disease that can only be treated and managed by an infectious disease specialist or physician. Dr. Sallah further stated that a total cure of the disease is impossible because the virus can hide in the

242 Testimony of MC73 22 July 2020- lines187-247

243 Testimony of ME64 20 July 2020- lines 109-197

244 Testimony of MD59, 20th July 2020 line 140-151

245 Testimony of Dr Assan Jaye 14th October 2020 lines 1029-1035

cell genes, eliminating the virus effectively means killing these cells as well, which spells a death sentence for the patient if you eliminate the virus at that stage. Dr. Sallah added that it should be remembered that the virus has the cell's DNA at its predilection, so it prefers to stay there to the extent possible. If you eliminate the virus, you would as well eliminate the individual, which defeats the whole purpose of treatment²⁴⁶. Dr. Jaye confirmed this scientific theory in his testimony, stating that attempting to cure a person of HIV means trying to kill them. He testified that only one person was healed by accident, and he ended up dying.²⁴⁷

274. Lamin Gano, in his testimony, told the Commission that he heard the Aljazeera reporter²⁴⁸ who interviewed **Yahya Jammeh** ask him whether his cure had been tested. **Yahya Jammeh** responded that if coca-cola did not reveal their secret, he would not reveal his to anyone.²⁴⁹ Dr. Jaye said **Yahya Jammeh** lied to the people when he said he could treat HIV/AIDS in 3 days.²⁵⁰

275. The Commission heard from witnesses that were handpicked to be the first batch of the treatment. Fatou Jatta testified that she was a participant in the first batch and she was made to give positive testimonials about the treatment programme on Gambia Radio and Television Services (GRTS). The Commission also heard from MC73 and MJ94²⁵¹ that they were told to give positive reviews about the treatment programme. The participants were denied their right to express their opinions and views about the program. Given that **Yahya Jammeh** was a dictator, the participants did not dare give negative reviews in his presence.

5.1.2 PARTICIPANTS DID NOT GIVE CONSENT BEFORE THE TREATMENT

276. The Commission heard from the witnesses in the first batch of the treatment that **Yahya Jammeh** and the PATP team did not provide them with any briefing. Upon their arrival at State House, **Yahya Jammeh** informed him about his HIV/AIDS treatment rules. Fatou Jatta mentioned during her testimony that at no point was their consent requested or given for said treatment, nor was there use of the usual protocol upon admission to the hospitals. She added that they were guarded until the day that they were released. In her words, “*whichever side you look, you see soldiers guarding you as if you are locked up in prison, or you were under custody.*”²⁵² MC73 also revealed during the programme, the first day they went to see **Yahya Jammeh**, they were never asked whether they were willing to submit themselves to the programme or not and the treatment was administered to them without their consent.

277. **Yahya Jammeh** stated during the meeting that his first rule was that all the participants that were on the anti-retroviral treatment needed to stop taking the medication immediately. Further, the participants cannot have sex, eat kola nuts or drink green tea, commonly known as *Ataya* in The Gambia. **Yahya Jammeh** was reckless to order the participants to stop taking their antiretroviral treatment. It was during this time that participants in the first batch were told that they should be staying at the Kanifing Hospital, which initially was for three

246 Testimony Dr Adama Amadou Sallah 19th October 2020 lines 1100-1007
 247 Testimony of Dr Assna Jaye 14th October 2020 para 995 -1011
 248 Interview on Aljazeera admitted in evidence as exhibit 146A
 249 Testimony of Lamin Gano, 13th October 2020 lines 818-821
 250 Testimony Dr Assna Jaye 14th October 2020 lines 883-909
 251 Testimony of Fatou Jatta, 15th July 2020, MC73, 22nd July 2020, Testimony of MJ94, 12th October 2020
 252 Testimony of Fatou Jatta 15th July 2020 lines 555-556

days, then moved to five, then ten. However, PATP participants' testimonies indicate that they were there for multiple months. Even though they voluntarily entered the fake PATP, the other batches testified that they did not receive informed consent of the treatment procedure.

5.1.3 ROLE OF PERSONS INVOLVED IN THE PATP

278. A sad fact about the PATP was that Dr. Tamsir Mbowe, a well-known Gambian, experienced doctor and a specialist gynaecologist, endorsed and validated the PATP. Witnesses testified before the Commission that Dr. Mbowe told them that the treatment was successful and people are being cured. Considering the position of Dr. Mbowe, his presence legitimised the PATP and gave courage to most people to join the PATP. Being informed that the treatment was genuine and would cure them of HIV, the participants entered the PATP with the same belief, not knowing that the PATP was created to violate their rights. MK83, a protected witness who testified before the Commission, explained that Dr. Mbowe told him when they met at the Banjul Hospital that, “*We have already cured a lot of people who had already gone home*” and asked him, “*don't you watch TV? Haven't you seen MC73 and others like Kebba Jannah who were already cured and released to go home?*” that “*all these people were cured and they went home and many others.*”²⁵³

279. Dr. Mbowe told the Commission that he shared a personal relationship with **Yahya Jammeh** and that **Yahya Jammeh** told him that he had herbs that would cure HIV/AIDS. In his words, “*I will eliminate the virus, I will cure the virus*”. He also told him the treatment would take three days. Dr. Mbowe maintained that “*the programme is true and the treatment is true.*”²⁵⁴ Dr. Mbowe further explained that he helped to administer the treatment. He said, “*I used to help him give medications to the patients and help him apply the medication on the patients. This is the topical application.*”²⁵⁵ He admitted to supervising the collection of samples but denied arranging for the testing himself. He also admitted having had no baseline information about the treatment and that samples were taken not just from patients but also from others present who were not patients, claiming it was a way of protecting data and safeguarding the treatment.²⁵⁶

280. Dr. Mbowe told the Commission that he believed **Yahya Jammeh's** cure for HIV/AIDS to be true and genuine and objected to it being described as fraudulent. He said, “*the programme was true, the medical herbs have the potency to eliminate the HIV/AIDS virus from the human system based on laboratory test results.*”²⁵⁷ The witnesses who testified before the Commission on the PATP disclosed the fundamental role Dr. Mbowe played in aiding **Yahya Jammeh** to succeed in his bogus and fraudulent claim of being able to cure HIV/AIDS.

281. The Commission also heard the testimony of Dr. Mariatou Jallow. She testified she was present at a discharge ceremony for participants who **Yahya A.J.J. Jammeh** had misled into believing they were cured. Dr. Mariatou confirmed that her statement “*hope and life were restored.*”²⁵⁸ was not true. As a doctor, she knew that there was no cure for HIV/AIDS but

253 Testimony of Mk 83 22nd July 2020- Line 173-185
 254 Testimony of Dr Tamsir Mbowe 21st October 2020- Line (1030)
 255 Testimony of Dr Tamsir Mbowe 21st October 2020- Line (1143)
 256 Testimony of Dr Tamsir Mbowe 21st October 2020-Line (2850)
 257 Testimony of Dr Tamsir Mbowe 21st October 2020- Line 1951
 258 Testimony of Dr Mariatou Jallow 23rd July 2020 lines 559 -565

was afraid of what Yahya A.J.J. Jammeh might do to her because he could have framed, arrested, imprisoned or worse – made her a part of the statistics of those disappeared people. Dr. Mariatou Jallow participated in rubbing the herbal ointment on the participants.

282. Dr. Mariatou also told the Commission that it was in her presence that Dr. Mbowe, nurses and other medical personnel gave the treatment and made the participants believe in the cure. To end it all, Dr. Mariatou testified that she felt terrible to be a part of this fake and fraudulent treatment and she knew that no one was cured. Instead, the participants of the PATP who were supposedly cured, came back worse, having been discharged from the programme.
283. The Commission heard Dr. Malick Njie testified that he told former President **Yahya Jammeh** that he didn't believe him when Jammeh first told him that he could cure HIV/AIDS. He added that he advised him that as the President, he should concern himself with governing the State rather than curing HIV. Dr. Njie further stated that he told **Yahya Jammeh** to leave the treatment of HIV/AIDS to the professionals and that the national programme is working very well. **Yahya Jammeh** responded by saying Dr. Njie “*was brainwashed by the toubab, the white people*” that's why he was saying that to him.
284. Dr. Malick Njie continued to testify that from the day **Yahya Jammeh** told him that he had a cure, he knew it was fake. Dr. Njie told the Commission that from the test results of the first batch, he had told Yahya A.J.J Jammeh that the participants were still HIV positive. Dr. Njie testified that **Yahya Jammeh** said, “*don't worry, I shall give them something stronger.*” From all indications, **Yahya Jammeh** knew that his cure did not work but continued to mislead the participants and put their lives in danger.
285. One of the laboratory technicians, Momodou Landing Faal, disclosed to The Commission that standard procedures governing the way they executed their duties existed where patients were usually given code numbers for identification purposes, after which their samples would be tested upon request by the patients themselves. With **Yahya Jammeh's** PATP patients, this procedure did not apply as random blood samples from unidentified persons were sent to them for testing.. Faal also affirmed the existence of standard operational procedures when carrying out blood tests for patients, but that with **Yahya Jammeh's** patients, the application of these rules was flouted, adding that in his professional opinion, **Yahya Jammeh's** conduct was clearly unethical. Due to fear of not only being sacked but being harmed by **Yahya Jammeh**, he had to turn a blind eye to the abnormalities and just do as he was instructed to do.²⁵⁹
286. Mr. **Abdoulie** Saihou Batchilly's testimony corroborates the non-compliance of the standard of rules of procedure regarding how tests were conducted. He cited instances where some tests were conducted from blood samples of which the viral loads were undetectable and **Yahya Jammeh** relied on these to declare to the world that his treatment worked and that he could cure HIV/AIDS. He added that he specifically told **Yahya Jammeh** in the presence of Dr. Tamsir Mbowe that if a person has undetectable viral loads, it does not mean the person is cured. In essence, those patients were still positive despite the undetectable viral loads.²⁶⁰ From this statement, it could be reasonably ascertained that the said test results that **Yahya Jammeh** claimed were undetectable may not even be accurate because he was always

259 Testimony of Momodou landing Faal 23rd July 2020- Lines 485-614
260 Testimony of Abdouile Batchilly 15th October 2020- Lines 363-389

sending random samples with unknown identities to be tested. As such, the said results and the reliance on the same to mean he could cure HIV/AIDS was bogus and fraudulent. To further substantiate the inaccuracy of **Yahya Jammeh's** claim that the undetectable test results meant that he could cure HIV/AIDS, MC73 added that Cheikh Anta Diop University, where said samples were taken to for testing, later wrote a letter to State House refuting any claims progress or success based on the blood sample tests **Yahya Jammeh** claimed were conducted by their University. Professor Souleymane Mboup of the Cheikh Anta Diop University also published an article on the false claim by **Yahya Jammeh** of curing HIV/AIDS based on his inconclusive results of the blood samples.²⁶¹

5.1.4 PERSONS ACCUSED OF WITCHCRAFT

287. MB15 disclosed that some of the patients were accused of witchcraft by **Yahya Jammeh** when a woman got severely ill due to the treatment administered to her eventually leading to her death. He accused patients of sabotaging his treatment and gave them a concoction called ‘Kubejara,’ which had an intoxicating effect on the patients. Nine of the patients lost consciousness and he concluded that they were witches and wizards. Consequently, some of them were expelled while others were isolated and left to suffer as a form of punishment, which eventually led to their deaths.²⁶² This act by Yahya A.J.J. Jammeh is inhumane and degrading and caused the death of falsely accused patients.

5.1.5 MODE OF ADMINISTRATION OF THE TREATMENT PROGRAMME

288. The Commission heard that **Yahya Jammeh** used to patiently prepare the cure himself and that he would administer it himself. **Yahya Jammeh** ensured that participants only had a towel wrapped around their bodies and laid down on the treatment bed.
289. He then routinely began each treatment by praying over them and reciting incantations and reading scriptures from the Qur'an. **Yahya Jammeh** would then rub herbal ointment all over the patients' bodies, leaving them with a prayer. Fatou Jatta told the Commission that she was asked to undress and given a towel to wrap around her body. **Yahya Jammeh** asked her to cup her hands and he poured “spiritual water” in them. He recited verses from the Quran and requested that Fatou rub it over her face. The participants would then be given a concoction to drink and they were at first fed with good food to make them appear strong and healthy, but as they continued drinking the concoction and stopped using their antiretroviral drugs, they began to show signs of weakness and their health significantly declined. The concoction was in different forms. Some were named by the participants as *omo* and *chakri* and they said the concoction was brown in colour and had a very negative effect on them once they drank it.
290. MC73, a protected witness who testified before the Commission revealed the mode in which the treatment was administered. He said the procedure in which the treatment was administered was that they were asked by **Yahya Jammeh** to entirely undress themselves and lie on a couch with a towel on them. Stripping naked also included the women. First, he

261 Testimony of MC73 22nd July 2020-Lines 714-788
262 Testimony of MB15, 21st July 2020 Lines 684-782

said **Yahya Jammeh** would stand over them and pull the Quran and utter certain incantations before applying some of the liquid – an oily substance, and start massaging, after which the nurses and any doctor around would join him to complete the massage process. MC73 also said the massage part of the treatment was the funniest part to him and that this was the point he started losing hope. That HIV has no relationship with muscles, as it is a blood borne disease. He then said that when he saw himself being massaged, he knew straight away that **Yahya Jammeh** lacked the knowledge of what HIV/AIDS is, but he just had to helplessly submit himself to the treatment. He furthered that the massage experience was very intrusive and disgusting, given that their entire bodies were massaged, including their genitals.²⁶³

5.1.6 HOW THE TREATMENT VIOLATED THE RIGHTS OF PARTICIPANTS

291. The PATP violated the rights of the participants contained in Section 21 of The 1997 Constitution of The Gambia. The witnesses testified that they were forced to drink **Yahya Jammeh**'s concoctions being the purported "cure," which made them lose consciousness sometimes for hours and put them in a drunken state. In the first three batches, the witnesses testified before The Commission that they were detained at the Serrekunda Hospital under guard by state agents around the clock with no option to leave nor have visits from friends and family. The witnesses stated that most times, they would be made to run around as exercise to test their strength after taking the concoction. **Yahya Jammeh** would parade the participants when he had festivals, especially those held in Kanilai.
292. The participants of the PATP were at times forced to gather and dance up to around 2 am, making a fool of themselves, not by choice. Therefore, such treatment by the former President, a position held by someone who should protect and treat citizens in a civilised manner, violated all protocols. The participants were treated in an Inhumane and Degrading manner which flouts the provisions of Section 21 of The 1997 Constitution of The Gambia. This provision states that no person shall be subject to inhumane and degrading treatment. **Yahya Jammeh** treated the participants as guinea pigs, using them on an experimental escapade for personal gain.
293. Considering that The Gambia is a signatory to international instruments, the provisions provided in those instruments should be upheld by the State. Article 5 of the Universal Declaration of Human Rights (UDHR) was breached by former President **Yahya Jammeh** and his PATP, as the provision provides that '*No one shall be subjected to torture or to cruel, inhumane or degrading treatment or punishment.*' The PATP participants were subjected to cruel, inhumane, degrading treatment and punishment.
294. Article 7 of the International Covenant on Civil and Political Rights (ICCPR) was violated by **Yahya Jammeh** and his PATP. The provision provides that '*No one shall be subjected to torture or cruel, inhumane and degrading treatment or punishment.* In particular, *no one shall be subjected without his free consent to medical or scientific experimentation.*' By his actions, **Yahya Jammeh** violated the human rights of the participants by subjecting patients to medical or scientific experimentation without seeking their consent.
295. The PATP had an adverse impact on the health of the participants to the extent that it violated

263 Testimony of MC 73 22nd July 2020- lines 341-362

their right to health under Section 216 of the 1997 Constitution of The Gambia. Further, the provisions of Section 18 of the Constitution were also violated as many participants died, deprived of their life by the fake and fraudulent treatment.

296. The International Covenant on Economic, Social and Cultural Rights provides that everyone has the right to the enjoyment of the highest attainable standard of physical and mental health. The right to health is defined as including the right to control one's health and body; the right to be free from interference, such as non-consensual medical treatment and experimentation; and the right to seek, receive information and ideas concerning health issues. **Yahya Jammeh** and his government were responsible for providing drugs that were not scientifically proven and approved for use on human beings and further failed to ensure the availability of medically appropriate services that respect confidentiality and medical ethics. This provision was violated by **Yahya Jammeh** and his PATP as witnesses testified before The Commission that they did not have control over their bodies during the treatment and that they were requested to stop taking their most important medication, being their ARVs. **Yahya Jammeh** endangered the lives of the participants as he was certain that his so-called cure was not working but continued to administer it while participants were dying during the PATP. Various witnesses that testified before the Commission attested to the fact that several patients died during and after the PATP.

5.1.7 THE IMPACT OF THE PRESIDENTIAL TREATMENT PROGRAMME

297. The Presidential Alternative Treatment Program has led to the death of many patients during and after the treatment and The Commission was able to establish 41 of these deaths. All the witnesses who took part in the treatment disclosed to The Commission that their health conditions deteriorated significantly after consuming the concoctions given to them. MC73 narrated that after they drank the concoctions, **Yahya Jammeh** would ask them about the colour of their feces, which he found very degrading. If the color was yellow, then that was normal and if it was green, it was a problem. They were forced to admit that they were being cured by **Yahya Jammeh**'s concoctions when in truth, they participated in the hoax to safeguard themselves from being victimized. He narrated the circumstances that led to the death of a patient, Fatou Ceesay. He said Fatou was virtually dragged and taken to the isolation unit in the hospital, where she subsequently died. MC73 furthered that before Fatou's death, even after crying and repeatedly saying that she was well, she was still dragged to the isolation room and was left to die. As such, he said he felt he had no choice but to lie about the treatment being successful. He did this to save himself, as he strongly felt that his life would be at risk if he had said anything wrong or contrary to what **Yahya Jammeh** wanted to hear.²⁶⁴
298. It was further revealed to The Commission by MC73 that about 15 patients died in the course of the PATP and he mentioned a few examples such as one Dampha, a very inspiring and industrious man, a Sarahuleh (a tribe in The Gambia) lady, who was a very prosperous businesswoman and Fatou Ceesay, who was brutally manhandled and inhumanely treated, as earlier mentioned.²⁶⁵ **Fatou Jatta** also told The Commission that many people died as a result of the treatment. From Exhibit 146, she identified persons 1 to 7 as people who died

264 Testimony of MC73 22 July 2020 Line 706-714

265 Testimony of MC73 22 July 2020 Line 714-778

during the treatment programme and persons 8 and 9 as people who died immediately after the treatment programme.

299. **MC73** also disclosed the impact the PATP had on him. He said he managed to go back to Hands on Care for the conventional treatment after leaving the PATP. When he returned to the said clinic, the Dr. told him that if he had stayed at the PATP any longer, it would not be good for him. He said he was put on second-line drugs due to his severe and deteriorated health condition after he got discharged from said programme. He furthered that the said programme negatively impacted his life and his family's, to the extent that after the broadcast of his HIV and AIDS status on national TV, his daughter's suitors all disappeared, believing that like him, she might also have the virus. He was mostly in the bush alone, trying to deal with the stigma and the stress of his deteriorated health condition as a result of the PATP of the former President of the Republic of the Gambia, **Yahya Jammeh**.
300. Almost all the witnesses that testified before the Commission on the PATP revealed that they went back to using Anti-Retroviral drugs after they were discharged from the PATP as their health conditions deteriorated significantly. **Fatou Jatta** told the Commission that after drinking the concoctions, she suffered a loss of appetite. She frequently vomited and was generally unwell. She said, "*I suffered a lot. My health suffered a setback because I was not eating and I was under constant stress*". Her condition raised some concerns and she heard **Dr. Malick Njie** told **Yahya Jammeh** that she should be taken to the hospital and his response was, '*No, she will get up*'.²⁶⁶ Fatou added that she had the HIV for 11 years before being dragged into the PATP and she had never used ARV; however, after she participated in the PATP, her health condition deteriorated to the point that after leaving the PATP and going back to MRC, she was put on ARV to get her to a healthy state.
301. The Commission also heard from Protected Witness, **ME64**, who described his health condition post-PATP and its impact on him and his family. He developed severe body ache, frequent high body temperatures and pimples all over his face. After he was discharged, his health worsened and he went back to the Brikama Health Center to restart his conventional treatment. Instead of taking septrin and paracetamol as in his previous treatment at the Brikama Health Center, he was now put on Antiretroviral in addition. He stated that his wife and himself found it hard to sustain themselves and their family, given that his wife was also HIV positive and had enrolled in the PATP even before he did. Hence her deteriorated health after she left the PATP.²⁶⁷
302. **MH49**, also a Protected Witness testified that after she and her husband were discharged from the PATP, they were still not cured, forcing them to go back to their previous clinic at the Brikama Health Center, where they were even refused treatment because they abandoned their treatment despite all the risks involved. She added that she and her husband had to go to one of the health facilities in Banjul, Poly Clinic, where her husband was being treated with septrin, multivitamins and B-co and laetr placed on antiretroviral drugs.
303. **ND59**, a Protected Witness, testified that he was not allowed to take any form of conventional treatment whilst he was at the PATP, as a result of which he developed constant diarrhea, anemia, low blood pressure, fungal mouth infection, ulcer and even had difficulty swallowing food. He also told The Commission that he experienced a loss of appetite. He revealed that **Yahya Jammeh's** treatment made him very sick and that he was much healthier and better

266 Testimony of Fatou Jatta 15th July 2020 lines 449-450
267 Testimony of ME64 20 July 2020 Lines- 504-575

cared for at the clinic he registered with prior to joining the PATP. His health massively deteriorated. He stated that **Yahya Jammeh** stopped making his concoctions because of the 2016 Presidential election preparations and abandoned them, prioritizing his political agenda over their health. **ND59 stated that** this caused more harm to him and his mates and added that the people responsible for the administration and day-to-day operations of the Ndemban Clinic, ironically resorted to the conventional form of treatment for him. He added that this was also due to the fact that in addition to being an AIDS patient, he had also developed other illnesses during the cause of the so-called treatment by **Yahya Jammeh**.²⁶⁸

304. **ND59** added that as his situation worsened at Ndemban Clinic, he realized that the PATP was a scam and was not helpful. He decided to go back to Hands on Care to receive better treatment. When he informed Lamin Jatta about his decision, he told **Aunty Nyima Badjie** and was discouraged by Lamin Jatta from going back to said place. They would not accept him back and instead recommended that he goes to the Serekunda General Hospital. The reason for the recommendation, according to **ND59**, was due to the fact that the hospital was at that point giving Anti-Retroviral drugs. **ND59** added that this hospital was initially used for **Yahya Jammeh's** Alternative Treatment but later transformed into a conventional treatment center.²⁶⁹ He said he eventually went to the Serekunda General Hospital and was received and treated just like any other patient going there for the first time because they did not have his medical records at the time. He added that after the hospital confirmed his HIV/AIDS status, he was then on ARV. He, however, told The Commission that when he got back to the conventional treatment, instead of going back to taking one tablet a day, he was only put on two a day. Even at that, he said the medicine was not helping him get better and instead of suppressing the virus, it became resistant to it.²⁷⁰
305. **ND59**, in pursuit of improvement in his health condition, returned to Hands on Care and upon his arrival, the medical personnel got very worried and scared because of his deteriorated medical condition, as his CD4 went up to 7, meaning that he was extremely sick. Dr. Sabally from Hands on Care informed him that his condition worsened because he stopped taking his medicines during the period. He switched to **Yahya Jammeh's** unconventional treatment program, as a result of which the conventional medicines became resistant. Therefore, he said he was now put on the same drugs they gave him (Hands on Care), only that this time, said drugs were tripled. He went further to narrate that he has been able to regain his health because he went back to the conventional treatment. Notwithstanding, **Yahya Jammeh's** treatment negatively impacted his health and personal life, the reason being, he still has an ulcer. However, he does not get attacks, and that his fungal infection is yet to clear and that he is jobless.²⁷¹
306. **MJ94**, amongst other witnesses, also testified that there were times they used to be transported in a bus from the Serrekunda General Hospital to Kanilai, in which they were mixed with TB patients. He said he developed TB along the way and another type of ailment he pleaded not to share with the general public. He further advanced that he got so sick to the extent that he was later taken to a Military Clinic in Banjul at the private ward for him to be conventionally treated, as **Yahya Jammeh** was unable to treat his sickness. As his condition worsened, he pleaded to be allowed to go home so that he could be adequately cared for by his family. As narrated by **MJ94**, this request was denied and that he got so sick that his mum, sister and

268 Testimony of ND59 20 July 2020- Line 356-424
269 Testimony of ND59 20 July 2020- Line 425-50
270 Testimony of ND59 20 July 2020- Line 453-462
271 Testimony of ND59 20 July 2020- Line 468-518

younger brother had to be with him at the clinic, as he was unable to wash his clothes, bathe himself or walk on his own. **MJ94** also disclosed that when his request to go home was denied, he decided to stop taking **Yahya Jammeh**'s unconventional medicine and went back to conventional treatment, at which point, his diarrhea and other ailments he did not disclose stopped and that he eventually started walking on his own.²⁷²

307. **MJ94** testified that after the treatment programme, the treatment administered to him had a negative effect on him, as he started experiencing severe fever and that his viral load went up. He told the Commission that he also started going to IDC in Banjul and continued taking conventional medicine due to the fact that he was sick. He added that even before he got discharged when he went for TB treatment, his health deteriorated so badly that he weighed 24KG, which made him sad. Moving on, **MJ94** disclosed that other nationalities were part of the programme, and just like him, none of them was ever cured. He furthered that when he went back to taking ARV, his condition improved such that he became undetectable and was able to marry and as it stands, he lives with the virus comfortably.²⁷³
308. Testimony from Protected Witness **MK83** also disclosed that his health condition worsened during the programme. He then said he got discharged with some other people and they were all told by **Yahya Jammeh** and Dr. Mbowe that they had been cured. However, he said this statement was false, as his health condition worsened and he still had the virus. He added that shortly after he left the programme, he was sick to the extent that he got paralyzed. He then told the Commission that he had to go back to the same hospital in Banjul where he used to have his conventional treatment to continue the same. He also testified that he was later referred to a psychotherapist after being scanned for his bones, which used to hurt him a lot. The witness also shared that he was informed by the Dr that scanned his bones that his condition, that is, the aching bones and paralysis were all as a result of some sort of food he used to take. After proper recollection, he said he realized that they were referring to the concoctions given to him by **Yahya Jammeh**. He therefore said that the PATP did not cure him at all and that it cured no one, and all it did was cause more harm than good to his medical health and personal life, seeing that he is no longer able to work.²⁷⁴
309. By and large, all the witnesses that testified before the Commission were so severely affected by the PATP that they all had to go back to using the ARV drugs that **Yahya Jammeh** prevented them from using. This further amplifies how fraudulent and fake the PATP. Most of them were lucky to have gone back to using their ARV drugs in a timely manner. Otherwise, they would have encountered irreparable damage to their health. Most unfortunate of all, **Yahya Jammeh** made it look like they were being cured by instilling fear in them to keep them from saying anything bad about his treatment. An example of this was how he punished the nine patients he accused of being involved in witchcraft and neglected them until they eventually died.

272 Testimony of MJ94 12th October 2020 -lines 593-630
 273 Testimony of MJ94 12th October 2020- lines 793-932
 274 Testimony of Mk83 22 July 2020- Line 458- 570

D. FINDINGS

1. The Commission finds that **Yahya Jammeh** is neither a trained/certified medical doctor nor a trained/certified herbalist. He does not hold any academic qualifications or certificates in either of the two to enable him to practice as either. Therefore, his practice was a sham, carried out under the guise of a profession with no knowledge or professional/academic training.
2. The Commission finds that the establishment of the unproven and fraudulent treatment program by **Yahya Jammeh**, was a flagrant abuse of power. **Jammeh** gambled with people's lives by conscripting people living with HIV and AIDS into his bogus treatment programme and ordering them to cease taking antiretroviral drugs. Many of the patients that stopped taking the medically recommended HIV treatment died.
3. The Commission finds that **Yayha Jammeh** did not accept any criticism and would use his dictatorial powers on any one who questioned the authenticity of the treatment. .
4. **Yahya Jammeh** disrupted the country's HIV/AIDS prevention and response strategy, by diverting resources to his treatment program.
5. The Commission finds that **Yahya Jammeh**'s 'cure' for HIV/AIDS did not go through the "exploratory, pre-clinical, clinical development, regulatory review and approval, manufacturing and quality control"²⁷⁵ of the World Health Organization. The cure also did not undergo any clinical trials, nor was it approved and licensed for admission or distribution. Therefore, **Jammeh**'s claim to cure HIV/AIDS patients within 3, 5, and 10 days was fake and fraudulent as the cure did not meet these internationally accepted standards.
6. The Commission finds that **Yahya Jammeh** knew or eventually realized that his herbal treatment was a colossal failure. As a result, he assented to the HIV/AIDS Prevention and Control Act, 2015, on 2 April 2015. **Jammeh**'s PATP contravened the procedures and guidelines stipulated in the Act relating to procedures, patients' consent, privacy and medical confidentiality, amongst others.
7. The Commission finds that **Yahya Jammeh** forced the Persons Living with HIV to join the treatment program. He also used coercive tactics such as being present along with security agents to compel patients to give false statements that they have been cured. The participants were further coerced to state that their test results showed that their CD4 counts are better than ever.
8. The Commission finds that **Yahya Jammeh** failed to obtain the informed consent of the first batch of the PATP patients; instead, he used his power to force them to take part in the treatment. The Commission further finds that even though subsequent batches of participants admitted to the treatment program willingly, they were not adequately informed about the risks and hazards of the treatment to enable them to choose to consent or not to, to the treatment.
9. The Commission finds that participants in the treatment program suffered false imprisonment with restricted mobility. They were under full guard by state agents at all times. They were always transported by an authorized official vehicle between the Kanifing Hospital and

275 Centers for Disease Control and Prevention. <https://www.cdc.gov/vaccines/basics/test-approve.html>

- State House and when they were being taken to Kanilai for the discharge ceremonies or other festivals held by **Yahya Jammeh**. The participants were not allowed visits from their families or their friends.
10. The Commission finds that some of the participants were sexually abused by **Yahya Jammeh** and members of the PATP team. Witnesses testified that **Yahya Jammeh** administered and massaged his herbal concoctions on patients' private body parts, This violated patients' right to dignity and privacy.
 11. The Commission finds that **Dr Tamsir Mbowe** was an accomplice to **Yahya Jammeh** in the bogus treatment. **Dr Tamsir Mbowe** endorsed the treatment programme which led to human rights violations and the loss of life.
 12. The Commission finds that **Dr. Tamsir Mbowe** did not uphold the standards of ethics as provided in the codes of ethics and professional conduct for medical and dental practitioners in The Gambia. **Dr. Mbowe** failed to ensure that informed consent was obtained from the participants of the PATP and did not give attention to the sensitive nature of the disease, the social factors, and the need for psychological support.
 13. The Commission finds that Ansumana Jammeh (deceased), while working under the supervision of Dr. Mbowe, was primarily responsible for pounding the leaves used to make the *Chakri* and *Omo* concoctions. Furthermore, he administered the concoctions to the patients on several occasions. Whereas Ansumana is neither a medical practitioner nor a herbalist. He endangered the lives of persons by purporting to be curing them of HIV/AIDS when he had no proof or scientific basis to rely on under the direction of **Yahya Jammeh**
 14. The Commission finds that both **Yahya Jammeh** and **Dr. Tamsir Mbowe** misled people to participate and undergo the treatment program using a conventional hospital setting and medical staff.
 15. The Commission finds that PATP subjected patients to cruel and degrading treatment. They were compelled to discontinue life-saving antiretroviral treatment and suffered poor quality of care, which further damaged their weak health. They were not informed of the duration of their treatment nor their mandatory isolation at the treatment center. While they were given adequate food supply for the first 2 to 3 months, they were too frail to cook their food.
 16. The Commission finds that the PATP violated the Right to Privacy of the participants as their names, HIV/AIDS statuses, identity (faces), and even the results of their CD4 counts were broadcast on national television without their consent nor approval sought.
 17. The Commission finds that the PATP violated the right to health of persons living with HIV/AIDS. **Yahya Jammeh's** unconventional treatment prevented them from taking ARVs and septrin, which worsened their HIV status and gravitated their health to AIDS.
 18. The Commission finds that participants of the PATP who were admitted to the programme for the 2011 elections were denied their right to vote. Their condition of isolation prevented them from being able to vote.

19. The Commission finds that **Yahya Jammeh** accused some PATP participants of being witches and wizards trying to sabotage his AIDS treatment. He neglected and isolated them as a form of punishment and was left to suffer. **Yahya Jammeh** further gave them the Kubejara concoction that led to 9 participants becoming unconscious.
20. The Commission finds the fake, fraudulent, and bogus claim of **Yahya Jammeh** to cure HIV/AIDS endangered the lives of many people living with HIV/AIDS that participated in the PATP, causing their death.
21. The Commission finds that **Yahya Jammeh** exploited the participants and subjected them to forced labor by working on his cashew and rice farms without remuneration or pay.
22. The Commission finds that Jammeh admitted two children to the PATP in violation of the Convention of the Rights of the Child. **Yahya Jammeh** further forcibly administered the concoction to at least one of the children, leading to him being critically ill and hospitalized. Upon returning to the treatment center, Jammeh continued to administer the concoction to the child.
23. The Commission finds that **Dr. Mariatou Jallow** while being the Director of Medical Health Services, was present at the treatment center and, on at least two occasions, administered the concoctions to the participants under the direction of **Yahya Jammeh**. The participants did not adversely mention her as having been part of the PATP or informing them that they would be cured. The Commission finds the same.
24. The Commission finds that **Dr. Malick Njie** by virtue of his position as the Director of Medical Health Services and then the Minister of Health under the direction of **Yahya Jammeh** participated in the early stages of the PATP. Witnesses mentioned that **Dr. Malick Njie** told them that **Yahya Jammeh** would not broadcast the video recording at the statehouse showing their faces and partially naked bodies. The Commission finds that this could have been the genuine belief of **Dr. Malick Njie**. Further, **Dr. Malick Njie** was not mentioned by the witnesses to have told them that the cure would work nor did he administer the cure on them. The Commission makes no finding against **Dr. Malick Njie**.

E. RECOMMENDATIONS

1. The Commission recommends that former President **Yahya Jammeh** and **Dr Tamsir Mbowe** should be charged with murder and prosecuted for intentionally and knowingly causing the death of People Living With HIV/AIDS (PLHIV), who were conscripted in the sham PATP and deprived of life-saving treatment.
2. The Commission recommends that **Yahya Jammeh** and **Dr Tamsir Mbowe** be prosecuted for negligence causing deaths of PLHIV who took part in the programme who were deprived from lifesaving treatment.
3. The Commission recommends that **Yahya Jammeh** and **Dr Tamsir Mbowe** should be prosecuted for the inhumane and degrading treatment meted out on PLHIV that took part in the treatment programme.

4. The Commission recommends that **Yayha Jammeh** be prosecuted for admitting children into the PATP in violation of the provisions of the Children's Act 2005 and the Convention on the Rights of a Child.
5. The Commission recommends that the Medical and Dental Council should revoke **Dr Tamsir Mbowe's** practising licence indefinitely for failing to honour the medical code of conduct and for the role he played in the fake PATP.
6. The Commission recommends that **Ansunama Jammeh** should not hold any position in the government at all levels and in any capacity.
7. The Commission recommends a review of the legal framework and policies on HIV to identify and address gaps in relation to the protection of the rights of PLHIV.
8. The Commission recommends the establishment of mechanisms to ensure access to comprehensive treatment, care and health services for PLHIV.
9. The Commission recommends that the regulation of herbal medicinal products to ensure that the herbal medicinal products meets standards of quality, safety and efficiency, and that its production is governed by the provisions and requirements of the Medicines and Related Products Act, 2014.
10. The Commission recommends that the existing regulations should be strengthened on the use of herbal medical products through the effective enforcement of the Medicines and Related Products Act, 2014.
11. The Government should ensure access to treatment, care and health services for PLHIV.
12. All healthcare workers in The Gambia should be trained on HIV/AIDS stigma and discrimination and protecting the right to privacy and confidentiality of people living with HIV/AIDS, human rights and medical ethics in the context of HIV. In the same vein, the government should increase access to HIV testing services countrywide.
13. The Ethics for Health care providers should be strengthened. There should be penalties, criminal or otherwise, for healthcare workers that disclose the status of people living with HIV/AIDS to anyone, including family members, without obtaining the prior informed consent of the PLHIV. Healthcare professionals that promote, support or spread misinformation regarding HIV and other diseases to members of the public should face disciplinary actions and loss of their practicing license where appropriate.
14. Media Practitioners are to uphold the standard for reporting on persons living with HIV/AIDS. There should be penalties, criminal or otherwise, for journalists who disclose the HIV status of a person living with HIV/AIDS to the public without the prior informed consent of the people living with HIV/AIDS. There should be mandatory training on HIV-sensitive media reporting to address stigma and discrimination against PLHIV due to negative or offensive media coverage of HIV issues.
15. The government should support People living with HIV/AIDS. The government should recognize support groups of people living with HIV/AIDS as an integral part of the public health system and include budgetary support for people living with HIV/AIDS-led support groups within their healthcare budgets.

16. The Government should put in place a system of social safety nets to protect the right to education and welfare of people living with HIV/AIDS. This should include free education and other support for children orphaned by HIV, for primary and secondary school education.
17. The Medical and Dental Health Association should strengthen its mechanisms and procedures on ways to discipline medical personnel who violate the rules and regulations governing the conduct of medical practitioners. The Medical and Dental Health Association should review its regulatory framework to identify inadequacies that enabled doctors and medical assistants to participate and endorse the bogus program.

