

# AIDS genocide in Africa condoned by United Nations agencies

by Warren J. Hamerman

The Geneva-based World Health Organization (WHO), which, along with other multinational institutions such as the International Monetary Fund, has long fostered a policy of "Don't panic, don't act, and especially don't ask for emergency funds" to fight AIDS in Africa, is now attempting to cover for the results of its murderous policy by sounding the alarm on the out-of-control situation. Given the fact that AIDS is a slow-acting virus (lentivirus), the prolonged policy of the international agencies to encourage delaying tactics, has resulted in the widest possible spread of the 100% lethal biological time bomb. Thus, the pandemic will now wipe out the maximum possible part of the population, which the Malthusian international agencies (with their stated commitment to reduce population in Africa) view as "excess eaters."

At the Brussels conference on AIDS in Africa in November 1985, for example, the material on the unassailable *causal* connection between the vast spread of AIDS and the brutal economic-collapse conditions and murderous health-program budget cuts forced on the African nations by the international agencies was kept off the main agenda.

At the October 1986 meeting of Commonwealth health ministers in Nassau, the African representatives are reported to have requested a "massive injection of funds" to buy basic medical equipment and curb the spread of the disease.

## One million slated to die

Approximately one week later, the *London Times* began to run a special series under the headline, "A Million Africans Are Set to Die From AIDS," citing a report, soon to be published in an American scientific journal, which says that not only will a million die over the next few years, but, also, several million are already carriers of the virus.

The *Times* states: "The disease is spreading rapidly and almost uncontrolled across the continent, and a concerted international effort to help more than 20 African nations struck by the epidemic is urgently needed, the report says. Emergency action to try to control and prevent further spread of the disease is essential, but huge political, economic, and social problems stand in the way." The report is co-authored by Dr. Jonathon Mann, formerly working in Kinshasa, Zaire,

and formerly of the Atlanta Centers for Disease Control (CDC), and now head of the World Health Organization's AIDS project in Geneva; Dr. James Curran, from the Atlanta CDC; Dr. Thomas Quinn of the U.S. National Institute of Health in Bethesda, Maryland; and Dr. Peter Piot, a microbiologist at the Institute of Tropical Medicine in Antwerp, Belgium.

Dr. Mann, once a respected researcher who did the early work indicating the possibilities of mechanical insect transmission of AIDS, subsequently "recanted" and has been trying to impeach and rumor-monger against the Pasteur Institute team's experiments on AIDS and insects in Africa. Dr. Curran, who has been characterized in the United States as the CDC's "AIDS Godfather" has supervised a relentless campaign to slander and explain away the impeccable documentation of AIDS cases in Belle Glade, Florida—which is experiencing an African-type AIDS breakout in conditions of a tropical economic hell-hole.

## The new report

The new Mann-Curran Report indicates that more than 200,000 of the 2 million people who live in Zaire's capital city of Kinshasa are believed to be carrying the AIDS infection, and, in the next five years, the city could have 50,000 people dying from the disease.

shasa, because of the threat of AIDS, is now one of the most dangerous cities in the world in which to live. It has the unenviable name of the AIDS capital of Africa. Perhaps more than any other city, it contains all the nightmares that AIDS evokes. People here are exposed to an alarming and increasing risk of AIDS from a variety of sources. Medical treatment is fraught with hazards from contaminated blood transfusions, unsterilized equipment, disposable syringes that are used repeatedly instead of being thrown away, chronic shortages of antibiotics, overcrowded wards and untrained paramedical staff."

The new report contends that: 1) AIDS in Africa is as common among women as men, and is predominantly transmitted through heterosexual liaisons; 2) The incidence in some African cities, such as Kinshasa in Zaire and Kigali in

Rwanda, has reached between 550 and 1,000 cases for every million adults, the highest rate in the world; 3) Increasing numbers of children are being born with traces of the AIDS infection, and at least 12% of children aged between 1 and 2 attended at Kinshasa hospitals have traces of the virus in their blood; and 4) Blood banks are contaminated in many African countries, but donors are not being screened because of lack of resources or expertise, even though, in at least one city known so far, 18% of donated blood is contaminated. The report is quoted: "AIDS has become a major health threat to all Africans, and prevention and control through educational programs and blood-bank screening must become an immediate public health priority."

### Africa needs emergency funds!

What is clear is that attempts to deal with the AIDS epidemic in Africa are sabotaged by the brutal shut-off of credits to these nations from the international agencies. In most countries, the combination of the Soviet-inspired and U.S. State Department-fostered "barefoot medicine" programs for Africa which were pushed on the continent for "budgetary reasons" at the 1978 World Health Organization Conference at Alma Ata in the Kazakh, S.S.R. between Sept. 6-12, 1978, has left Africa defenseless. (See *An Emergency War Plan to Fight AIDS and Other Pandemics*, EIR Special Report, pp. 33-42, 1986.)

As a result of the curious alliance between the Soviets such as Dr. Sergei Litvinov at the WHO and the Malthusians of the U.S. State Department to mutually "facilitate" so-called population control in Africa, hospital budgets have been too small to buy the necessary antibiotics or provide disposable injection equipment. The costs of caring for 10 AIDS patients in the United States (about \$450,000) is greater than the entire budget of a large hospital in Zaire, where up to 25% of children and adult admissions may have HIV infections!

Since the national resources of African countries are insufficient to deal with the problem, a concerted international effort will be necessary to prevent further dissemination of HIV infection.

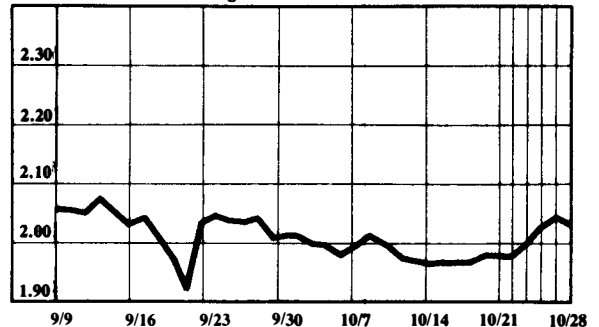
Even the new Mann/Curran report draws the correct conclusion: "Unless the financial resources to support national AIDS control programs is made available and unless information about AIDS research including vaccine development, antiviral treatment and prevention programs, are shared among scientists and public health officials of all countries, AIDS will continue to spread throughout the world, exacting its toll on the health of mankind."

The situation in Africa today portends the future situation for the rest of the world. Only a full-scale emergency economic reorganization can provide the financial means to pay the billions of dollars which must now be spent in an Apollo Moon-shot-style crash research program and emergency public health and medical programs needed to halt the spread of this species-threatening disease.

## Currency Rates

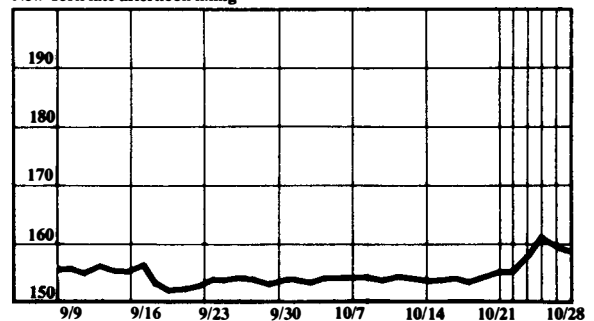
### The dollar in deutschemarks

New York late afternoon fixing



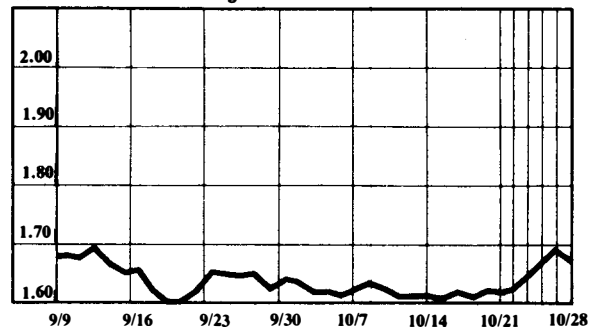
### The dollar in yen

New York late afternoon fixing



### The dollar in Swiss francs

New York late afternoon fixing



### The British pound in dollars

New York late afternoon fixing

