

steelworker pension plans. This meant it promised to pay \$7 billion to American retirees covered by troubled funds even though only \$3 billion is available to the insurance system. The ailing Pension Benefit Guarantee Corporation could easily be out of cash within five years. It went to court to attempt to throw the liabilities back at LTV. It failed. But along with LTV, Wheeling-Pittsburgh, McLouth, Kaiser, and Sharon have been forced to seek bankruptcy law protection. When major steel companies close plants, they trigger the early-retirement benefits for their workers that are built into the contracts. These were brought in as part of the overall plan to shut down industry, a way to encourage workers not to work, similar to the brilliant idea of paying farmers not to grow food. Now these benefits are capable of bankrupting major firms, thus allowing them to dump their underfunded pension programs on to the PBGC, which will clearly not be able to sustain the load.

The steelworkers in Minnesota got a real taste of the recovery in 1987 earlier this year. At Eveleth Mines, they were told that unless they took a three-year wage cut of \$2.43/hour, after already taking cuts in wages and benefits of over \$4.50/hour over four years, the orders for the 600,000 tons of taconite pellets they produce every year would go to overseas producers!!

No room at the inn

The collapse of so much of American industry has led, predictably, to increasing numbers of homeless people. Even those with a roof over their head are finding it necessary to share. According to the U.S. Census Bureau, 65% of Americans between the ages of 18 and 30 are living with their parents. Whatever housing is available is hardly affordable. An average house now costs well over \$100,000, whereas in 1960 an average home was priced around \$25,000.

Yet, during the first ten months of 1987, 1.41 million housing units were started compared to 1.58 million units last year, a decrease of 10.6%. The decrease of 8.2% in October was the sharpest decline in three years, with little prospect for improvement.

At the same time, the number of families living below the poverty line has increased because of unemployment and cuts in welfare benefits, the availability of low-cost housing has plunged. The federal budget for subsidized housing has all but disappeared.

Now, under a ruling made Dec. 11 by the Department of Health and Human Services, the government plans to cut back its paltry aid for sheltering families with children. It will now contribute to the cost for only 30 days of a family's stay in a shelter for any 12-month period. In fact, it is much easier to get shelter if you split your family up. In Los Angeles, which is not atypical, out of the 215 shelters, only 51 accept families. Of those, only 16 accept families with fathers.

This is Christmas in the "Great Recovery" of 1987.

Europe's death lobby:

by Mark Burdman and Jutta Dinkermann

As the U.S. presidential campaign took off in 1987, only one candidate, Democrat LaRouche, has brought the issue of euthanasia to the forefront of his campaign. LaRouche warned that current trends of fiscal austerity and gnostic attacks on the sacredness of life, especially under conditions of the uncontrolled spread of AIDS, would lead to generalized acceptance of euthanasia practices beyond even what the Nazis did. This contention has met with shock and sometimes skepticism, with some demanding "proof."

Developments in Western Europe during 1987, especially the second half of the year, provide all the proof in the world.

Suddenly, in November, one picks up the daily press in predominantly Roman Catholic France, and reads debates over a French senator's proposal to the National Assembly, to legalize the killing of handicapped children within three days of their birth.

In Holland, a top doctor at a children's hospital boasts that he has helped cancer-sick adolescents take cyanide packets without their families' knowledge; reports are released that 10% of all those who die in Holland do so by euthanasia, in many cases *without* their request; and the Dutch government sends legislation to the Parliament to "decriminalize" euthanasia. In Britain and West Germany, doctors laud Dutch methods for "mercy killing" of AIDS patients.

There have been three qualitatively new trends in Europe which have marked 1987 as a branching-point in the postwar period's attitude toward the sacredness of life and the values of Western Judeo-Christian civilization. These trends include:

1) In several countries, a linkage has been made between the spread of AIDS and the "necessity" of legalizing euthanasia. This has become a rallying cry of the French euthanasia lobby. On Sept. 8, Madame Paula Caucanas, head of the French Society for the Right to Die and general-secretary of the World Federation of Societies for the Right to Die, stated: "AIDS will help us very much, I'm sure." In Britain in mid-November, a medical group formed within the Voluntary Euthanasia Society argued that AIDS' spread necessitates

louder and deadlier

euthanasia's legalization. In West Germany, the notorious Dr. Julius Hackethal said that "mercy killing" for AIDS patients should no longer be considered a taboo. Throughout the year, Holland was openly publicized as the model society of "euthanasia for AIDS."

2) Economic austerity and "cost-cutting," and not simply the "suffering of AIDS victims," have been openly cited as justifications for legalizing euthanasia. France's deranged Sen. Henri Caillavet, head of the "Association for the Prevention of Handicapped Children," told a journalist on Nov. 26: "Economic reality is an important factor for euthanasia." The well-connected Baroness Adrienne von Till d'Aulnis de Bournuil, a leading influence in Dutch euthanasia circles, was more "democratic" in her approach: "If we want to use the cost-budget-effectiveness argument to justify euthanasia, we should not do it under the table, because that would make it like what the Nazis did, purposeful killing for racial or other discriminatory reasons," she told a journalist Sept. 24. "Since we all live in democracies, what we should do is make a change in law, a democratic decision that our country can take. If we do it below the table, then we become like the Nazis, singling out gypsies or old people for special treatment. But, in a democracy, you can make any law you like. If you want to decide that people who cost more than 300 guilders a day should be killed, or that people over 60 should not receive health care, then make any law you like, and, if you get a majority, you win."

On this front, the insurance companies are particularly active. In mid-June 1987, in West Berlin, the International Association for the Study of the Economics of Insurance, held its annual assembly, on the theme, "Problems and Perspectives of Health Insurance." What was pushed as a guideline was the concept of "managed health care," based on "cost-containment initiatives . . . aimed at reducing unnecessary hospital use"; measures to reduce the number of doctors; increasing use of hospices, home care, U.S.-modeled "Health Maintenance Organizations," etc.; and upgrading the involvement of the insurance companies in delivery of health care. The association's secretary general and admin-

istrator is Orio Giarini, chief economist of the malthusian Club of Rome. One of its honorary presidents is French presidential candidate Raymond Barre, whose involvement in such doings might prove embarrassing in the period leading up to France's spring 1988 presidential elections.

3) Euthanasia has been hailed as part of a gnostic attack on Christianity and on Judeo-Christian values, more broadly. Again, there is Senator Caillavet, from Catholic France, who gloats during a late-November discussion that euthanasia will become accepted in France, especially as "the religious aspect of life has almost been destroyed." He gloats that "death will become an issue in the French presidential campaign."

Evolution of euthanasia in Europe

The following chronology focuses on four countries, Holland, France, West Germany, and Britain.

Jan. 16: The Dutch government puts forward regulatory guidelines, according to which a doctor who practices euthanasia can defend himself by demonstrating that the patient requested euthanasia and that he, the doctor, had consulted medical colleagues before acting.

March 30: The Dutch Health Council advises the cabinet to change the wording of proposed euthanasia guidelines, to allow terminally-ill children to request euthanasia without parental consent. This law applies to children aged 1-15 who can now "request" death, without the parents having any say in the matter.

May 6: West Germany's "Dr. Death" Julius Hackethal announces that he will perform "mercy killing for people sick with AIDS," and that this should not be a taboo in West Germany.

June 14: Hackethal announces that he will go to the federal court of West Germany to get rid of Law 216, which forbids killing on request of patients.

June 29: A senior official of the Dutch Council of Churches, reports privately that "a habit is developing" whereby judges exonerate doctors who have applied euthanasia to AIDS sufferers under certain circumstances.

Aug. 8: A Munich regional court acquits Hackethal in a case in which he actively assisted a cancer-sick patient to commit suicide with cyanide three years earlier. Charges are also dropped against Hans-Henning Atrott, of the "German Society for a Humane Death," a prominent mouthpiece of the euthanasia movement, who provided the cyanide to Hackethal. The court argues that Hackethal is not to be blamed for committing "an act leading to relief for the patient." "Medical doctors have no duty to prolong life," and "to prolong the life of the patient would have caused an inhuman torture of the patient."

Sept. 9: A 30-year-old paralyzed West German woman is killed by a member of Atrott's "Society for a Human Death"; the Atrott aide, describing herself as a "death-helper," provides the young woman with a cup with cyanide, which provokes a very cruel death by paralysis of the respi-

ratory organs.

Oct. 6: A Dutch Jewish physician who escaped the Nazis by hiding in Amsterdam throughout the war, keeps handwritten lists of all the patients he has killed with a lethal injection. Dr. Herbert Cohen tells Reuter wire service that he has good relations with the police. He warns them a day or two before he carries out a "mercy killing," then calls them afterward with all the details. The cases go no further than the prosecutor's office. Cohen has "administered euthanasia" to about 40% of his patients.

Oct. 9: Holland is rocked by a scandal involving Prof. P.A. Voute, celebrated oncologist of the children's hospital in Amsterdam, who tells the daily *Het Parool* that he has helped 14 adolescents to terminate their suffering by delivering to them a "mortal pill." He tells the paper that, since 1980, he has given a "euthanasia pill" to adolescents aged 15-18 in the terminal phase of sickness, and who asked for the means to "put an end to it." Says Dr. Voute: "The possession of such a pill gives to the young people a feeling of security. They know that they can die when they want to die. . . ." He says he did not think it necessary to warn the parents about this, although he affirmed he always advised the youths to "discuss the question with their family."

Week of Nov. 2: Senator Caillavet calls for legalization of murder of handicapped up to three days of age. On Nov. 7, he tells French television: "If I had had a handicapped child, I would not have let it live. . . . I gave life, I have the right to take it away. . . . You have the right to be shocked, and so am I when I hear some of the Pope's comments. . . . We have got to take away the guilt so that such parents do not feel like criminals for demanding euthanasia for their abnormal children." APEH's aim is to stop the number of mentally defective children from increasing, he proclaims.

Nov. 13: Newspapers report the formation of a medical group within Britain's voluntary euthanasia society, which is campaigning for the legalization of euthanasia, especially in view of the spread of AIDS. Nineteen doctors say: "AIDS has added a new and rapidly growing group of often well-informed patients who may not want to risk the mental deterioration which so often occurs."

Nov. 19: Caillavet proclaims himself "overjoyed" at the release of a new poll which purports to show a majority in France in favor of euthanasia. "The taboo of death has been overcome, as it had been previously with sex and abortion."

Nov. 26: Caillavet tells a journalist that "economic reality is an important factor for euthanasia." France, he says, will move from already-accepted practices of "passive," or "administrative," to "active" euthanasia.

Dec. 14: The Dutch government puts forward a bill that aims to change the law that still forbids euthanasia. Pending parliamentary approval during 1988, this law would provide guidelines for how doctors might perform euthanasia and not be prosecuted.

The resistance

There were also outspoken attacks on euthanasia practices in 1987. Most important, these attacks increasingly focused on such substantive issues as the parallel with the Nazi period, in the use of "cost-cutting" justifications, and attacks on the sacredness of life.

On May 2, Pope John Paul II invoked the memory of the outspoken Catholic opponent of Nazism, Clement Cardinal von Galen, and his battle against euthanasia, to call for a mobilization against euthanasia, mercy killing, and abortion today. "There are today in society strong forces which threaten human life," he stressed. "Euthanasia, mercy killing, on the basis of apparent compassion, is again a frightening recurring measure."

From June through October, the Brussels-based World Medical Association, representing more than 2.5 million physicians practicing in 42 countries, mobilized vociferously against euthanasia. At its September convention, the group unanimously adopted a declaration stating, "Euthanasia, that is, the act of deliberately ending the life of a patient, even at the patient's own request or at the request of close relatives, is unethical. . . ."

The head of the WMA, André Wynen, not only condemned his colleagues in Holland, but especially attacked people like French Socialist Jacques Attali, adviser to President Mitterrand, who has argued that without an active euthanasia program, there will occur a "demographic explosion!"

On June 22, writing in the *Jerusalem Post*, Ram Ishai, head of the Israeli branch of the WMA, the Israeli Medical Association, attacked euthanasia, especially the practice in Holland of euthanasia for AIDS victims, and warned that it may increasingly be justified to "avoid economic burdens on society." In an interview four months later given to the Club of Life, the anti-malthusian organization founded in 1983 by Helga Zepp-LaRouche, Ishai attacked another aspect of the same problem: "unconscious euthanasia," which is practiced widely: "Due to the lack of manpower, cost-containment, the need of 'triage' [selection], they cannot grant each patient the time and the attention he needs and one finally practices euthanasia involuntarily. . . . Once there are limited resources, there are priorities, and there are people who deliberately do not receive the care they deserve or need. . . ."

In November, the Caillavet-led offensive against life, drew angry protests from a spectrum of French medical professionals and religious organizations. Characteristically, Georges Hourdin, former president of *La Vie Catholique* publications, wrote in *Le Monde* Nov. 18: "Hitler has still not quite lost the war. Nazism did not come to an end by its own death. We have, each month, the proof of this. . . . We must absolutely refuse to legalize euthanasia. Let us not forget that the gas chambers in Germany first began to function for the incurably sick, the handicapped, and the old."