

bacteria, and parasites, and propagating them in a susceptible population.

The IMF response to this breakdown has been to demand even greater austerity and to place increasing pressure on these countries to pay their debt. The only possible result of this policy is to ensure the most rapid possible extermination of the population of black Africa.

The most significant demographic change, which has created the conditions for mass epidemics with a high fatality rate, is a direct result of IMF economic policy. This is the phenomenon of population concentration. In addition to the African concentration camps, resulting from the present acute famine and regional wars, there has been a longer-term process of population concentration under way in the underdeveloped countries. This is the phenomenon of "marginalization," in which rural populations are driven out of the countryside by economic collapse and accumulate around the periphery of major Third World cities, creating a peripheral zone characterized by crowding, filth, malnutrition, and ab-

sence of even rudimentary medical and sanitary facilities. As the infrastructure of the cities themselves breaks down, an epidemic unleashed in the marginal zone would quickly "implode" the urban center.

Thus, we are witnessing a very efficient and inexpensive method of targeting and destroying large populations in the Third World, while avoiding the expense of nuclear or conventional weapons. The "infrastructure" for transmission of the diseases would consist of the population itself plus the rats and other vermin which act as carriers for the various microorganisms.

It is in this context that the World Health Organization recently reported that every minute, 10 children under five years of age die and 10 more are handicapped for lack of vaccines against a few common childhood diseases. Almost all of these children live in the developing sector, where only 20% of children are fully immunized. Five million children die each year and five million are crippled for lack of vaccines which would cost about \$10 per child. The low level of

Genocide lobby vows: Let disease curb population

Colorado Gov. Richard Lamm wrote in the New York Times April 17:

I put forth blasphemy: the U.S. should give no emergency food relief to countries that are unwilling to adopt long-term economic reforms and population control programs. . . . Sadly, neither America's grain bins nor its pocketbooks can possibly keep up with the demographics of starvation, in Ethiopia or anywhere else. . . . Sooner or later, third world countries must come to grips with their population pressures. . . . If America gives short-term aid without insisting that recipient nations take long-term action to limit population and reform their economies, we merely throw gasoline on a fire. . . . The late Alan Gregg of the Rockefeller Foundation once said that overpopulation is a cancer and that he had never heard of a cancer that was cured by feeding it.

Thomas Ferguson, Latin American case officer for the Office of Population Affairs of the U.S. State Department, was quoted in EIR March 10, 1981, discussing the OPA's experiences during the Vietnam War:

We thought that the war would lower population and we were wrong. . . . To reduce population quickly, you have to pull all the males into the fighting and kill significant numbers of fertile, child-bearing age females.

[As for the civil war in El Salvador], you are killing a small number of males and not enough fertile females to do the job on the population. . . . If the war went on 30 to 40 years like this, then you might accomplish something. Unfortunately, we don't have too many instances like that to study. . . .

The population might weaken itself, especially if the war drags on, you could have disease and starvation, like what happened in Bangladesh and Biafra. Then you can create a tendency for population to fall very rapidly. This could happen in El Salvador. When that starts happening, you have total political chaos for a while, so you must have a political program to deal with it. I can't estimate how many people might die that way. It could be a great deal, depending on what happens.

Bertrand Russell, Prospects of Industrial Civilization:

The white population of the world will soon cease to increase. The Asiatic races will be longer, and the negroes still longer, before their birth rate falls sufficiently to make their numbers stable without help of war and pestilence. . . . Until that happens, the benefits aimed at by socialism can only be partially realized, and the less prolific races will have to defend themselves against the more prolific by methods which are disgusting even if they are necessary.

immunization ensures that no significant "herd immunity" will be present in the target populations to inhibit the spread of epidemics.

The foregoing does not even take malaria into account. This disease, in its most malignant form, *Falciparum Malaria*, affects nearly 200,000,000 Africans and will ultimately kill at least 20,000,000 of those affected. In addition, it is the major cause, other than malnutrition, of immune depression. It is malaria that creates the conditions under which the virus which causes infectious mononucleosis causes lymph-node cancer. Scientists are now investigating a situation in which four Americans developed this cancer, following exposure to a visitor from South Africa who was carrying the virus.

The holocaust is not limited to human disease. African swine fever, which necessitated the destruction of all swine in Haiti a number of years ago, with disastrous consequences for the food supply, has broken out in Belgium. This disease, which is 95% fatal to affected swine and almost impossible to eradicate, poses a threat to the \$20 billion a year European

pig industry. So far 20,000 Belgian swine have been slaughtered, and authorities are cautiously optimistic that they have controlled it—this time.

These animal diseases pose a double threat to man, both from transmission of the diseases themselves, such as toxoplasmosis and trichinosis, and destruction of the major source of high-quality protein. This is a significant problem in Ibero-America, where widespread animal disease is responsible for costly, inefficient production of pork and beef.

If the maps of malnutrition and potential epidemic animal and human diseases are overlapped (see cover), one gets a precise picture of the populations which have been targeted by such institutions as the Club of Rome and the other Malthusian think tanks that guide IMF policy. What also becomes obvious is that it will be impossible to contain these pestilences in the target areas. This is especially so when it is grasped that significant areas of the United States are included in the targeting.

Under present policies, Africa is entering a terminal stage, which will result in massive depopulation in the next two to three years. Large parts of Asia, and Ibero-America will soon follow, and then, sooner than is realized, significant portions of the developed countries. The perceived advantage of this scenario, from the standpoint of those agencies that are running it, is that, unlike nuclear war, it will specifically target the black, brown, and yellow races, while supposedly sparing the Anglo-Soviet and Venetian-Swiss gamemasters.

Are we next?

Cholera, malaria, AIDS, and other diseases now devastating Africa, do not respect national borders and are growing so luxuriantly that they will hardly remain confined. Under such conditions, mutation to more virulent forms, and increased transmissibility, will occur. It is only a matter of time before they spread to Europe and the United States, where the same IMF policies are creating growing pockets of nutritional and sanitary collapse, which will provide the necessary concentrations of susceptible individuals.

AIDS (Acquired Immune Deficiency Syndrome) is exemplary of this situation. Originally described in promiscuous male homosexuals and intravenous drug abusers, now over 10,000 cases of AIDS have been reported in the United States and approximately 48% of these people have died already. The number of reported cases in 1984 rose 74% over the number reported in 1983. The fatality rate is higher among affected children; among victims diagnosed before January 1984, it is 73%.

Four states, New York, New Jersey, California, and Florida account for 75% of the reported cases. While the disease has largely remained confined to four major risk groups, recent studies indicate that a rapid expansion into the general population could occur under conditions of nutritional and sanitary breakdown.

In April 1984, scientists from the United States and France

Bertrand Russell, Impact of Science on Society:

At present the population of the world is increasing at about 58,000 per diem. War, so far, has had no very great effect on this increase, which continued throughout each of the world wars. . . . War has hitherto been disappointing in this respect . . . but perhaps bacteriological war may prove effective. If a Black Death could spread throughout the world once in every generation, survivors could procreate freely without making the world too full. The state of affairs might be unpleasant, but what of it?

Stephen Mumford, of the Institute for Population and National Security, recently told a caller:

I have been looking at diseases as confined to children, which are making a very significant contribution to population growth control in Africa. It's the least desirable way, but in Africa it is significantly controlling population. There is a great rise in infant child mortality, one-third of the children are not surviving to the age of five.

[Concerning Bertrand Russell's views on Africa and disease, Mumford replied:] Africa is really starting to show that this statement by Russell is true. Childhood death rates are really going up in Africa. Unfortunately, not enough people are looking into the question of disease as a determinant of population growth. I'm looking primarily into childhood diseases, in Africa, in Haiti, Java, Bangladesh. Not just cholera, but the whole collection of diseases. Because of it, Africa will go through a depopulation process.