

transmitted diseases and already infected with AIDS. We must contend with adolescents from all social classes, who become pregnant at an early age, swelling the abortion statistics or increasing the probability of risk to the newborn and themselves; with adolescents who abuse drugs and alcohol, fleeing the depression, who die or kill others in car accidents or who, insecure, discouraged, without a future or help, actively or passively seek out death through various means.

Unhappily, this is the way the majority of Brazil's youth are born, live and die.

EIR: How can we change this picture?

Monteiro: We could follow, for example, the recommendations of UNICEF for reducing infant mortality in the short term: adequate nutrition, basic sanitation, immunization programs. Prevention of low birth weight with a consequent reduction of the infant mortality rate could be achieved by improving the health and nutrition levels of women of child-bearing years, with pre-natal consultation, with prevention of drug abuse in the pregnant woman, and with the reduction of adolescent pregnancies.

EIR: Do you think that the social problem can be solved with local proposals?

Monteiro: Apart from the local solutions, it is essential to understand Brazil's position in the global context, and to view as extremely unjust the unequal distribution of wealth among nations. We are aware that in recent years, the lives of hundreds of thousands of children from the developing sector have been mowed down to pay the debt.

To the question of former Tanzanian President Julius Nyerere—"Must we starve our children to death to pay the debt?"—we must answer "No!" In the face of the devastating situation of tens of millions of Brazilian children and youth, a situation with which few are familiar and others either don't want to see or don't want to involve themselves in, it is immoral and anti-ethical to divert economic resources for any other purpose than to improve this situation.

It is important to emphasize that given the current economic conditions in the country, there are already indications of stagnation and projected worsening of the curve of infant mortality in Brazil. This reality is unacceptable. We cannot permit the deterioration of our social indicators, as occurred in 1983-84, to recur over the next few years.

I am neither an economist nor a ruler. It is as a pediatric physician that I propose that Brazilians inform the international economic community that we are suspending payment on the foreign debt out of just and humanitarian considerations, and that negotiations will be conditional on the reduction of our infant mortality rates to internationally acceptable levels, and not on the imposition of unattainable economic goals.

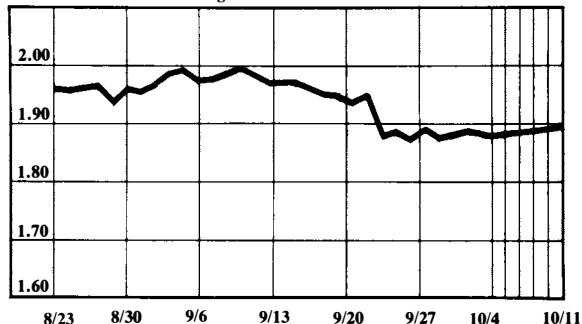
"We do not want to die. We want to live with dignity."

This is the clamor of millions of Brazilian children to the bearers of economic power throughout the world.

Currency Rates

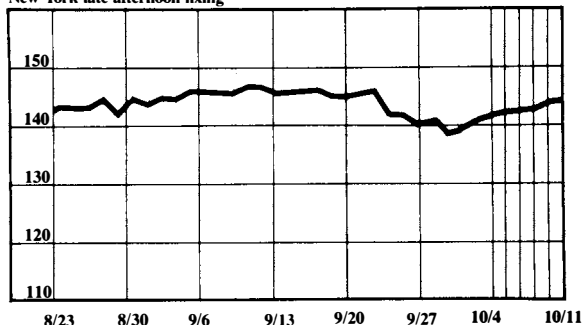
The dollar in deutschmarks

New York late afternoon fixing



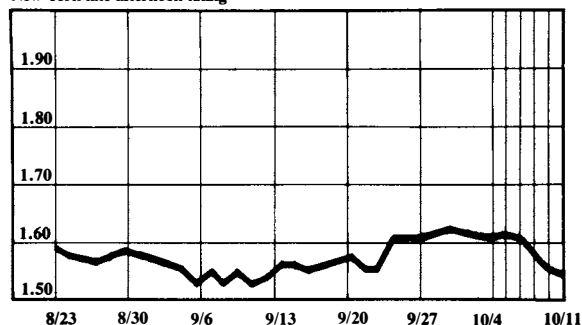
The dollar in yen

New York late afternoon fixing



The British pound in dollars

New York late afternoon fixing



The dollar in Swiss francs

New York late afternoon fixing

