

New Study Confirms Baltimore Death Zones

by the *EIR* Economics Staff

The 2005 study commissioned by Lyndon LaRouche, of the collapse in health and lifespan of Baltimore's population, has been mimicked in a front-page feature on the increased rate of AIDS infection in Baltimore, published in the *Baltimore Sun*, Nov. 4 and 5, by medical reporter Jonathan Bor.

During 2005, AIDS spread in Baltimore at the rate of 40.4%—the second-highest rate in the United States—with 1,074 cases per 100,000 population, the *Baltimore Sun* reported. At the same time, a new report from the Federal Centers for Disease Control has identified Baltimore as the number one city in America for rates of the killer MRSA, methicillin-resistant *Staphylococcus aureus* infection in 2005, with rates more than *two times* those of any other area—a whopping 117 cases per 100,000 people.

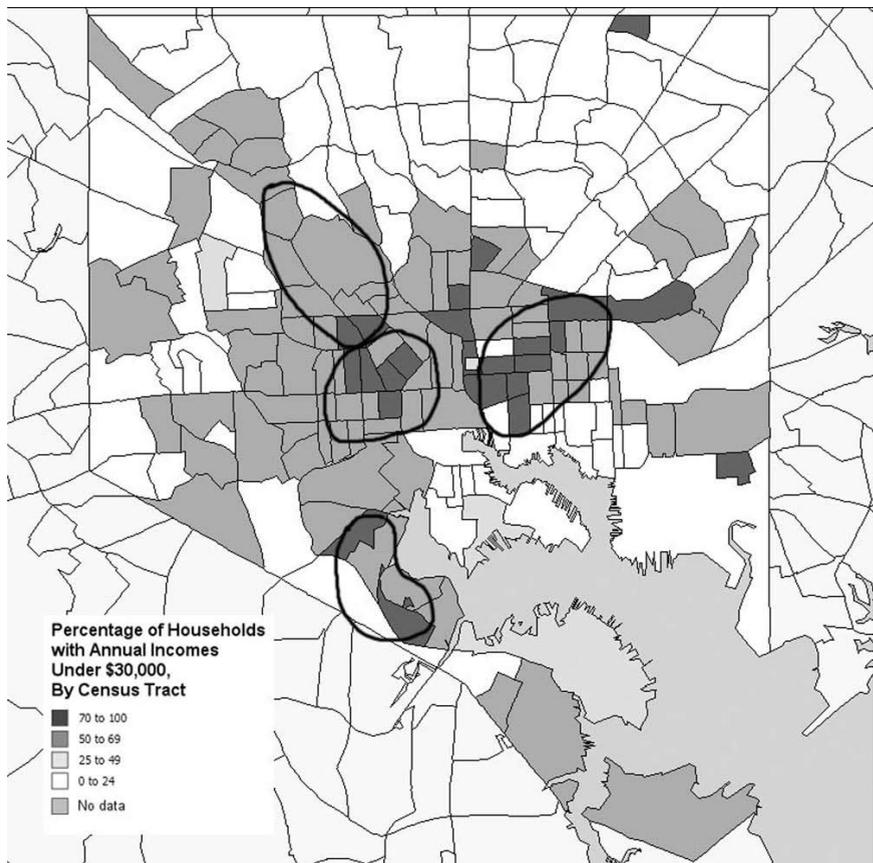
In the *Sun*'s two-part feature, ironically entitled, “An Epidemic's Unseen Cause,” the author attributes the rise in the rate of both HIV and AIDS infections solely to increased drug use by prostitutes. The *Sun* interviewed, photographed, and told the stories of 19 prostitutes, and mapped the HIV/AIDS statistics onto zip codes in Baltimore City and several surrounding counties. The *Sun*'s pathetic “solution” to the crisis is clean needles, educating women to demand men use condoms, and more methadone clinics for IV drug users.

The LaRouche-Commissioned Study

The *Baltimore Sun* study, put simply, blames the crisis on its symptoms. If the pieces of an exploded planet are flying around like asteroids, only fools would explain it by saying the asteroids *caused* the explosion. Drug use, prostitution, high disease rates, mental health problems, filthy living conditions, are symptoms of a collapsed economic structure. In the case of Baltimore, its economy was—until the 1970s—built on steel and other productive industry, with good-paying

Baltimore 'Death Zones'—Areas (Circled) of High Disease, Poverty, and Death Rates, Inside the City Borders

(Base map shows percentages of households with annual incomes under \$30,000, by Census Tract, 2000)



Map produced by Mapinfo

Sources: EIR, Bureau of the Census.

The EIR study of Baltimore's Deindustrialization-caused "Death Zones" mapped onto census tracts the areas of lowest annual income, and highest disease, mortality rates, and "excess deaths" compared to the national standard for current age-adjusted death rates. The Baltimore Sun found the high disease rates, but not any causal connections.

jobs that supported a work force whose living standards were rising, for both African-Americans and white workers, despite racial inequalities.

But, in the 1970s, America changed to the post-industrial paradigm. As the *EIR* Economics Staff wrote in its Baltimore disease study: "The process of deindustrialization and globalization unleashed in leading manufacturing cities in America in the last 40 years is producing a collapse in civilization. This collapse, now in its end-phase, manifests itself in a large increase in death rates from disease, and the potential for still greater death rates as new combinations of diseases interact with squalid living conditions, to spawn still more virulent killer diseases." For the full report, see "The Case of Baltimore: Deindustrialization Creates 'Death Zones,'" *EIR*, Jan. 6, 2006.

The most interesting point of the *Sun's* coverage is the zip code map of the city. Two of the zip codes it identifies as the

highest for AIDS and HIV, 21217 and 21202, are Baltimore city areas which the *EIR* study mapped as having the highest incidence of disease. *EIR's* study was more rigorous, because it scaled down from zip codes to smaller census tract units, to avoid any distortion of data by vacant properties, or non-residential complexes, such as the huge Johns Hopkins Hospital in downtown Baltimore, which is surrounded by squalid areas of the inner city.

Commenting on the epidemiological conditions of populations who do not reach adulthood under a certain level of productivity, LaRouche said in October 2005: "[When] you have a population of very poor people ... and in very poor conditions; and a high rate of disease ... And when we look through some of the things in this area, and you look at things like HIV and you start to make dots [on a graph] of the co-factors, in some of these areas, you find that instead of having an area, where you have many dots of co-factors, the whole thing is almost solidly black co-factors: which is the kind of cess-pool, in which AIDS spreads fantastically. Because everybody transmits everything to everybody out of this kind of area.

"And usually, the center of this thing, is something like a prison system. You go into the prison system, you'll find the concentration of disease of the populations coming in and out of the prison, in a *dynamic model*—not your normal statistical model. But a dynamic analysis of this, will show you a process, where you have an

area in a city, which has this function. Of people who are in the process of dying, who are all black in terms of dots of disease-sharing, and who often spread AIDS, tuberculosis, and everything else at a high rate, because everybody who kisses everybody, spreads all the diseases.

"Some people are looking for a specific agent: They're not looking at the totality of the problem. They're looking at the *disease of poverty! The disease of filth! The disease of terrible conditions!* And every other disease imaginable. And it's all this area. And then, you can find an area, you can demark precisely: *It's where the people who are part of this operation live.*" (Emphasis in original.)

And, that is why, to stop the skyrocketing spread of AIDS, MRSA, and other killer diseases, we must restart the productive economy, which gives people a future, as well as the self-conception of a person who is important to the future.