

Mortality in Congo: The Word Is ‘Genocide’

by Lawrence K. Freeman

Misguided fools and outright liars, who continue to babble about genocide in Sudan, discredit themselves by ignoring the ugly reality: Genocide is the British policy for *all* of sub-Saharan Africa, and has been since colonial times. The most glaring example of the effects of this policy are in the Democratic Republic of Congo (D.R.C.), where the death rate has increased by an astounding 50% from 30,000 “excess deaths” per month, from 1998-2004, to 45,000 a month, from January 2006 to April 2007. During this 16-month period, according to a new study by the International Rescue Committee (IRC), “Mortality in the Democratic Republic of the Congo: An Ongoing Crisis,” an estimated 727,000 Congolese perished, above the “average” death rate. Between August 1998 and April 2007, an estimated 5.4 million “excess deaths” occurred there. While the killing of 800,000 in Rwanda in 1994 was horrifying, the genocide against the Congolese people, which is an order of magnitude greater, has barely registered in the minds and hearts of those who profess concern about Africa.

The IRC survey reports that the Crude Mortality Rate (CMR) of the D.R.C., at 2.2 deaths per 1,000, is 57% higher than the average CMR for the rest of sub-Saharan Africa (1.4), despite the lapse of four years since the formal end to the war in July 2003. In the East, the CMR is higher (2.6 deaths per thousand)—85% above the average for sub-Saharan Africa. A 2004 IRC study of the D.R.C. correctly classified the majority of deaths as *preventable*, with deaths caused by violence at only 1% (see “Genocide: Millions Dead in Congo,” *EIR*, Dec. 24, 2004).

The new IRC report states: “As with previous IRC studies in D.R. Congo, the majority of deaths have been due to infectious diseases, malnutrition and neonatal- and pregnancy-

related conditions. Increased rates of disease are likely related to the social and economic disturbances caused by conflict, including disruption of health services, poor food security, deterioration of infrastructure, and population displacement. Children, who are particularly susceptible to these early preventable and treatable conditions, accounted for 47 percent of deaths, even though they constituted only 19 percent of the total population.”

With rates of unemployment reaching as high as 80% in Kinshasa, the absence of any semblance of infrastructure for a country of 70 million people, the lowest per-capita health expenditures for any country in the world, infant mortality at 20% (that is, one-fifth of all children die before their fifth birthday), and the highest maternal death rate in the world, dare our fellow citizens utter the words “never again,” without a deep feeling of shame, for their hypocrisy?

Economic Genocide

The truth is that, especially since U.S. Secretary of State and National Security Advisor Henry Kissinger’s December 1974 “National Security Study Memorandum 200,” the stated policy of the United States—following Britain’s lead—has been to reduce the indigenous population of African countries (among other undeveloped nations), through the spread of disease, famine, and war, in order to secure for the West the vast wealth of natural resources located there. The elimination of millions of Congolese and the stealing of the region’s mineral wealth was the intention of NSSM 200.

According to a U.S. Government Accountability Office (GAO) report in March of this year, the D.R.C. has: 34% of the world’s cobalt reserves, 10% of the world’s copper reserves, 64% of the world’s coltan reserves, along with diamonds, gold, cassiterite, and other minerals. The report reveals that the United States gave a mere \$399 million to the D.R.C. in 2006 and 2007, mainly for humanitarian assistance, and not one cent for investment in the development of vitally needed infrastructure, without which human life cannot be sustained. Nine out of the country’s ten provinces have *no road* linking them to the capital, and there are no roads connecting the East to the West, nor the North to the South—typical of the imperialist legacy in Africa, where such roads as were built, were only to facilitate shipment of raw materials looted out of the colony.

In both the eastern and western regions of Congo, according to the IRC, almost two-thirds of all deaths are due to fever/malaria, diarrhea, acute respiratory-tract infections, neonatal death, tuberculosis, measles, and malnutrition—all treatable, and therefore preventable, causes of death. The absence of violence in the West and the Transition East (the middle section of the country) has led to a decrease in deaths due to violence, to 0.4% of the total deaths in the country. The overwhelming preponderance of deaths are the result of “economic genocide”—a term that accurately conveys the *knowable result*, when a people are intentionally deprived of the basic necessities of life required for survival.

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