

AIDS Toll Rises, But Could Still Be Stopped

by Colin Lowry

The AIDS epidemic worldwide has infected at least 40 million people, and is now in the process of wiping out an entire human generation in Sub-Saharan Africa. The report by the United Nations AIDS program (UNAIDS) released just before the 14th International AIDS Conference in Barcelona, Spain on July 8-11, showed that the epidemic is still increasing rapidly in India, Southeast Asia, and Russia, and that if massive treatment and prevention programs are not put in place now, 70 million people will die from AIDS over the next 20 years. The assumption made by some “experts” a year ago, that the AIDS epidemic has hit a natural limit in Africa, is also shown false, as the worst-affected countries there continue to see increases in new infections and total infections in the population.

There were 4.8 million new HIV infections in the world in 2000; 5 million estimated in 2001; and the UNAIDS report forecasts 5.5 million per year over the next eight years. AIDS is now causing 1 of every 18 deaths worldwide. Twenty years after it was first measured, the AIDS global pandemic is still accelerating.

This is confirming the earliest long-range forecast of the pandemic made by a team of collaborators of Lyndon LaRouche and published in *Fusion* and *EIR* magazines in 1987. This forecast warned of an *indefinite acceleration* of the pandemic through the human race, until and unless massive programs of mandatory testing and public-health infrastructure-building, were undertaken against it. Much earlier, in 1974, LaRouche had published a forecast of the emergence of a mix of deadly new diseases in the human population, as a result of the then-ongoing destruction of African economic infrastructure by financial policies of the International Monetary Fund. This was ten years before the identification of AIDS. CIA National Intelligence Estimates not published until 1999 and this year, have shown that AIDS is at the center of precisely such a deadly vortex of newly emerging human diseases, as LaRouche warned of.

Pinching Pennies With the Human Race

Dr. Peter Piot, director of the UNAIDS program, says that at least \$10 billion is needed for AIDS treatment and prevention programs worldwide per year, but so far only \$2

billion has been pledged from the industrialized countries. Only 4% of AIDS patients in the developing-sector nations are being treated with anti-retroviral drugs, despite the political pressure on drug companies to provide the drugs at little or no cost to the countries that need them most.

The AIDS epidemic is now larger in scale than any other in human history, with 23 million dead since it began, and 3 million people killed last year. The devastation wrought by the epidemic is not only a medical problem, it is dismantling the social and economic fabric of entire nations in Africa. There are now more than 10 million children in Africa who are orphans, due to the death of their parents from AIDS. In many countries in southern Africa, school enrollment has dropped by 10-20% in the past five years, as children either die from the disease, or leave school to go work, when a wage-earner in the family dies. Hundreds of schools lack enough teachers, as 30-40% of teachers have been infected in several countries in southern Africa. South Africa estimates that it will lose 12% of its workforce by 2005 due to AIDS.

Even more frightening, is the projection that between 2010 and 2015 in South Africa, there will be 17 times more deaths among young people ages 15-34 than would have occurred in the absence of AIDS. This means there will be 3.2 million excess deaths in this age group. The epidemic has reduced life expectancy in Sub-Saharan Africa to only 47 years. Infant mortality has increased by 25-40%, and the percentage of new mothers who are infected with HIV ranges from 25% in South Africa to 45% in Botswana.

In the six countries of southern Africa, 20% of people between the ages of 15-34 are already infected.

What is taking place in Africa now has not caught the United States or other Western governments by surprise. The dangerous threat the epidemic represents to the populations of the world has been known since LaRouche's mid-1980s proposals to establish a crash research program to find a cure for AIDS, accompanied by rigorous public-health reporting of the disease, and large projects for building health-care and sanitation infrastructure, especially in the developing nations. By 1992, a team at the U.S. Census Bureau was accurately forecasting the devastating global spread of AIDS which was to come in the ensuing ten years; but until 1999, those government warnings were kept secret.

The CIA National Intelligence Council's own report in 1999, declared the AIDS epidemic a threat to U.S. national security, and was the only recent report that did not underestimate the severity and scope of the crisis. That report estimated that one-quarter of the population of southern Africa would become HIV-infected by 2005. The report also projected that India and China would surpass Africa in total numbers of HIV infections by 2010.

But, though the CIA has already said the epidemic is a security threat to the United States, the Bush Administration has offered only a pledge of \$500 million to the UN-adminis-

tered Global Fund to Fight AIDS, TB, and Malaria. The Clinton Administration gave only \$250 million for AIDS programs in 2000. In the face of such a newly escalating disaster, the U.S. and other governments are living in denial of the impending reality; or, one might conclude, they are not opposed to widespread depopulation of the Third World's nations.

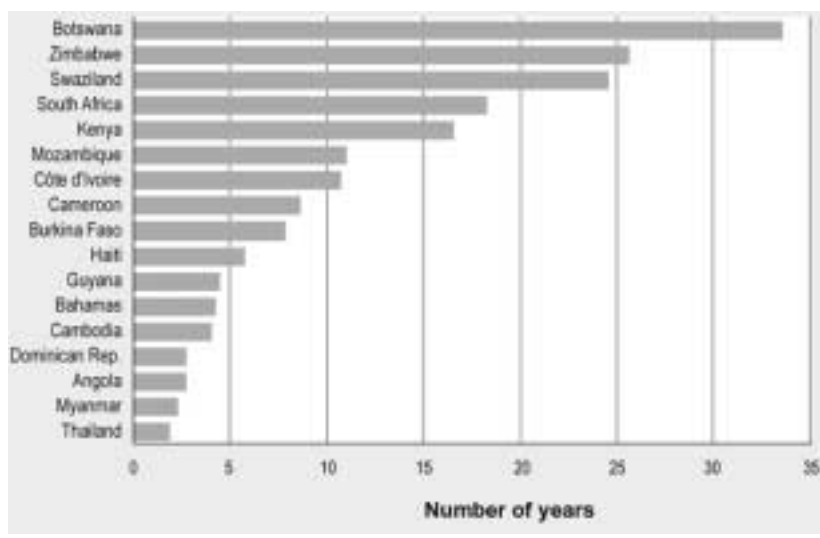
Demographics for a Dark Age

As grim as the statistics of the epidemic are, they do not tell the full story of the impact on the people and nations of Africa. In the next five to ten years, the demographics of the countries hardest hit by the epidemic will be of a type unknown in human history.

As an example, let us look closely at Botswana, which has an infection rate of 39% of its population. There, young pregnant women have an HIV infection rate of 45%. Life expectancy has been cut by over 30 years due to AIDS, and now a young person born in Botswana can expect to live to only 38. AIDS will literally wipe out the current generation between the ages of 15-34, leaving very few survivors able to work or raise a family. Imagine walking into a village in Botswana, where four out of ten people you meet will die due to AIDS in the next five to ten years. In addition, recently 30-45% of babies are born infected with HIV; they will likely not survive past age 5. For those who do survive, how many will be orphans? This leaves a population of very few young children and a dwindling number of older adults over age 50. The epidemic is creating a demographic catastrophe that no war could cause, as the women of child-bearing age are the largest casualty. This means the population will not reproduce itself, and the workforce will not be replenished with young workers when the elderly become unable to work. This scenario, in progress daily in Sub-Saharan Africa, will produce the complete destruction of its nations.

Now, imagine the same process beginning in other parts of the world. The epidemic is increasing its spread at alarmingly high speed. In 1997, UNAIDS estimated there were 23 million people infected with HIV in Africa. That figure jumped to 30 million this year, which is a 30% increase in only five years. An updated analysis by the CIA National Intelligence Council in June 2002, forecast that in the next five years, the number of HIV infections in Africa will double to 60 million, and there will be 45 million new infections worldwide. The NIC report also warned that Nigeria and Ethiopia have passed a critical point, and the epidemic

FIGURE 1
Reduction In Life Expectancy by AIDS in Selected Countries: 2000-2005



Source: UN Department of Economic and Social Affairs (2002).

there is now going to increase massively. Nigeria officially says it has 6% HIV prevalence, but the NIC estimates that Nigeria and Ethiopia are at 10%.

Because we have the recent history of the epidemic in South Africa, it is easy to make a comparison to other countries, such as Cameroon and Nigeria, to get an idea of where the epidemic is now headed, and how quickly it will spread. Nigeria, Cameroon, and Ethiopia are now at a stage of spread similar to that in 1994-95 in South Africa, and can expect the epidemic to increase its spread by at least 30-50% in the next five years. Nigeria is Sub-Saharan Africa's most populous country, and already has more than 3 million people living with HIV.

The Next Epicenter

India and China are home to more than one-third of the people on this planet. The UNAIDS report predicts that India will overtake South Africa in total numbers of HIV infections in a few years. China is estimated to have about 1 million HIV infections now, and UNAIDS estimates that it may reach 20 million infections in 20 years, unless large-scale prevention and treatment programs are established soon.

While good data on the epidemic in China are sketchy, the picture in India at the local and state levels shows that the national average of 0.4-0.7% HIV prevalence is very deceptive. Surveillance data from several large Indian states shows an epidemic moving quickly out of typical high-risk groups such as prostitutes and drug users, to the general population.

In the state of Andhra Pradesh, with a population of 55 million, HIV infections were found in 2% of women at pre-natal clinics. In Tamil Nadu and Maharashtra, 3% of women at these clinics, and 10% at sexually transmitted disease (STD) clinics, tested positive for HIV.

If you were to simply average out the HIV prevalence from these states, and apply it to the 1 billion population of India, you would end up with an estimate of 10-18 million cases of HIV infection, not the officially reported 4 million. India also has many concentrated hotspots of high HIV prevalence in certain sub-populations. These hotspots have the potential to spread the virus quickly into the general population, and that is what appears to be happening now. Sex workers in Bombay have HIV rates as high as 50%. Studies of migrant workers have shown that they have a much higher rate of HIV infection, and often return to their homes and infect their families.

The situation in China is quite different, and the epidemic is at an earlier stage of development. However, small studies have shown very quick rates of spread in certain regions. Reported HIV infections increased by 67% in the first six months of 2001 in China. In Guangxi, HIV prevalence among sex workers has increased from less than 1% in 1996, to 11% in 2000. A serious rural epidemic due to unsafe blood donation procedures in Henan province has resulted in 150,000 people becoming infected there.

The World's Fastest Growing Epidemic

The AIDS epidemic is growing faster in Russia and Ukraine than anywhere else in the world. Since 1997, the number of HIV infections has doubled each year. This year, conservative estimates put Russia's total number of HIV cases at more than 1 million. With a public-health system shattered by years of International Monetary Fund (IMF) "shock therapy," the population has become increasingly vulnerable to diseases like tuberculosis, diphtheria, STDs, and now AIDS. Only about 1,000 people are being treated with the latest anti-retroviral drugs in Russia today. The epidemic in 1995 was seen mostly in young intravenous drug users and sex workers, but now is poised to continue its explosion into the general population. A study by researchers at Imperial College in London, predicts that within five years, 5% of the population of Russia will be infected with HIV.

Ukraine has the highest HIV prevalence in Europe, at 1% officially, or 250,000 cases, but this estimate is probably quite low. The epidemic is spreading rapidly in the Baltic states, and in Belarus, and is certain to continue sweeping westward into Europe.

The United States, with 1 million people living with HIV, has little surveillance data on the epidemic, and since the Centers for Disease Control and Prevention (CDC) plan for more surveillance sites has only been activated this year, no one knows how bad the epidemic really is. Only 37 states

have any rules for reporting HIV cases to public health boards. After rejecting the LaRouche movement's ballot initiatives in 1987 and 1988 to make AIDS a reportable disease, the state of California took 15 years to come to its senses, and is now instituting a system to report HIV cases to public health officials.

Heterosexual transmission of HIV to African-American and Hispanic women in the United States has increased by 10% in the last two years, and 27% of new infections occurred through heterosexual transmission since 1994. At the same time, a six-city study of homosexual men shows that HIV infection rates are increasing again among young men under 34, after years of stable decreases. Alarming, the study also found that the percentage of new HIV infections that are resistant to at least one drug has increased from 2.5% in 1996 to 13% in 2000. This has serious consequences, as it is the expensive cocktails of multiple anti-retroviral drugs that have reduced the death rate and kept many HIV-infected people alive for over a decade. If the rapidly mutating virus makes these drugs obsolete, patients will have to struggle to survive until new drugs currently in development become available.

A Genocide Policy

While well-meaning experts such as Dr. Piot call for \$10 billion a year funding to fight the epidemic, under the current IMF-World Bank dominated financial system, stopping the epidemic is impossible. This is the reality that the U.S. government refuses to face. The nations of Africa pay a combined \$15 billion a year for debt service to the IMF, World Bank, and related financial institutions. How can countries literally dying of disease, malnutrition, and lack of development, pay that each year and have any chance of funding serious public health infrastructure to stop AIDS?

While many Western governments give lip service to helping fight the AIDS epidemic, their own policies are ensuring its continued spread. LaRouche forecast in 1974, that the continuation of the austerity and looting policies that targetted the developing sector would cause an eruption of new and old diseases that would also hit the crumbling physical economies of the industrialized nations. It is the continuing support for those policies by the United States that has allowed the AIDS epidemic to threaten the existence of entire nations.

UNAIDS makes the assumption that the economies of the industrialized nations are growing, so they can afford to give billions to fight the epidemic. But this assumption has already been proven false by the collapse of the physical economy and the crash of the fraudulent "new economy." In the current global financial collapses, UN Secretary General Kofi Annan's aides have told the press that no significant contributions have actually come in to the Global AIDS Fund for many months. The solution to the crisis requires a new financial system worldwide: the New Bretton Woods proposal of London LaRouche.