# **EIRSpecialReport**

# IMF's ecological holocaust: more deaths than nuclear war

by Warren J. Hamerman

From approximately Labor Day weekend through Christmas 1974, at the initiation of Lyndon H. LaRouche, Jr., I directed the work of a task force which produced a study forecasting the consequences to the world's population and the biosphere as a whole, were the "zero-growth" policies then being implemented by the International Monetary Fund and Robert McNamara's World Bank not drastically altered. This "Ecological Holocaust" study was one of the principal projects which developed into the founding of the Fusion Energy Foundation that fall, and the progress of the study was announced at the FEF's founding event at the Tudor Hotel in New York on Nov. 23, 1974.

Our study followed the research guidelines of a special memorandum prepared by LaRouche, mandating the study and outlining the methodology to be pursued. The preliminary results of our study, including prepared graphs, maps, and charts, were presented by a member of the task force on Dec. 28, 1974 to a conference of the National Caucus of Labor Committees in New York City. Some of these graphics are reprinted in this *Special Report*.

We forecast at that time that, given the policies then being implemented by the IMF and World Bank to slash the food and energy consumption of the world's population, a global ecological holocaust would be the inevitable consequence. The new policies of the IMF and World Bank included the vicious "triaging" of certain nations and whole regions of the world, which were given the designation of "the Fourth World." These Fourth World areas were written off as unworthy of any investment for economic development. Whole nations were being written off as "bad credit risks" and established as looting zones. At LaRouche's suggestion, the task force proceeded to investigate what the consequences would be of the IMF and World Bank applying Adolf Hitler's economic policy of "primitive accumulation" against labor and capital infrastructure, to the world as a whole.

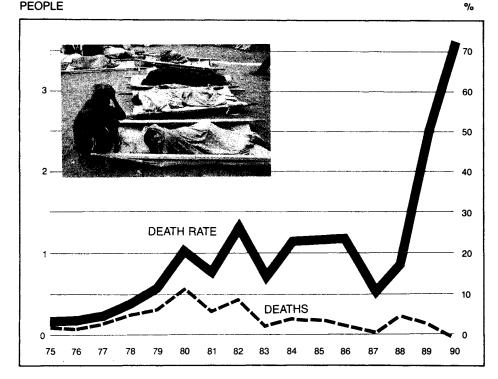
We warned of the specific disease pandemics and famine deaths which today, 11 years later, are occurring.

Our specific conclusions were:

1) The holocaust would develop in successive waves of famine and disease,

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The graph, first published in December 1974, shows schematically the expected increase in deaths (dotted line) and the catastrophic increase in the death rate (heavy line), as described in the study of the coming ecological holocaust by the research team headed by the author. The study projected blight and collapse of basic agricultural production capacity in 1980, 1982 and 1984, leading to a full ecological holocaust in 1987-88, if the policies of the International Monetary Fund were not stopped. In the photograph: victims of drought and famine in Ethiopia in November 1984.

ratcheting downward in a succession of exponential step functions, to a final *breakdown phase* and into a full *ecological holocaust* in the period 1987-88. This process would undergo several *phase changes*, which can be approximated in simplified form by the classic thermodynamic progression from ice to water to steam.

prior to the 1987-88 period, were forecast to occur in 1980, 1982, and 1984, as blight and collapse of basic agricultural production capacity were expected to hit Ibero-America and famine conditions were to strike the underdeveloped nations of Asia, Africa, and Ibero-America.

2) Preceding the final breakdown period, we forecast the outbreak of a cholera pandemic in Africa. We presented a historical study of the spread of pandemic cholera in the early to mid 19th century. We mapped the way the cholera pandemic had originated in India, spread rapidly to Southeast Asia, Japan, the Mideast, the north and east coasts of Africa, Western Europe, and from there to the Americas. Our task force presented a forecast map, upon which we charted the route of the 1970s "El Tor" cholera pandemic, which had originated in Southeast Asia. We predicted that in the 1980s, there would be a vicious renewed outbreak of a cholera pandemic in the region of the famine-wracked Sahel of Africa. Among the distinctive features of our study was the forceast that the cholera pandemic of the 1980s, unlike the one of the 19th century, would be initially centered in Africa. We feared, as well, that at a certain stage the cholera pandemic would be complicated by renewed outbreaks of Bubonic Plague ("Black Death") and new mutated, even more deadly forms of disease, which would totally overwhelm the immunological defenses of populations. In the final phase of ecological holocaust, various strains of pandemic diseases would simultaneously attack the world's flora, fauna, and

tions—spreading rapidly throughout Africa, Asia, and Ibero-America, as well as invading the advanced-sector areas of North America, Europe, and Japan.

3) The task force presented data estimating that the final phase of ecological holocaust would take a toll far, far greater than did the Black Death centuries ago. The specific death estimates through the 1987-88 phase change, we forecast to be approximately one billion persons, distributed as follows:

- 56,423,000 deaths in West Africa;
- 10,672,000 deaths in North Africa and the Mideast;
- 73,428,000 deaths in East Africa;
- 749,277,000 deaths in Asia;
- 81,019,000 deaths in Latin America;
- Total global deaths = 970,819,000.

The approximately 140,000,000 deaths by 1987-88 in Africa alone which we forecast is *slightly less than half* the number of Africans (300,000,000) now threatened with death by the outbreak of a cholera pandemic in the precise zone of Africa which we had pinpointed 11 years ago.

4) The "cost-efficient" World Bank programs of Robert McNamara in Ibero-America would generate conditions of laterization and erosion of topsoil. Ecological collapse would result in the areas of fragile jungle ecology, which would be compounded by the high rainfall. As topsoil and nutrients were washed to the sea, sheets of mineral salt would remain, which, without fertilizer input, would turn once lush jungle into desert. The beginning destruction of a vast jungle area

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such as the Amazon would have global consequences on world weather patterns.

We warned that the policies of the IMF and World Bank, modeled upon the programs of Hitler's Economics Minister Hjalmar Schacht, would cause mass murder and genocide. What the LaRouche task force warned would be the consequences of repeating Adolf Hitler's economic policies on a worldwide scale, is now occurring. Those who have implemented these policies have not merely mistakenly committed mass murder on a scale greater than Hitler did; they did so consciously. In fact, various proponents of "massive population reduction" programs for the developing sector have insisted in private discussions that outbreaks of disease are the most effective way of "eliminating" large numbers of people rapidly. Advocates of the notorious Global 2000 program of the Carter administration's State Department, for example, have been documented to advocate such mass murder. In addition, associates of the late Aurelio Peccei's Club of Rome have referred to disease as the most "effective" means of population reduction of the Four Horsemen of the Apocalypse.

We have the proven scientific authority to now assert: Unless those policies of the IMF and World Bank are immediately halted, and measures implemented to repair the damage of the last 11 years, in the period leading into 1987-88, mass murder of the world's population and irrevocable collapse of the entire biosphere will occur on a scale far, far more devastating than that which would result from full-scale thermonuclear war!

## What is an ecological holocaust?

The LaRouche task force described how, in the final phases of ecological holocaust, disease organisms would have an increasing chance to successfully mutate into more virulent strains, as the resistance of the human population is lowered. Disease mutants would be less likely to die out, because the human population's immunological defense system would break down under conditions of drastically diminished protein intake and collapse of basic irrigation, sanitation, and other health services. Under such conditions, the increase in the total disease population leads to the possibility of an increase in the rate of evolution of any given disease, and then the cycle continues.

Our basic thesis in 1974 was that the outbreak of epidemics and pandemics was not limited to the individuals or subpopulations catching or carrying the disease, but rather, especially under conditions of massive reductions in the living standards of populations, was a threat to the human species as a whole. Furthermore, the disease outbreaks were only one prominent feature of what could become the full-scale collapse of man's biosphere itself, subsuming breakdowns in flora, fauna, natural irrigation, and weather cycles, among other effects. One feature of the work of the task force was the intensive historical study of 1) The Black Death or "Bubonic Plague," which in the mid-14th century wiped out

approximately 50% of the European population in just a few years; 2) the cholera pandemics of the 19th century, which originated in India as a result of the brutalizing policies imposed there by the British, and then swept rapidly in successive waves to Southeast Asia, Japan, the Mideast, the north and east coasts of Africa, Western Europe, and from there to the Americas; and 3) the killer influenza pandemic which killed more people in six months of 1918 than had died in the entirety of World War I.

We learned from these studies both qualitative features—principally that under conditions of globalized economic brutality, full-scale economic/biological breakdown crises occur as one coherent process—and quantitative features—principally that under pandemic conditions, annual death rates shoot up into the 20-25% range. Thus the outbreak of an epidemic in one portion of the human species was in fact a threat to every member of that species. We anticipated that, given the interrelated nature of the world economy in the late 20th century, this feature would be even more pronounced. At Lyndon LaRouche's emphasis, we therefore adopted as our basic modeling concept an exponential step-function model for ecological holocaust.

### The 'weak link'

We analyzed the link between collapsing living standards and the development of pandemics:

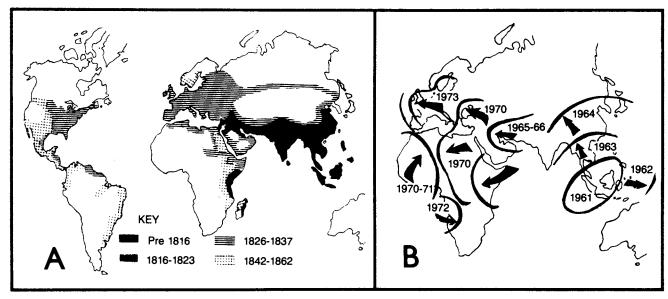
To understand this entire process of ecological collapse, it is critical to understand it as a process of the total ecology, not of individuals. The history of epidemics demonstrates that epidemic disease occurs only when a "weak link" exists in the human species as a whole. Disease attacks the weakest, least resistant area, when that area is surrounded by relatively low levels of resistance—even though the resistance is higher in surrounding areas than in the "weak link" areas. Therefore, new diseases are produced in the areas of the lowest standard of living, and then begin to spread.

For example, at the beginning of the 19th century, cholera was unknown throughout the world. As the British Raj lowered the standard of living in India in approximately 1816, a pandemic started to spread outward from India throughout the entire world.

During the 20th century, India has been the "weak link"—India and what is now Bangladesh—so the identical process is now occurring. As the general process of economic decay started to hit Southeast and South Asia, cholera began to spread. If you read textbooks dating from 1960, cholera had been wiped out outside of this area. At the end of the 1960s, however, a new mutant variety of cholera began to spread outward from Southeast Asia and Bengal through India, arriving by the late 1960s in the Mideast and—with continued deterioration of living conditions—arrived by the early 1970s in Africa. . . .

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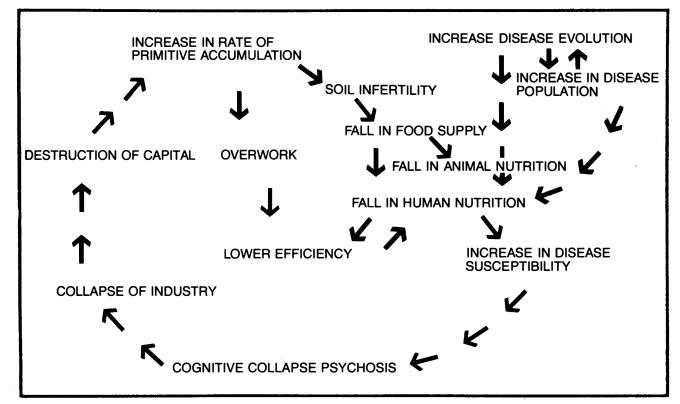
# Highlights of the 1974 study



The spread of pandemic cholera. Cholera swept the globe in the early mid-19th century. Originating in India, cholera spread rapidly to Southeast Asia, Japan, the Mideast, the north and east coasts of Africa, Western Europe, and from there to the Americas, as shown in Map. A.

Map B traced the route of the El Tor cholera pandemic, which originated in Southeast Asia. Geographical progress of the two pandemics are noticeably similar: In the 1970s' pandemic, however, Africa (and especially the famine-wracked Sahel) is hard hit, unlike the earlier one, where a relatively unexplored African continent was touched only peripherally.

Maps are reproduced from the 1974 study.



Schema showing process of ecological holocaust, which would advance devastatingly if diseases spread unchecked, production collapses, and primitive accumulation and starvation drive humanity into psychosis. Source: New Solidarity, Jan. 16, 1975.

Once this process of the spread of epidemic diseases through populations starts, the disease itself begins to aggravate nutritional problems. You lose nutrients in fighting off a disease, in coughing, and so on. Next time around, you're even weaker—more susceptible, to the disease. At the same time the disease rate, the rate of evolution of new diseases, increases. . . .

The 1974-75 task force warned that the very areas which the World Bank and IMF wrote off, classifying them as "the Fourth World," were the areas where plague and other diseases are endemic. These areas were identified as the African Sahel, the Rio de la Plata region of Latin America, northern Brazil/Venezuela, the Middle East, Southeast Asia, and the Indian subcontinent.

# 20th-century pandemics

During the 20th century, protein intake of populations was drastically reduced around the period of the pre-World War I global crisis and the subsequent war, and then again during the Great Depression of the 1930s. Under the brutal policies of British colonialism, India suffered five major famines in the first 20 years of the 20th century alone. The collapse of living standards around World War I was compounded by the outbreak of plant diseases. In 1917, potato blight destroyed 40% of the Eastern European and Central European potato crop. The collapse of protein intake in the advanced countries began simultaneously, as well as the increase of disease potential throughout the world. Waves of epidemics swept Czarist Russia. In 1917, there were epidemics of syphilis and measles.

In 1918, this process peaked, with the outbreak of a virulently mutated strain of influenza—unlike any influenza today—with an enormously high mortality rate. It killed over 25 million people in six months, half a million in the United States alone! During the 1930s Depression, a similar process occurred, again precipitated by policies which drastically reduced the general nutritional levels of populations.

# The consequence: unstoppable collapse

We summarized the results of our study with the following analysis:

In conclusion, taking the process of ecological holocaust as a whole, we see a series of interrelated cycles: the fall of soil fertility leading to a fall in food supply, leading to a fall in nutrition of both human beings and animals, leading to a lower efficiency of human metabolism and further drops in nutrition, leading to an increase in the disease population, a further fall in human nutrition, and further susceptibility to disease. The cycle as a whole leads to a general collapse of the cognitive abilities of the population, to mass psychosis, collapse of industry, destruction of wealth, and therefore an increase in the driving force behind the holocaust.

The study then projected a step-function process of accelerating waves of famine, disease, and industrial collapse, to a period in the mid- to late-1980s. We asserted:

With the collapse of the "redevelopment" projects in "Fourth World" areas outside the Middle East, with the spread of famine, the potential for pandemics of bubonic plague would already be present and would actually be realized. To the extent that a general financial collapse was occuring simultaneously, areas of the advanced world—especially those dependent on imported food, such as Japan—would be vulnerable to plague, especially to the extent that sanitation, antirat measures, etc., are at a primitive level, as in Italy now.

Under these conditions, we projected that at a certain point the biological-ecological collapse would be *unstoppable*. We envisioned the following horrifying situation:

You have to envision an environment of enormous speed-up, vast brainwashing, general hopelessness, superimposed on the sorts of psychosis which are unique to plague and epidemic diseases: workers refusing to transport food into diseased areas, raw materials from diseased areas not being delivered, total collapse of productive processes, increasing psychosis, increasing rate of disease, breakdown of food production. . . .

Once the ecological-biological collapse had reached that level of momentum, the vulnerability of formerly industrial societies, with their very large concentrations of urban populations, would succumb to a full-scale disease/nutritional/industrial breakdown collapse. We forecast that under such conditions, the annual death rate of the world's population would rise from the 3% range to the 20-25% range, which is typical of previous historical periods of plagues and ecological holocaust. Surviving populations, while perhaps too small and scattered to maintain the plague cycle, would eventually succumb to continuing crop failures and transformations of the functioning of the biosphere itself. It is quite possible, we hypothesized, that by the end of the century, the survivors of the ecological holocaust themselves would face a final crisis.

In the immediate period ahead, mankind has one last chance to reverse the IMF and World Bank policies, before the world reaches the point of no return for the final phase of ecological holocaust. Precious little time remains in which to act decisively.

Warren Hamerman, before working on the LaRouche task force, had been a biomedical research assistant working in a scientific laboratory engaged in basic immunological research. He subsequently completed a major study of the life's work of Louis Pasteur, which was published independently by the Johns Hopkins Medical School, the Pasteur Institute of Lille, France, and the Fusion Energy Foundation.