

without any diversions of profits to the Congolese people!

The New Breed Unravelled

Despite Holbrooke's display of United States backing to the Ugandan-Rwandan seizure of eastern Congo, the fighting between the two allies is the death knell for the policy the United States has carried out in eastern Africa over the last decade. That policy centered on bringing to power and backing a so-called "new breed" of African leader, led by Ugandan President Yoweri Museveni. The breed included Paul Kagame of Rwanda, President Isias Afwerki of Eritrea, President Meles Zenawi of Ethiopia, and in the shadows, Burundian President Pierre Buyoya. The qualifications for the new breed centered on their coming to power through the gun, preferably based on mono-ethnic insurgencies and their adherence to the escalated looting of their national economies through globalization and the IMF. In East Africa, this new breed was given two targets accepted by the entire donor community: the Zaire of President Mobutu Sese Sekou, and the National Islamic Front government of Sudan.

The war against Sudan, perpetuated by Uganda, Ethiopia, and Eritrea, has not brought about the donor community's objective, but has resulted in the death by starvation and war of hundreds of thousands of Sudanese. The coalition of "front-line" states against Sudan has fallen to pieces, as Egypt is pursuing a policy of peace for southern Sudan and Ethiopia and Eritrea have been at war with each other over the last year. A failure in its own terms, this policy, zealously enforced by Payne, Rice, and Albright in Washington, has brought only death and devastation to the Sudanese people. Net political result: zero. Death toll in Sudan since 1990: at least 1 million Sudanese.

In 1990, Uganda invaded Rwanda to bring down the government of Juvenal Habyarimana, an ally in the region of Mobutu. The aim was to install the mono-ethnic Tutsi Rwandan Patriotic Front government in Kigali and thus consolidate a Uganda-Rwanda-Burundi (Tutsi) military coalition along Zaire's western border. Habyarimana was not finally brought down until his plane was shot down on April 6, 1994. The takeover of Rwanda by the new breed combine resulted in the slaughter of 800,000 Rwandans in 1994, with estimates that another 1 million Rwandans have been killed by the Kigali regime since 1994.

In 1993, the Western powers backed the overthrow of the government that had been elected in Burundi in June 1993, in order to bring back to political power the Tutsi Burundian military to play its role against Zaire. This effort ultimately succeeded with the July 1996 coup of Pierre Buyoya. Death toll in Burundi for this operation: 500,000. The continuing civil war in the country has further resulted in the forced internment of 800,000 Hutu Burundians and, at a minimum, another 200,000 dead.

In 1996, the Rwanda, Uganda, and Burundi militaries launched war on Zaire, allegedly in pursuit of armed refugees

and in a drive to put Laurent Kabila in power in Kinshasa. The war resulted in the wholesale slaughter of United Nations-protected refugees, half of them children. But, once in power, Kabila turned against the British Commonwealth companies that had financed his march across Zaire and turned against his Rwandan and Ugandan allies when they refused to leave the country. Net political result of this policy: zero. Death toll of the 1996-97 war: 500,000 Rwandan refugees and another 500,000 Congolese.

In August 1998, Uganda, Rwanda, and Burundi again invaded eastern Congo. Their attempts to seize the capital of Kinshasa were forestalled by Angolan, Namibian, and Zimbabwean troops invited to defend the Congo by the Kabila government. The war continues. As the IRC study indicates, the death toll of this operation *so far* is at a minimum of 1.7 million Congolese.

Today, there are 700,000 Ugandans in internment camps for the internally displaced inside Uganda; there are 400,000 Rwandans in internment camps inside Rwanda; 500,000 people in internment camps in Burundi; and 2-3 million displaced eastern Congolese. These people—especially children under the age of five—are in dire risk. Their needs are unmet; their voices are never heard. They and millions more in the war-torn countryside of Uganda, Burundi, Rwanda, and the Congo have been silently sacrificed on behalf of a policy of imperialist looting of East Africa.

In its rapacity for mineral wealth at the expense of the lives of human beings, the post-Cold War policy of Britain, the United States, and its allies in the "donor community" rivals the imperial mass murder perpetrated by King Leopold of Belgium. It is a policy that has brought cataclysm to Africa and political and diplomatic ignominy to the United States. It must be scrapped in its entirety, and careful work must be done to reconstruct an American foreign policy toward Africa based on republican—not colonialist—principles that will *save lives*, not destroy them.

Mortality in Eastern Congo: Results from Five Mortality Surveys

The following are excerpts from the International Rescue Committee report, Mortality in Eastern Democratic Republic of the Congo (D.R.C.), released in New York City on June 8.

The International Rescue Committee (IRC) conducted a series of five mortality surveys. These surveys took place between April 18 and May 27, 2000. The areas surveyed included the city of Kisangani, the Katana and Kabare Health



Rwandan refugees in Zaire, 1994. According to the International Rescue Committee, there have been 1.7 million excess deaths or more over the past 22 months as a result of the fighting in the Congo.

Zones, the Kalonge Administrative Zone, and approximately 1,000 square kilometers surrounding Moba. These sites represent three of the five eastern provinces within the D.R.C. and have a collective population of 1.2 million.

The 1,011 households visited contained 7,339 living residents, who reported 606 deaths among their household members since Jan. 1, 1999. From the information provided the IRC reports that:

1.7 million excess deaths or more have occurred over the past 22 months as a result of the fighting in the D.R.C. This equates to 77,000 deaths per month and of that, 26,000 (34%) are children younger than five years of age. [In Kabare,] a disproportionate amount of this mortality was among those under one, who had a mortality rate of 20/1,000/month. This means that 24% of children born during or in the months before the recall period died in the first year of life. [In Katana,] half of the deaths reported by families were among children younger than five, with malaria (26%), malnutrition (22%), and diarrhea (11%) being the most commonly reported causes of childhood death. Among those five years of age or older, the most common causes of death were violence (26%), malaria (19%), and malnutrition and cholera (15% each).

[In Moba,] aside from the staggering estimate that 47% of children less than one year died in their first year of life, children 12 to 23 months of age were estimated to have a 29% mortality rate.

During the Moba survey, only 12 violent deaths blamed on armed individuals were reported, while 31 deaths were reported by people hiding from armed forces (that is, not

fleeing to another location but waiting in the bush before returning home). While this is an extreme form of social disruption, it exemplifies the “non-weapon” nature of the war-related deaths in eastern D.R.C.

Other people, citing the unusual economic circumstances in explaining deaths, often stated that their local clinic had no medicines or that they could not presently afford the cost of going to a clinic. In places like Kabare, there is little violence, yet the mortality is double what it should be, and infant mortality is three to four times what was normal when economic activity was occurring.

There are many children younger than two years old missing from the demographic profile. Compared to the number of three and four year olds, there are 30% to 40% fewer children under two years of age than would be expected. [In Kisangani,] five women reported having full-term stillborn children (which were not included as deaths in this report), an estimated 3% of full-term pregnancies in the sample population resulted in a maternal death; and adult malnutrition appears to be a disproportionately higher female phenomenon. In the attribution of “maternal mortality,” the two pregnant women who died of heart attacks during military attacks (one while being shot at, one while running), and the woman who was too pregnant to run from attackers and was strangled during/after being raped, were classified as deaths from violence. The woman in Kisangani who died of an induced abortion had her death classified as “other non-infectious.” The reason for mentioning these four deaths is to note that there are risks in the D.R.C. associated with

being pregnant that are not captured by the epidemiologist concept of maternal mortality. [In Moba,] eight women died related to childbirth, primarily due to hemorrhaging, although one death was reported to be tetanus related. At least three of the women were displaced and hiding in the bush at the time of death. Based on the number of live and deceased under one- and one-year-olds, it is estimated that 10.8% of full-term pregnancies during the past 16.8 months resulted in maternal death.

Violent deaths and other “nonviolent” deaths are inseparable in eastern D.R.C. Those places and times where infectious disease deaths were highest were the same as where violent death rates were highest. This was seen most dramatically in Kalonge, where when violent deaths increased dramatically (5.5-fold) during the period after October 1999, the malaria-specific mortality rate simultaneously went up 3.5-fold. In eastern D.R.C., war means disease. The dozens of adults who reportedly died of malaria while displaced had certainly survived malaria in the past. Yet, while at home, they could eat and drink water while ill, and perhaps could have paid the few cents needed for a course of chloroquine. One girl from Kalonge told us how five of her eight family members had died of malaria within the same month.

Violence against civilians appears to be inflicted by all sides. Among the 69 deaths attributed to violence, family members reported that the deaths were committed by the Interhamwe and the RCD Rally for Congolese Democracy [Rwanda front] at a similar frequency.

Violence against civilians appears to be indiscriminate. Women and children constitute 47% of the violent deaths reported. Only 53% of those killed were males over 14 years in age.

Eastern D.R.C. is an unchecked incubation zone for disease. Several major disease outbreaks were detected during the course of these five surveys. Examples of this include an estimated 870 suspected meningitis deaths in Kisangani, family-reported death rates in Moba from cholera and dysentery of approximately 1% of the same population, reports of multiple measles deaths in three of the five surveyed populations, suspected polio deaths reported in Kalonge. In February 1999, the IRC conducted a mortality survey in Katana Health Zone which revealed a measles outbreak that had killed 1,400 children.

The overall mortality rate during the year 2000 is higher than it was in 1999. Thus the monthly death toll of 77,000 attributed to this war shows no sign of declining. An estimated 34% or 26,000 of these monthly fatalities are children younger than five years of age. The acceptance of the status quo in D.R.C. or the tolerance of slow diplomatic solutions implies an acceptance of these ongoing deaths.

It is believed that the projection of 1.7 million deaths due to this war in the D.R.C. is a very conservative estimate. This is believed to be true because:

- Our surveys clearly occurred in safer and more accessible areas than the average location in eastern D.R.C.

- [In Kalonge,] violence appears to cluster by household. There were a couple of households where everyone had died except for one interviewee. Thus, it is likely that entire families were killed in the recent violence. This would mean that the mortality measured among the IDP [internally displaced persons] families underestimates the mortality experience of the Kalonge residents over the past 16 months. (That is, if an entire family was killed, no one would be left to interview in the Bukavu area, creating a survivor bias in our sample.)

- It is not likely that 2 million in Katanga have escaped unscathed. An OCHA [UN Office for the Coordination of Humanitarian Affairs] evaluation of western Katanga, behind the Kabila lines, was released May 2000. It portrayed an image of “widespread malnutrition, prolonged displacement of civilians, and severe economic depression.”

Voices Cry Out against Genocidal War in Congo

Rep. Cynthia McKinney, U.S. House of Representatives

On June 9, Representative Cynthia McKinney (D-Ga.), a member of the House Subcommittee on International Operations and Human Rights and formerly a member of the House Subcommittee on Africa, wrote President Clinton asking him to take action to end the war in the Congo. Her open letter is printed here:

I am contacting you regarding a matter of urgent and immediate concern. Fighting between Ugandan and Rwandan troops in the Democratic Republic of Congo is continuing in the fifth day, despite attempts by the United Nations to broker a lasting cease-fire agreement.

The conflict includes heavy exchanges of artillery fire in and around the city of Kisangani in blatant disregard of international law. The indiscriminate shelling of the civilian population has left over 100 dead with thousands fleeing for their lives, prompting the head of the UN team in Kisangani, Col. Danilo Pavia, to accuse both the Ugandan and Rwandan leaders of “committing genocide against the city.”

The reported genocide is corroborated by a report released today by the International Rescue Committee revealing that, by conservative estimates, more than 1.7 million people in eastern Congo have died as a result of the two-year-old conflict.

It has only been a few short years since another UN officer, General Dallaire of Canada, warned of impending genocide in southern Africa. At that time, the international community