

Home Rule imaginable, and a precedent for the destruction of all democratically elected institutions. Congress has the authority and obligation to rein in this Frankenstein monster, which they created. They must be caused to act on the evidence of this genocidal transition, by returning to the principle of protecting and promoting the General Welfare. You, the City Council, have the authority, the obligation, and the backing of the citizens, to demand that Congress act, to reverse these illegal actions, and put an end to this horrid system, that makes a mockery of health care. If Congressional hearings, such as this one today, were to be held on Capitol Hill, and the fraud of this system exposed, this nonsense could be ended.

Do not become collaborators in this genocide. An advisory commission, to oversee these deaths-by-privatization and other human rights violations under this new plan, will do nothing, except assist these passive executions. You do not appoint “a commission” to oversee concentration camps in Nazi Germany; you simply put an end to the system. To accept this as a “done deal,” even at this late date, is to accept a vast human carnage, a holocaust in the capital of the most powerful nation in the world. Justice can only be served for these victims, and for the hundreds of thousands of residents and visitors to our nation’s capital, by restoring D.C. General to a full service, fully-funded public hospital.

Interview: Esther Haywood

Health-Care Takedown Is ‘Ethnic Cleansing’

Missouri State Rep. Esther Haywood (D-71st District), representing St. Louis County, Missouri, made a trip to Washington, D.C. in June, to join in the fight to save D.C. General Hospital. She spoke with Marianna Wertz on June 16.

EIR: You were in Washington recently, for the campaign to save D.C. General Hospital. What do you believe is the importance of that fight?

Haywood: I have real problems with this shutdown, because I believe this is the beginning of a clinic approach to health care in this country, that they are going to be spearheading that from there. That’s



exactly what they want to put in there. They want to put in clinics and a whole lot of satellite areas, and people will go undiagnosed; it will be days before they see anybody. On top of that, usually they won’t be seen by a health-care professional. Many times, they are para-professionals, nurse’s aides, or whatever. That’s the case here in St. Louis. We have them in areas here, and I believe that many folks are dying because they’re misdiagnosed.

EIR: I’ve read a document, put together by Missouri State Rep. Charles Quincy Troupe (D-District 62), on the extent of closure of public and other hospitals in Missouri, which was disturbing.

Haywood: I’d like to see what you have. I can only speak to St. Louis County, where it started many years ago with the Homer G. Phillips closing in 1979. This hospital was the main source of training for every black professional who is over 50 years old today.

EIR: According to what I’m reading here, St. Louis in 1977 lost Booth Memorial; in 1978, lost North St. Louis General; then, Homer Phillips in 1979; Robert Koch Hospital in 1983; St. Mary on the Mount in 1985; Lindell Hospital in 1988. It goes on and on.

Haywood: A lot of these places I’m not even familiar with. Like Lindell, some of these are small units, and they close up those, and people don’t even recognize they’re gone. But the main ones, like Regency, ConnectCare—Regency is sitting over there with ten beds. That’s closed, as far as I’m concerned. Because it’s only open for overnight stay. If you come in as an emergency, they keep you overnight. So, they have ten beds for you.

EIR: That’s just like D.C. General.

Haywood: Absolutely. This has begun to be a trend across the country. If we don’t do something about it, if we just go through the motions and just plain ignore it—it’s right in our back door. It’s in yours today, but it’s certainly in mine tomorrow. It’s been there a long time, even if we don’t want to recognize it.

EIR: Do you hear complaints about these closings from your constituents?

Haywood: I do. I live in an area where the hospital did close: Normandy Community Health Care. They closed that hospital some years ago. When they closed that hospital, we were able to get the certificate of need back. We lost it. It may have been one of the only hospitals that has ever been able to get a certificate back, once they lost it. At this point, we’re struggling to hold onto it.

It’s a very difficult challenge for us in a minority area. You hear of this only in the black communities. None of this happens in the predominantly white areas. That’s where the new hospitals are being built. We also have a situation in St.

Louis, with a hospital called DePaul, a very fine facility here, and Christian Northwest, both of them are very fine hospitals, and they want to move all the babies from the area to what I call a baby factory, all the way out west, about 40 miles away. These girls who are going to have these babies, will probably have them on the highway trying to get to the hospital, because it's so far away.

EIR: Mr. LaRouche has charged that what's going on in these hospital closures in the largely African-American and Hispanic areas, is a form of genocide, or ethnic cleansing.

Haywood: Absolutely. I didn't say that, but that's the general idea.

EIR: Here in D.C., as you know, they want to close the hospital and build instead expensive condominiums and waterfront projects.

Haywood: And where do they want to put the uninsured and the homeless and the minorities?

EIR: Somewhere else.

Haywood: Have they designated a place?

EIR: No.

Haywood: There you go; no one does. None of these places have places in mind when they do it.

EIR: They just hope that these people will disappear.

Haywood: They hope they'll disappear, they'll find them somewhere corked out on the streets.

EIR: Is there anything more you wanted to say about the health crisis in St. Louis County?

Haywood: The big concern is, that — the reason they give us for this health-care crisis, is that there is no money. I'm there, looking at the situation, and I realize that our budget in the state of Missouri is limited this year, worse than it ever has been.

EIR: Because of the economic slowdown?

Haywood: Absolutely. There are a lot of things we need money for, and the only area that got full funding was education. Everything else got cut. We know we don't have a lot of money to work with, but certainly health care should be at the top of the burner between now and September. In the first week of September or so, the governor is going to call a special session, where we're going to come in and try to get prescription drug coverage for seniors through. We'll also meet to get transportation money through for the highways.

We did pass the women's initiative, in Missouri, where a woman can get an appointment with her gynecologist without having to go back to her primary care physician to get that done. But at this point, we're working against a lot of odds, because of the funding.

Bush, U.S. Are Facing 'Death-Penalty Penalty'

by Marianna Wertz

International pressure against capital punishment in the United States is greater today than at any time in history, and is helping to spark a renewed fight against the death penalty in the United States itself, despite the Presidency of "Chief Executioner" George W. Bush (as Governor of Texas, Bush put a record 152 men and women to death)—or perhaps because of it. The Bush Administration's resumption of Federal executions, after a 38-year hiatus (Oklahoma bomber Timothy McVeigh was executed on June 11, and Texas drug-trafficker Juan Raul Garza was executed on June 19), sparked a European-wide wave of protests, which greeted Bush during his tour there, which began the day that McVeigh was executed. Later in June, the Council of Europe denounced the United States for this barbaric practice, which is banned throughout Europe as a fundamental human rights violation, and urged a worldwide moratorium on executions (see article in *International*).

While a Federal moratorium or outright ban on executions are not likely in the current political climate, opponents of capital punishment are working feverishly to pass legislation which at least sets national standards to greatly restrict the practice. On June 27, the U.S. Senate Judiciary Committee, now headed by death penalty opponent Sen. Patrick J. Leahy (D-Vt.), held hearings on Leahy's proposed Innocence Protection Act, which has 222 co-sponsors, from both parties, in the House and Senate. The Innocence Protection Act, which failed to pass in last year's GOP-dominated Congress, would encourage states to provide good trial lawyers for defendants facing the death sentence, would afford Death Row inmates greater access to DNA testing, and would ensure that juries are aware that life without possibility of parole is an alternative to the death penalty in states where this is the law.

Wrongful Convictions

At the hearing, a nonpartisan panel of judges, former prosecutors and victims advocates, members of the Committee to Prevent Wrongful Executions, presented its new 66-page report, calling on states and the U.S. Congress to pass the provisions of the Innocence Protection Act, and also to limit the death penalty to people who intended to kill; and to eliminate it for the retarded, juvenile killers and those who are liable simply because they participated in a felony, such as a