

# ECO-IMPERIALISM: Green Power - Black Death

## Excerpts from Chapters

(Note: All endnotes and citations in original text have been deleted; asterisks denote missing text.)

### 5. Sustainable Mosquitoes – Expendable People

**F**iona “Fifi” Kobusingye is a 34-year-old designer and businesswoman from Kampala, Uganda. In early November 2002, saw her doctor because she felt fatigued – and discovered she had malaria. Her year-old niece shivered and cried all night, and suffers from impending kidney failure, because of malaria. Her sister was critically ill and hospitalized with malaria, and her mother came to Kampala to help tend everyone – but ended up in the hospital herself with malaria.

“Our family and community are suffering and dying from this disease, and too many Europeans and environmentalists only talk about protecting the environment,” Kobusingye says. “But what about the people? The mosquitoes are everywhere. You think you’re safe, and you’re not. Europeans and Americans can afford to deceive themselves about malaria and pesticides. But we can’t.”

\* \* \* \* \*

“My friend’s four-year-old child hasn’t been able to walk for months, because of malaria,” she out like a chameleon, her hair is dried up, and her stomach is all swollen because the parasites have taken over her liver. Her family doesn’t have the money to help her, and neither does the Ugandan government. All they can do is take care of her the best they can, and wait for her to die.”

\* \* \* \* \*

In 2000, say World Health Organization and other studies, malaria infected over 300 million people. It killed nearly 2,000,000 – most of them in sub-Saharan Africa. Over half of the victims are children, who die at the rate of two per minute or 3,000 per day – the equivalent of 80 fully loaded school buses plunging over a cliff every day of the year. Since 1972, over 50 million people have died from this dreaded disease. Many are weakened by AIDS or dysentery, but actually die of malaria.

\* \* \* \* \*

These are real deaths and real impacts – not just theoretical deaths, based on extrapolations from rodent studies (as in the case of Alar, the growth-regulating chemical that was the subject of a vitriolic attack and fund-raising campaign by the Natural Resources Defense Council and Fenton Communications in 1989), or hypothetical catastrophes (like flood and drought scenarios generated by certain climate change computer models).

They are due in large part to near-global restrictions on the production, export and use of DDT. Originally imposed in the United States by EPA Administrator William Ruckelshaus in 1972, the DDT prohibitions have been expanded and enforced by NGO pressure, coercive treaties, and threats of economic sanctions by foundations, nations and international aid agencies.

Where DDT is used, malaria deaths plummet. Where it is not used, they skyrocket. For example, in South Africa, the most developed nation on the continent, the incidence of malaria had been kept very low (below 10,000 cases annually) by the careful use of DDT. But in 1996

environmentalist pressure convinced program directors to cease using DDT. One of the worst epidemics in the country's history ensued, with almost 62,000 cases in 2000.

Shortly after this peak, South Africa reintroduced DDT. In one year, malaria cases plummeted by 80 percent; in two years they were almost back to the 10,000 cases per annum level. Next door, in Mozambique, which doesn't use DDT, malaria rates remain stratospheric. Similar experiences have been recorded in Zambia, other African countries, Sri Lanka, Bangladesh and elsewhere.

\* \* \* \* \*

No other chemical comes close to DDT as an affordable, effective way to *repel* mosquitoes from homes, *exterminate* any that land on walls, and *disorient* any that are not killed or repelled, largely eliminating their urge to bite in homes that are treated once or twice a year with tiny amounts of this miracle insecticide. For impoverished countries, many of which are struggling to rebuild economies wracked by decades of disease and civil war, cost and effectiveness are critical considerations.

Substitute pesticides are rarely appropriate. While carbamates work well, they are four to six times more expensive than DDT and must be sprayed much more often. Organophosphates are dangerous and thus not appropriate in homes. And mosquitoes have built up a huge resistance to synthetic pyrethroids, because they are used so extensively in agriculture.

For poor African, Asian and Latin American countries, cost alone can be determinative. Not only do they need their limited funds for other public health priorities, like safe drinking water, but they have minimal health and medical infrastructures. Every dollar spent trying to control malaria is a dollar that's unavailable for other public health needs. "DDT is long-acting; the alternatives are not," says Professor Roberts. "DDT is cheap; the alternatives are not. End of story."

DDT is not a panacea, nor a "super weapon" that can replace all others. Nor is it suitable in all situations. However, it is a vital weapon – often the "best available technology" – in a war that must be fought against a number of mosquito species (vectors) and constantly changing malaria parasites, in different terrains and cultures, and under a wide variety of housing and other conditions. Like any army, healthcare workers need to have access to every available weapon. To saddle them with one-size-fits-all solutions (tanks and pistols, bed nets and drug therapies) is unconscionable.

\* \* \* \* \*

New insecticides, chemicals and drugs are clearly needed. However their development and use are hampered by insufficient funding (in Africa), excessive reliance on the precautionary principle (particularly in Europe), and drug approval delays and the ever-present threat of multi-billion-dollar liability judgments (especially in the United States). Even if they might someday be a reliable substitute for DDT, tens of millions are likely to die in the meantime.

Simply put, the suggestion that alternatives to DDT exist now or will in the near future is little more than wishful thinking in its deadliest form – promoted by people who have staked out an ideological position against DDT anywhere, anytime and under any circumstances, and cling to their position like limpets to a rock.

Even the *New York Times* (which usually sides with radical environmental groups) now says the developed world "has been unconscionably stingy in financing the fight against malaria or research into alternatives to DDT. Until one is found, wealthy nations should be helping poor countries with all available means – including DDT."

And still anti-pesticide activists like Greenpeace, the World Wildlife Fund and the Pesticide Action Network are unmoved.

\* \* \* \* \*

