

War creates a humanitarian disaster in the Congo

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More than 2.5 million people have died as a result of the war in the Democratic Republic of Congo (DRC) according to a recent report. Most of the victims have been women and children who have died from disease and malnutrition.

“In several health zones we found a dearth of children under two years of age,” said Les Roberts, the epidemiologist who carried out the survey. Seventy five percent of children born during the three year war have died in some districts of eastern Congo.

Amid the careful listing of statistics, the report, commissioned by the International Rescue Committee, notes “the mortality experienced by all children in the surveys is extraordinary.” An estimated 60 percent of children are dying before their fifth birthday. These infant mortality rates, the report concludes, are “in no way normal or a background rate, but instead indicate a health crisis.”

The processes that have produced these catastrophic figures are revealed in another report produced jointly by Oxfam, Save the Children and Christian Aid. It describes the humanitarian crisis in the Congo as one of the worst in the world.

More than two million people have been driven from their homes and only half of these displaced people have received any outside assistance. Most of them are living with other families or have taken refuge in the forests.

The limited health services that were available before the war have broken down. Hospitals and clinics have been destroyed, medicines are unavailable and vaccination programmes disrupted—leaving children to die of common, preventable diseases. An estimated 18.5 million people have no access to health care.

Even in areas not directly affected by the war health care is minimal. Government expenditure on health is less than one percent of its total budget. In rebel controlled areas there is no budget for health care at all. Before the war there were only 2,056 doctors for a population of 50 million. The official state salary for a doctor is 4,700 Congolese francs a month, the equivalent of US\$14, but even this has not been paid recently.

Those health facilities that have survived the war are in a state of dilapidation. Few hospitals have access to clean water, so it is impossible to maintain the most basic level of hygiene. Maternal mortality rates are among the highest in the world. As many as 3,000 women are dying for every 100,000 live births. Even in the capital Kinshasa the death rate is 1,393 per 100,000 live births.

Epidemics of measles and whooping cough are sweeping through the population unchecked, killing thousands of children. Malaria is on the increase, particularly among displaced people forced to live out doors. More than half the recorded deaths in the DRC are the result of malaria. The country was already facing a tuberculosis epidemic before the war. No up to date figures are available, but malnutrition and the conditions of overcrowding in towns and cities as displaced people have sought refuge has worsened the situation.

The number of people with Aids is unknown, but an estimated one million children have been orphaned by the disease. Aids and other sexually transmitted diseases are on the increase as a result of the war, as women are forced into prostitution to survive.

Water borne diseases are being spread by contaminated drinking water. Less than half the population have access to a clean water supply. In rural areas the figure can be as low as three percent. Water treatment plants have broken down through lack of spare parts, chemicals or fuel. Thirty percent of all recorded diseases in Kinshasa are water related.

Health care has to take second place in most families' budgets to food. An estimated 16 million people are short of food as production in this fertile country has fallen and distribution networks have broken down. Many farmers have turned to mining in an attempt to make a living and production has been further reduced by cassava blight that has devastated crops of this essential foodstuff. The cost of basic commodities is 50-150 percent higher than in other African countries. A kilo of rice imported from Thailand is now almost the same price as a kilo of cassava, the local staple.

Displaced families are most at risk of malnutrition, but the whole country is affected. Kinshasa has a food deficit of one million tonnes. A growing number of people can eat only once a day and in many areas they may eat as little as every two or three days. Kwashiorkor, an illness caused by protein deficiency, has become widespread in the eastern provinces. The number of children born with cretinism is increasing because of the lack of iodine in the diet.

Before the war 40 percent of children were not in education. No reliable figures presently exist, but many school buildings have been destroyed by the war or have fallen into disrepair. Where schools exist few families can afford to send their children. Fees are the equivalent of US\$3 per term. For those that can pay the fees, the education they receive is limited by lack of books and equipment.

Since the war the DRC has fallen 12 places in the UN Human Development index to the 152nd position today. It was already the poorest country in the region, with a per capita gross domestic product of only US\$110 in 1998. More than half of the five million people living in Kinshasa survive on less than US\$1 a day.

Yet in terms of its mineral wealth DRC is one of the richest countries in Africa. It has immense reserves, many of which can be found nowhere else in the world. In addition the Congo river is capable of providing sufficient hydro-electric power for the whole of southern Africa. The land is fertile and well-watered, making the DRC a potential exporter of food.

The Congolese population has never benefited from their country's natural wealth. The region was savagely exploited by the Belgian colonialists. After independence in 1960, the US backed dictator Mobutu Sese Seko was allowed to plunder the economy as part of the West's Cold War strategy. With the collapse of the Soviet Union, Mobutu was unceremoniously removed from power by a US backed rebel movement, led by Laurent Kabila, who plunged the country into war.

Since the assassination of Laurent Kabila, his son Joseph Kabila has moved to placate Western interests that had become impatient with his father. He has broken the diamond monopoly which his father gave to International Diamond Industries, the Israeli company, and has floated the Congolese franc, effectively dollarising the economy.

In return the international donors have agreed to aid packages. The European Union has offered 28 million euros (US\$23.7 million) to rehabilitate the justice system and a further 120 million euros (US\$101.6 million) if Kabila continues talks with the rebel forces and opposition leaders. Belgium, the former colonial power, has agreed to resume aid and along with Canada, has chaired a World Bank meeting of donors. This aid is not aimed at alleviating the

conditions of the people of the DRC. These small sums of money are intended to keep Joseph Kabila on track with the Lusaka accord, which has brought an official end to the war. Under the agreement Uganda and Rwanda are to withdraw their troops and the rebel forces they back are to take part in a political dialogue so that the central government in Kinshasa can once again resume control of the entire country, which is at present divided into three.

The amount of money involved is barely sufficient to compensate for the 14 percent decline in the economy or the US \$38.9 million budget deficit, the equivalent of half of all government expenditure. But for Kabila, who has no secure political base, these paltry sums of money are an incentive for him to open up the DRC's mineral wealth to the transnational companies. Without this foreign aid and the military support he receives from Angola and Zimbabwe, he could not survive in power.

The effect of the IMF-backed economic measures he has introduced have added further misery to the lives of ordinary people. Fuel prices have risen 70 to 280 francs a litre. Further measures are in the pipe line. They include cutting the budget deficit, removing controls from interest rates and introducing new mining laws. Their effect will be to push up unemployment.

Oxfam and the other charities have timed publication of their report to coincide with a visit of UK Overseas Development Minister Claire Short to the DRC. But rather than resulting in more humanitarian aid, the outcome of Short's visit will be further IMF measures as the Western powers step up their drive to control the DRC's mineral wealth. Her visit reflects the fact that pressure for the Lusaka accord has come mainly from the USA and France, rather than Britain. When Joseph Kabila came to power he made a point of visiting the USA, France and Belgium, but pointedly ignored the UK. Short is hoping to make some capital out of the dissatisfaction of Uganda and Rwanda and the rebel forces they back with the agreement. The area which Rwandan forces control contains important minerals including tantalum, which is used in mobile phones and has become immensely valuable.



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