

# **Black Survival in Crisis: The Plight of Afrikans in the Globalisation of Western (European) Culture**

Presented by

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## **Introduction**

Culture can be defined as the way of life of a people. Every culture contains values and ideals that are taught to their children as definitions of that culture. Hence, culture is what we teach our children to become. However, we must realize that different cultures focus and develop different approaches to the same problems in different ways. This focus includes not only the history of what values and images are taught as ideal, but also who does the teaching. The worst thing that can happen to a culture is to have its history told by its conquerors.

Afrikan culture and worldview is based upon the relationship between human beings and their environment. This relationship is based on balance, unity, harmony, interdependence and an all-encompassing optimistic spirituality. Ten thousand years before the Chinese Taoists taught of these metaphysical principles in terms of yin and yang, Afrikans along the Nile and the Niger and their kin people had mapped out the universe; intuited the divine knowledge of Shu and Tefnut; and expressed it in their symbols, metaphors, parables, sacred histories, scriptures and sacred rituals. The Afrikan way of life is in sharp contrast to that of European or western culture in that Afrikan culture is based on nature, the community and the environment. European culture is built on science and technology, driven by individualism, greed and profit.

Western culture has brought forth the world's greatest technologies such as computers, the automobile, television, medical diagnostics, airplanes, space flight, nuclear energy, etc. Western European cultures control the manufacture of nearly all pharmaceutical drugs and pesticides. Using the principles of genetic engineering, they promote the genetic modifications of crops, food and animals, leading to patents on plants and other living things.

They develop and produce biological and chemical weapons. They create designer diseases. Western Europeans are producing animal clones for entry into the food chain and firmly believe that one day, they will be able to clone themselves. Through the use of mass media, these predominantly white countries are seeking to impose their culture on every other culture around the globe. We should ask ourselves, "Has the rise of Western civilization and culture been a net benefit to the world" and if so, how so? Can the benefits that Afrikans obtain from their assimilation of Western culture be measured as a function of economic innovation or technological expertise? Is it related to the development of political structures, or philosophical thought, or perhaps by military prowess and superiority?

Western European culture is oppressive to other cultures that are contained within its borders. This oppression extends to the entire living world as well. For instance, the United States embraces a culture of death to include: birth control, abortion, sterilization, euthanasia, eugenics, genetically engineered diseases, chemical and biological warfare, nuclear warfare, military domination, and terrorism. When it does support life, it does so in unnatural ways, arrogantly challenging and circumventing "Nature" for supremacy. Through its exploitation of material resources, it is unsupportive of the living world. Therefore, as a system, it is unsustainable. Thus, Afrikans in the Diaspora find themselves at an immediate disadvantage within the mainstream European cultures of North and South America, the Caribbean, Europe, and Australia.

The desire of the West to impose its economic and cultural will upon the rest of the planet is not new. For centuries, Afrika and the world have been terrorized and plundered by numerous European powers. Disregard for the interests of people with different skin colour, cultures, philosophies, religions, languages, ways of life, and socio-economic structures is also not new. All European empires built their fortunes by plundering the world. The West behaves as if it has an inherited, but undefined right to profit from the misery of the rest of the world. Many nations of the world had to give up their own culture, their religions, even their languages, and convert to a Western set of beliefs and values that are defined as "civilized." Afrikan people did not initiate the large scale exploitation of natural resources such as those fostered by western cultures. In fact, many of the present problems of these countries can be traced to the colonization and industrialization that resulted from contact with western influences. No official apology has ever been issued; no compensation has ever been paid.

It is our firm belief that the risks of assimilating western European culture can best be measured by examining the quality of life and health of Afrikan people. Viewed from this standpoint, it is clear that the survival of the Afrikan race as a whole has been severely compromised. Western medicine is based on European culture and physiology. The chronic ailments and diseases that affect Afrikans in the Diaspora, i.e. cancer, diabetes, heart disease etc., are generally based on improper diet and lifestyles, poverty, lack of health insurance and lack of access to appropriate and adequate health care services. As a result, Afrikans in the Diaspora have a much lower quality of life than their European counterparts.

By design, Afrika is currently plagued with natural and unnatural occurrences of communicable, parasitic and infectious diseases, such as AIDS, malaria, polio, etc. With their

corresponding vaccinations and pharmaceutical drugs, these diseases are devastating the continent's Black population. The AIDS/Malaria genocide taking place in Afrika is painting a clear pattern of death, of cultural, economic and agricultural destruction to be followed by encroaching Western political and military control.

It would be very difficult, however, to review the overall health of Afrikan people without first examining the role of melanin in black physiology. Melanin, the biochemical molecule that gives Black/Afrikan people our characteristic colours and defences, requires a type of dietary nutritional support that is not readily available in most western European cultures. There are not many published research studies on melanin as it relates to health and the environment; however, the studies that are available to us were written and published by Afrikan people.

Within the last 100 years, the technological advances made in medicine, pharmaceuticals, genetic engineering, biotechnology, food technology, agriculture, chemicals and fast food, have created stressful and chronically sick lifestyles that are now fully integrated into western European societies and cultures. Many of these "advances" are detrimental to the original biological makeup of man and to the global environment as a whole. In view of the increasing globalisation of western European culture, particularly on the Afrikan continent, it is imperative that we acquire knowledge of our unique biological makeup and our spiritual culture. We must learn to eat the foods that are uniquely beneficial to us. We must not only educate ourselves on our physical and spiritual uniqueness, but also on the health aspects of living in toxic environments. Afrikans were the healthiest people on earth. What happened?

### **Melanin and Afrikan Physiology**

The science of Afrikan biochemistry is based on the melanin biochemical molecule. Melanin is found not only in the skin, hair, and eyes, but it is also contained in many other vital organs of the body as well. It is in the nervous system, the spinal cord, the glands, the brain, the DNA, the muscles, intestines, heart and liver. Its presence can be found throughout nature and is also found in many of our foods, such as plants, seeds, fruits, and vegetables. It is found in animals, in the soil, in the bark of trees, rivers, streams, and seas.

Melanin in its most concentrated form is black. It is black because its chemical structure will not allow any energy to escape once that energy has come in contact with it. Melanin is a very old, extremely stable, biochemical polymer composed of smaller chemical species in varying amounts, e.g. tyrosine, tryptophan, phenylalanine, serotonin, melatonin, dopamine, norepinephrine, and epinephrine also called adrenaline. It responds to and absorbs light, sound, and electrical energy and uses this energy in the body as food. Melanin can convert light energy into sound energy and back again. It has semiconductive properties outside the body. This means that it behaves like a conductor at times and may conduct electricity. It also behaves like an insulator in that it will not allow electrical current to pass through its structure, similar to rubber and plastic insulators. Melanin can bind and release many of the known elements that are essential for proper body metabolism. It can also produce or neutralize radiation or free radicals (antioxidant effect) and is generally present at the site of tissue repair, regeneration of cuts and wounds, and infectious diseases.

Melanin in the human body is synonymous with chlorophyll in plants. Chlorophyll functions as a converter of solar energy and is essential for maintaining the vitality of the plant. Thus, no flora without chlorophyll exists on this planet. White leaves do not exist. Green pigment chlorophyll is necessary for all vegetation. Melanin, on the other hand, is a converter of physical energy. It is responsible for manufacturing and sustaining human life and it keeps the Black human in constant contact with the natural, radiant energies of the Universe.

Melanin is important for proper human physiology. On the molecular level the electrons in melanin molecules orbit and rearrange themselves. They undergo what is called resonance. This rearrangement of electrons causes certain energy shifts in the body. This energy is then used in metabolism and cellular organization. Melanin depends on nitrilosides to keep itself clean. When we eat synthetic or overcooked foods, we don't get enough B vitamins and a lot of toxins are not removed. When melanin becomes toxic, it adversely affects the biochemistry such that the individual becomes susceptible to a host of diseases. As melanin becomes toxic, it is blocked from making the energy changes that are needed and this can result in dysfunction and disease.

According to Dr. Laila Afrika, "Blacks have specific nutritional and dietary needs. These nutritional needs arise because we have specific bodily differences as compared to other races and cultures. For example, over 70percent of Black people (worldwide) cannot digest cattle milk. In addition, the intestinal flora (bacteria, virus, fungus and yeast) that naturally live in Black people's intestines are unique to Blacks. "Subsequently, Blacks assimilate food in the intestines differently. Also, despite centuries of living in countries outside of Afrika, their intestinal flora are the same as it was in their ancestor's stomachs 2,000 years ago. Melanin (black colour pigment) is obviously most abundant in Blacks. This melanin aids in protecting Blacks, from the ultraviolet rays of the sun. It also increases the speed of nerve and brain messages which are transmitted between the left and right hemispheres of the brain and all signals transmitted throughout the bodily nerve network. Black people's blood crystallizes differently from white people's blood. These are some of the many reasons why Blacks have unique nutritional, medical, and dietary needs."

In the past, melanin was considered by "western scientists" to be a waste product of body metabolism and served no useful function within the body. Recently however, scientists have discovered that melanin is a refined, complex, multifunctional chemical that has a wide variety of important functions within the human body and in the environment. All aspects of our lives are centrally involved and controlled by melanin. One property exhibited by melanin, which is critically important to the well being of the Afrikan, is its ability to combine or chemically react with various drugs and chemicals. Melanin is a storehouse of neurotransmitters (brain signals) and releases them into the body when other sources are depleted. Toxic drugs and chemicals such as pesticides, food additives, recreational drugs and pharmaceuticals can alter and change melanin's chemical structure, its electrical charge and electronic configuration thus altering many life-supporting activities. Therefore, it is important that we keep all melanin centres and organs functioning properly for good mental and physical health.

## **Health of Afrikans in the Diaspora**

Afrikan populations in the Diaspora are dying from chronic illnesses and diseases. Black/Afrikan Americans, for example, have the highest death rates of any of America's racial and ethnic groups. Only a small part of this phenomenon can be attributed to inequalities in economic status, education, and occupation. The racial differences in the death rate persist even in studies where individuals with similar income and educational levels are compared. This difference occurs for all of the major causes of death with the exception of suicide. In the United States, Blacks have the lowest suicide rate than any other ethnic group, but we have the highest death rate for homicides and accidents. Stress and post traumatic stress syndrome play major roles, as it is much harder to be a black person than a white person in this society.

Genetic differences play an important role in our biological makeup. The U.S. Center for Disease Control's 2001 Health Statistics shows that the infant mortality of Black children in the States is 2.5 higher than white children. Blacks are 1.3 times more likely to die from heart disease than whites. They are 1.3 times more likely to die from breast cancer, 2.8 times more likely to die from prostate cancer and 1.4 times more likely to die from colon cancer. Sickle cell anaemia occurs in approximately 1 in every 500 births. Approximately 2 million Blacks in the United States carry the sickle cell trait. However, our greatest disadvantage is in deaths from HIV infection, for which the risk to blacks is over seven times the risk to white Americans and the numbers are rising. Government research shows Black women in the U.S. are 23 times as likely to be infected with the AIDS virus as white women and account for 72 percent of all new HIV cases among women in 29 US states. In 2001, death rates among Afrikan-Americans exceeded those of the white population by 33 percent.

Blacks living in Western cultures are suffering from a variety of chronic endocrine problems and degenerative diseases directly attributable to diet such as: insulin resistance, excessive intake of refined carbohydrates and processed foods, reduced intake of raw vegetables and fruits, lack of proper fat in the diet, and lack of exercise. We indulge in high carbohydrate foods that have been processed, refined, synthesized, artificially-flavoured, and loaded with chemical preservatives. Blacks in the U.S. are 1.4 times more likely to have diabetes than whites. One of the leading culprits is the poisonous foods eaten by Blacks called "soul food": ham, potato salad, French fries, macaroni and cheese, white rice, pork chops, chitterlings, pig feet, and hog maws. All of these foods are cooked in or laced with pork fat, lard, milk, eggs, butter, salt, spices, and lots of refined white flour and white sugar. We are high consumers of fast food, notorious for MSG (monosodium glutamate), salt, Nutrasweet, corn syrup, food additives, artificial colours, chemically processed and genetically modified food. To compound the problem, most of the natural vitamins, trace elements and enzymes are removed from our foods during the manufacturing process. All of these foods are not compatible with our biochemical makeup and are responsible for the many diseases that we suffer from today.

Afrikan health scientists have discovered that many of the intricate biochemical processes that govern the body can be influenced by the presence or absence of certain vitamins, minerals, or nutrients. If the ailments that Afrikan people suffer from today are based on our

improper diet and lifestyle, is it possible that hypertension, heart disease, cancer, diabetes, rheumatic diseases, much of our gastrointestinal disorders, sickle cell anaemia, and skin disorders are all directly or indirectly related to deficiencies in our diet?

According to Dr. Tariq Sawandi, author of a treatise on “Afrikan Biochemistry”, “Nitrilosides or (beta-cyanogenetic glucosides)-rich plants and foods are a vital part of an amazing biochemical process in the Afrikan body type. Referred to commercially as laetrile, an anti-cancer preparation, the compound nitriloside occurs abundantly in nature in over twelve hundred edible plants. It is found in grasses, sorghum, millet, cassava, yams and many other Afrikan foods, that have been removed from the diets of western societies. Nitrilosides are non-toxic, water-soluble, and completely normal to and compatible with human metabolism. It was an essential food compound in the diet of our Afrikan ancestors. For centuries, nitriloside-rich plants were used by Afrikans as a food and medicinal agent without manifesting any side effects. This diet has been one of the deciding factors that protected the integrity of the biochemical processes in Afrikan people. Preventing the formation of cancer cells appear to be closely related to the traditional Afrikan diet.”

The Afrikan diet is primarily vegetarian. We should eat very little meat or dairy products. Foods that once provided Afrikans with ample amounts of natural nitrilosides, have been replaced by foods almost totally devoid of this factor. Afrikan physiology evolved over millions of years to be in the best possible harmony with the diet our ancestors were eating. If we were to eat now approximately what we ate then, our bodies will automatically tend to resume the harmony of their natural state. In other words, our immune systems would function at its highest level, if we give it the essential food nutrients it requires, in the form that it craves.

### **The State of Western Medicine**

The definition of “medicine” is that which helps, heals or cures sickness and disease. If that is the case, then we are witnessing a breakdown of western European systems to cure diseases derived from both natural and unnatural causes. Health care spending in the United States reached \$1.6 trillion in 2003. Considering the enormity of this amount; the US should have the best medicine in the world. They should be reversing disease, preventing disease, and doing minimal harm. However, careful review shows the opposite.

Western medicine does not take into consideration the following monumentally important aspects of a healthy human organism: stress and how it adversely affects the immune system and life processes; insufficient exercise and excessive caloric intake; highly-processed and denatured foods grown in denatured and chemically-damaged soil; and exposure to tens of thousands of environmental toxins. Instead of minimizing these disease-causing factors, medical technology and their overuse of pharmaceutical drugs have actually caused more illnesses than they have cured. For example, immunization by vaccination has been the means of spreading some of the most fatal and infectious diseases, such as leprosy, syphilis, tetanus, tuberculosis, smallpox and presently AIDS, polio and meningitis. Health is the ideal state to be sought, not disease.

Vaccination is the implantation of disease; that is its admitted purpose. Disease-causing agents in vaccines are genetically engineered and grown in putrid mixes of blood, tissue and other substances from: monkey kidneys, chicken and duck embryos; dog, horse, rabbit, mouse, sheep and cow tissues. Toxic substances, such as aluminium, thimersol, formaldehyde, carbolic acid (phenol), antibiotics, acetone, alum, glycerine, etc. are also present. Vaccines, by their very nature, can actually render people more susceptible to disease by depressing vital energy and diminishing the body's natural resistance to disease.

The RNA & DNA from 11 species contaminate vaccines. Human tissue culture containing cells notably from the uterine cancer of Henrietta Lack, and human cells obtained from the dissected organs of aborted fetuses, can also be found in human vaccines. Henrietta Lack, who died in the 1960's, was an Afrikan American woman whose cancer cells (called HeLa cells) were laboratory-proliferated and now contaminate cell lines in research labs around the globe. Back in the 1950s, HeLa cells were used to test polio vaccines. Other research uses of her cancer cells helped to create the fields of molecular biology and virology.

If immunity from all diseases is to be realized through the attainment of health and not by the propagation of disease, then it is not necessary to set up a disease in a healthy organism to protect against another. Such procedures are in violation of the basic principles of hygiene and sanitary science.

In "The Hygienic System", published throughout the 1930's and 40's, Dr. Herbert Shelton writes, "The whole of the modern medical practice of vaccine, serum and antitoxin therapy is based upon the **supposition** that the body manufactures substances called anti-toxins, antibodies, antigens, etc., which are capable of meeting and destroying toxins that get into the body. The idea **seems** to be sound, although it is possible that the work of destroying such toxins is that of the detoxification carried on by the liver, and lymph glands, etc. Anti-toxins, antibodies, antigens, etc., have never been isolated. They have only been **assumed**, while the practice based upon their assumed existence has been both a failure and disaster. However, this may not be due to their non-existence. If they exist, it is impossible to separate them from the proteins of the animal's blood (used in making vaccines) and these proteins when injected directly into the blood of another animal (or human being) are very poisonous. Besides this, there is no evidence that the anti-toxins of one species can be made use of by another species. Where vaccines are employed, it constitutes the introduction of actual disease matter into the blood."

Many of the world's greatest thinkers, scientists, statesmen and even doctors have condemned vaccinations as being crimes against humanity, a fraud promoted for private gain, an insult to race and a blot upon the name of civilisation Yet, this treacherous practice of blood pollution has been adopted by enlightened governments and forced on the protesting population for profit. Moreover, any information concerning their development, drug interactions and/or function in the eradication of disease is obstructed, suppressed and discredited by multinational corporations, having clear economic interests. The pharmaceutical industry makes over one trillion dollars from selling drugs and vaccines for ongoing diseases. The natural purpose and driving force of this multinational industry is to

increase sales of pharmaceutical drugs for ongoing diseases and to find new diseases to market existing drugs.

By its very nature, the pharmaceutical industry has no interest in curing diseases. Most pharmaceutical drugs are developed primarily to relieve symptoms, not to cure diseases. Vaccines were developed to immunize against disease, but can also be used to spread disease. Economic interest is the main reason why no medical breakthrough has been made for the control or elimination of the most common diseases and why these diseases continue like epidemics on a worldwide scale. They withhold public information about the effects and risks of prescription drugs and vaccines, and life-threatening side effects are omitted or openly denied.

For the same economic reasons, the pharmaceutical industry has formed an international cartel by the code name "Codex Alimentarius" with the aim to outlaw any health information in connection with vitamins and to limit free access to natural therapies on a worldwide scale. In order to assure the status quo of this deceptive scheme, pharmaceutical lobbyists are employed to influence legislation, control regulatory agencies, and manipulate medical research and education. Expensive advertising campaigns and PR agencies are used to deceive the public. Millions of people and patients around the world are defrauded twice: a major portion of their income is being used to finance the profits of the pharmaceutical industry. In return, they are offered a medicine that does not even cure. Many Blacks in the U.S., like their counterparts throughout the Diaspora, cannot afford pharmaceutical drugs to even alleviate the symptoms of disease.

### **Western European vs. Traditional Afrikan Medicine**

In all countries of the world, there exists traditional knowledge related to the health of humans and animals. Traditional medicine might also be considered as a solid amalgamation of dynamic medical know-how and ancestral experience. Traditional Afrikan medicine was founded upon holistic principles. This science pre-dates Egyptian medical science and is between 20,000 and 100,000 years old. In fact, it is the oldest medical science on the planet. Afrikan health practitioners were devoted to teaching individuals to improve their physical, mental, and spiritual health through preventative lifestyles. This philosophy is consistent with the laws of nature and is based upon a belief in the body's natural ability to heal itself, when given the appropriate herbs, seeds, and foods.

Western European health science is incompatible with the Afrikan body type. Western doctors believe that the body destroys itself with disease and that harmful bacteria and viruses are trying to kill good bacteria and viruses. Therefore, they must give toxic, poisonous drugs and vaccines to stop the body from killing itself. The Afrikan system of health disagrees with the idea of germs being the sole source of disease. The human body supports millions of micro-organisms to help keep our immune systems healthy, which enables us to lead healthy lives. The ancient Afrikans believed that a healthy immune system is responsible for the health and healing of the human body. From this premise, health problems occur as the result of "something lacking" in our nutrition, leaving the human body vulnerable to disease. Afrikan medicine is a nutrient based system. A diet and lifestyle

deficient in vital nutrients makes us susceptible to opportunistic infections, and cellular disorganisation (cancer).

In the past, modern science has considered methods of traditional knowledge as primitive. During the colonial period, traditional medical practices were often declared illegal by the colonial authorities. Consequently doctors and health personnel have continued to shun traditional practitioners despite their contribution to meeting the basic health needs of the population, especially the rural people in developing countries. Developing countries have begun to realise that their current health systems are dependent upon western technologies and upon western medicines that are expensive and whose supply is erratic. In Afrika, traditional healers and herbal remedies made from plants play an important role in the health of millions of people. Afrika has a long and impressive list of medicinal plants based on local knowledge.

The multinational drug companies are helping to place a ban on natural herbal products as well to monopolize the vitamin and herbal remedies as their limitless source of revenue. These same multinational companies have introduced diseases that can destroy the plants and herbs we use as natural sources of nutrients, so that we can become more dependent on their products. These are the same multinational corporations that have a monopoly on the development and production of pesticides and herbicides, which poison the environment and produce changes in our foods and in our bodies. They score a double purpose of selling their products and reducing our population. Volatile, synthetic, pesticide poisons are the largest group of poisonous substances purposely added or disseminated throughout our environment. All of the major pesticide producers are also in the health/pharmaceutical, chemical and the biotechnology/agriculture industries as well. So as you are poisoned, polluted, sicken and begin to die from their synthetic chemical poisons, they will sell you synthetic chemical drugs to survive.

## **Western Technology, Agriculture, and Food**

### **Pesticides**

Studies show that we are being constantly exposed to a cocktail of pesticide residues in the foods we eat. Current safety levels do not take into account the impact of the “cocktail effect” of multiple residues in particular foods, or in our overall diet. Not much research has been conducted into the safety of pesticide mixtures, but some studies have highlighted potential risks to the immune system or behavioural changes. Environmental studies have shown that pesticides can cause immune systems to collapse, a finding that could help explain the rise in human autoimmune diseases, particularly in Blacks. In human terms, impaired immune systems could lead to people dying of common colds or other infections that a healthy person would be able to resist easily.

Glyphosate, for example, is a broad-spectrum herbicide, widely-used to kill unwanted plants in a variety of agricultural, lawn and garden, aquatic, and forestry situations. It ranks among the top ten herbicides used in the U.S. and Canada, both in agricultural and non-agricultural situations. Glyphosate-containing products are acutely toxic to animals, including humans.

Symptoms include eye and skin irritation, cardiac depression, gastrointestinal pain, vomiting, and accumulation of excess fluid in the lungs. The herbicidal action inhibits the biosynthesis of aromatic amino acids. Aromatic amino acids such as **phenylalanine, tyrosine, and tryptophan** are used in the synthesis of proteins and are essential for the growth and survival of most plants. These amino acids are also essential to the human diet because humans cannot synthesize these amino acids and rely on their foods to provide these compounds. Phenylalanine, tyrosine, and tryptophan are only a few of the many chemical precursors of melanin.

Glyphosate residues have been found in a variety of fruits and vegetables and can be detected long after treatments have been made. Lettuce, carrots, and barley planted a year after glyphosate treatment still contained residues at harvest. Glyphosate reduces the activity of nitrogen-fixing bacteria. These bacteria transform nitrogen, an essential plant nutrient, into a form that plants can use. It also reduces the growth of beneficial fungi that help plants absorb water and nutrients and increases the susceptibility of plants to diseases. Glyphosate exposure damages or reduces the population of many animals, including beneficial insects, fish, birds, and earthworms. The impact of glyphosate on wildlife should serve as an indicator of potential human health problems. Polyacrylamide, a chemical additive in glyphosate, is being studied for its contribution to the presence of acrylamide in cooked foods. Acrylamide is a potent nerve toxin in humans that affects male reproduction and causes cancer and birth defects in animals.

The herbicide fumigation of vast areas of Ecuador and Colombia, funded by the U.S. in the fight against drug traffickers, has placed populations in developing countries at risk. Aerial herbicide spraying destroys many types of crops and wild plants and it has a drastic impact on agriculture, rural peoples, and on wildlife. The U.S. and other western European countries have already bequeathed a toxic legacy to some of the poorest nations in Africa. Poisonous pesticides sold for profit or given as aid are now rotting away in dump sites from Northern India to South America. Many of these pesticides are actually banned in the West. There are thousands of sites posing a deadly risk, both to those around them and to the global environment. Overexposure to pesticides can over stimulate the nervous system, cause flu-like symptoms, blurred vision, increased sweating, nausea, vomiting, muscle twitches, decreased coordination, and in severe cases, death.

Pesticides and herbicides are anti-life. Like chlorophyll, melanin is a living molecule. Many of the toxic chemicals in these compounds can chemically interact with melanin, thus causing physical, hormonal and biochemical imbalances in melanated people. Research suggests that pesticides and herbicides actually interfere with the production of chemicals called flavonoids, which are good for our health. Flavonoids are polyphenolic compounds that have potent antioxidant activity and act as a plant's natural defence. They are produced in plants in response to environmental stressors such as insects or competing plants. For example, the phenolic acids in shea butter, called cinnamates, are more absorptive of UVB rays, which can be very damaging to skin and is responsible for sunburn and cancer. These phenolic acids help to protect melanated skin. Flavonoids and the anti-cancer compounds, nitrilosides, are essential for building and maintaining our melanin centres.

## **Antibiotics and Growth Hormones**

Microbial food-borne illnesses are the largest class of emerging infectious diseases. The use of antibiotics and hormones in agriculture is growing. Their prolonged use on farm animals has resulted in cancerous tumours and unmanageable bacterial and viral infections in animals. Of particular concern are the antibiotics and hormones fed each year to hogs, chickens and cattle that are specifically designed to reduce their bacterial populations and to promote faster growth for food production. By some estimates, these "sub therapeutic" doses constitute 8,000 tons of antibiotics a year. One major important fact is that the bacteria, these antibiotics are designed to destroy, are growing increasingly resistant to antibiotics and at a faster pace, than if these antibiotics were only used to treat animals diagnosed with disease. This creates super-bugs and super infections. Studies show that giving children antibiotics in the first six months of their life is linked to an increased likelihood of allergies and asthma. In response to increased warnings that the widespread use of antibiotics on farms is making antibiotic drugs less effective for treating people, a well-known fast-food chain directed some of its meat suppliers to stop using antibiotic growth promoters. Animal diseases are becoming more resistant and these diseases are now capable of crossing over to other animals and finally to human species. SARS, Bird Flu, West Nile virus, and Mad Cow are just a few of these diseases making the headlines.

Bovine Growth Hormone (BGH), a naturally occurring hormone produced by milk cows, closely resembles the natural growth hormones in human children. The presence of BGH in milk is shown to significantly elevate hormone levels in people, creating a host of growth problems. Recombinant BGH (rBGH) is an unnaturally occurring, genetically engineered hormone that increases a cow's milk production by an estimated 15-25 percent. This increase in milk production causes the animals to suffer from mastitis, a bacterial infection of the udder and widespread occurrences of cystic ovaries and disorders of the uterus. Bacterial mastitis is a serious disease of dairy cattle and can be passed into milk for consumption.

Over a quarter of U.S. milk cows are in herds supplemented with rBGH. The vast majority of the country's 1,500 dairy companies mix rBGH milk with non-rBGH milk during processing to such an extent that an estimated 80-90 percent of the U.S. dairy supply is contaminated. Girls in the U.S. and Canada are beginning to menstruate at younger and younger ages. Consumers are not told that supplementing their diet with additional growth hormones is causing secondary sex characteristics to appear earlier in young children, particularly girls. The public also isn't told that rBGH-injected cows produce milk with exceedingly high levels of Insulin Growth Factor-1 (IGF-1), a cancer promoter that occurs naturally in the human bloodstream but generally does not result in tumours. Recent research has directly linked elevated levels of IGF-1 to increased risk of breast and prostate cancer.

The highest rates of hormone-dependent cancer, such as cancer of the breast, endometrium, ovary, prostate, testes and colon are also found in North America. Hormone-treated meat consumption has been considerable in the U.S. and Canada in the last 20 years. Fifty years ago the incidence of breast cancer risk among U.S. women was one in twenty. It has grown to one in eight women as of 2001. Black women are 1.3 times more likely to die from breast

cancer than white women. Breast cancer is the leading cancer disease among all women in Canada.

Afrikan people have a higher incidence of lactose intolerance and suffer from a variety of digestive symptoms that result from consuming milk and other dairy products, including gas, bloating, diarrhoea, constipation, and indigestion. In total, there are an estimated 50 million lactose intolerant adults in the U.S., including 15 percent of the white population, 70 percent of the black population, and 80 to 97 percent of Asian Americans, Native Americans, and Jews of European descent. People of colour lack the necessary enzymes to properly digest cow's milk and are thus unable to ingest milk for its "enriched" vitamin D content. Vitamin D, a vitamin the body needs to maintain normal blood levels of calcium and phosphorus, is found in the skin of melanin-dominant individuals after sun exposure. Less "melanated" people require the intake of dairy products to secrete vitamin D. Vitamin D deficiency leads to thin, brittle bones in adults and rickets in children.

### **Genetically Modified vs. Organic Foods**

Genetic engineering involves taking genes from one species, and inserting them into another to transfer a desired trait or character. Eighty two percent of all genetically modified food is produced in the U.S. and Canada. Biotechnology allows corporations to genetically modify plants for the purpose of obtaining patents that give corporations the exclusive rights over these crops as well as to the pesticides, fertilizers, and other chemicals involved in production of these crops, allowing corporations to amass huge amounts of money. Hence, biotechnology is about making money for the biotech industry. It is now possible for scientists to introduce genes taken from bacteria, viruses, insects, animals or even humans, into plants, animals and humans. None have been independently tested for long term health safety. In fact, scientists have little understanding of how the different characteristics of DNA interact with each other, especially across species boundaries.

Genetically engineered foods already on the market in the US and Canada include corn, soybeans, wheat, potatoes, squash, tomatoes, chicory and papaya as well as milk and other dairy products from cows treated with a genetically engineered growth hormone. A variety of enzymes, produced from genetically engineered micro-organisms, are used throughout the food processing industry. Trade in genetically engineered food, crops and micro-organisms are dominated by a handful of multinational corporations, the same corporations involved in the manufacture of pharmaceuticals, nutraceuticals, pesticides and other chemicals. Genetically engineered foods produce toxic reactions as well as food allergies, both of which are seriously affecting children. Genetically engineered micro-organisms can unpredictably kill other living things and genetically engineered plants can harm wildlife.

More than two-thirds of conventional crops in the United States are now contaminated with genetically modified material, dooming organic agriculture and posing a severe future risk to health. Because of the contamination, farmers unknowingly plant billions of GM seeds a year, spreading genetic modification throughout North American agriculture. This could become even more of a danger to health with the next generation of GM crops, bred to produce pharmaceuticals and industrial chemicals. Biotech companies are experimenting

with corn, soybeans, tobacco, rice and sugar crops as a cheaper way to mass produce medicines to treat a range of human ailments. Americans and Canadians have been eating genetically modified foods for more than a decade. Bread, soy beans, cooking oil, even infant formula already contain genetically modified ingredients, something that U.S. labels don't reveal.

Multinational corporations use genetic engineering to monopolize the seed supply and raise the cost of farming so that the agricultural industry can consolidate its control worldwide. Billions of people on the planet are supported by farmers who save seeds from crops and replant these seeds the following year. Most farmers cannot afford to buy new seeds every year, so collecting and replanting seeds is a crucial part of the agricultural cycle. This is the way food has been grown successfully for thousands of years. Traditional agriculture methods, such as cross-pollination or selective breeding, are based on natural reproductive mechanisms. These traditional methods will cross only one kind of plant or animal with a similar species. Fruits and vegetables grown organically show significantly higher levels of cancer-fighting antioxidants than conventionally grown foods. Consumer interest in organic foods, produced without use of antibiotics, pesticides and growth hormones, has ballooned in recent years due to increasing concerns about health and food safety.

One of the arguments, favourable to producing commercial genetically engineered crops, is that it will produce more food to feed the hungry with less need for pesticide use. However, genetically engineered crops are not producing more food nor are they reducing the use of chemicals. While the hunger argument is the most frequently used argument to promote and push genetic engineering and genetically modified foods, it has more to do with corporate hunger for profits than poor people's hunger for food. The technology of genetic engineering is not about overcoming food scarcity, but about creating monopolies over food and seed, the first link in the chain and over life itself.

The latest development in genetic engineering biotechnology is called 'terminator technology', which render seeds infertile to guarantee the multinational seed corporations' yearly sales. If terminator crops become widespread, it would be easy for a country or a company that controls the technique to stop sales to a specific country or region for political or economic purposes. After some years of planting such seeds, only limited quantities of other seeds would be available, thus agriculture would be paralysed, paving the way to serious economic crisis and/or famine. On the face of good intentions, genetic engineering of food crops is being used to crush people of colour.

### **Food Weapons**

In the past decade, genetically engineered plants have been investigated as a means to produce and deliver vaccines. The production of vaccines or other bioactive substances in edible crops is called "biopharming". There are already a variety of research reports demonstrating that genetically-engineered plants can elicit an immune response in humans and clinical trials on humans are currently underway to test vaccines produced in edible crops. These edible vaccines may be isolated from the plant for further processing or directly delivered to the patients by consumption of the engineered plant. Vaccines are only one type

of bioactive substances being produced in edible crops. Several US companies are using genetically engineered crops to produce industrial enzymes, growth hormones, and other potent pharmaceutical compounds. These techniques pose a serious risk to human health and the environment, especially when the highly active pharmaceuticals are introduced into edible crops.

The possibility of abuse of these crops and/or the underlying technology for hostile and illegal purposes is serious. It may be tempting to weaponise bio-engineered crops, spiking them with, for example, disease-inducing such as cancer or debilitating compounds such as those affecting human or animal fertility or built-in deficiencies that could lead to crop failure. The introduction of a gene for human sperm cell antigens into a crop could create a contraceptive vaccine, such as the genetically engineered corn that was developed by a U.S. company to produce antibodies against human sperm. Another example is Trichosanthin, considered to be a potential anti-cancer agent. It has the same mode of action as the bio-warfare agent ricin and is a strong abortion-inducing compound. In the US, trichosanthin production in tobacco plants was induced by a genetically engineered plant virus. That same virus will easily infect crops such as tomatoes and peppers as well.

There are other routes to achieve similar effects without having the sophisticated knowledge to engineer a specific crop with a specific compound. No biological arms control could stop a person from stealing a handful of kernels, growing more, and introducing them into a country's food supply. Theft of a few biologically active corn kernels from one of the many trials with edible plants, producing biologically active substances is enough. Introducing it into the food supply would not be technically difficult. Considering how easy and effective it would be to wreck havoc on unsuspecting populations, a complete ban on the production of hazardous biological compounds in edible crops is morally justified.

## **Food Additives**

In recent times, there has been an increase in public awareness of the potential health effects of the thousands of food additives utilised by the food industry. The number of food additives now in use is staggering. Unfortunately, sufficient information to make informed judgments on their safety is often lacking. Anyone whose diet is high in processed food products consumes a significant amount of additives and artificial ingredients. At their best, additives and artificial ingredients simply add little or no nutritional value to a food product. At their worst, additives pose a threat to your health.

A high number of Black children, suffering hyperactivity and minimal brain dysfunction, are actually sensitive to certain constituents in their diet. Processed sugar, monosodium glutamate and artificial food colourings are among the chief offenders. High fructose corn syrup and monosodium glutamate are being examined as possible culprits for the current obesity phenomenon that is occurring in Western European cultures. Chronic obesity leads to diabetes, heart disease and death. Diabetes killed more people than AIDS last year and the numbers are growing in both developed and developing countries.

Extremely toxic additives, such as benzoic acid, nitrosoamines (sodium nitrite and nitrate), aspartame (NutraSweet) or monosodium glutamate (MSG) can directly bind or become incorporated in the biosynthesis of melanin. Humans actually have receptors on their tongue for glutamate. Digestive enzymes in saliva break down glutamate to phenylalanine, an amino acid protein in food that the human body recognizes as meat and elevates blood pressure and blood sugar. As one of the chemical precursors of melanin, phenylalanine is converted to tyrosine, another amino acid, and subsequently to dopamine, norepinephrine and epinephrine, all of which are neurotransmitters. Monosodium glutamate is used as a flavour enhancer in many of the processed foods on today's market. It is also a major food additive in foods from restaurants and fast food carry-outs. The glutamate in MSG, considered a neurotoxin is chemically synthesized and exhibits a different chemical configuration than naturally occurring glutamate. So, phenylalanine will have a different chemical configuration and cannot be assimilated properly by the body. Thus, another avenue opens where melanin becomes toxic, nerve and energy transmission is blocked and subsequently we become diseased and dysfunctional.

## **Western Technology and the Environment**

### **Chemical Contaminants**

It should come as no surprise that we have industrial chemicals running through our veins. More than 4.5 billion chemicals are known and 50,000 are commercially distributed. Most of these chemicals did not exist in the environment, let alone in human bodies, just 75 years ago. The long-term health effects of most chemicals in use today are not well known. But that did not stop American industries from dumping 7.1 billion pounds of hazardous compounds into the air and water in the United States in 2000. Although, most levels of environmental chemicals are seldom high enough to cause acute health problems, they do cause chronic health problems long after exposure to them. Some of these include cancer, birth defects, organ damage, disorders of the nervous system and damage to the immune, respiratory and reproductive systems.

In Canada and the U.S., as in other western European countries, we are bombarded with chemicals from the cradle to the grave and at all times in between. Chemical and nuclear waste materials are being recycled into consumer goods. Our food is chemically processed, chemically flavoured and enriched with artificial additives, wrapped and stored in synthetic plastics. One has only to look at the devastating chronic diseases and plagues that are affecting us as a result of Western technology and their economic values. The air we breathe, the water we drink, the soil in which we grow our plants, the feed that we fed our animals, the animals, the fish and plants we consume, are all showing the effects of toxic environmental pollution.

### **Organic Waste Contaminants**

The overuse of heavily prescribed human and agricultural pharmaceutical drugs has become one of the leading causes of environmental pollution seriously affecting Western ecology. Hormones and antibiotics in animal feed appear in waste and leach into local streams and

rivers. Drugs and antibiotics, designed for humans, move through sewage systems. Tossed into the trash, such leftovers also are often carted off to landfills where seeping rainwater can dissolve the capsules and carry away the compounds they contain. Known as organic-waste contaminants, these compounds pass through sewage-treatment plants virtually untreated. They represent emerging contaminants: chemicals whose presence in US and Canadian rivers, streams, and lakes has gone undetected for years and whose effects, singularly and in combination, on fish, aquatic plants, and humans are often poorly understood. These "emerging contaminants" include: antidepressants, steroids, non-prescription drugs, insect repellent, detergent by-products, disinfectants, plasticizers, fire retardants, antibiotics, insecticides, reproductive hormones such as birth control, ovulation inhibitors, estrogen and testosterone derivatives, other prescription drugs, antioxidants, fragrances, solvents, food additives and genetically modified organisms.

Recently, scientific research has been focussing on the health effects of endocrine system disruption by steroids and pathogen resistance to antibiotics, mentioned earlier. Chemicals of particular concern are antibiotics, estrogenic steroids, and anti-depressants. Parts per trillion levels of natural and pharmaceutical estrogenic compounds have been shown to have reproductive and developmental effects. According to a 1997 US Environmental Protection Agency Risk Assessment report:

“Recently, a number of ecologists, epidemiologists, endocrinologists, and toxicologists have called attention to the potential hazardous effects that estrogenic and anti-androgenic chemicals and certain other environmental chemicals have on human health and ecological well-being. A hypothesis has been proposed that certain chemicals may disrupt the endocrine system. These chemicals have been called "endocrine disruptors" because of they are thought to mimic natural hormones, inhibit the action of hormones, or alter the normal regulatory function of the immune, nervous and endocrine systems. Possible human health endpoints affected by these agents include breast cancer and endometriosis in women, testicular and prostate cancers in men, abnormal sexual development, reduced male fertility, alteration in pituitary and thyroid gland functions, immune suppression, and neurobehavioral effects. In addition to human health effects, reports have accumulated that many chemicals released into the environment can disrupt normal endocrine function in a variety of aquatic life and wildlife. Some of the more harmful effects observed in animals have been attributed to some persistent organic chemicals. Adverse effects include abnormal thyroid function and development in fish and birds; decreased fertility in shellfish, fish, birds, and mammals; decreased hatching success in fish, birds and reptiles; de-masculinisation and feminisation of fish and birds; decreased offspring survival; and alteration of immune and behavioural function in birds and mammals.”

The list of endocrine disrupting chemicals includes at least 49 different pesticides. These compounds are known to cause birth defects, reproductive failure and developmental abnormalities. Associations between pesticide use and prostate cancer risk among the farm

population have been made as farming is the most consistent occupational risk factor for prostate cancer. The highest rate of prostate cancer anywhere is among African Americans.

The presence of other endocrine disruptors, such as antidepressants, has also been reported in U.S. and Canadian rivers and streams and detected in fish. Prozac, a widely prescribed antidepressant, can affect the development of babies when taken by pregnant women. It passes into breast milk and is found in the blood of newborns whose mothers are taking the drug. It can also affect the ability of both males and females to achieve sexual climax. Prozac is prescribed for neurochemical imbalances, arising from a deficiency in serotonin, the neurotransmitter that regulates mood, appetite, sleep and impulse. These neurochemical imbalances are the underlying causes of depression, insomnia, anxiety, and overeating disorders. Structurally similar to melanin, serotonin is an alkaloid produced in the pineal gland. Serotonin is synthesized in the body from tryptophan, an essential amino acid that can be obtained from dietary sources such as bananas, dried dates, fish, and peanuts. About 10 per cent of Canadian women and 5 per cent of men will take antidepressants at some point in their lives. In the United States that figure is much higher.

Plastics contain xenoestrogens, another type of endocrine disruptor, which can have devastating effects on your body's estrogen receptors. Plastic containers, plastic food wrap, plastic soda bottles, and other plastics such as styrofoam and vinyl products, can release toxins into your food by merely touching the food.

### **Environmental Factors on Infertility**

The evidence that organic and other environmental pollutants are estrogenic means that they produce biochemical effects that mimic those of the female sex hormone. Tests show the presence of estrogenic pharmaceuticals and other organic waste contaminants in US and Canadian waters. Females exposed to excessive estrogen and synthetic progestins, for instance birth control pills and hormone replacement therapy, have a combined 120 possible risks and side-effects. When estrogen is in excess, it is toxic to the body. These are not natural hormones but rather powerful drug therapies. Estrogen and progestins are carcinogenic substances initiating and promoting breast cancer in both men and women, and ovarian and uterine cancer. They also cause blood clots, strokes and high blood pressure and much more. Symptoms of excessive estrogen include: weight gain, migraines, high blood pressure, fatigue, aging skin, thinning hair, fluid retention, PMS, low libido, muscle aches and pains, memory fogging, fibroids, endometriosis, depression, fibrocystic breasts and miscarriage. The more serious, life-threatening conditions of estrogenic excess are: reproductive cancers, strokes, blood clots, compromised immune system, toxic livers, gall bladder disease, auto-immune diseases (lupus, MS, rheumatoid arthritis), glucose intolerance, pancreatitis, and interference with the uptake of thyroid hormones.

Scientific studies suggest that environmental factors now play a larger role in infertility in most western European countries. The primary cause of infertility today in both men and women is due to the wide range of chemical exposures present in the home, job, diet and environment. Evidence shows that some of the same chemicals responsible for infertility and miscarriage are increasing the risk for having a child with mental retardation, learning

disabilities or behavioural problems (such as ADHD). Women who has never conceived, (primary infertility), are more predominate in developed countries, but sub-Saharan Afrka is a striking exception to this pattern. In this region, most couples (52 percent) suffered from secondary infertility—that is, a woman cannot conceive even though she previously has conceived. Latin America also has a relatively high rate of secondary infertility at 40 percent. In contrast, only 23 percent of infertile couples in Asia and 16 percent in North Africa suffered from secondary infertility.

### **Environmental Factors on Children**

Children are especially vulnerable to environmental insults. Various disturbing trends have led researchers to believe that environmental exposures are contributing to children's declining health status. Their nervous, respiratory, reproductive, and immune systems are not yet fully developed. Children take in more air, food, and liquids than adults and there is concern that environmental exposures could be causing a wide range of health threats to children, including birth defects, childhood cancers, asthma, attention-deficit hyperactivity disorder (ADHD), defects in male reproductive tracts, and the prevalence of autism.

The impact of neurodevelopmental disorders such as ADHD, for example, on children and their families is immense. Environmental exposure to any of a number of known and suspected developmental neurotoxins could contribute to ADHD, including lead, mercury, manganese, tobacco smoke, dioxins, polychlorinated biphenyls (PCBs), certain pesticides, and solvents. Black children are much more apt to be diagnosed with ADHD and placed on medication. Children with high lead exposures are more easily distracted, less organized, and more apt to be hyperactive, impulsive, aggressive, and easily frustrated. Studies have shown that chronic lead exposure can lead to hypertension and nerve disorders in Black adults. Low-dose prenatal exposure to mercury affects a broad range of skills such as motor, attention, and language. It decreases IQ and increases impulsivity. Women, who consume large amounts of contaminated fish and seafood during pregnancy, have children who are at high risk of having problems from mercury.

### **War and Depleted Uranium**

Depleted uranium (DU) is the by-product of the uranium enrichment process, which removes the more reactive U-235 from natural uranium to make nuclear bombs and reactor fuel. The remaining uranium waste is 99.8 percent uranium-238. DU is a chemically toxic heavy metal (like lead or mercury). It is radiogenic and burns on impact, creating tiny aerosolised particles that emit alpha, beta and gamma radiation. These particles can be carried by the prevailing winds over long distances, have a radioactive half-life of 4.5 billion years, and pose a long-term threat to human health and the environment by contaminating air, soil and water.

In Iraq's arid climate, this means that tiny particles of DU are likely to be blown around and inhaled by civilians for years to come and the dust-laden winds of DU-contaminated war zones will remain effectively radioactive for the rest of time. Depleted uranium has been used in military practice maneuvers in Indiana, Florida, New Mexico, Massachusetts,

Maryland and Puerto Rico. After the Navy tested DU weaponry on the Puerto Rican island of Vieques, one third of the island's population developed serious illnesses. Many people are showing high levels of uranium in their bodies.

Humans and animals, friends and foes in military fallout zones are destined to a long downhill spiral of chronic illness and disability. Kidney dysfunction, lung damage, bloody stools, extreme fatigue, joint pain, unsteady gait, memory loss and rashes and, ultimately, cancer and premature death await those exposed to DU. A single particle of DU lodged in a lymph node can devastate the entire immune system. When inside the body, their radiation and toxicity can trigger the growth of malignant tumours. Add to these, fetal deformities, sterility in sexes, an increase in miscarriages and premature births, congenital malformations, additional abnormal organs, hydrocephaly, delayed growth and a host of eye diseases. The effects of ionizing radiation on growth and development are especially significant in the prenatal child as more and more children are born deformed.

The technology of war is completely out of control. The estimated amount of DU used in the 2003 Iraqi war is 1,700 tonnes. Preliminary tests in Iraq show that air, soil and water samples contain 'hundreds to thousands of times' the normal levels of radiation. American forces admit to using over 300 tonnes of depleted uranium weapons in 1991, although the actual figure is closer to 800. This brings the total amount of DU weapons used in Iraq to well over 2500 tonnes. There is enough depleted air-borne uranium, travelling around the world or where ever the wind blows, to radiate everyone on the planet. Tens of thousands of sick British and American soldiers are now dying from radiation they encountered during Gulf War I. Sixty-two percent of sick vets tested have uranium isotopes in their organs, bones, brains and urine. In other studies, some sick vets were found to be expressing uranium in even their semen. Their sexual partners often complained of a burning sensation during intercourse, followed by their own debilitating illnesses.

No one country has the resources to clean up such large amounts of radioactive waste materials or the ability to treat all of the health conditions these weapons are causing

### **Global Warming and Climate Change**

Scientists have observed reductions in surface solar radiation (sunlight). This reduction, called "global dimming", means each year less sunlight reaches the surface of the Earth as a result of industrial air pollution and global warming. The effect on photosynthesis and on plant and tree growth in equatorial regions and parts of the southern hemisphere will not be directly affected. In the northern climates, however, everything becomes light-limiting. Since the reduction in solar radiation is in the visible light and infrared region of the spectrum, a reduction in sunlight becomes a reduction in productivity.

However, the more harmful ultraviolet light, which can penetrate through the leaky ozone layer, is not affected by reductions in solar radiation. The ozone is the protective layer in the atmosphere that shields the Earth from dangerous ultraviolet radiation. Ultraviolet radiation can cause skin cancer, cataracts, respiratory infections, cellular immunity and can harm marine life. As ozone depletion becomes more pronounced, the risk of health complications

from over-exposure to ultraviolet radiation is becoming a substantial public health concern. Independent scientific research shows that every year there are between two to three million new cases of non-malignant melanoma and around 130,000 malignant skin cancer cases. Most known skin cancers seemed to occur in the western industrialized world.

People with melanated skin are less susceptible to skin cancer from UV radiation. In the skin, melanin molecules have the ability to rearrange their chemical structure to absorb all types of energy across the radiant energy spectrum, offering us protection against deadly solar and electromagnetic radiation. It is the reason melanin appears black in color. As stated earlier, its chemical structure will not allow any type of energy to escape once that energy encounters its structure. In essence, melanin captures energy from all of the natural sources in the universe and converts it into energy it can use.

As part of a new generation of sophisticated weaponry under the US Strategic Defense Initiative, HAARP, the High-Frequency Active Auroral Research Program, constitutes a system of powerful antennas capable of creating “controlled local modifications of the ionosphere.” Based in Gokoma, Alaska, the use of HAARP, if applied, could have potentially devastating impacts on the world's climate. It is described as, "a super-powerful radiowave-beaming technology that lifts areas of the ionosphere [upper layer of the atmosphere] by focusing a beam and heating those areas. Electromagnetic waves then bounce back onto earth and penetrate everything, living and dead." From military command points in the US, entire national economies could potentially be destabilized through climatic manipulations which could be implemented without the knowledge of the enemy, at minimal cost and without engaging military personnel and equipment as in a conventional war.”

Responding to U.S. economic and strategic interests, its selective use, to modify climates in different parts of the world, could result in the destabilization of agricultural and ecological systems. Climatic manipulations under the HAARP program (whether accidental or deliberate) would inevitably exacerbate these changes by weakening national economies, destroying infrastructure and potentially triggering the bankruptcy of farmers over vast areas. While there is no concrete evidence of HAARP having ever been used, scientific findings do suggest that it is at present, fully operational.

## **Health of Afrikans in Africa**

### **HIV/AIDS**

According to the World Health Organisation, there are 40 million people worldwide living with HIV and 28 million reside in sub-Saharan Afrika. This includes the more than 3 million newly infected with HIV and the over two million that died of AIDS in 2003. It should also be noted that only 1 percent of the millions of Afrikans who need anti-AIDS drugs ever received them. As a result, more than 11 million Afrikan children under the age of 15 are orphaned. Although no responsibility for its origin is forthcoming, HIV/AIDS is regarded by many in Afrikan circles as a laboratory-formulated-genocidal tool to eliminate the Black race.

About 90 percent of all deaths relating to AIDS and malaria in children occur in sub-Saharan Afrika, where 23 percent of the world's births and 42 percent of the world's children deaths are observed. For millions of children, the biggest health challenge is to survive until their fifth birthday. Those, who do make it past childhood, are confronted with adult death rates that exceed those of 30 years ago. In 2002, more than four million Afrikan children died from causes associated with poverty and disease. In addition, more than one in five pregnant women is HIV-infected in some Afrikan countries. Although AIDS is not mentioned as a probable cause of decreasing fertility rates, it is the leading cause of death in adults aged 15–59 years. AIDS is killing almost 5,000 men and women in this age group, and almost 1000 of their children, every 24 hours in sub-Saharan Afrika.

Afrikans, by virtue of their agricultural traditions are generally very healthy people. However, AIDS-related deaths among farm workers threaten agricultural production and food security, most notably in south and eastern Afrika. It is estimated that 7 million agricultural workers in 25 Afrikan countries, with high rates of HIV prevalence, have died of AIDS since 1985. Time devoted to care, funerals, and mourning of family members with HIV/AIDS reduces productivity and jeopardises households' ability to produce and purchase food. Moreover, important knowledge and skills are lost as deaths mount among the agricultural population.

### **“Rolled Back” Malaria**

The economic cost of malaria is also high in Afrika. Malaria, the ancient mosquito-borne disease that was “rolled back” by medical advances in the mid-20th century, has made a deadly comeback. Infectious strains of the disease are becoming increasingly resistant to treatment, infecting and killing more people than ever before, sickening as many as 900 million worldwide in 2003. More than 1 million people and by some estimates, as high as 2.7 million of those victims died. The vast majority of the deaths were in Afrika. Among children, malaria kills even more than AIDS. The major cause of malaria's alarming resurgence is the parasite's increasing resistance to the pharmaceutical drugs used to treat and prevent the disease. Chloroquine, the cheapest and most effective anti-malarial since the 1950s have become ineffective in up to 80 percent of malaria cases in some countries.

Chemical eradication of the mosquito population is of major importance in controlling outbreaks of malaria. However, the mosquito has also become resistant to most chemical insecticides to the point that only DDT remains effective in controlling the insect population. DDT is banned in western European countries because of its purported dangers to human and environmental health. Western concerns over the very real environmental danger from widespread DDT use in agriculture are denying a choice to poorer Afrikan nations, in how they fight malaria. The UN is attempting to harness nuclear technology to try to eradicate the mosquitoes. The International Atomic Energy Agency has developed the “Sterile Insect Technique” where scientists are breeding insects and exposing the males to enough radiation to render them sterile. The males are then released into the environment to breed with the females, whose eggs are unfertilized and will never hatch. The concept is based on the depopulation of the mosquito leading to its eradication, and subsequently to the eradication of the disease.

Research into genetically modified mosquito strains has concentrated on adding genes that cause mosquitoes to have immune system reactions to the malaria bacteria so that the mosquitoes' own natural defence mechanisms destroy the disease before the mosquito can pass it on to human beings. If such insects were ever released in the wild, they might supplant infected natural populations, helping in the fight against human disease. Researchers modified the yellow fever mosquito to make it produce a powerful antibacterial protein, limiting its ability to transmit disease. Even more recently, researchers have bioengineered a gene that causes alterations to the mosquito's gut, where malaria incubates. This alteration causes the production of a protein that prevents the parasite from binding to the gut walls and could reduce malaria transmission by 80 percent.

Similarly, genetic engineering may be opening a new way to use insects as weapons. Insects were systematically explored as a mechanism to spread a variety of diseases during World War II and the postwar US program. Insects may be engineered to produce toxic compounds and deliver them through their natural feeding habit, e.g. in the saliva of mosquitoes. Again, these compounds may exert a broad range of possible effects, from non-life-threatening illness to sterility to widespread fatal illness in a target population. Techniques to use insects to deliver vaccines have already been developed and patented. Genetically engineered mosquitoes or other biting insects could also deliver minute quantities of vaccine through the saliva every time they bite. Unfortunately, the development of insect combatants is a real possibility.

### **Vaccinations and Immunisations**

Of real concern to the Afrikans in the Diaspora are the rationale, reasoning and objectives for the multitude of vaccinations given to Afrikan children and adults. Afrikan governments are being manipulated or bullied into forcing their citizens to vaccine immunizations for unrealistic motives. Seemingly, all that is required for mass immunizations is one incidence of disease to occur and soon after, foreign drugs containing unknown toxins and genetically engineered substances are developed, promoted and distributed to the population without so much as a check. It is now a generally accepted truth in Afrikan circles that AIDS was manufactured in the West and was distributed in a genetically modified vaccine. We find the lack of concern, shown by many Afrikan leaders, as to the safety of the medicines and vaccines provided by "white" foreigners to their people, puzzling.

The recent health controversy over the polio vaccinations of Muslims in northern Nigeria is a good example. Wild, indigenous polio virus usually infects children under age five through contaminated drinking water and attacks the central nervous system, causing paralysis, muscular atrophy, deformation and, in some cases, death. Polio enters the body through the mouth and multiplies in the intestine. It presents such initial symptoms as fever, fatigue, headaches, vomiting, stiff neck and pains in the limbs. Polio is transmitted through the fecal-oral route, which means the oral ingestion of material contaminated with fecal micro-organisms. Not washing hands after using the bathroom and drinking contaminated water are common culprits in this type of disease transmission.

A recent polio outbreak (<25) has spread from Nigeria to neighbouring countries, threatening 15 million children and requiring a massive immunization campaign across five countries in West and Central Africa. The aim of hundreds of thousands of volunteers and health workers in Benin, Burkina Faso, Ghana, Niger and Togo was to reach every child in those countries with polio vaccine in just three days. This UNICEF campaign, organized at a cost of more than US\$ 10 million, came in response to nearly a dozen children being paralysed in four neighbouring countries, from poliovirus “genetically” traced to northern Nigeria. The polio-infected states, centering on the state of Kano, have supposedly re-infected other areas in Nigeria. They refused to grant the State permission to vaccinate their children, citing possible contamination of the vaccine with elements that could cause sterility or cancer. Requests to have the vaccine tested by independent sources were met with subterfuge and confusion.

However, a thorough laboratory analysis of the polio vaccines conducted by neutral Muslim countries revealed evidence of serious contamination with compounds that could cause infertility in women. The western-manufactured vaccines were laced with Estradiol—a synthetic estrogen compound, anti-fertility agents, and 17 other contaminants and adulterants. This scenario is being repeated over and over again throughout Afrika.

This is not the first controversy over sterilizing agents in vaccines. In 1995, the Catholic Women's League of the Philippines won a court order halting a UNICEF anti-tetanus program because the vaccine had been laced with antibodies, which when given in a vaccine permanently causes women to be unable to sustain a pregnancy. The Supreme Court of the Philippines found the surreptitious sterilization program had already vaccinated three million women, aged 12 to 45. The vaccine laced with pregnancy hormone antibodies, was also found in at least four other developing countries.

It should be noted that in 2002, researchers were successful in building a poliovirus “from scratch” through chemical synthesis. Starting with the gene sequence of the agent, which is available online, the researchers synthesized virus sequences in the lab and ordered other tailor-made DNA sequences from a commercial source. They then combined them to form the full polio genome. In a last step, the DNA-sequence was brought to life by adding a chemical cocktail that initiated the production of a living, pathogenic virus. This experiment was funded by the US Defense Advanced Research Projects Agency. In principle, the above method has been used with other viruses that have similarly short genetic sequence (genome), such as Ebola and the Marburg viruses.”

Once wild poliovirus transmission is eliminated worldwide, scientific laboratories will be the only source of wild poliovirus. As a precondition for polio-free certification, the WHO developed the Global Action Plan for Laboratory Containment of Wild Polioviruses in collaboration with scientists, ministries of health and vaccine manufacturers, for the purpose of adequate containment of wild polioviruses. To minimize the risk of reintroducing wild polioviruses into the population from stored sources, an increase in precautions is needed to ensure the safe handling and disposal of these materials. These materials include wild poliovirus infectious stocks, specimens from polio patients, and products of research on potentially infectious materials (i.e., throat, fecal, or water and sewage environmental

specimens, collected for any purpose, at a time and in a geographical location where polio was endemic). From published progress reports, there appears to be no official Afrikan laboratories having an inventory of wild polioviruses and infectious or potentially infectious materials, anywhere on the Afrikan continent, not even the samples that originated there. Moreover, the majority of laboratories with stored infectious or potentially infectious materials are located in Europe, the Americas and in Western Pacific regions.

### **Biological Weapons and Designer Diseases**

Current wisdom holds that population-specific, biological weapons are theoretically impossible and unpractical. However, new technologies are indeed available that translate specific genetic sequences into markers or triggers for biological activity. A recent analysis of human genome data in public databases reveals that hundreds, possibly thousands of markers for ethnic-specific weapons do exist. Weapons targeting specific population groups do not need to be deadly. They could cause temporary incapacitation, illness, sterility, permanent fatigue, or any other condition that may not be fatal, but desirable from an aggressor's perspective, in order to destabilize, harm economically, or weaken an enemy society. In Afrikan/Black people there are some 15,000 possible biochemical markers that exist as a future bioweapons.

We are observing a procession of possible genetically engineered diseases on the Afrikan continent. We believe that diseases that are of laboratory design or, the result of a genetically engineered organism, such as HIV/AIDS, polio, meningitis and Ebola, are being used for the purpose of population control. As we speak, there is a growing concern about an Ebola outbreak right on the Uganda border with Sudan. For example, the Ebola virus is spread by contact with body fluids, including sweat and saliva. Outbreaks of the disease are rare, and no one knows where the virus lives when it is not infecting humans. We are told that the viruses are probably preserved in an undefined reservoir in the rain forests of Afrika. The disease usually kills its victims so fast that it also destroys the host for the virus. There are four known strains of Ebola-like viruses, three of which cause the deadly disease. This latest outbreak is not linked to the known strains of Ebola-like viruses that cause the severe viral infection. It should be of tremendous interest to us that Ebola, like AIDS, can be produced in a laboratory.

Practical steps can and must be undertaken today to prevent the future development of these kinds of weapons. A key step would be to restrict the amount of ethnic-specific genomic data to an absolute minimum. However, we are currently witnessing a scientific development that is actually doing just the opposite: creating vast amount of genetic data on different populations and ethnic groups to be used for:

- race-based medicine to locate relevant gene markers directly involved in drug metabolism or drug action in order to elucidate genetic influence on drug safety and efficacy. This can very easily be converted into triggers/markers for the action of biological or chemical weapons ;
- to create a map of genetic structures (called haplotypes) in the human genome by the analysis of genetic patterns in blood samples. In this US\$ 100 million public-private

- undertaking, genetic variations in four populations are being investigated, US residents with European ancestry, Han Chinese, Japanese and Yorubas in Nigeria. The HapMap project will provide vast amounts of genetic markers specific for any of the four populations. A similar project, to build a collection of DNA and other information from 25,000 people of Afrikan descent, was proposed by genetic researchers at Howard University. They say that it will help the search for genes and non-genetic factors to explain why American blacks run elevated rates of such diseases as high blood pressure, prostate cancer, obesity, asthma and diabetes; and
- in forensics, genetic fingerprinting can be used to match a suspect's DNA with that found at a crime scene. At the moment, there are already two million people locked away in U.S. prisons, the majority of which are Black. Law enforcement is always striving to get more information out of crime scene DNA, including the "race" or ethnicity of the culprit. If a systematic search for ethnic specific markers is undertaken, it may reveal biological markers that are exploitable for bioweapons abuse.

## **Depopulation**

A U.S. foreign policy document, officially known as National Security Study Memorandum 200 or NSSM 200, detailed a plan to target thirteen large developing nations with intensive efforts to promote population "policies" that would allow the U.S. to run massive birth control and sterilisation projects in those countries. The NSC report listed twelve other nations whose growth could give them increased political influence, and which were to be targeted under the international population program. Those countries are Nigeria, Egypt, Ethiopia, Pakistan, Indonesia, Turkey, Bangladesh, India, Thailand, the Philippines, Mexico and Colombia.

A recent investigation, by Brazilian authorities into the Brazilian sterilisation program run by U.S., has revealed that 44 percent of all Brazilian women between the ages of 14 and 55 have been permanently sterilised. The older women apparently had the operation done when the program started, nearly two decades ago. News reports charge that many of these women underwent the operation without their knowledge or consent. According to some reports, ninety percent of all Brazilian women of Afrikan descent have been sterilised. If true, this would nearly eliminate future generations of black people in Latin America's largest nation. Brazil's black population is reported to be second in size only to Nigeria's. At least half of Brazil's 154 million people are believed to be of Afrikan ancestry.

The NSC report stated that the U.S. "will require large and increasing amounts of minerals from abroad, especially from less developed countries. That fact gives the U.S. enhanced interest in the political, economic, and social stability of the supplying countries. Wherever a lessening of population pressures through reduced birth rates can increase the prospects for such stability, population policy becomes relevant to resource supplies and to the economic interests of the United States."

Generally, in the United States and Europe, women are having fewer children, while fertility rates remain high in India, parts of Afrika and some other developing countries. However,

the world's population growth is slowing because women are having fewer children and more people are dying from AIDS, especially in Afrika. According to a population study by researchers at Penn State in 2000:

"Recent birth rate declines in sub-Saharan Afrika, especially in cities, may signal the first small, faltering steps toward balanced population, adequate food supplies and relative economic stability. The slowing of population growth should facilitate economic development, making for better use of the region's human and natural resources. This has implications worldwide, since it means that sub-Saharan Afrika can start to become a full-fledged economic bloc in its own right, providing mass markets for U.S. goods and requiring less aid from the industrialized powers. Until the late 1980s, Afrika south of the Sahara Desert was the only major world region where fertility rates remained high and showed no signs of falling. In terms of human fertility, sub-Saharan Afrika was then at a stage similar to that of most of Europe a century ago, with a wide gap between declining death rates and persistently high birth rates. However, the gap was distinctly wider for sub-Saharan Afrika, translating into much more rapid population growth. During the past decade, this situation has changed significantly, with fertility rates decreasing throughout much of sub-Saharan Afrika, especially urban areas. The causes, all facilitated by urbanization, are fourfold: declining infant and child mortality, higher educational levels, delayed marriage or cohabitation, and increased use of contraceptives. A fertility rate of about 2.7 children per family is necessary to maintain the population at a zero growth rate in sub-Saharan Afrika."

AIDS continues to have its greatest impact in developing countries of Asia, Latin America and especially sub-Saharan Afrika. Botswana and South Afrika are among countries that have seen population decline because of AIDS deaths. AIDS is devastating the heart of these countries, affecting people in the prime years of not only their economic production, but the prime years of reproduction

Through the use of western technology, we are watching the unfolding of a complex plan to retake and colonize the Afrikan continent for both political and economic gain. There seems to be a systematic program in place to depopulate the Afrikan continent by eliminating large numbers of Afrikan people through the use of designer viral and bacterial diseases; the introduction of disease-causing agents by inoculation, vaccination and immunisation as a source of killer diseases and sterilisation agents to prevent the propagation of the race; and the development of chronic and degenerative diseases from nutrient-deficient foods that can physically and mentally weaken Afrikans, elsewhere in the Diaspora. This is being demonstrated as we speak with the US establishing military bases on the Afrikan continent in the so-called "war on terror"; with the oil companies and other multi-national corporations exploiting Afrikan countries for their oil resources and valuable minerals; with the pharmaceutical companies exploiting indigenous intellectual property rights, bio-pirating and the patenting of indigenous medicinal plants and herbs, and with Afrikans, both the living and unborn, dying in record numbers from previously unknown or reconstituted diseases.

## **Biodiversity**

Afrika is a natural treasure house, endowed with wonderful examples of physical and cultural diversity. Afrika is also a laboratory for studying the boundaries between modern scientific methods and technologies and traditional practices. Indigenous knowledge has a transgenerational, communal and cultural nature. As in all traditional societies, Afrikan people have evolved sophisticated realms of knowledge, derived from experimentation or observation to explain, predict, and control natural phenomena. This indigenous knowledge often appears to differ from or even run counter to the scientific principles taught by the colonial powers. Evidence of Afrika's store of indigenous scientific knowledge has emerged recently in a variety of disciplines. Living on the desert's edge, Afrika's nomadic pastoralists are acknowledged to be among the world's experts on famine and range management. The 1,000-year-old cultures living south of Timbuktu along the Niger River in Mali consult written texts that we appreciate today, as a model of environmental conservation. The continent's materia medica of more than 1,000 animal, plant, and mineral products for the treatment of illness is a resource that western-trained scientists are avidly studying. Afrika's traditional plant breeders cultivated tropical gardens that contain as many as 150 species and recognition is given to the Afrikan for the development of a remarkably productive agricultural system.

Biodiversity is Afrika's richest asset. The traditional knowledge on the properties of plants, seeds, algae and other biological resources is sought by scientists for medicinal, agricultural and other purposes. Trade in biological resources is big business today, but the terms of global trade are increasing corporate control of Afrika's agriculture and healthcare systems and undermining the collective rights of communities to biodiversity. Since time immemorial, Afrikan people have depended upon free and open access to a rich diversity of biological resources for food, fuel, medicine, shelter, economic security, and the exchange and trade of such resources among themselves. In agriculture, the commercialization of the seed market, patents on seed, and the introduction of genetic engineering have serious implications for Afrika's farmers and food security. In healthcare, intellectual property rights have only increase the price of essential drugs. The future of the Afrikan race is definitely in jeopardy if the European-controlled, multinational corporations gain control of the world's natural plant resources. The biodiversity that exists in all tropical areas around the world is at risk. People of colour are at risk.

## **Conclusions**

Our role and function in this universe is spiritually ordained. Western European societies have unofficially declared a biological war on people of colour. We have a right to exist. We must return to our "**roots**" in order to survive the genocide of our people currently taking place on the Afrikan continent and in the Diaspora. Now is the time for Afrikan traditional healers...physical and spiritual, traditional herbalists and agriculturists and their counterparts in the Diaspora to jointly develop herbal remedies and herbal formulations that can effectively heal the sicknesses in our people. We cannot fight for our survival if we are sick. For thousands and thousands of years, we have depended upon Nature to supply the food and medicine that our bodies uniquely require. As a result, we need to encourage pan-Afrikan

farmers to produce natural and traditional crops that are beneficial to our biological makeup. In the interest of food safety and food security, we need to establish a pan-Afrikan distribution and marketing network that can serve and service the needs of melanated people wherever we are. Finally, as Afrikan people, we need to return to a way of life that is more in tune with “Nature” and the spiritual ways of our ancestors.

This paper is a summation of all the information taken from many articles and reviews that already exist in the public domain and can be found at

[http://www.blackherbals.com/Articles\\_and\\_Reviews.htm](http://www.blackherbals.com/Articles_and_Reviews.htm).