SARS-COVID Genocide

Vol: 1

Racial Capitalism:

Witness in its Arsenal the Virus.

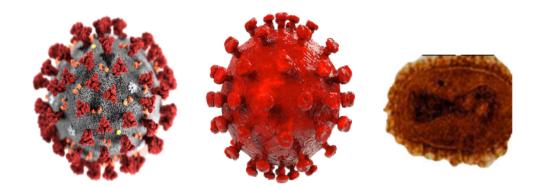


Image description for the cover: A cover page for a zine which investigates how the COVID pandemic fits in the broader history of viruses being weaponized for the sake of advancing racial capitalist domination. The top portion of this image is the title of the zine, which is "SARS-COVID Genocide Vol: 1" typed in bold font. The center of this cover page is a clear rectangle which contains the subtitle of the zine, which is "Racial Capitalism: Witness In Its Arsenal the Virus." The bottom portion of this image consists of the three viruses analyzed in the zine. The ordering of these viruses is Smallpox on the right, HIV in the center, and COVID on the left. The background of this cover page is white.

By: Eugenics Ender Squad https://fighteugenics.noblogs.org/

Font: Liberation Serif

Made in Winter 2023.

Content Warning: Graphic Ableism, Transphobia, Domestic Violence, Racism (Especially anti-Black and anti-Indigenous Racism).

Preface

This zine was written by a white Jewish disabled enby who believes that revolution in the so-called "United States" can only manifest if racial capitalism as a whole is attacked unto the point of annihilation. What W.E.B. Dubois referred to as the *color line* has played a massive role in the history of class exploitation and class struggle throughout this country. No political economic analysis or praxis against the foundation of the "United States" is truly meaningful unless the racialization of the proletariat is accounted for.

Since the present zine was created by a white person, the author is open to criticism on its content. Despite being against white supremacy and racial capitalism as a whole, the author does benefit from white privilege and therefore has not personally been discriminated by the racism described in this text. This lack of experience inevitably means that there exists some imperfection with the analysis, which is why the author is very open to feedback.

Here is the author's email: eugenicswillfall@proton.me

As for terminology, some words deserve to be clarified for this text. "Proletariat" (or prole for short) in this piece refers to people dispossessed from their prior capacity to subsist on the land entirely for survival, due to private property enclosing the space under the control of primarily white land owners. Within the context of settler colonialism, many ex-peasants who became proles in Europe were offered private land ownership throughout various geographies in exchange for participating in the colonization process which dispossessed Indigenous people from primarily collective land arrangements. This feature of the white proletariat being able to access land in the settler colonial context is a key element that has historically distinguished their material conditions and broader political trajectory. Meanwhile, "working class" in this zine refers to the section of the proletariat who engage in labor-capital relations in order to earn an income for survival. This includes manufacturing jobs, working in the service industry, being employed in logistics, the housewife role of replenishing the husband's labor power in exchange for subsistence from his wage, etc. All these fields of labor help with the process of capital accumulation. However, with the tendency of profits declining (which started to rear its head in the early 1970s) and with the intensification of climate change, the labor-capital relationship has grown to become increasingly unstable, especially through the more impoverished areas of the Earth. This has caused many proles to exist entirely outside of the labor-capital relationship altogether, forcing them to develop other strategies to survive. It is for this reason why the zine will focus on the term "proletariat" rather than "worker." Additionally, since this piece advocates for disability liberation, it is important to acknowledge how the majority of disabled proles have never truly been able to enter the laborcapital relationship due to their particular bodyminds making it impossible for them to be consistently exploited for labor.

The goal of this series is to help bring about the destruction of eugenics, primarily by analyzing the situation of that historical process in the present "United States." What has been going on for disabled people (especially Black and Indigenous disabled people) is a genocide where COVID is being weaponized to annihilate them because their bodyminds have a perceived lower use value for the labor-capital relationship. The "hands off" approach to the pandemic is the result of a 500+ year violent process where disabled people have been forced to either assimilate as potential workers (something offered primarily to white disabled folks) or to be murdered (something that primarily has been inflicted on racialized disabled people, especially Indigenous and Black disabled people). This ableist historical process of mono-cropping the population to consist of people purely fit for labor exploitation is eugenics, which has existed in practice centuries before the term was coined. It must be destroyed.

Chapter 1 – Racial Capitalism: Witness in its Arsenal the Virus.

Welcome to the arsenal. Its owner is racial capitalism, a mode of production risen from a history of blood and vile fire, where a racialized underclass of dispossessed people (called proletariats) are hyper-exploited for the sake of the ruling nation and its property owning class. Originally this racialized class of dispossessed people consisted of enslaved Tartars and Slavs, hyper-exploited for their labor to enrich the owner's wealth.¹ Then, the riches of the 15th century Genoese merchants allowed the English state to enable the enclosure of the common lands which transformed them into the original capitalist private property. These gains from their especially exploitative

¹ Cedric Robinson, *Black Marxism*, pgs 16, 18.

investments allowed the Genoese merchants' to ultimately provide the financial means for Spain to initiate the Columbus expedition.² Through the ongoing colonial war of Turtle Island ("North America") and Abya Yala ("South America") which birthed by this invasion, and Bartlome de las Casas' declaration to replace Indigenous slaves with Black slaves, the racialized underclass would now consist of a broad category of "human other."³ Sylvia Wynter noted how this wider racialized category of "human other" was developed from the concept of the "evil sinner," which existed in contrast to the "good Christian" concept that would eventually evolve into the position of "man" which included only white people.⁴ This categorization would permit for the intensely brutal exploitation of Indigenous labor in Putusi⁵ and Zacatecas, and Black labor in Ayiti and the Mississippi Delta. Their coerced labor and stolen existence produced the life essence of the racial capitalist world system that reigns to this day. Capitalism thrives through a steady maelstrom of violence utilizing a variety of weaponry to maintain a proletariat split apart by a color line interwoven with a thread of gender⁶ and a thread of "ideal" bodymind. We will be discussing one series of weapons in this zine, used soon after Columbus invaded Ayiti with his expedition of warfare.

² *Ibid*, pgs 106, 109.

³ *Ibid*, pg 127.

⁴ This is described in great detail through Sylvia Wynter's text Unsettling the Coloniality of Being/Power/Truth/Freedom: Towards the Human, After Man, Its Overrepresentation—an Argument.

⁵ Black labor was also exploited in the notorious Cerro Rico silver mine which annihilated millions of lives.

⁶ Nsambu Za Suékama, *Dispatches from Among the Damned: On the History and Present of Trans* Survival.* <u>https://pinko.online/web/trans-survival</u>. Nsambu Za Suékama is one of the best theorists alive today with incredible insights on the relation of gender under racial capitalism. Her patreon is <u>https://www.patreon.com/qittycorner</u>. If you like this zine, give your money instead to her either at \$nsambu (cashapp), paypal.me/profound, or @vonnedavien-wislon (venmo).

Here is the hall of viruses. In this context of racial capitalism, there have been many introduced onto Turtle Island and Abya Yala via imperialist violence. Yet one, whom is a relative of Monkeypox, was especially harnessed as a blade wielded through the historical ongoing process of colonial war: Smallpox. Its contagion, like a slow nuclear explosion, gave Cortez the leverage to supplant the Aztecs with an even more brutal empire, creating the viceroyalty of New Spain by ashes and blood. This pox virus had been utilized to murder millions of Indigenous lives. In this occupied area of "New Spain," Smallpox would be instrumental in massacring the Indigenous population, playing a huge role toward dropping it from 25 million in the start of the 16th century to 1,075,000.⁷ The virus served as the main contributor of multiple epidemics that were exploited to murder 97% of the Indigenous population in so-called "Oregon" between the years 1700 and 1880.⁸ It also was key in razing the Northwest coast of Turtle Island broadly, annihilating the amount of Indigenous people living in that region from 200,000 in 1770 to 40,000 a century later.⁹ Indigenous communities throughout the two continents were devastated by Smallpox, giving way for colonizers to plunder these lands like open veins.¹⁰

The lethal potency of Smallpox was because of its context in colonialism. This virus spread amidst land theft, environmental destruction, massacres carried out by other means (such as with rifles and blades), attacks on food sovereignty, assaults toward ways of life, and other means of violence which

⁷ Cedric Robison, Black Marxism, pg 124.

⁸ Anna Dvorak and Larry Landis, *Early Disease Epidemics and the Pacific Northwest*. https://blogs.oregonstate.edu/scarc/2020/05/15/early-disease-epidemics-in-oregon-and-the-pacific-northwest/

⁹ Zig-Zag, Northwest Coast Resistance to Colonization, pg 20.

¹⁰ Eduardo Galeano's *Open Veins of Latin America* is an incredible book regarding much of the colonial process in Turtle Island and Abya Yala which the Spanish crown begun.

settler forces imposed on the Indigenous populations to induce death and dispossession.

Numerous instances reveal how Smallpox's lethality was escalated by the colonial warfare on Turtle Island. When the Northwest coast of that continent was becoming colonized by so-called "Canada" in the mid 19th century, settlers were encroaching the area in mass due to them learning about the presence of gold in the Fraser canyon. Resistance emerged from the local Indigenous population against this colonial violence, to protect the land and their way of existence.¹¹ The settler influx eventually brought forward a Smallpox epidemic in 1862 throughout so-called "Victoria, British Columbia." While the Indigenous population around that city initially received several hundred doses of the vaccine from state authorities, the colonial government then exploited the opportunity to evict and burn their villages, coercing the newly displaced residents into close-contact situations which stimulated Smallpox spread.¹² These same authorities also prevented infected Indigenous people from quarantining during their illness in spite of the vaccination effort not being completed, causing Smallpox to engulf their communities without mitigation.¹³ Around 1/3rd of the Indigenous people living in "British Columbia" at the time were killed by this particular epidemic, one which "dampened" the anti-colonial resistance efforts throughout the region.^{14,15} Smallpox outbreaks were also amplified in other contexts of displacement and attacks against Indigenous ways of life, such as with the 1781 San Ignacio mission epidemic in so-called "Baja California"

- 12 Ibid.
- 13 Ibid.
- 14 Ibid, pg 15.
- 15 Ibid, pg 20.

¹¹ Zig-Zag, Northwest Coast Resistance to Colonization, pg 19.

which carried a 50% mortality rate.¹⁶ It was intentional measures of forced infection and active hostility against viral mitigation by settler forces which allowed Smallpox to be especially deadly.

Meanwhile, populations that lacked immunity to Smallpox, yet were not oppressed by colonialism, experienced less fatal outbreaks. The 1707-1709 epidemic of that virus in Iceland would only have a 26% fatality rate, a rate way too high but nonetheless smaller than what the Indigenous communities of Turtle Island and Abya Yala usually experienced.¹⁷ The exact dilemma was evident around the $\Delta \sigma < b \Gamma \ d \ d^{2}$ (romanized: Weenipagamiksaguygun or also known as "Lake Winnipeg") area during the 1876 Smallpox epidemic, which killed 103 Icelanders while it probably slain up to 200 local Indigenous people; both of these populations lacked prior immunity to Smallpox.¹⁸ Their inclusion into white supremacist power structures allowed the Icelandic settlers to be exempt from the brutal restrictions which the state forced onto Indigenous communities. As such, the inherent violence of the historic process that is colonialism made the already deadly Smallpox an even more lethal virus to the Indigenous populations of these two continents.

War is also a mass disabling event, especially a war that eviscerates a community's relation to the land and their way of life. Typical disabilities that emerge from war include trauma, loss of body parts, etc. However, when a war ejects people from the land they live on—their food and medicine source as well the site of their kinship—it tends to have a devastating impact on the

18 Ibid.

¹⁶ Robert T. Boyd, *Smallpox in the Pacific Northwest: the First Epidemics*, pg 18. <u>https://pdxscholar.library.pdx.edu/cgi/viewcontent.cgi?article=1142&context=anth_fac</u>

¹⁷ M. Gouldhawke, A Smallpox Epidemic & Colonial Quarantine around Lake Winnipeg. https://mgouldhawke.wordpress.com/2020/04/04/a-smallpox-epidemic-colonial-quarantinearound-lake-winnipeg/

bodymind of the dispossessed person. Having less stable access to food can mean starvation and potentially unhealthier diets, and that along with the stress of losing loved ones and home, will impact the livelihood of a person (including their immune system). It does not help either that environmental degradation is often linked to negatively impacting the bodyminds of the people inhabiting the blighted area, and racial capitalism has a tendency to plunder land for profit at the expense of lives. War may not guarantee disability nor disable people equally, but it usually disables much of the population, especially if they are being oppressed under a historical processes of violence such as colonialism. The patterns of destruction which Indigenous people were subjected to from colonialism made many of them more vulnerable to viral infection than usual due to the tendency of disability that war carries. It is because of colonialism being a process of war which explains why at least 30% of the Indigenous population today in the so-called "United States" are disabled in a society that seeks to kill off racialized disabled people in particular.¹⁹ This tendency of disablement via warfare was weaponized for genocide, allowing viruses like Smallpox to flow while treatment or even rest was denied for the infected Indigenous people.

It must also be emphasized how Smallpox served as a tool of counterinsurgency. The Spanish invasion would had made less progress in their colonial war if not for the biology of Smallpox and the destabilized living conditions inflicted on the Indigenous communities which they had attacked. In the context of colonization in the Northwest coast of Turtle Island, Smallpox was exploited to massacre the local Indigenous population whom were fighting back against the colonial process. The virus was even

¹⁹ CDC, *Adults with Disabilities: Ethnicity and Race*. The piece deals with the racial breakdown of disability in the "United States". The data was published in 2017. https://www.cdc.gov/ncbddd/disabilityandhealth/materials/infographic-disabilities-ethnicity-race.html

acknowledged as being weaponized by the settlers whom wielded it to quash the 1763 Pontiac rebellion.²⁰ This specific virus would even be used as a tool to suppress Black revolt, in particular against the Haitian revolution during the early 1790's.²¹ Yet smallpox is not the only virus which racial capitalism has transformed into a weapon against the revolts that sought its abolition; in fact, there are other viruses which had been used to maintain this mode of production. Lets us visit two more sections in this hall of viruses.

This is HIV. While many people in the so-called "United States" identify the virus with queer people broadly due to its spread in the 1980's, in the wider scheme of the world it has primarily been utilized for anti-Black violence, especially against gender marginalized as well Queer Trans Gender Non-Conforming (QTGNC) Black people. Yet the direct weaponization of this virus by racial capitalism is carried out through more subtle means such as disinformation and denial of treatment. In fact, western economists literally used the infamous "cost-benefit" analysis to argue that wealthier countries (whom take part in colonization) should reject providing HIV treatment to African countries because it is "not profitable".²² It is worth noting that while HIV did emerge in Africa in the 1960's, its spread which accelerated in the 1980s occurred at an opportune moment for it to be wielded as a colonial weapon, since the decolonization movements across the continent had at this point achieved independence for many countries. There are differences in how HIV has been handled in each African country. However, South Africa will be the main one analyzed in this zine, due to it bearing a similar settler colonial history to the "United States," and because of the high HIV rates there. The impact of this virus on Black people in the "United States" will

²⁰ Roxanne Dunbar-Ortiz, An Indigenous People's History of the United States, pg 113.

²¹ C.L.R. James, The Black Jacobins, pg 103.

²² Anonymous Economist in Forbes Magazine, *Treating HIV Dosen't Pay*. https://www.forbes.com/forbes/2005/0725/044.html?sh=4862d36e68a4

also be analyzed as its weaponization holds parallels in how it has been utilized in certain African countries. Nonetheless, at least 32 million people in Africa died from HIV as of 2020²³ and 44% of all people who die from HIV in the "United States" are Black people.²⁴

The story of HIV in South Africa is that of state neglect, where the state's approach to the epidemic only altered once social movement pressure forced it to change. As HIV began to become more prominent in the 1990's, the South African state was rather idle on the matter until 1999, when it initiated a decade-long misinformation campaign to justify its neglectful strategy toward the epidemic. Yet grassroots mobilization and organizing lead to years of political struggle—which carried out in a diversity of tactics from legalism to direct action—pushed the government into launching treatment programs for the virus by 2004.²⁵ Social struggle against the state is what forced it to offer treatments for HIV and ultimately forced it to end the campaign of misinformation (which at one point even denied that HIV caused AIDS). Sadly, about 7.5 million South Africans have HIV as of 2021,²⁶ with the super majority of them being Black people.²⁷ The end of apartheid has not ceased white supremacist power in the country either as 72% of all individually-held land in South Africa is still owned by white people as of 2019²⁸ and nearly

²³ Liam James Kingsley, *Paying the ultimate price*. https://africasacountry.com/2020/05/paying-the-ultimate-price

²⁴ Kaiser Family Foundation, *Black Americans and HIV/AIDS: The Basics*. Published in Feb 7th 2020. https://www.kff.org/hivaids/fact-sheet/black-americans-and-hivaids-the-basics/

²⁵ Treatment Action Campaign, Our History. https://www.tac.org.za/our-history/

²⁶ Be in the Know, At a glance: HIV in South Africa.

https://www.beintheknow.org/understanding-hiv-epidemic/data/glance-hiv-south-africa

²⁷ M. Mabaso, L. Makola, I Naidoo, L. L. Mlangeni, S. Jooste, L Simbayi. *HIV prevalence in South Africa through gender and racial lenses: results from the 2012 population-based national household survey*. https://pubmed.ncbi.nlm.nih.gov/31666077/

²⁸ Ariel Levy, Who Owns South Africa?. https://www.newyorker.com/magazine/2019/05/13/who-owns-south-africa

40% of the Black population (the super-majority demographic) are unemployed as of Spring 2022.²⁹ With neo-colonial rule persisting in spite of anti-colonial struggle rupturing for centuries, it is logical for the state to desire the infliction of an immune system destroying virus to spread among the most marginalized/exploited populations. The conditions of unemployment, resource impoverishment, and continued colonial rule is absolutely unbearable for the dispossessed native population. Yet, it is much harder to dismantle institutions of oppression when a common cold can kill you. In the context of a population that carries a living memory of resistance which won tangible victories, a sophisticated counter-insurgency program is required to maintain the hyper-exploitation. State intervention earlier on against the HIV epidemic would had saved a massive amount of lives; however, it would had also made it harder to sustain the oppression required for neo-colonial rule.

This web of counter-insurgency is also a corner stone for the so-called southern "United States," and the spread of HIV there is definitely a feature of that repressive structure for the most marginalized Black people in that region. Because of the South's settler colonial roots tied to chattel slavery, foundational to the wealth of the "US," there, in contradiction, exists a revolutionary current against the subjugation of Black people via maroonage and slave revolts which culminated into an eruption in the form of a general strike during the first "American" Civil War which shook the whole country's foundation.³⁰ Reconstruction would arise out of this revolutionary general

²⁹ Department of Statistics South Africa, *Quarterly Labour Force Survey: Quarter 2: 2022*, pg 24. <u>https://www.statssa.gov.za/publications/P0211/P02112ndQuarter2022.pdf</u>

³⁰ For analysis of this general strike, W.E.B. Dubois' *Black Reconstruction* talks in great detail on the subject in the chapters "The General Strike" and "The Coming of the Lord;" this book is an essential read for anyone engaged in revolutionary struggle within the so-called "United States." For analysis on maroonage and other slave revolts in that country, Russell

strike; however, so too would the reactionary forces of the region modify shape to crush the newly acquired political and economic gains of Black people. This counter-insurgency structure would implement Jim Crow laws inspired by the pro-slave laws before the general strike; yet also key to this anti-revolutionary foundation included state-sanctioned paramilitary violence from white workers and bourgeoisie, an intense culture of Christianity, explicitly fascist state governments, the plantation's revival by incarceration, strong emphasis on the nuclear family, as well as additional cross-class measures designed to materially impoverish Black people in the region. Though these revolutionary currents have not disappeared (emerging in situations such as Robert F. William's NAACP chapter and moments of the so-called "Atlanta, Georgia" wing of the George Floyd uprising), this colonial structure for counter-insurgency persists today even in spite of the gains made by the civil rights movement. It is in this region, where abstinence-only "sex education" is the status quo, and a sexually-repressed culture nourished by both Christian hegemony as well the nuclear family form, where the majority of Black people with HIV (58%) in the "United States" live.³¹

Though the South is not the only region where HIV is a problem, it does contain factors that especially enable the virus to flourish. Insurance is difficult for Black people (especially of the most marginalized) to access in the "United States," as insurance premiums often end up being 20% of their income, with many Black people relying on medicaid as their sole insurance provider; this results in 10% of the Black population in the "United States" being uninsured.³² And insurance is even harder to acquire in the South, as many southern states, including those with the highest Black populations in

Maroon Shoatz's *The Real Resistance to Slavery in North America* is an essential starting place.

³¹ Kaiser Family Foundation, *Black Americans and HIV/AIDS: The Basics*. Published in Feb 7th 2020. https://www.kff.org/hivaids/fact-sheet/black-americans-and-hivaids-the-basics/

the country, have not expanded medicaid.³³ It does not help that anti-Black medical racism, especially of the (trans)misogynoir variety, flows rampant in the plurality of medical institutions throughout the "US," and therefore makes treatment less reliable. These particular factors make HIV harder to address, allowing it to hurt notable segments of the Black population, especially Black trans women,³⁴ Black cis women, and other Black QTGNC people.³⁵ While the amount of HIV per-capita is less with Black people overall in the "United States" compared to Black people in a notable amount of African countries, it is still a prevalent issue among transmisogynoir affected people in the "US." It is especially concerning as transmisogynoir is escalating via state violence and anti-trans panic. This hyper-repression of the most marginalized in society is a core feature of counter-insurgency, as those most oppressed have more to gain and less to lose in the liberation struggle. Nonetheless, HIV is one of the components that repress some of the most marginalized segments of the Black population in the South, and the way it has been approached in the region has provided a blueprint for addressing the defining epidemic of the 2020's.

Yet, it must be recognized how a crucial element of HIV contagion under racial capitalism is the usage of cisheteropatriarchy to maximize spread and oppression. In the "United States" context, this arose by the strengthening of

³² Jamila Taylor, *Racism, Inequality, and Health Care for African Americans*. Publish in December 19th 2019. https://tcf.org/content/report/racism-inequality-health-care-african-americans/?session=1&utm_source=yahoo&utm_medium=referral&utm_campaign=in-text-link&session=1

³³ Ibid.

³⁴ CDC, *Transgender Women Urgently Need More HIV Prevention and Treatment Services*, *New CDC Data Show*. Published in April 15th 2021. https://www.cdc.gov/media/releases/2021/p0414-trans-HIV.html

³⁵ Kaiser Family Foundation, *Black Americans and HIV/AIDS: The Basics*. Published in Feb 7th 2020. https://www.kff.org/hivaids/fact-sheet/black-americans-and-hivaids-the-basics/

sexual stigmatization, militant patriarchal violence, and denial of care especially toward Black QTGNC people, in a backlash against the advancement of both anti-colonial as well anti-cisheteropatriarchal struggle through both the 1960's-70's and the 2010's. As well, after decades of major anti-colonial rebellion across the continent, the neo-colonial presence in locations such as South Africa required a more complex social composition of repression to substitute for the brute colonial rule that apartheid served. A main aspect of this repressive web is cisheteropatriarchy through the household level. While the cisheteropatriarchy which defines racial capitalism originated from Europe, and would take centuries of colonial domination to implement, it has proven to be an effective tool for maintaining a social unit fit for capitalist exploitation, and for building an element of loyalty to the racial capitalist order. In South Africa, cis women across the board, and especially Black cis women, suffer higher rates of HIV than all cis men.³⁶ It was also found in South Africa that HIV positive (cis) women were 50% more likely to report situations of domestic violence from their partner than HIV-negative (cis) women.³⁷ These horrific trends emerge in a context where the unemployment rate of gender marginalized people broadly is high, and the social status of (cis) Black women in communal land shrinks as pollution from extractivist projects make their labor of subsistence farming

³⁶ M. Mabaso, L. Makola, I Naidoo, L. L. Mlangeni, S. Jooste, L Simbayi. *HIV prevalence in South Africa through gender and racial lenses: results from the 2012 population-based national household survey.* https://pubmed.ncbi.nlm.nih.gov/31666077/

³⁷ K. Shannon, K. Leiter, N. Phaladze, Z. Hlanze, A. C. Tsai, M. Heisler, V. Iacopino, S. D. Weiser, Gender Inequity Norms Are Associated with Increased Male-Perpetrated Rape and Sexual Risks for HIV Infection in Botswana and Swaziland. Publish in January 11th 2012. https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0028739

less feasible, coercing them to rely more on cis men for survival.^{38,39,40} Cis men acquired more leverage to exploit gender marginalized people as a result of HIV, whether in the doctor's office of some southern "United States" town or a home on communal land tainted by some mining project.

As the bourgeoisie in South Africa de-industrialize the country and expand an especially Earth-annihilating economic model called extractivism—focused around ripping raw material from the land while it becomes uninhabitable— the need for people to live shrinks.⁴¹ Extractive economies in this era of capitalism generally do not require much labor to carry out, hence the country's high unemployment rate. The growth of automation and reliance on extractivist commodity production has resulted in a smaller amount of proletariats within the labor-capital relationship, forcing many of them to be purely dispossessed people existing as a surplus population. Through climate change destabilizing the supply chain and other pieces of the accumulation process, capital will need less lives in order to breathe. A higher surplus population is growing as a result of ecological catastrophe too, one with many extraneous elements due to the degrading conditions developing more revolters and disabled bodyminds. Capital seeks to kill off the extraneous population because of them being harder to exploit, and Black people are

³⁸ Mandisa Mbali, *Women in South African AIDS Activism: Towards a Feminist Economic and Political Agenda to Address the Epidemic*. https://sfonline.barnard.edu/women-in-south-african-aids-activism-towards-a-feminist-economic-and-political-agenda-to-address-the-epidemic/

³⁹ L. D. Villiers, A. Thomas, D. Jivan, G. Hoddinott, J. R. Hargreaves, V. Bond, A. Stangl, P. Bock, L. Reynolds, *Stigma and HIV service access among transfeminine and gender diverse women in South Africa – a narrative analysis of longitudinal qualitative data from the HPTN 071 (PopART) trial.* Published in 2020. https://bmcpublichealth.biomedcentral.com/articles/10.1186/s12889-020-09942-5

⁴⁰ Khayaat Fakier and Jacklyn Cock, *Eco-Feminist Organizing in South Africa*, pg 20.

⁴¹ Jean Imbs, *The Premature Deindustrialization of South Africa*. https://link.springer.com/chapter/10.1057/9781137335234_20

especially targeted due to being positioned around the nadir of "human otherness;"⁴² it is for this reason why the super-majority Black populated province of Gauteng has 1.6 million people living near environmentally toxic land⁴³ and why Hurricane Katrina harmed in particular the Black communities of so-called "New Orleans." With South Africa consisting of a large unemployed as well impoverished Black proletariat whom posses a living long memory of revolt against the racial capitalist order, additional measures beyond environmental racism are needed to subdue them. The structure of cisheteropatriarchy allows for HIV to be a bargaining chip between proletariat cis men and the bourgeoisie: the deal being to spread this virus that destroys people's immune systems in exchange for additional power over gender marginalized people's bodyminds as well their labor for care. This alliance has contributed to making South Africa become the country with the highest known amount of HIV on Earth,⁴⁴ and a larger population whose bodyminds are less equipped to execute conventional methods of rebellion.

HIV as a weapon continues to be wielded, but a novel virus identified by 2019 has been reigned into this arsenal. Severe Acute Respiratory Syndrome Coronavirus 2 or SARS-COVID-2, commonly recognized as COVID, infects primarily via airborne contact.⁴⁵ While its initial acute phase has slain at least 6.7 million people world wide,⁴⁶ SARS-COVID-2 is especially dangerous for its mid and long term impact. One infection alone can increase the chance of

⁴² Sylvia Wynter, Unsettling the Coloniality of Being / Power / Truth / Freedom: Towards the Human, After Man, its Overrepresentation—an Argument, pg 301.

⁴³ Khayaat Fakier and Jacklyn Cock, *Eco-Feminist Organizing in South Africa*, pg 18.

⁴⁴ L. D. Villiers, A. Thomas, D. Jivan, G. Hoddinott, J. R. Hargreaves, V. Bond, A. Stangl, P. Bock, L. Reynolds, *Stigma and HIV service access among transfeminine and gender diverse women in South Africa – a narrative analysis of longitudinal qualitative data from the HPTN 071 (PopART) trial.* Published in 2020.

⁴⁵ CleanAirCrew, COVID is Airborne. https://cleanaircrew.org/covid-is-airborne/

heart issues by 63% with even mild cases,⁴⁷ have a tendency to scar the brain in a manner similar to Alzheimers with the brain cells annihilated by COVID,^{48,49} as well cause neurological problems in 1/3rd of the people it harms,⁵⁰ and force its host to have a 50% higher chance to contract a stroke, as well acquire other issues as the virus primarily attacks through the cardiovascular system.⁵¹ COVID kills the same portion of the immune system (CD4 T-cells) that HIV destroys, with those cells not regenerating at least in the mid-term (there needs to be more studies regarding how COVID affects T-cells in the long run).⁵² No meaningful immunity is built from getting sick via COVID as a result of this. The virus is even more lethal with repeated cases, as people with 2 or more infections of COVID were 3 times as likely to get blood clots, heart problems and lung issues, and as well become twice

⁴⁶ World Health Organization (WHO), *WHO Coronavirus (COVID-19) Dashboard*. https://covid19.who.int/

⁴⁷ Mariana Lenharo, *Even Mild COVID Can Increase the Risk of Heart Problems*. Published in March 16th 2022. https://www.scientificamerican.com/article/even-mild-covid-can-increase-the-risk-of-heart-problems/

⁴⁸ Jennifer Abbasi, *Even Mild COVID-19 May Change the Brain*. Published in March 23rd 2022. <u>https://jamanetwork.com/journals/jama/fullarticle/2790595</u>

⁴⁹ Erin Prater, *Scientists made mini brains and infected them with coronavirus. What they saw could explain Long COVID.* Published in November 5th 2022. https://fortune.com/well/2022/11/05/mini-brain-organoids-covid-infection-neurologic-symptoms-synapses-long-covid-pruning-stroke-depression-anxiety-memory-migraines-parkinsons-alzheimers-tremor-headache-confusion-brain-fog-mood-disorder/

⁵⁰ M. I. Stefanou, L. Palaiodimou, E. Bakola, N. Smyrnis, M. Papadopoulou, G. P. Paraskevas, E. Rizos, E. Boutati, N. Grigoriadis, C. Krogias, S. Giannopoulos, S. Tsiodras, M. Gaga, G. Tsivgoulis, *Neurological manifestations of long-covid syndrome: a narrative review*. Published in February 17th 2022. https://pubmed.ncbi.nlm.nih.gov/35198136/

⁵¹ Kristina Sauerwein, *COVID-19 infections increase risk of long-term brain problems*. Published in September 22nd 2022. https://medicine.wustl.edu/news/covid-19-infectionsincrease-risk-of-long-term-brain-problems/#:~:text=A%20comprehensive%20analysis %20of%20federal,the%20first%20year%20after%20infection

⁵² Andrew Nikiforuk, *What if COVID Reinfection Wear Down Our Immunity*? Published in November 7th 2022. https://thetyee.ca/Analysis/2022/11/07/COVID-Reinfections-And-Immunity/

as likely to die for any reason.⁵³ Despite being effective against the initial infection period, Vaccines have been found to reduce the chance of these horrific Long COVID symptoms only by 15%!⁵⁴ SARS-COVID-2 functions in parallel to HIV as a snaring bath of gasoline, with the match being either another virus like Influenza, RSV, or a bodily organ fatally malfunctioning.

COVID's utilization in the so-called "United States" context bears all the traits which define how the virus is wielded as a weapon by racial capitalism. First is the epidemic targeting a racialized demographic in whom it harms the most. With Smallpox, it was primarily Indigenous people of Turtle Island and Abya Yala, and in some historical moments revolting Black people; for HIV, those facing the most harm by it are Black QTGNC people as well Black gender marginalized people broadly; with COVID in the so-called "US" it is Indigenous people and Black people as well non-Black Latinx people of color, and—through the social element of the pandemic via scapegoating those under the category of Asian American. The virus is merely just one of the tools used for sustaining colonialism. It is for this reason why Smallpox was intentionally spread against Indigenous people whom were resisting the colonial violence, why HIV was even allowed to flourish in a continent where a 20th century of rebellion legitimately shook the power of the metropole countries, and why restaurants were permitted to re-open in socalled "Minnesota" swiftly after the 3rd precinct burned.⁵⁵

⁵³ Maggie O'Neill, *It's Really, Really Worth Trying to Avoid Getting COVID Multiple Times*. Published in November 15th 2022. https://www.self.com/story/covid-reinfection-health-risks-study

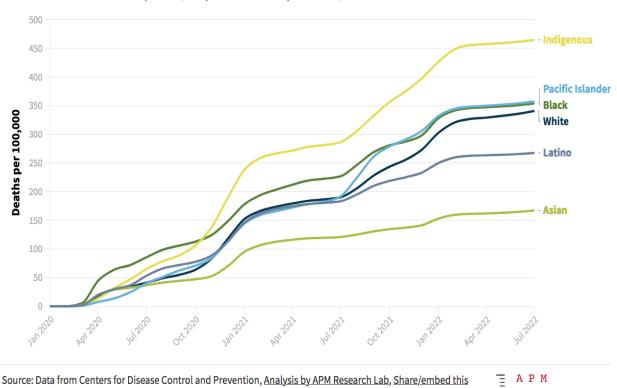
⁵⁴ Z. Al-Aly, B. Bowe & Y. Xie, *Long COVID after breakthrough SARS-CoV-2 Infection*. Published in May 25th 2022. https://www.nature.com/articles/s41591-022-01840-0

⁵⁵ Joy Summers, *Minnesota Restaurants and Bars Pause Dine-In Service Again*.https://twincities.eater.com/2020/11/18/21573774/minnesota-restaurant-bars-dining-rooms-closed

Though these viruses were not born as weapons, their existence has been exploited to be shaped for quashing revolt. Additionally, an element of disablement is also a definitive trait for these viruses being utilized to sustain racial capitalism. With smallpox, the epidemics in particular took advantage of many Indigenous people having weaker immune-systems due to the nature of colonial war destabilizing their way of living; in the case of HIV and also COVID it is the manner these two viruses eviscerate the immune system to allow other diseases to deliver the killing blow. When a population becomes broadly disabled by the ongoing motions of racial capitalism, conventional militant tactics become much harder to pull off as the bodyminds of disabled people often require an alternative approach to struggle in order to meaningfully fight; in other words, mass infection often forces the oppressed population to utilize different strategies in order to maintain revolutionary struggle.

In all instances of viruses being wielded for capitalism, a specific extraneous population is targeted for murder. With Smallpox, it was Indigenous people whom either could not or refused to assimilate into the racial capitalist order. In the context of HIV, it is QTGNC Black people and other Black gender marginalized people. With COVID, the main victims are disabled people (especially Black and Indigenous disabled people). Yet for these viruses to flourish as an effective epidemic, cross-class alliances were needed to be mobilized for infliction. Smallpox would not have been as deadly if not for the white proles collaborating with the bourgeoisie to infect Indigenous people in exchange for land; many people with HIV caught the virus from working class cis men in collaboration with the bourgeoisie by spreading it to acquire excess power over gender marginalized people; COVID is having unprecedented spread after the bourgeoisie bought out (primarily white) abled bodymind proles with access to bars, indoor dining, and a

psychological wage of stability⁵⁶ for the price of massacring disabled people. The harm of these viruses were distributed by the color line, serving as ammunition of counter-insurgency, taking advantage of disabled people's bodyminds to hurt them even more, in order to wipe out certain populations through the help of proles aligned with the bourgeoisie.



COVID-19 Cumulative Crude Death Rates in the U.S.

Number of COVID-19 deaths per 100,000 persons as of September 7, 2022

Source: Data from Centers for Disease Control and Prevention, <u>Analysis by APM Research Lab</u>, <u>Share/embed this</u> <u>graph.</u> • Crude death rates are the actual number of deaths per 100,000 within the given race/ethnicity group and are not adjusted for age.

Image description: A graph of COVID deaths per capita by race in the "United States" from January 2020 to July 2022. Indigenous people overwhelmingly died from the virus, with over 450 dead per 100,000. Black people and Pacific Islanders are above 350 dead per 100,000 of them. White people are above 300 dead per 100,000 of them. With Latinx people its a little

⁵⁶ Inspired by W.E.B. Dubois' concept of the psychological wage of whiteness described in pages 700-701 of *Black Reconstruction*. This phenomenon of the psychological wage of stability is primarily exhibited in white people, as it is amplified by the power they gain through white supremacy.

above 250 dead per 100,000. For Asian Americans it's around 150 dead per 100,000. The graph was made by the APM Research Lab.

To describe the COVID epidemic's peculiarity with its connection to eugenics broadly, clarity is first needed to explain the ongoing genocide of disabled people. Eugenics is a historical process, one created with the formation of a bodymind whom can be easily exploited for labor as the cross-class mold of the "abled" bodymind. This abled bodymind exists in contradiction with disabled people—who possess a bodymind defined by having bodily features which make it harder to be exploited consistently for accumulating capital. Eugenics has existed long before the 19th century, arising 500+ years ago when the capitalist world-system began to congeal, persisting through the checkpoints in the Trans-Atlantic slave trade literally designed to wipe out enslaved disabled Black people,⁵⁷ lending support to killing off disabled Indigenous people whether via Smallpox or other forms of medical neglect, and serving as the basis for erecting houses of corrections in England to assimilate disabled people by "curing" their flesh into having an abled bodymind.^{58,59} It persists today in the so-called "United States" by structural resource neglect forcing numerous disabled people into the streets (1/4th of known houseless people there are disabled),⁶⁰ with 50% of police murders each year being disabled people (especially those who are also Black),⁶¹ and

⁵⁷ C. L. R. James, The Black Jacobins, pgs 7-9.

⁵⁸ S. S. Tollit, *Transactions of the Historical Society of Lancashire and Cheshire*, pgs 69-90. 59 Ridley, *A Brief History of the Tudor Age*

⁶⁰ United States Interagency Council of Homelessness, *Homelessness in America: Focus on Chronic Homelessness Among People With Disabilities.* https://www.usich.gov/resources/uploads/asset_library/Homelessness- in-America-Focus-on-chronic.pdf. This source only believes that 1/4th of all houseless people are disabled. However, since data on houselessness is tough to collect and often carry flaws, the amount of disabled houseless people could be higher than recorded.

⁶¹ M. O'Hara, *Up to half of people killed by US police are disabled*. https://www.theguardian.com/society/2016/mar/29/media-must-report-police-violence-towards-disabled-people

nearly 1/3rd of all the country's prisoners being disabled people⁶² (within an industrial complex which heavily incarcerates Black and Indigenous people). The goal of this historical process is to mono-crop the broader population to consist of only abled bodymind folks inherently fit for working as a cog in the capital accumulation process, to assimilate all "salvageable" disabled people as potential workers and exterminate those whom cannot become use values for the growth of capital. Assimilation was usually something only offered to white disabled people, as they are categorized still as "man" and therefore not entirely exempt from liberal humanist values; however, centuries of struggle against white supremacy has allowed some disabled BIPOC to access assimilation as a concession of resistance. The proponents of this historical process are the bourgeoisie, who reproduce a lie that they "earned" their wealth through being "naturally the hardest workers." It is also supported by working class abled bodymind folks who prioritize the existence of "normal" folks over that of disabled people; and they as "normal" carry a particular hatred aimed at those whom cannot serve as workers. Even in spite of temporarily sparing some lives via assimilation, eugenics is a violent process. It is fueled by disabled blood. It speaks in the language of violence. It breathes and moves by violence. It only comprehends violence.

Though originally a nuisance for the bourgeoisie (before they seized it as a tool for annihilating a "useless" demographic), COVID served as an opportunity to repress an increasingly ungovernable population. While climate change is brewing barriers against the supply chain and unleashing weather patterns that hinder even labor exploitation, a surplus population is growing as the degrading environment is simply making it harder to

⁶² J. Bronson, L. M. Maruschak, M. Berzofsky. *Disabilities Among Prison and Jail Inmates*, 2011-2012. https://bjs.ojp.gov/content/pub/pdf/dpji1112.pdf

accumulate capital. Although disability is not inherently bad, and is not inherently a product of toxic ecosystems, the poisoning of the Earth does alter the bodyminds of various people into possessing bodily features that make it harder for the person to be useful as a cog in the capital accumulation process. The further poisoning of the planet and the escalating instability of the "free market" also has been producing more rebels against racial capitalism. This is the context of the "United States," as resistance and flare ups throughout the 2010's erupted into the George Floyd uprising, a rebellion that quaked the country to its core as millions of people finally had enough with racial capitalism and state-sanctioned colonial violence.

An extraneous population of resisters and disabled people was a problem that needed to be addressed for the governing institutions of statecraft and capital, as prisons and houselessness were not enough to suppress insurgency nor would "efficiently kill off enough" disabled people who were a "drain" to profits. COVID offered the perfect solution for this issue. It is a deadly virus for disabled people,^{63,64} yet is "mild" enough for vaccinated abled folks that it can be ignored as a "cold" or "flu." It also is a virus which primarily stings in the medium and long term, which means it can allow capital to use up the life force of an "abled" person and then toss them out through death via Long COVID, without having to provide care to them once their newly disabled bodymind makes that person into an "unprofitable return of investment". It helps too that the design of most prisons allow COVID to circulate through

⁶³ Syracuse University, *COVID was deadlier for those with intellectual and developmental disabilities*. Published on September 13th 2022. https://medicalxpress.com/news/2022-09-covid-deadlier-intellectual-developmental-disabilities.html

⁶⁴ E. Browne. *CDC director Rochelle Wallensky Tweets After Backlash Over Omicron Death Comments*. https://www.newsweek.com/cdc-rochelle-walensky- tweets-backlash-comments-omicron-death-comorbidities-1667329

the cells like Zyklon B in the gas chambers, transforming these plantations into slaughterhouses of ableist violence.⁶⁵

It benefitted the bourgeoise that the George Floyd uprising faltered on attacking ableism despite its escalation within the prison industrial complex, leaving the ground fertile for a counter-revolution spearheaded by the motions of eugenics. In spite of the practice of "we protect us" and mutual aid widespread in this massive revolt, too many abled working class folks would reject solidaristic ethics in favor of access to in-person sites of consumerist entertainment and for a psychological wage of stability that veils the crumbling trajectory of society. They partake in "COVID over" and pay it with disabled blood, as this orgy of commodity consumption and murder paved the land (again) for complicity in midst of expanding police budgets as well attacks on bodily autonomy. Through this cross-class alliance, public space has become lethally inaccessible as many (primarily white) abled people refuse to keep masking (as masks pierce the mirage of "normal"). Abled roommates and loved ones even partake in this blood fest at the expense of their disabled roomies' and/or loved ones' lives. A genocide is escalating, one with abled proles and the bourgeoisie working hand in hand to make existence for disabled people impossible. COVID allowed for something eugenics never had access to before, which was the ability to turn the breathing of abled bodymind folks into bioweapons against disabled people. It is the weaponization of COVID that allows eugenics to be an effective tool for a growingly eco-fascist society, as it can massacre down current and future disabled people even as climate change impedes on capital's accumulation.

⁶⁵ Meg Anderson, Huo Jingnan, *As COVID spread in federal prisons, many at-risk inmates tried and failed to get out.* https://www.npr.org/2022/03/07/1083983516/as-covid-spread-in-federal-prisons-many-at-risk-inmates-tried-and-failed-to-get-

The rest of this visit in the arsenal will focus on this genocide being executed by COVID spread in the so-called "United States." First there will be an overview of this pandemic in that country. Then there will be an interrogation on Long COVID as well how its being weaponized too. The participation of abled (primarily white) proles in this genocide will be followed up as many bask in eugenicist hedonism rather than reject their vicious pact that the bourgeoisie forged with them. This will lay the ground to discuss how the bourgeoisie and the state utilize the virus to quell revolt and to make themselves stronger at the expense of all life, advancing the push toward ecofascism. The final section will be about defeating the SARS-COVID Genocide, which will require a praxis against eugenics acting with a dialectic of militant care, attack, and theorization. Eugenics is ultimately a head of the broader racial capitalist hydra,⁶⁶ and its defeat will require a program of disorder that contradicts this genocide into the point of blossoming a social struggle for disability liberation.

No historical process is impossible to weaken or defeat. The mortality of cisheteropatriarchy is exposed when the rapists are retaliated against, as well as when trans and gender expansive people combat the socially-imposed contradiction of cis men and cis women. Capitalism's fragility begins to crack when the labor-capital relationship is attacked, whether through the disruption or shattering of the means of production, and in situations where private property is at once contested as well revealed as a social construct. The reach of colonialism has only retracted whenever the people its oppresses refuse the brutal daily violence and fight back. The history of

⁶⁶ Inspired by the Zapatista concept of the capitalist hydra, not Russell Maroon Shoatz's conception of the hydra resistance form described in the incredible essay *The Dragon and the Hydra*.

resistance against all historical processes of oppression, and the hierarchies they maintain, exposes that liberation is not only possible, but is only viable when the social relations which these oppressions sustain are attacked. Since eugenics is also a historical process of oppression, it is defeatable. The downfall of eugenics is visible when the anti-masker is no longer presumed as an "innocent misinformed" person—but rather when they are recognized as a eugenicist who is part of the same historical continuum as the intentional smallpox spreader before them, and those today whom call the cops on (usually racialized) disabled people for having a mental breakdown in public. And this path of abolishing eugenics grows closer when the anti-masker get attacked for their lethal ableist violence of spreading a deadly virus. The weakness of eugenics then appear when the prisoners are broken free no matter their bodymind, when the sweeps against encampments are shut down, and when the refusal to partake in COVID precautions is treated as a mass act of violence similar to shooting a gun into a crowd. The non-linear historical projection of eugenics is realized when the empty buildings are squatted, providing housing for disabled people including those whom are most marginalized, and when disabled people are able to access the means to live without being required to work or prove "useful" as workers. These motions of disability liberation are only possible when whiteness is attacked also, when transphobia is treated properly as a danger to fight, when all hierarchical rule is recognized as barriers against liberation. Nonetheless, the seeds of resistance can begin with street propaganda that threatens rather than coddle the anti-masker, through militant care that keeps disabled people alive whether in the houses or streets or prisons, with verbal confrontation against those that seek for the death of disabled people, and through attempts to shut down super-spreader sites.

As partisans from Greece and so-called "Chile" recognized:

"The only battle lost is one not fought."

Read More At: https://fighteugenics.noblogs.org/

"The harm of these viruses were distributed by the color line, serving as ammunition of counterinsurgency...in order to wipe out certain populations through the help of proles aligned with the bourgeoisie."

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