

# Special Investigation into Project Coast

## SOUTH AFRICA'S CHEMICAL AND BIOLOGICAL WARFARE PROGRAMME

### ● INTRODUCTION

- 1 The Commission's hearings into South Africa's Chemical and Biological Warfare programme (the CBW programme, also known as *Project Coast*) during the 1980s and early 1990s, were held in Cape Town in June and July 1998. The hearings focused on the apparently offensive (as opposed to defensive) aspects of the programme. The image of white-coated scientists, professors, doctors, dentists, veterinarians, laboratories, universities and front companies, propping up apartheid with the support of an extensive international network, was a particularly cynical and chilling one. Here was evidence of science being subverted to cause disease and undermine the health of communities. Cholera, botulism, anthrax, chemical poisoning and the large-scale manufacture of drugs of abuse, allegedly for purposes of crowd control, were amongst the projects of the programme. Moreover, chemicals, poisons and lethal micro-organisms were produced for use against individuals, and 'applicators' (murder weapons) developed for their administration.
- 2 The CBW programme, which was developed and supported by scientists, health professionals, research laboratories and front companies, fell under the nominal control of the surgeon-general of the armed forces. Ostensibly designed and conducted to support a 'defensive capability' in response to perceived external threats and international developments, the CBW programme displayed numerous bizarre aberrations of policy, management and intent. Overall approval and budget control lay with a central management committee which included the chief of staff of the defence force, the chief of staff of intelligence, the surgeon general as project manager and the project leader, Dr Wouter Basson. It became clear at the hearing that the overall command by the surgeon general and his colleagues on the co-ordinating committee was either ignored, or alternatively that they themselves were complicit in the programme's criminal aberrations.

- 3 One of the curious aspects of the CBW programme was the high level of respect it enjoyed with the military and the government of the day. The facts, as they emerged in the Commission's hearings, show that this respect was misplaced. The scientific research undertaken by the project was pedestrian, misdirected, ineffectual and unproductive. It was also exorbitantly expensive, costing the nation tens if not hundreds of millions of rands. Moreover, the evidence that emerged at the Commission's hearings demonstrates that it resulted in the substantial self-enrichment of several of the individuals involved.
- 4 The investigation began with a single amnesty application, a small number of confiscated technical documents relating to the programme and documentation from the Commission's Research Department. It expanded into a comprehensive exposé, based on more than 150 documents, *affidavits*, amnesty applications and interviews. The results provide a basis for further investigation of the individuals involved and their apparently unprofessional and criminal activities. They also ensure that such aberrations in national policy and individual behaviour are chronicled and prevented from happening again. In this regard, there may also be lessons for the international community.

## ● METHODOLOGY

- 5 The Commission's exploration of the South African Defence Force (SADF) chemical and biological warfare programme began in 1996 with a top secret briefing by Mr Mike Kennedy of the National Intelligence Agency (NIA) and the surgeon general, Dr DPKnobel, to a select group of Commission officials who had received security clearance from the NIA. The gist of the briefing was that although South Africa had had a CBW capability in the past, it had been defensive in nature and had subsequently been dismantled.
- 6 After this briefing, the Research Department began to look at the background to the programme and its implications, relying on the information that was available. This included press clippings, a few intelligence reports and some information gathered by Mr Claus De Jonge who was asked to look at the programme in Europe. The Research Department then drew up a list of anti-apartheid activists who had been the target of poisonings or suspected poisonings (for example, the attempted assassination of the Reverend Frank Chikane in 1989). This led the Commission to conclude that toxins may have been used by the security forces in their war against the 'total onslaught', a conclusion later corroborated by former operatives of the SADF.
- 7 The arrest of Dr Basson and the seizure of four trunks containing documents related to *Project Coast* in January 1997 provided the Commission with proof that there was more to the programme than had initially met the eye. The Commission was one of four interested groups with access to the trunks, the other three being the Office for Serious Economic Offences, the Gauteng Attorney-General's Special Investigation Team and the NIA. An agreement was struck between the parties that the Commission would have unhindered access to the information in the trunks.
- 8 In 1997, the Commission decided to call the project officer, Dr Basson, for a section 29 *in camera* hearing, in an attempt to glean more information about the programme and its relation to human rights abuses. Before the *subpoena* could be enforced, the Commission was approached by the Attorney-General and the NIA. The Commission was persuaded that enforcing the *subpoena* could be detrimental to the case that the Attorney-General

was building against Dr Basson, and that it could jeopardise state security. The Commission was requested to hold a meeting with the Deputy President, which would be organised by the NIA, to discuss these matters. The Commission agreed and Dr Basson was informed that he would not be required to appear before an investigative hearing at that stage.

- 9 A series of meetings between the Commission and the NIA took place but no meeting with the Deputy President was forthcoming. The Commission issued a second *subpoena* to Dr Basson in February 1997. Again, the NIA intervened and the Commission agreed not to enforce the *subpoena* until it had consulted with the necessary parties.
- 10 By August 1997, two related amnesty applications had been identified. The Commission could no longer postpone its investigation into the CBW programme. It had become clear that investigating only the two amnesty applications and not the operations of the programme in general would represent a neglect of the Commission's duty to uncover the truth.
- 11 It was therefore agreed that an in-depth investigation would be conducted, starting in February 1998. At that stage there were only four months remaining before the Commission would have to conclude all its investigative work.
- 12 Discussions with the office of the Attorney-General again revealed a concern that the Commission's investigation would have a negative impact on its prosecution of Dr Basson. It was clear that an overlap between the two investigations could not be avoided. The group of scientists with information about the programme was small and the amount of information available consequently limited. Although the Commission assured the Attorney-General on a number of occasions that it did not intend to damage his case in any way, progress was slow and at no stage was information shared between the two offices. The NIA continued to share the concerns of the Attorney-General and had additional concerns that it believed to be even more serious. This made for a slow and painful beginning to the investigation, requiring more negotiation than investigation.
- 13 The Office for Serious Economic Offences was, however, very helpful. Although it expressed doubts about the Commission's ability to complete an investigation of such magnitude in so short a period of time, it provided enough information and assistance to guide the Commission in the right direction. Access to documents from the trunks also proved vital to the Commission's case.
- 14 The first real investigative steps involved setting up a number interviews with a wide range of people. In order to make a start, a core group of important individuals was identified. During a series of debriefings with this group and an examination of the vast and confusing evidence that was being gathered, the true complexity of the programme began to emerge. It was soon realised that the limited scientific knowledge available in the Commission was simply not sufficient to help it understand the implications of the research documents from Roodeplaat Research Laboratories and Delta G Scientific. It also became clear that the focus of the investigations would have to be restricted considerably, since time was at a premium and the subject matter was vast.
- 15 Professor Peter Folb, head of the Pharmacology Department at the University of Cape Town, was approached and agreed to provide the Commission with assistance. With his expert help, the Commission was able to decipher the

relevant documents and begin to develop a complete picture of the bizarre type of science that was conducted by these military front companies.

- 16 A computer database of all documents relevant to the investigation was developed and the Commission continued to conduct interviews with scientists and others involved in the programme. It was clear that the hearing (planned for 8 to 12 June 1998) would not be able to touch on all aspects of the investigation. It was decided, therefore, in discussion with the legal officer of the Commission and the commissioners, that the focus of the hearing should be further limited. The potential witness list was also re-examined and a final, shortened list decided upon.
- 17 Two weeks before the hearing was due to take place, government, in the person of the Deputy Minister of Defence, requested a meeting with the Commission to discuss the sensitivity of the hearing. A series of meetings with high level government representatives, including the offices of the President, the Deputy President, the Minister of Defence, the NIA and the South African Council for the Non-Proliferation of Weapons of Mass Destruction ensued. It became clear that there were two reasons for the government's concern about a public hearing. First, that it could violate international obligations in relation to the international proliferation of chemical and biological weapons; and second, that it could jeopardise international relations with countries which may have assisted the programme but with whom South Africa continues to have diplomatic relations. This culminated in a representation by government that the hearing be held *in camera*, a suggestion that was declined. However, provision was made for the presence of a legal representative on behalf of government to ensure that no information was released that could lead to proliferation.

## ● RESULTS OF THE INVESTIGATION

### Individual poisonings

- 18 The discovery of a document which has become known as the '*Verkope lys*' (sales list) and a list of SADF sponsored ('hard') projects conducted at Roodeplaat Research Laboratories provided the Commission with a clear indication that there was an intent to poison individuals, and that the front company, Roodeplaat Research Laboratories, was involved in the development of the toxins used for this purpose. The list, found amongst the documents seized at the time of Dr Basson's arrest, was authored by Dr André Immelman, head researcher on SADF projects at Roodeplaat Research Laboratories. Dr Immelman provided the Commission with an *affidavit* that confirms that he authored the list at a time when he had been required, at Dr Basson's request, to provide a group of individuals with the toxins. The items on the list include anthrax in cigarettes, botulinum in milk and paraoxon in whiskey — in the Commission's view clearly murder weapons. This was, indeed, conceded by witnesses at the hearing and Dr Knobel went so far as to say that, in his view, such a list could not form part of a legitimate defensive programme. The inclusion of a baboon foetus on the list, dated late July 1989 (just prior to such a foetus being found in the garden of Archbishop Tutu's house), as well as a reference to chemical and biological operatives, indicated that the items may well have found their way, directly or indirectly, into the hands of operatives of the Civil Co-operation Bureau (CCB).

- 19 Discussions with members of the CCB indicated that operatives were not necessarily aware of the existence of a CBW programme. They were, however, aware of the capacity of the SADF doctors to provide them with toxins. This was corroborated by a member of the Directorate of Covert Collection who explained to investigators that there was an understanding in their unit that they could get toxins from Dr Basson.

## **Street drugs**

- 20 Documents seized at the time of Dr Basson's arrest indicated that the front company, Delta G Scientific, was involved in the manufacture of significant quantities of methaqualone (mandrax) and ecstasy, and was also involved in researching the possibility of using street drugs for crowd control purposes. This was corroborated at the hearing.
- 21 It was also established that approximately 1 000kg of ecstasy was manufactured in 1992 and was, in all likelihood, encapsulated by Medchem Pharmaceuticals, a subsidiary of the holding company Medchem Consolidated Investments, under which Delta G Scientific also fell. The production manager at Delta G Scientific informed investigators that he had been approached in 1988 by the managing director of the company, Dr Philip Mijburgh, and asked to produce 1 000kg of methaqualone. It is not certain whether this was also encapsulated, but it seems likely. The explanation given by witnesses was that the intention was to use it for crowd control purposes. General Lothar Neethling told the Commission during the hearing that, on three occasions, he had been requested to provide Dr Basson with mandrax tablets confiscated by the South African Narcotics Bureau (SANAB). He claimed that he had given Dr Basson approximately 200 000 tablets in total as well as quantities of LSD and dagga, on the understanding that they would be investigated to determine whether they would be appropriate crowd control weapons. None of the witnesses could provide the Commission with any information about tests that had been conducted in this regard and at least one witness stated that these drugs would not be suitable for such a purpose.
- 22 In August 1988, Delta G Scientific began producing 1 000kg of methaqualone. From the documentation provided by DrKnobel, it seems that tests were carried out on methaqualone as an incapacitant in 1988, and that it was established that it was not effective since it did not take effect immediately. As a result, work on methaqualone stopped at the end of 1988 but work on methaqualone analogues continued. What happened to the 1 000 kg of methaqualone has still not been established. Moreover, at the end of 1991, the Co-ordinating Management Committee of *Project Coast* saw fit to send Dr Basson to Croatia to close a deal with renegade Croatians (including high-ranking government officials) for the purchase of 500kg of methaqualone, which was brought back to South Africa.
- 23 A year later, this was allegedly destroyed after an order that work on all incapacitants should cease. The deal in Croatia was in itself extremely questionable, leading to a loss of millions of rands. Dr Basson intercepted Vatican bearer bonds to the value of \$40 million that had been intended for the purchase of weapons by the Croatian government, leading to his arrest in Switzerland. Why the military was importing such large quantities of methaqualone at such high cost at this late stage of negotiations is not clear and was not adequately answered by Dr Knobel or Dr Basson. The documents also cast doubt on whether these substances were in fact destroyed on 27 January 1993, as alleged.

- 24 Investigations could not trace the drugs produced at Delta G directly to the street. However, Dr Basson was arrested with quantities of ecstasy and mandrax tablets in his possession, and the Steyn report indicates that Dr Basson allegedly offered an operative mandrax tablets in return for an operation. The Commission has a strong suspicion that drugs obtained during the course of this programme may well have found their way onto the streets.

### **Mozambican incident**

- 25 In January 1992, FRELIMO troops conducted an operation near the South African border. During the course of the operation, they were allegedly exposed to what was thought to have been a chemical agent. Some of the soldiers died during the incident and others required hospitalisation.
- 26 A submission by General Pierre Steyn stated that an attack was launched from Komatipoort by South Africans as a training exercise. Investigators were unable to determine the accuracy of this information as use of the Komatipoort airstrip is not regulated.
- 27 After the incident, a series of investigations were conducted by scientific teams from South Africa, Mozambique, Switzerland, Sweden, and the United Kingdom. The reports were inconclusive. The only report that expressed a belief that the troops had been exposed to a chemical agent was that of the British scientist. A United Nations investigation was launched and was also unable to come to any firm conclusions.
- 28 Dr Brian Davy, who had been the head of the South African investigating team, spoke to Professor Peter Folb during the course of the Commission investigation and was unable to provide any further information. Attempts to meet with the British scientist failed. Attempts were also made to access the medical records of the soldiers involved. However, the Mozambican authorities failed to respond to Commission's requests for information. Investigators met with Dr Staub, a member of both the Swiss and the United Nations investigating team. He told them that he believed that the troops had suffered dehydration and had not been the victims of a chemical attack. This explanation struck the Commission's investigation unit as unlikely.
- 29 Investigators also met with Dr Vernon Joynt of Mechem, which could have manufactured the carrier for such a weapon. This interview did not provide any new information of significance.
- 30 Unfortunately, the matter remains unresolved.

### **International links and support**

- 31 Documents in the Commission's possession indicate that Dr Basson travelled extensively to collect information during the initial phase of the CBW programme. He visited Taiwan where he was shown their CBW facilities and provided with significant information, and also attended a conference at San Antonio in the United States in the early 1980s. Documents indicate that, during the apartheid years, members of the SADF visited Israel and West Germany to share information about CBW matters and there was clearly a link with Belgian nationals and companies. Other documents reveal links between the surgeon general and Americans who were part of the United States CBW programme, and demonstrate their willingness to assist the South Africans.

- 32 Dr Basson and other members of the programme travelled extensively. Their links with sanctions busters and other people prepared to assist the South African CBW programme, both officially and unofficially, cannot be doubted. Dr Basson's trips to Croatia during the 1992/3 period indicate that he had a number of contacts throughout the world who could provide assistance in one way or another.
- 33 By the end of 1993, the United States and British governments approached the South African government to express concern about the programme. The motives for the meetings between these two governments and the South Africans are unclear. At the hearing, both Dr Basson and Dr Knobel alleged that the British and Americans had informed them that they did not want the programme to fall into the hands of the ANC government after the election in April 1994. Dr Basson visited the US in 1981 and Dr Knobel had contact with scientists who were part of the American CBW programme much later; the existence of a South African programme was no secret to the Americans or the British. A further indication of such a relationship is a visit by Dr Brian Davey, a medical doctor and former member of the South African Medical Services (SAMS), to Porten Down in 1992, after the alleged attack on Mozambican forces (see above).
- 34 The role of foreign governments in supporting the South African programme is not yet clear. It cannot however be doubted that, without some level of foreign assistance, this programme would not have been possible.

## ● FINANCIAL MISMANAGEMENT

- 35 There is evidence of large-scale fraud and mismanagement of funds of the CBW programme, which is the subject of an extensive investigation by the Office for Serious Economic Offences (OSEO). The Attorney-General provided the Commission with an interim charge sheet that reveals an intention to charge Dr Basson with fraud amounting to R50 million. Because fraud and theft of funds do not form part of the Commission's mandate, and because this is the subject of an investigation by the OSEO, the Commission did not extensively investigate this aspect. It did, however, become clear in the course of our investigations and through evidence given at the hearing that the programme was fraught with financial irregularities.

## ● INSTITUTIONAL AND STRUCTURAL ASPECTS OF THE CBW PROGRAMME

### **Military**

- 36 A management committee (beheerkomitee) was established to oversee the management of the CBW programme. It included the chief of the SADF, chief of staff finances, head of counter-intelligence, chief of staff intelligence, the surgeon-general and the project officer (Dr Basson). The management committee had three working groups: a technical working group, a security group and a group responsible for administration and finances. According to documents provided by Dr Knobel (which include a number of minutes from the meetings of this committee), once the

front companies were established and running, the committee met once a year to approve the project's budget and as needed in the case of emergencies.

- 37 The surgeon general acted as project leader, a role that is unclear at this stage. Dr Basson was project officer and apparently reported both to the surgeon general and the head of Special Forces, and variously to the Minister of Defence, chief of the SADF, Minister of Police, commissioner of police and the chief of staff intelligence.
- 38 Front companies were established to do the work of the programme, with the SADF as the main client. They were also provided with covert funding from the SAMS budget during the earlier period of the programme.
- 39 No one at the hearing was prepared to take direct responsibility for the programme and responsibility has been passed both up and down. It is the Commission's view that, while Dr Basson was clearly a central figure, several of the people involved in the *beheer Komitee* cannot deny responsibility. Unfortunately, the exact responsibility for the programme could not be determined.

## ● ANALYSIS

- 40 The CBW programme in the 1980s and early 1990s was ostensibly established for the purpose of providing the country with a defensive capability. By this it was understood that there should be the necessary expertise to understand and to be able to react to chemical and biological threats posed from outside the country's borders. South Africa should also have the capacity to launch retaliatory attacks in the event of CBW agents being used against South Africa's own forces.
- 41 It was explicitly and repeatedly stated that the intention was not, and never had been, to develop an offensive capacity. Such intent would have been evidenced by large-scale production at factory level, the manufacture of missiles capable of dispersing chemical and biological substances amongst enemy troops ('weaponisation') and the training of troops in their use. There would also have been at least limited evidence of the use of such agents in warfare.
- 42 The exception to this was the express intention of the military to develop crowd control agents. These included standard agents for the purposes of self-sufficiency and novel agents developed through the adaptation of chemicals already in existence. There is also invariably some overlap between defensive and offensive programmes. Although never explained in precise terms, this may be the reason for surplus production volumes.
- 43 In strict military terms, such a defensive programme would need to be managed in accordance with each of a number of criteria. These would include careful compliance with the criteria of defensive capability, sound and disciplined leadership, careful auditing of financial dealings, compliance with international conventions determining the conduct of such military business and reliable and comprehensive systems of accountability. The Commission's hearings showed that the programme failed to meet each and every one of these criteria. In fact, there was consistent evidence of serious departures from these standards.



- 44 Despite the fact that the South African CBW programme during the period under review has now been exposed as showing gross aberrations of intent, discipline, actions, command structures, financial dealings and professional relationships, it was highly regarded within the military, which considered it a successful programme. The military command maintained that *cognoscenti* in the international military community shared this opinion. One of the astonishing aspects that emerged in the hearings was that the professionalism, competence and mystique of the programme were stripped away by the evidence of the very people who participated in it. The hearings revealed a nepotistic, self-serving and self-enriching group of people, misled by those who had a technical grasp of what was happening. They conducted work they deemed to be scientific, but which was underpinned by ideas, suggestions and hypotheses that were bizarre and incompetent.
- 45 Dr Basson's evidence was not fully tested at the hearings because of the legal objections he raised with regard to his forthcoming criminal trial. Initially, Dr Basson's legal representatives indicated that they wished to bring a legal challenge to prevent their client from testifying at the hearing. The panel presiding over the hearing ruled, however, that Dr Basson was compelled to testify. This decision was challenged in the Cape High Court. The court upheld the panel's ruling and ordered Dr Basson to testify before the Commission on 29 July 1998, a mere three days before the mandate to hold human rights violations hearings expired.
- 46 On 29 July 1998, Dr Basson appeared before the Commission without his Pretoria-based legal representatives and asked that the hearing be postponed until they were available. Ultimately, Dr Basson's evidence was only heard on 31 July. Much of the time was spent on legal argument, and the extent of questioning was curtailed.
- 47 Although Dr Basson gave evidence for almost twelve hours, the Commission would have preferred to have had an opportunity to question him more thoroughly. In the event, many questions were left unanswered.
- 48 Dr Immelman, who served as director of the scientific research programme at Roodeplaat Research Laboratories during its existence as a front company for the conduct of the CBW programme, submitted an *affidavit*. A thorough testing of his evidence must now await his cross-examination in court. It is clear from Dr Immelman's *affidavit* that he was directly responsible for the production of items on the '*Verkope lys*'; that he dealt directly with operatives, and that he is accountable for the scientific content of the Roodeplaat Research Laboratories programme in the years in which he held office — in the mid- and late 1980s and the early 1990s. In addition to the obvious issues of professional culpability, negligence and criminal intent that apply to others as well, it has to be said specifically of Dr Immelman that he allegedly had full knowledge of the activities at the laboratories that were under his control.
- 49 Inevitably, the CBW programme achieved little of value or of common good. Enveloped as it was by secrecy, threats and fear, opportunism, financial mismanagement, incompetence, self-aggrandisement, together with a breakdown in the normal methods of scientific discourse, the results were paltry. Tens, even hundreds, of millions of rands were squandered on ideas that had no scientific validity. At best, the programme succeeded in producing for manufacture analogues of CR and BZ incapacitants, and in making local arrangements for protective clothing for troops against mass chemical and biological attack. At worst, the programme had criminal intent.

## FINDINGS

### THE COMMISSION FINDS THAT:

- SCIENTISTS WERE RECRUITED TO THE CBW PROGRAMME FROM UNIVERSITIES AND RESEARCH INSTITUTIONS IN SOUTH AFRICA BECAUSE OF THEIR 'PATRIOTISM' AND LOYALTY TO THE GOVERNMENT OF THE DAY. THEY WERE LURED BY GENEROUS CONDITIONS OF SERVICE, FACILITIES, WORKING ARRANGEMENTS AND PAY PACKAGES.
- WORK WAS CONDUCTED ON A 'NEED TO KNOW' BASIS, SUBVERTING THE VERY PURPOSE OF SCIENCE. THE FREE DISCOURSE OF INFORMATION AND IDEAS THAT CHARACTERISES SCIENTIFIC ENDEAVOUR WAS SUBVERTED. MOREOVER, THOSE WHO WERE APPOINTED WERE INTIMIDATED AND THREATENED, EVEN WITH THEIR LIVES, IF THEY STEPPED OUT OF LINE.
- OVERALL UNDERSTANDING OF THE PROGRAMME, AND ITS CO-ORDINATION AND DIRECTION, WERE VESTED IN THE HANDS OF ONE PERSON, DR BASSON, WHOSE ABILITY AND (IT IS ASSUMED) INTEGRITY WERE UNQUESTIONED BOTH BY THOSE WHO SERVED UNDER HIM AND BY THOSE TO WHOM HE HAD TO REPORT. IT EMERGED IN THE HEARINGS THAT THE MILITARY COMMAND WAS DEPENDENT ON DR BASSON FOR THE CONDUCT AND COMMAND OF THE PROGRAMME, EVEN AT A TIME WHEN THERE WERE SUFFICIENT INDICATIONS THAT DR BASSON MIGHT NOT BE TRUSTWORTHY AND THAT THERE WERE SERIOUS ABERRATIONS IN WHAT WAS HAPPENING.
- THE MILITARY COMMAND, AND PRE-EMINENTLY THE SURGEON GENERAL, DR DP KNOBEL, WERE GROSSLY NEGLIGENT IN APPROVING PROGRAMMES AND ALLOCATING LARGE SUMS OF MONEY FOR ACTIVITIES OF WHICH THEY HAD NO UNDERSTANDING, AND WHICH THEY MADE NO EFFORT TO UNDERSTAND.
- THE CBW PROGRAMME MADE THE SELF-ENRICHMENT OF INDIVIDUALS POSSIBLE AND OPENED THE WAY FOR A CYNICAL SUBVERSION OF ITS OSTENSIBLE AIMS IN THE PRODUCTION OF MURDER WEAPONS FOR USE AGAINST INDIVIDUALS.
- A EXTREMELY COMPLICATED ARRANGEMENT OF FRONT COMPANIES SUPPORTED THE PROGRAMME, A PART OF WHOSE INTENTION WAS A PLAN FOR ITS OWN ULTIMATE PRIVATISATION. THIS, IT APPEARS, WAS INTENDED FROM THE START.
- THE DEVELOPMENT OF THE PROGRAMME WOULD NOT HAVE BEEN POSSIBLE WITHOUT SOME LEVEL OF INTERNATIONAL CO-OPERATION AND SUPPORT.

### THE ROLE OF THE MANAGEMENT COMMITTEE

- THE CBW PROGRAMME, AND IN PARTICULAR ITS GROSS ABERRATIONS, WOULD NOT HAVE SUCCEEDED WITHOUT THE SUPPORT, ACTIVE AND TACIT, OF THE CO-ORDINATING MANAGEMENT COMMITTEE OVER THE PERIOD 1988 TO 1995.

- THE COMMITTEE KNEW OF THE LARGE-SCALE PRODUCTION OF MANDRAX AND ECSTASY AND THEIR PURPORTED USE, BUT DID NOT SEEK TO ESTABLISH REASONS FOR THIS. IT APPROVED OF THE IDEA AND LENT ITS SUPPORT DIRECTLY. THE IDEA OF USING EITHER MANDRAX OR ECSTASY FOR THE PURPOSE OF CROWD CONTROL CONTRAVENES INTERNATIONAL CODES. IN ADDITION, THERE WAS NO SCIENTIFIC BASIS FOR THINKING THAT IT WOULD BE AN APPROPRIATE, SAFE OR SENSIBLE FORM OF CROWD CONTROL.

- THE COMMITTEE WAS AWARE OF AND AUTHORISED BASSON'S TRIPS TO CROATIA, AT GREAT EXPENSE, TO PURCHASE 500KG OF METHAQUALONE AS LATE AS 1992, AND ASSISTED BASSON WHEN HE WAS ARRESTED IN SWITZERLAND IN POSSESSION OF FRAUDULENT BEARER BONDS.

THE SURGEON GENERAL IN PARTICULAR:

- KNEW OF THE PRODUCTION OF MURDER WEAPONS BUT REFUSED TO ADDRESS THE CONCERNS THAT WERE RAISED WITH HIM, ON THE GROUNDS THAT THEY DID NOT FALL UNDER HIS AUTHORITY. HE WAS NEVERTHELESS FULLY AWARE THAT THESE ACTIVITIES HAPPENED IN FACILITIES UNDER HIS DIRECT CONTROL AND WERE PERPETRATED BY STAFF UNDER HIS CHAIN OF COMMAND.

- DID NOT UNDERSTAND, BY HIS OWN ADMISSION, THE MEDICAL, CHEMICAL AND TECHNICAL ASPECTS AND IMPLICATIONS OF A PROGRAMME THAT COST TENS, IF NOT HUNDREDS OF MILLIONS OF RANDS.

- MADE NO EFFORT TO COME TO GRIPS WITH THESE TECHNICAL AND MEDICAL ISSUES, NOTWITHSTANDING THE FACT THAT HE WAS THE HIGHEST-RANKING MEDICAL PROFESSIONAL IN THE MILITARY AND THAT OTHERS IN THE MILITARY WERE WHOLLY DEPENDENT ON HIS JUDGEMENT AND DISCRETION.

- ADVISED THE MINISTER OF DEFENCE, ON 7 JANUARY 1993, THAT SOUTH AFRICA SHOULD CONCEAL FROM THE CHEMICAL WEAPONS CONVENTION THAT THE COUNTRY POSSESSED NGT (A NEW GENERATION OF TEAR GAS RELATED CLOSELY TO CR), RECOMMENDING THAT SOUTH AFRICA SHOULD PROCEED WITH THE RESEARCH AND DEVELOPMENT OF NGT IN A COVERT MANNER WHILE AT THE SAME TIME CONCEALING IT.

- APPROVED THE BUDGET FOR PROJECTS (IN SOME CASES ALONE, AND IN OTHERS IN CONJUNCTION WITH HIS FELLOW OFFICERS ON THE MANAGEMENT COMMITTEE, WITH OR WITHOUT THE FULL UNDERSTANDING OF WHAT HE WAS DOING) THAT HAD AS THEIR PURPOSE THE MURDER OF INDIVIDUALS, AND THE UNDERMINING OF THE HEALTH, IF NOT THE ELIMINATION, OF ENTIRE COMMUNITIES (FOR EXAMPLE, PROJECTS INVOLVING CHOLERA, FERTILITY DRUGS, BOTULINUM, MANDRAX AND ECSTASY).

- AGREED TO THE DESTRUCTION OF DOCUMENTS DESCRIBING THE ACTIVITIES AND THE FINANCIAL ASPECTS OF THESE PROGRAMMES. INSTEAD, HE SHOULD HAVE ENSURED THAT THE DETAILS OF THE PROGRAMME WERE RECORDED AND ACCESSIBLE, WHILE LIMITING THEIR ACCESSIBILITY TO AUTHORISED PERSONS. THIS WOULD HAVE SAFEGUARDED THE MASSIVE INVESTMENT, BOTH FINANCIAL AND IN TERMS OF SCIENTIFIC ACHIEVEMENT, WHILE, ON THE OTHER HAND, GUARDING AGAINST USE OF THE INFORMATION FOR PURPOSES OF PROLIFERATION OR CRIMINAL ACTIVITIES.