

**From:** Boris Nikolic <[REDACTED]>  
**To:** Jeffrey Epstein <jeevacation@gmail.com>  
**Subject:** RE: pass along if you want  
**Date:** Wed, 13 Mar 2013 17:32:28 +0000

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Thank you!

I forwardd it to Bill. H is now in DC on non-stop meetings. Probably will not have time to reply until Friday.

Also I am meting him on Friday and will discuss in more details.

Thanks!

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**From:** Jeffrey Epstein [mailto:jeevacation@gmail.com]  
**Sent:** Wednesday, March 13, 2013 6:15 AM  
**To:** Boris Nikolic  
**Subject:** pass along if you want



Terje Rod-Larsen  8:32 AM (32 minutes ago)

to me



Jeffrey,

I will of course do anything you ask , and follow your lead . If you think important I will divert manpower to it immediately . My initial thoughts, however, are as follows :

Pakistan is vulnerable to polio due to a number of factors including poor sanitation, unclean water, weak public/health services, inhospitable terrain in some areas, the unstable security situation (particularly in border regions), misinformation and suspicion of anything foreign. Because of uncontrolled borders and close kinship ties, there is always the danger of a spread to Afghanistan.

Through our very personal contacts in Pakistan – including in the Federally Administered Tribal Areas (FATA) – I was able to gauge some of the past reaction to the polio eradication campaign. It has been characterized by some of its critics as a plot to sterilize girls and to make boys impotent. It is said to be against Islam because some of the inoculations use attenuated (“live”) vaccines. Foreign health workers (even before the capture of Osama bin Laden) are regarded as spies, while local NGOs are labelled as slaves of spies. The campaign has also been instrumentalized by some armed groups (allegedly close to the security services) that say “we’ll stop the attacks on health workers if you stop the drone attacks”.

That said, local leaders – including some associated with the Tehrik-i-Taliban of Pakistan (TTP) – told our CS that “we try to give our children the anti-polio drops whenever possible”. The same source claimed that the TTP was not behind the attacks against health workers. He even offered to issue a statement in support of the campaign. He insinuated that it was Taliban groups that are not part of the TTP (and close to some state institutions) that were complicit and that few attacks had taken place in TTP-controlled regions.

Apparently, and unfortunately, pharmaceutical companies that are not part of the Global Alliance on Vaccines and Immunisation (GAVI), or which are not involved in the polio eradication campaign, are jealous and resentful because of the large amounts of money involved. There are others who apparently profit from the status quo: they are concerned that a successful eradication of polio would bring an end to the campaign and therefore a significant reduction in their revenue.

In Nigeria, my information (albeit preliminary) is that it is not yet clear if health workers and health centers have been specifically targeted, or if they have simply been caught up in the growing cycle of violence. That said, there has been suspicion of the anti-polio campaign in the past, due to rumours that vaccinations spread AIDS or caused sterilization of girls.

### **What can be done?**

I suggest we take the following steps: Intelligence, Strategy, Tactics.

- Carry out a mapping exercise of regions vulnerable to polio, a situation/threat assessment of those areas, and an overview of who's who. A similar approach could be taken in Nigeria;
- Drawing on this information, we, only with your express approval, would use our contacts (diplomatic, military, police/security services, medical community, religious and community leaders, international/regional organizations, civil society) to identify possible interlocutors with the required influence in the affected regions. We would/could facilitate contacts between these interlocutors and the Foundation;
- Analyze public opinion on the polio eradication campaign, if that has not already been done, in order to better understand the resistance to it. If necessary, we could assist or carry out targeted surveys; or review work done to date.
- On the basis of these survey results, we would be in a better position to make suggestions on evidence-based policy on how it might carry out its polio eradication strategy;
- For example, this information could help to shape a communications strategy to dispel misinformation and to explain the dangers of polio. Jeffrey, I believe this strategy should obviously focus on the national government, communities, and public opinion in general. but, key opinion makers should be "engaged" to inform and "turn" public opinion. (For example, in Nigeria the influential religious and political leader Alhai Abubakar Saad, Sultan of Sokoto, has come out in favour of the polio eradication campaign.) Special efforts should be made to reach the remote areas, i.e. in the past radios and batteries have been air-dropped to enable dissemination of information. If you like we could help coordinate efforts with our other friends re other relevant actors including national and local authorities, religious leaders, the WHO, ICRC, and UNICEF.
- Jeffrey, It is vital to engage local leaders, appealing in particular to their self-interest and social responsibility. For example, yesterday, I had someone speak to an official from FATA (close to the Taliban). He suggested that pictures of local officials who are in favour of the polio eradication should be displayed on public information posters (not just the logo of the government) in order to demonstrate their endorsement.
- In Afghanistan and Pakistan, it is necessary to publicly exhibit progress in eradicating polio in non-Taliban controlled areas in order to create a "demonstration effect".

One of the major keys is to understand the motivations and influence of those who may be either helpful or spoilers, and to take steps to "depoliticize" the issue. At the same time, preventing ,as you are very aware, the local instability can go a long way in helping to prevent the spread of polio.

In the near term, working in Pakistan will be difficult because the government will step down on 16 March, after which time a caretaker government will be in power until the conclusion of national elections. These few months should be used as an opportunity for a cool down period, a chance to (re)assess the situation, and to develop a strategy to be used in cooperation with a new government and relevant power brokers I will look to you for your help in this.

Be aware that acting too quickly , could stimulate a negative campaign that suggests that attacking the polio campaign is an attack on the West, and could therefore "inspire" other groups in other countries to do the same (as we have seen in Nigeria).

More broadly speaking, I might suggest a very private (key) meeting in the Gulf amongst the influential religious and political leaders (particularly pragmatists) in order to generate support for the anti-polio campaign. This could be done on the margins of the planned Global Vaccine Summit in Abu Dhabi this April. Your contacts combined with mine would enable a serious dialogue with the leaders of the organizations which , as you know , have been structured to promote inter-religious and inter-cultural interaction. My organization would assist in the convening of this meeting if you saw fit.

I had great fun at your house with your friend and the magician. There are many areas where peace and health overlap. I will see you in Paris .

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