Cholera outbreak kills dozens in Papua New Guinea

Zac Hambides 27 November 2010

A cholera outbreak in Papua New Guinea (PNG) has claimed the lives of at least 100 people. One of the worst affected areas is the island of Daru, some four kilometres south of the PNG mainland and just 50 kilometres north of Australia's Torres Strait islands. The main concern of the Australian government has been to close its borders, while providing only the most minimal aid to the people of its former colonial possession. Australia directly ruled PNG until 1975.

The cholera outbreak began in July 2009 near the northern city of Lae and has spread to other parts of the desperately impoverished country. At least 800 people have been diagnosed with the disease on Daru Island, whose only town is the capital of PNG's western province. At least 300 people have required emergency treatment at Daru General Hospital. Most schools on the island have been shut and all public gatherings have been banned or cancelled.

A local priest, Father Vinod D'Mello, told *Radio New Zealand* this month that the official death toll was an underestimation. The priest claimed there had been 35 to 40 deaths at Daru General Hospital. According to information he has received from people who live on nearby islands, the death toll is more than 100 in the Daru area alone. "There are two or three deaths every day," D'Mello told the *Australian* last week. "I can hear the crying from the hospital when I am in the church."

According to a press release from the office of the Australian foreign affairs minister, the Daru hospital has been receiving up to 70 patients per day suffering from cholera. The 60-bed facility, the only one on the island, does not have the resources or staff to cope.

Cholera patients are being left lying in the hospital's corridors and next to non-cholera infected patients.

"They are just given an iron or stainless steel rod, to which the glucose bottle is being hung, in order to get them recovered from dehydration," Father D'Mello told *Radio New Zealand* on November 18. "They're running out of glucose also."

In September last year, as the outbreak was spreading, AusAID, the Australian government's international aid agency, donated just \$1.7 million to combat cholera in PNG.

A joint PNG-Australia-World Health Organisation (WHO) aid mission was belatedly established on November 11, to specifically address the outbreak on Daru Island. The Australian foreign ministry reported that it had delivered \$1 million of IV fluid, oral rehydration salts, containers of clean water, purification tablets and information posters on hygiene, as well as emergency and medical specialists.

Australian Foreign Minister Kevin Rudd claimed on November 11: "Australia remains concerned about cases in the hinterland around Daru Island, with potential for further spread of the disease."

The Queensland state government has been holding health seminars in the Australian Torres Strait Islands, to both educate islanders in cholera prevention and issue reassurances that there is little risk of the outbreak reaching Australian territory.

The Australian government's main priority has been so-called border protection. On November 12, the

Gillard government prohibited any travel by PNG nationals to Australia through the Torres Strait. Under normal circumstances, free movement is permitted between PNG and the Torres Strait islands. Tribal communities in both countries have close ties and still engage in traditional fishing, trading and joint cultural activities.

According to a report in the *Australian* on November 25, immigration officials have intercepted and turned back more than 300 PNG citizens since the travel ban was imposed. The PNG authorities, under Australian pressure, have also mobilised military forces to try to prevent people from moving out of infected areas. The pittance in aid from Canberra, coupled with its police measures, underscores that its so-called concern does not extend to the plight of the population of PNG.

Cholera is a disease of poverty. It is contracted by ingesting water or food that is contaminated by the faeces of those infected. It causes severe dehydration that can lead to death. It can be prevented through immunisation and the provision of basic sanitation, and is readily treated in most cases.

The people on Daru Island, which has a population of 20,000, are at the mercy of such diseases due to the legacy of economic backwardness left by Australian colonialism. There is no sewage system on Daru and many residents use buckets to empty their waste. Under such conditions, water supplies and food are easily contaminated with fecal matter. Infected persons on the island reportedly had drunk from a local well.

The cholera outbreak still has the potential to escalate into a major epidemic across PNG. The initial cases were diagnosed in July last year in two remote villages in Morobe Province, near Lae City, and the disease quickly spread west up the northern coast and south to Port Moresby, PNG's capital. It was the first outbreak of cholera in the country since the 1960s.

According to the WHO, 5,039 people become infected during the first 10 months of the outbreak and 79 died, mainly children and the elderly. Highlighting the risk of an epidemic, the WHO "cholera country profile" report on PNG, which was updated in July,

noted that only 40 percent of people have access to "improved water sources" and 55 percent have no access to proper sanitation facilities. Only 18 percent live in urban areas, while the majority of the population exists by subsistence farming. Just \$US34 is spent annually on health care per capita, in a country of 6.9 million people.

PNG also has the highest prevalence rate of tuberculosis (TB) in the Pacific, according to the UN Office for the Coordination of Humanitarian Affairs. There are more than 16,000 cases and over 4,000 deaths per year.

The poverty and misery endured by the people of PNG is an indictment of Australian imperialism and PNG's own ruling elite. Next to nothing has been done before or since independence to provide essential social infrastructure or modern medical services, but Australian and other transnational companies continue to generate huge profits from the exploitation of PNG's energy, mineral and other natural resources.

The scourge of cholera, tuberculosis and other easily preventable diseases could be overcome in PNG by redirecting just a portion of the wealth that is gouged out of the country every year to meet the needs of the population.



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