Samoa: Anger grows over escalating measles toll

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The population of Samoa was subjected to an unprecedented nationwide quarantine last week as the government struggled to stem the Pacific country's deadly measles epidemic. Police were reportedly deployed "in force" to impose the shutdown.

On December 5–6, all public and private services, offices, and businesses were closed and road travel prohibited to all except essential traffic. The government previously closed schools and banned children from public gatherings. People not yet vaccinated were told to remain indoors and tie a red cloth in front of their homes while awaiting mobile vaccination teams.

Despite more than 20,000 inoculations carried out over the two days, the toll from the disease has continued to rise. Over the past 24 hours the total number of deaths has reached 70, of which 61 are children aged 4 years or younger. Another 112 new cases were registered, bringing the total to 4,693 since the outbreak began. Currently 159 people are hospitalised, including 17 critically ill children.

According to Auckland University immunisation specialist, Dr Helen Petousis Harris, up to 3 percent of Samoa's population of 200,000 could be hit with the deadly virus before it is eventually contained.

Addressing a press conference last Friday, Prime Minister Tuilaepa Aiono Sailele Malielegaoi admitted the epidemic remained beyond the government's ability to control it, despite an influx of international medical aid and personnel. He launched an urgent financial appeal for $US10.7 million to help the overwhelmed health system. UN spokesperson Simona Marinescu warned that there are still 110,000 vulnerable people at risk.

The government faces mounting public anger over its failure to prevent what was an entirely foreseeable and preventable outbreak. Relatives of children who have died maintain the authorities must have known that the population was at grave risk of infection.

According to the World Health Organization (WHO), in the last five years levels of vaccination against measles, mumps and rubella (MMR) collapsed in Samoa, particularly among the most at-risk groups of infants, from 90 to just 31 percent.

Dr Petousis-Harris posted on social media that while the compulsory immunisation campaign may mitigate the crisis, "for many it is too late." The low immunisation coverage has left Samoa extremely vulnerable to measles, comparing it to "a lit match to dry tinder and gasoline." With the global resurgence of measles, the risk of an outbreak was "almost inevitable."

Already low immunisation levels were exacerbated by a medical mishap in July 2018 that killed two babies, causing widespread distrust in the vaccination program. Two nurses were prosecuted and jailed for negligent manslaughter after mistakenly diluting the powdered vaccine with a dose of anaesthetic instead of water.

In an act of wanton negligence, the government suspended all MMR immunisations for 10 months, leaving thousands of children unimmunised. Failure to inform the public that it was not the vaccine that caused the deaths helped boost a pernicious anti-vaccination campaign. In June, anti-vaccine activist Robert F. Kennedy Jr., a nephew of President John F. Kennedy, visited from the US and was photographed alongside Samoan government officials.

Community leader Tupai Molesi Taumaoe, whose 20-month-old nephew died of measles, told the UK *Telegraph* the government did not react quickly enough to falling vaccination rates. New Zealand had warned

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the government in August about a possible epidemic, he said, “but they did nothing.” Tuilaepa flatly denied leaving the response too late, asserting the disease “came from New Zealand.”

The Samoan government displayed the indifference and contempt with which the local ruling elite, based largely on traditional tribal chiefs, routinely treats the people. Taumaoe told the *Telegraph* that “the community points the finger at the government, and the government points the finger at the parents.”

Prime Minister Tuilaepa blamed the victims’ “mindset,” telling media the people had a “lackadaisical attitude to all the warnings that we had issued.” He told TVNZ the crisis had forced people to finally take vaccinations “seriously.” A leading health official exhorted everyone to “stop relying on the government to do everything” and to “look after their own family welfare.”

New Zealand’s Labour-NZ First-Green Party government also shares responsibility. It waited until November 19, nearly a month into the outbreak, before sending an initial team of 10 doctors and nurses to Samoa.

The Samoan epidemic, followed by smaller outbreaks in Tonga, Fiji and now American Samoa originated in New Zealand. There have been 2,149 confirmed NZ cases since January, including more than 1,711 in working class South Auckland. A 1991 survey showed that only 42 percent of NZ-resident two-year-olds from Pacific Island families were vaccinated. Earlier this year alerts were issued throughout the WHO’s Western Pacific region about a potential spread of the disease.

Sapeer Mayron, a former New Zealand reporter now with the *Samoan Observer*, told the *Telegraph* that South Auckland was well-known for low vaccination rates among Samoan families. “It was obvious to me what was going to happen,” she said.

NZ’s National Verification Committee for Measles and Rubella Elimination explicitly warned the Ministry of Health in July: “Steps should be taken to prevent measles spreading to Pacific Island nations from New Zealand, via communications to Pacific Island governments on vaccination requirements.”

The *Listener* magazine’s editorial on December 5 noted New Zealand’s responsibility for the spread of the 1918 influenza epidemic, which killed 22 percent of Samoa’s population. It questioned whether the Ardern government had been “forceful enough” dealing with the known risk of measles spreading to the islands. Dr Petousis-Harris has bluntly accused New Zealand of “failing” to protect its neighbour.

The worldwide resurgence of measles is a product of deepening inequality, poverty and sweeping corporate attacks on basic health provision. There were nearly 10 million cases and an estimated 142,000 deaths globally last year. Three times as many cases have been reported this year than at the same stage in 2018.

Vaccination rates have stagnated for a decade. The WHO says globally just 86 percent of children get the first dose of vaccine and fewer than 70 percent the second. A 95 percent coverage is required for what is known as herd immunity, to avoid outbreaks. Most of the dying are small children, while thousands more suffer ongoing harm including pneumonia and brain damage.

Commenting on the extraordinarily high death rate in Samoa, NZ Immunisation Advisory Centre director Nikki Turner told *Stuff*, “it is not unusual to see more people die of measles in low-income countries than other countries.” Children in poverty-stricken regions are often malnourished, access to primary healthcare is limited and hospitals are insufficiently resourced.

WHO director general Dr Tedros Adhanom Ghebreyesus stated the death of any child from a vaccine-preventable disease like measles “is frankly an outrage and a collective failure to protect the world’s most vulnerable children.” To save lives, he said, “We must ensure everyone can benefit from vaccines, which means investing in immunisation and quality healthcare as a right for all.”

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