

COVID-19 catastrophe unfolds in French Overseas Territories

Samuel Tissot
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The French Overseas Territories (OTs), which include islands in the Antilles, French Guiana, Polynesia and Réunion Island, are witnessing dramatic rises in the virus and hospitalizations. The poor state of health infrastructure, low vaccination rates and the herd immunity policy of the French ruling class have transformed them into major hubs for COVID-19.

The Antillean islands of Guadeloupe and Martinique in the Caribbean have had an incidence rate of 2,225 and 1,188 per 100,000, respectively, in the last seven days. Despite the imposition of limited lockdowns two weeks ago, the case rate in Guadeloupe has continued to rise. Now it is nearly four times higher than the most affected area in mainland France, the Bouches-du-Rhône region which had 693 cases per 100,000 over the last week. On August 11, Guadeloupe recorded 1,376 new cases, the equivalent of 245,000 cases in mainland France.

The situation has become so dire that last week Health Minister Olivier Véran appealed for volunteer nurses and doctors to travel to the islands. The army has also been mobilized to build emergency resuscitation beds on the islands as hospitals overflowed, with new admissions not treated due to lack of resources and personnel.

Speaking to *France24*, Dr. Marc Vallette, head of resuscitation of the Pointe-à-Pitre University Hospital in Guadeloupe, stated, “In the last 24 hours we have reached saturation, which means each new entry of a COVID patient is only possible if a COVID patient in intensive care leaves the service.”

Guillem Diarra de Latapie, a 28-year-old volunteer nurse in Guadeloupe, told *Europe1*, “We are overloaded with patients, arrivals, crowds, needs.”

Significant outbreaks have also been recorded in French Guiana, Saint Martin, Réunion and Saint

Barthelemy. Following a rapid rise in Delta variant cases, which now make up 60 percent of sequenced cases, French Guiana has reintroduced a curfew in the Cayenne region. Despite the developing situation, fully vaccinated travelers can still visit the territories if they present a recent negative test.

On the island of Réunion located in the Indian Ocean, a record of 3,590 COVID-19 cases was recorded last week. Despite the dangerous situation and the increased impact of the Delta variant on infants and adolescents, 220,000 unvaccinated school children on the island returned to school on Monday, August 16.

French Overseas Territories Minister Sébastien Lecornu visited Guadeloupe last week and told *France Inter*, “I am upset at what I saw today,” describing Guadeloupe’s infections as occurring at “a rate we have never known since the beginning of the COVID-19 pandemic.” A new lockdown was declared on August 4. Nevertheless, bars, beaches and other tourist destinations remained open until last week.

The rapid surge of cases in the Antilles and Réunion has been driven by a rise in tourism over the summer months. In June, Macron tried to encourage French tourists to boost domestic tourism, declaring, “This year, holidays are in France.” This has led to the OTs being particularly popular for tourists from the mainland, who introduced the Delta variant to these territories. As late as June 29, the weekly number of cases in Guadeloupe had been just 16.

While the Delta variant spread rapidly throughout mainland France in the last two months, the even more dramatic rise in the OTs is driven by low vaccination rates. While 52.6 percent of the mainland’s population are fully vaccinated, Martinique and Guadeloupe respectively have 15.8 percent and 15.9 percent of their populations fully vaccinated. On July 30, only 16.2

percent of the Guianese population were vaccinated, while Réunion has a vaccination rate of 29.2 percent.

The low vaccination rate in the OTs is due to many factors. While the vaccination campaign in mainland France was itself delayed, the territories in the Antilles had to wait an additional month for vaccination to commence due to insufficient infrastructure for mRNA vaccines, which must be stored in extremely cold temperatures to remain effective.

Huge numbers of the population in the ex-French colonies are hesitant to take a vaccine. Primarily, this is a product of the French government's neglect of these populations' health throughout the pandemic as well as the previous decades. The Macron government has fraudulently presented its murderous herd immunity policy, which has led to over 113,000 deaths, as "scientific," eroding public trust in any new measures taken to combat the virus.

While acknowledging the horrific proportions of the crisis in the OTs, the Macron government is seeking to shift the blame for its herd immunity policy onto the shoulders of the inhabitants of these regions. Sébastien Lecornu told *Libération* that the vaccination rate can be explained by "cultural or religious reticence." A Ministry of Health statement claimed, "We have not identified any specific obstacles to vaccination in the OTs, we have the same obstacles as in mainland France, but in a much more accentuated way."

Rather than the cultural or religious beliefs of the population in the Overseas Territories, the record of state abuse of the health of these communities is the chief cause of widespread vaccine skepticism.

While Macron blames the local populations for the spread of the virus, it is the president's own herd immunity policy that has promoted the premature end of lockdowns and renewal of tourism, causing the Delta variant to become entrenched on a mostly unprotected population. This policy has been supported by political leaders from across the OTs. This includes Olivier Serva, the Unsubmissive France deputy for Guadeloupe, who denounced mandatory vaccination in an interview with Europe1 on August 5.

This is only the latest and deadliest example of state misconduct, however. In Martinique and Guadeloupe, which have the lowest vaccination rates, over 90 percent of the population suffer from chlordecone poisoning, according to the French Ministry of Health.

Even low amounts of chlordecone in the blood can cause brain damage, cancer and infertility.

Despite being identified as a carcinogen by the World Health Organization in 1979 and banned in France in 1990, it was authorized to be used as a pesticide by the French government in Martinique until 1993. The molecule takes 700 years to decay in a natural environment and passes through the food chain, meaning even those born after the cessation of its use still become poisoned.

The provision of medical care in the OTs depends above all on the political mobilization of the working class in a struggle to eradicate the coronavirus. Only it can impose the social distancing and lockdown measures necessary to halt the rapid spread of the virus and create political conditions for scientists to explain the necessity of vaccination to the entire population.



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