Papua New Guinea morgues overflow as COVID-19 cases surge

John Braddock 31 October 2021

Papua New Guinea's (PNG's) health authorities have been organising a mass burial to relieve pressure on the Port Moresby hospital morgue, where bodies are stacked on top of each other as COVID-19 cases surge.

The *National* newspaper reported on October 27 that 253 bodies were to be given a mass burial in the capital. The bodies had been in the Port Moresby General Hospital (PMGH) morgue since April, according to hospital chief executive officer Dr Paki Molumi.

National Pandemic Response Controller David Manning said: "The mortuary is now filled to and beyond capacity with more than 300 bodies stacked on top of one another, as more Coronavirus (COVID-19) bodies are brought in from the wards and homes." The morgue was built to cater for only 60.

A newspaper advertisement is detailing the names and ages of the people who have died and been left unclaimed. After three days, the PMGH will take the bodies to a plot, allocated by the National Capital District Commission, to be buried together.

Among the deceased are 16 children, between the ages of two and 12, left by their relatives in hospital morgues for months. They will receive what is in effect a pauper's burial, when someone dies destitute without anyone to pay for their funeral expenses.

Molumi said four children had died of COVID-19 at PMGH. They were among 39 paediatric cases admitted since September 22, with serious health conditions, including rheumatic heart disease and tuberculosis. "A child with a serious medical condition, which has been complicated by COVID-19 pneumonia has a very high chance of dying," the doctor warned.

In a callous and dismissive statement, Pandemic Response Deputy Controller Daoni Esorom said children will only be vaccinated against COVID-19 "when the need arises," and only after "data" is collected of children becoming infected. He falsely declared that there was no vaccine for those aged under 18, adding that in any case the "primary focus" was on vaccinating those over 18.

Just 1.2 percent of the population of nearly 9 million has so far been fully vaccinated. PNG has depended very much on supplies through COVAX, the so-called "vaccine equity" partnership through the World Health Organization. This has failed to bridge the vast gulf between the poorest and wealthiest nations in terms of access to vaccines.

According to the Global Dashboard for Vaccine Equity (established by UNDP, WHO and Oxford University) as of September 15, just 3.07 percent of millions of people in low-income countries have been vaccinated with at least one dose, compared to 60.18 percent in high-income countries.

Meanwhile PNG's Health authorities scaled back the limited testing regime some months ago, on the pretext that it would allow them to "shift focus" to vaccinating vulnerable sections of the population.

PNG has officially confirmed 29,108 coronavirus cases and 367 deaths, but many more cases and deaths are going unreported. Official statistics drastically understate the reality of what is happening. What data is available shows a sharp spike in cases from April through June, and another this month, with 5,067 active cases over the last two weeks. On October 29, there were 285 cases reported, with a seven-day average of 340.

Radio New Zealand reported on October 11 that since PNG's first reported case of the Delta variant, brought in by a ship's captain in July, the virus had been largely left to "fester and spread." Port Moresby is currently undergoing a third wave of the pandemic, as a disaster unfolds around the country, with the fragile health system and its hospitals overwhelmed by hundreds of cases.

The indifference of authorities was underscored in a decision by National Capital District Governor Powes Parkop last month to oppose any further lockdowns in Port Moresby because of the "costs" of previous ones. In an apparent change of tune, Parkop later told the *National*: "If the doctors tell me that we have to lock down because they cannot cope any more, then I will follow their advice."

However, on October 27, Parkop confirmed that "after much deliberation with key stakeholders in the city and the national government," there would not be a total lockdown of the capital, despite the rocketing number of deaths and positive cases. Police Superintendent Gideon Ikumu declared there was moreover an "absence of regulations" to implement the Pandemic Act 2020, "and we cannot arrest someone for simply not wearing a mask, as an example."

Several other regions have imposed partial lockdowns and curfews in a bid to curb the spread of coronavirus. Eastern Highlands, Western Highlands and Enga are experiencing a surge in Delta variant cases. Hospitals in all three provinces have wards overflowing with COVID-19 patients, and shortages of beds and ventilators, forcing them to scale back services.

National health board deputy chair Mathias Sapuri said a two-week lockdown across the country was the only way to control the COVID-19 surge. "The virus stops moving when people stop moving," he said.

This runs counter to the homicidal policy of the James Marape-led government, which, like governments around the world, has prioritised business interests above the health of the population. Following an initial national lockdown in July 2020, Marape bluntly declared: "COVID-19 not only affects us healthwise, but also economically. We must adjust to living with the COVID-19... we will not shut down our country again."

While the culpability for the escalating catastrophe lies squarely with the PNG government, much media commentary points the finger at widespread "vaccine hesitancy" and misinformation among the general population for the extremely low testing and vaccination rates.

The Guardian reported an incident on 18 October, in

the second largest city, Lae, where community health workers were harassed and threatened with sticks, rocks and iron bars during a mobile awareness and vaccination drive. The drive was promptly abandoned and vaccinations are now only offered in the province at Angau General Hospital and smaller suburban clinics.

Undoubtedly there is widespread distrust of the government and its agencies, including health authorities and police. PNG's corrupt and venal ruling elite, which garners its share of the proceeds of the looting of the country's mineral resources by transnational corporations, rules over one of the most deprived populations in the world.

According to UN figures, 39 percent of PNG's people live below the poverty line of \$US1.90 a day and 66.5 percent of the workforce earns less than \$3.10 a day. In Port Moresby, tens of thousands live in crowded, unofficial settlements. More than 60 percent of the population has no access to safe drinking water.

The adult literacy rate is 64.2 percent, clearly a factor in keeping scientific knowledge from the working class and rural poor. The average number of years of schooling is 4.3 and just 11.7 percent of the population over the age of 25 has some secondary schooling. The deterioration of the public health system, compounded by a lack of roads and the remoteness of many villages, has had a devastating impact. Malaria, tuberculosis and HIV/AIDS are rife.

The backwardness and poverty, imposed by successive PNG governments since formal independence in 1975, was bequeathed by Australian colonial rule. The Australian ruling class never demonstrated the slightest concern for the PNG masses when it ruled over them, and is today doing virtually nothing to help contain the devastating and escalating COVID-19 outbreak on its northern border.



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