

# Papua New Guinea: Ongoing catastrophe amid third wave of Delta virus

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Driven by widespread community transmission of the Delta virus, Papua New Guinea's (PNG) biggest urban centres and major provinces have been grappling with a third wave of the COVID-19 pandemic for nearly three months.

According to the World Health Organisation, PNG has had 35,835 confirmed cases of COVID-19 and 573 deaths. Between November 25 and December 8, 995 cases were recorded with a 7-day average of 66 cases. However, with testing largely scaled back, many more cases and deaths are going unreported.

The majority of cases and deaths are in the National Capital District, centred in the shanty towns of Port Moresby, followed by Western province, Western Highlands, Morobe, Eastern Highlands and East New Britain.

At the Port Moresby General Hospital there were 40-50 COVID deaths a day in November, dropping recently to around 10 as people have simply stopped presenting. Already high maternal mortality rates escalated five-fold as the virus has struck pregnant women.

Young people are also dying. Obstetrician Prof Glen Mola told the *Conversation*: "I am 50 years into medical practice... but watching young people die from severe COVID disease had a very big impact on me. They literally die from laboured breathing respiratory failure: they just do not have the strength to take another breath."

In August 2020, Prime Minister James Marape ended national lockdowns, instead implementing soft social distancing restrictions allowing markets, schools and restaurants to reopen.

Capital District Governor Powes Parkop recently refused to implement a lockdown of Port Moresby despite the surge in cases. While some regions have re-

imposed partial lockdowns, Radio NZ reported in October that the virus has largely been left to "fester and spread."

The country's vaccination rate remains abysmally low. According to the National Control Centre, only 1.7 percent of PNG's population of 8.9 million is fully-vaccinated. Social tensions are escalating over vaccinations, as people working to curb the spread of the virus face mob attacks.

The government does not reveal the number of doses available, but vaccine supply appears not to be the main issue. Three different vaccines are available: AstraZeneca, Sinopharm, and Janssen. Following deliveries from the COVAX vaccine initiative, and donations from Australia and New Zealand, it was reported in June that there were sufficient doses to vaccinate 50 percent of the eligible population.

In September, however, the abject failure of the vaccine roll-out was underscored when the government transferred 30,000 doses from New Zealand on to Vietnam to avoid them being thrown out at their expiry date.

There are considerable logistical difficulties delivering vaccines across the country's mountainous terrain and to remote coastal villages. Hospitals and aid posts in rural areas, home to 80 percent of the population, do not have the resources to carry out vaccination programs or treat those with COVID-19 infections. Outside Port Moresby, Western Province currently has the highest vaccination rate due to more effective community engagement.

Clement Malau, a public health specialist and former secretary of the PNG health department, has criticised "crippling failures" in the government's pandemic response. Malau told the *Guardian* that failure to tailor pandemic campaigns to local conditions risked "a

disaster if we don't manage it properly." He warned against being "bulldozed down the track of just vaccine alone."

The doctor's comments were made in response to widespread "vaccine hesitancy" and misinformation among the general population which is contributing to the extremely low testing and vaccination rates and growing discontent.

The government and media commentary has placed the blame primarily on ordinary people, highlighting the prevalence of religious beliefs and superstition. In an outburst in parliament Marape claimed that instructions had gone out regarding workplace testing for COVID, but people "choose not to believe that." East Sepik Governor Allan Bird flatly declared that "Papua New Guineans are resistant against all vaccines, not just COVID-19 vaccines."

Vaccination is not mandatory, but protests over limited COVID protocols and vaccination requirements have escalated in PNG's two biggest cities, Port Moresby and Lae, in defiance of rules disallowing gatherings of more than 20 people.

Port Moresby market vendors held a large rally last month to demand an end to municipal rules restricting access for the unvaccinated. In the second largest city, Lae, clinics were forced to close indefinitely following attacks on health workers who have been subject to stone throwing, verbal abuse and threats. Morobe province has withdrawn mobile clinics conducting vaccination and awareness programs because of attacks.

Opposition to vaccination is widespread among the population, but the causes are rooted in longstanding social and economic crises which have produced a plethora of medical conditions associated with poverty, including polio, tuberculosis and HIV. Illiteracy is a major barrier to scientific understanding. Just 11.7 percent of the population over the age of 25 has some secondary schooling.

Social support has been extremely limited. Tens of thousands of workers, estimated by the World Bank to be as high as 25 percent of the workforce, have lost their jobs. The government has put the onus on individual employers to make decisions about laying off unvaccinated workers. Many families have been left without income earners. The average worker has about six dependents. Meagre government relief measures

such as tax deferrals and loan repayment holidays have been woefully insufficient.

Trust in the ruling elite has disintegrated following decades of social deprivation and growing wealth inequality, buttressed by authoritarian military-police measures. Health authorities have consistently ignored warnings about the need to act fast and distribute accessible information to curb falsehoods. There has been no effort to put out messages in the widely spoken Tok Pisin and Motu, or any of the 800-plus local languages.

Anthropologist Fiona Hukula told *the Guardian* on December 2 that the "fear of this vaccine is real." But, in the absence of clear, strategic information, dangerous rumours have run wild. According to Hukula, while social media has "supercharged" fears, it has been made worse by the absence of accurate information by the government.

Other unsuccessful aspects of the government's response, according to Hukula, include the use of centralised vaccine hubs where people wait many hours and which are not practical for the vulnerable. Fearful people want the reassurance of familiar health workers from their local clinics. "They should have gone out to the markets, to explain to people clearly that this is a vaccine that's going to help," she said.

Australian epidemiologist Stefanie Vaccher warned in the *Age* last week that simply sending vaccines is insufficient. Millions in funding and support are needed for "a large-scale behavioural change campaign." Mass vaccination campaigns, such as in Samoa and Fiji, are "resource intensive," and require close local organization. Omicron, she declared is "a clarion call for Australia to do much, much more to help vaccinate the people of PNG."



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