

Obama Hand in Haiti's Cholera Genocide

by Cynthia R. Rush

June 1—Yet again, *as predicted*, Haiti is in the grip of a cholera upsurge. The May-to-November rainy season, which is already much more intense this year than forecast, is causing floods and mudslides, destroying the precarious tent “homes” of the more than half a million citizens still forced to live in the squalid displaced-persons camps in the capital, contaminating water and creating an environment in which the cholera bacterium can thrive.

Moreover, new studies show the bacterium is “evolving”—mutating—and that a new strain has developed to which Haitians have no immunity.

Every few days, reports from UN officials, NGOs, physicians, and other medical personnel raise the alarm over the threat this current upsurge poses. The Pan American Health Organization warns that there could be as many as 200,000 new cases this year. Since the October 2010 outbreak, over half a million Haitians have fallen victim to cholera, and 7,300 have died. So far this year, 13,000 more have become ill, and 132 have died, with the number of daily cases rising quickly.

Last December, the number of new cases occurring daily *nationwide* was 300; by mid-April, just one cholera treatment center in Port-au-Prince alone reported 95 new cases *daily*. In less than a month, the number of people treated by Doctors Without Borders (Médecins sans Frontières/MSF), quadrupled in Port-au-Prince, reaching 1,600 cases in April.

The result? “The very existence” of the homeless in the camps is now in jeopardy, according to an April 2 statement by the UN Office of the Coordinator of Humanitarian Affairs (OCHA).

The same agency reported on May 1 that the national fatality rate is the highest since the beginning of the 2010 outbreak, standing at 3%. Worse, according to Nigel Fisher, the resident OCHA representative in Haiti, the World Health Organization (WHO) and the Food and Agriculture Organization (FAO) are currently working with the government to assess the food scarcity situation “because it is getting worse.”



American Red Cross

The cholera epidemic in Haiti, which is now surging again, could have been averted; but thanks to Obama's malign negligence, since the October 2010 outbreak, over half a million Haitians, including this young boy, have fallen victim to the disease.

Blame Obama

In the April 1 *New York Times*, Dr. Paul Farmer, co-founder of the Partners in Health (PIH) NGO, who in 2010 called for a New Deal-type of mobilization to address Haiti's desperate crisis, addressed the escalating genocide with this question: Why didn't the NGOs “throw the kitchen sink at cholera in Haiti? Why didn't they try harder?”

The answer is straightforward. It wasn't the NGOs that should have taken—or been given—the responsibility for rebuilding Haiti. It was President Barack Obama who should have honored the U.S.A.'s historic ties to Haiti by committing his government to a 25-year treaty with Haiti's government, to mobilize the emergency resources, including the Army Corps of Engineers, to build the necessary water and sanitation infrastructure, and housing and health facilities. This should necessarily have included creating something similar to the 1930s U.S. Civilian Conservation Corps, to train and mobilize young unemployed Haitians for the task of rebuilding their nation.

This is what Lyndon LaRouche and competent experts with experience in Haiti proposed to Obama in early February 2010, shortly after the horrific Jan. 12 earthquake. Obama rejected the plan, and instead handed the country over to hundreds of competing NGOs and agencies such as USAID, whose own political agenda is more in step with the British Empire's plan for depopulation and genocide.

The NGOs and private contractors now providing the bulk of humanitarian aid have effectively squeezed Haiti's government out of the reconstruction effort. A recent survey conducted by PIH reports that, of \$140 million donated and spent in 2010 and 2011 to set up and staff cholera treatment centers (CTCs), only \$5 million went to the government; and the government never saw a penny of the \$50 million donated by the U.S. government. Only one-third of Haiti's health services are delivered by the public sector.

The Health Ministry's budget is "minuscule," according to Dr. Louise Ivers of PIH. Ministry official Dr. Claude Surena told an interviewer last February that the government doesn't have the resources to handle the CTCs in the country. The MSF's Haiti mission chief, Gaetan Drossart, reports that the Ministry lacks enough medical personnel and is often unable to pay them regularly.

A Menacing New Strain

A new element in this disastrous mix is the recent study by the U.S. Centers for Disease Control and Prevention (CDC) showing that the cholera bacterium in Haiti is evolving, and that a new strain has developed to which Haitians will have no immunity. Researchers say this development indicates that the disease is most likely becoming endemic.

As survivors acquire immunity to the original Ogawa strain which infected thousands beginning in October 2010, the bacterium is undergoing a "serotype switch." However, development of what has now been identified as the Inaba strain means that it could now be easier for Haitians to become reinfected, this time with the new strain. The study's authors say samples collected in mid-March from the Artibonite region, site of the original 2010 outbreak, are indeed the newer Inaba serotype.

Yet Haitians are defenseless against this new threat. Fisher emphasized, in a May 2 interview with the UN News Center, that the current rainy season is unusually heavy, and has forced people to flee their flooded camps in the capital. The reality is, he reported, that there's no money, so the NGOs that used to work in the camps to ensure water and sanitation have left.

The UN's Consolidated Appeal for \$231 million for 2012 was only 8.5% funded as of early April, and now the UN is begging for \$53.9 million, the minimum amount needed to get the homeless camp-dwellers through the rainy season. Funds are urgently needed for provision of potable water and solid waste manage-

ment; lack of funds has caused worsening conditions in the camps, where there is no money to continue to desludge latrines or to purchase soap and water for hand-washing stations.

It is estimated that it would take between \$800 million and \$1 billion to build an adequate water and sanitation system for the country. Absent that, Fisher said, "what we are doing is sort of patchwork, band-aid work on a fundamental problem."

'Make Do With Less' Is Murder

Only a few camps have a modicum of sanitation or latrines. "Again, funds are declining, and we do not have the resources we need to enable those [NGO] partners to continue.... We do not have all the resources we need to do the necessary mitigation work on the ravines [clearing them of debris so water can flow through Port-au-Prince rather than into the camps] or to prepare evacuation sites ... and we are also rapidly exhausting our stocks of things like tarpaulins, which we need as people get flooded out, to give them emergency shelter."

Foreign donors, Fisher said, "are telling us that the facts of life are that there are less resources around, and therefore we have to make do with less.... Right now our appeal is only funded to 9%. *It's really quite disastrous.*"

Due to funding cuts, the number of NGOs deployed to combat the cholera epidemic has dropped dramatically, from 128 in January 2011, to 48 six months later. There were 101 CTCs in Haiti as of January 2011; today there are 30. According to MSF's Drossart, "too little has been done in terms of prevention, to think that cholera would not surge again in 2012."

Only a handful of medical groups, such as MSF, the Cuban medical mission, and scores of volunteers and missionary groups organized through the Haiti Epidemic Advisory System have stayed the course in Haiti, trying to stem the epidemic under constantly worsening conditions and dwindling resources.

Forget about "reassuring messages" being put out by the Haitian Health Ministry about cholera's evolution, Drossart warned on May 9. These "bear no resemblance to reality." The country "is not adequately prepared" to combat this year's epidemic, he added, pointing out that "health facilities in many regions of the country remain incapable of responding" to seasonal fluctuations of the cholera epidemic. A rash of new cases has occurred in several parts of the country, overwhelming many CTCs.