

The ‘Haiti Treatment’: What It Looks Like

by Cynthia R. Rush

May 3 (EIRNS)—If Americans want to know what kind of emergency assistance they can expect from Barack Obama in the event of a natural disaster—victims of recent flooding and savage tornadoes that have swept through parts of the U.S. have already gotten a glimpse of this—look at how the Narcissist-in-Chief responded to Haiti, following its horrific January 2010 magnitude-7 earthquake and subsequent cholera epidemic, which broke out later that year.

Sixteen months after the earthquake, which killed almost 300,000 people, and six months after the October 2010 cholera outbreak, the crisis in that impoverished nation of 9.6 million is more dire than ever. Bereft of health and sanitation infrastructure—especially clean water—as well as safe housing, jobs or food, Haitians are as defenseless against another earthquake as they are against the rapidly rising number of cholera cases, that have already begun with the advent of the rainy season. Haiti gets 40% of its average annual rainfall, or 18 inches, between March and May.

Food prices in the nation are soaring. Reflecting the international wave of oil-price speculation, the domestic price of gasoline has doubled to \$5 a gallon, while the price of corn in March was double the \$0.68 per kilogram that it was right after the 2010 quake. Today, Haitians must pay \$8 for a whole chicken—double what Peruvians pay. Argentines, who enjoy the highest living standards in Ibero-America, pay less per kilogram of rice than Haitians do. Desperate parents are still forced to feed their hungry children the infamous, but “affordable” concoction known as *bonbon tear*—mud cookies, made of mud mixed with vegetable oil and a little salt.

Why has so little improved, after 16 months? Ask Obama. To immediately address the horrendous death and destruction wrought by the quake, the U.S. President could have accepted the proposal of knowledgeable experts, including economist and statesman Lyndon LaRouche, and offered an emergency deploy-

ment of the U.S. Army Corps of Engineers to Haiti. With its decades of experience, and with a collaborative arrangement with the Haitian government, the Army Corps could have relocated 2 million homeless and displaced people out of the capital, Port-au-Prince, to higher ground before the rainy season began, also providing clean water and decent temporary housing.

The Policy Is Genocide

But Obama refused to act, and the result is genocide. At least 1.5 million were left to live in squalid “displaced persons” camps in Port-au-Prince, with only precarious tents as shelter, and no clean water supply other than what is provided by hundreds of non-governmental organizations (NGOs). In fact, some NGOs used the specious argument that providing clean water for free fostered a sense of “dependence” among the displaced Haitians, thus encouraging them to rely on hand-outs, rather than seeking work.

Work? Unemployment, which stood at 80% prior to the earthquake, is now so high the government doesn’t even attempt to count it. The minimum wage is officially \$5 day, but the few jobs to be had pay far less.

When the rains came in 2010, the population had no defense against cholera, a water-borne disease. Breaking out initially in the Artibonite River Delta in late October, cholera quickly spread to the capital, whose filthy camps were ideal breeding grounds for the disease. Proper waste disposal and bathing facilities were non-existent—this is still the case—with an average of 392 people in the camps sharing one latrine. When it rained, the canals bordering the camps into which human waste is dumped, overflowed, endangering the camp population. To date, 5,000 people have died from cholera, and over 250,000 have been infected.

Although the Pan American Health Organization (PAHO) had estimated that 400,000 people would be infected by October of this year, recent studies by Harvard Medical School and the University of California at San Francisco predicted that the number of infected will be double that figure by November, with over 11,000 deaths.

Newly elected President Michael Martelly has stated that preventing a new cholera outbreak will be his top priority; but he has no resources to effectively combat the epidemic. Addressing the UN Security Council on April 6, Secretary General Ban Ki-moon made the obvious point. “Only large-scale investments in Haiti’s water and sanitation system will protect



UNICEF/Marco Dominio

Here is what Americans can expect—and some are already experiencing—from their President, in the event of a natural disaster. This photo shows a refugee camp in Port au Prince in November 2010. Things have only gotten worse since then.

against another outbreak.” At the same meeting, outgoing President René Préval added that Haiti can’t rebuild without “bulldozers and engineers.”

‘Drowning in Sewage’

Investigative reporters who have spent considerable time on the ground over the past year describe Haiti as, literally, “drowning in sewage.”

Look at the following.

The Truttier Waste Disposal dump, located near the giant Cité Soleil slum in the capital, contains thousands of gallons of feces, much of it most certainly infected with cholera. In an article published April 25 in *OpEd-News.com*, investigative reporter Mac McKinney reported that toxic raw sewage from cholera treatment centers (CTCs) is discharged into a giant, open-air, unlined holding pond in the middle of the dump, from where it can potentially leach into the Plaine Cul-de-Sac aquifer underneath, which *supplies most of the water used by private companies that bottle and sell water in Port-au-Prince*. Discarded needles and syringes, bags full of vomit, and excrement from the CTCs also end up in the dump.

In an April 25 *Huffington Post* blog, investigative reporter and former Haiti relief worker Georgianne Nienaber pointed out that the Water, Sanitation and Hygiene Cluster, known as WASH, has received only 19%,

or \$32 million, of its \$175 million funding requirement for water and sanitation systems. Overall, only 17% of the \$915 million requested by the UN’s Office of the Coordinator of Humanitarian Affairs (OCHA) for its Haiti Appeal has been met.

Contrary to the assertion that the cholera epidemic is “waning,” with a new rainy season, the number of cases has begun to ratchet upward again, at a time when many medical NGOs that were treating cholera patients have left the country. This is especially true in rural areas where transportation infrastructure is primitive at best, and health clinics few and far between. Rains cause dangerous flooding, sometimes making roads impassable, in addition to leaving large pools of standing water that provide ideal conditions for cholera’s spread.

While the overall cholera mortality rate officially stands at 1.7%, it is 7.9% in the rural department of Sud Est, and 5.4% in Grande Anse.

Kathryn Mahoney, spokeswoman for the NGO Partners In Health (PIH), which has operated in Haiti for two decades, reported on May 3 that the number of new cholera patients at CTCs in Mirebalais in the Central Plateau, has tripled in recent weeks. PIH physician David Walton, who runs another CTC in Mirebalais, warned that “given what I’ve seen, we could be overwhelmed again at the cholera centers.” In Ste. Therese

Hinche, in the same region, cases of malaria and typhoid have also been reported.

It costs \$1 million to run a 200-bed cholera treatment center for three months, including 45 nurses, 80 support staff, and 9 doctors. Yet, there are insufficient funds to set up cholera units everywhere they are needed. As OCHA reported in February, Médecins Sans Frontières (MSF) and Oxfam NGOs planned to stop chlorination of 11 wells in the Port-au-Prince area that provided safe water for 374,500 people.

In rural areas generally, there is a dangerous shortage of water purification tablets. In the village of Chinchion, where Nienaber visited, residents were often travelling miles to market to buy bleach for water purification. Other villages were paying for the tablets on the black market.

MSF, one of the more effective medical NGOs treating cholera in remote rural areas, reportedly pulled out of Haiti because it ran out of funds; the Haitian government lacks the resources to take over the job it was doing.

What Housing?

The fact that “only” 680,000 people, instead of 1.5 million, still live in the filthy tent cities in the capital, is not “progress,” as experts like to boast. The housing situation is a nightmare, at best.

Most of those who have left the camps were forced out, either by the rampant violence and lack of sanitation, or by landowners who evicted them. *Evictions, in fact, account for the majority of departures from the camps*, with residents ending up in improvised or dilapidated dwellings that are as bad, or worse, than what they lived in prior to the earthquake!

A recent report by the International Organization of Migration (IOM) notes that only 4.7% of people who’ve left the camps did so because their homes had been rebuilt. A survey of 1,033 heads-of-household who left the camps in recent months revealed that 50% moved into equally precarious housing situations. They sometimes squeezed into already overcrowded family dwellings, set up tents on family property strewn with rubble, or took over abandoned housing in damaged shantytowns.

Priscilla Phelps, senior advisor for Housing and Neighborhoods for the Interim Haiti Recovery Commission (IHRC), bluntly told the Haiti Grassroots Watch group last January that, “with a few exceptions, the reconstruction is not going to make people homeowners

who were not homeowners before.” Given that only 43,100 “transitional shelters,” or “T-Shelters,” had been built as of Feb. 1, out of 111,240 scheduled to be built, the approximately 192,154 families that lived in rented homes prior to the quake, and now live in the camp hell-holes, will have no option but to remain there, or try to find housing on their own.

The new T-Shelters *do not include sanitation infrastructure*. People continue to defecate into plastic bags, or on the ground or in streams. The Shelter Cluster of NGOs reported that as of April 7, of the 56,107 temporary shelters, housing 235,649 people, 7.4% received no WASH services. Nienaber reports that an estimated 42% of an additional 116,000 temporary shelters scheduled to be built this year, *will not receive any sanitation and water services either*.

So much for abiding by the emergency response manual of the UN High Commissioner for Refugees (UNHCR). It recommends the installation of one latrine per family, set at a maximum distance of 100 meters from a shelter to a water point, plus two garbage containers per community of 80 to 100 people.

The Rim of Fire

Although there is disagreement among seismologists and geologists as to exactly what triggered the 2010 earthquake, no one disagrees that with its complex geological formations, geographical location on tectonic plates, and seismic history, Haiti is ripe for another very powerful earthquake, possibly in the not-too-distant future. An array of seismic instruments have been installed across the island in an effort to gather data about the origin of the fault, or faults, that may have played a role in the quake.

In the meantime, geologists and engineers recommend that Haiti’s reconstruction incorporate rigorous “risk mitigation” standards, that will improve the resilience of infrastructure and reduce the risk for Haitians in poor housing.

That would be fine if reconstruction were actually occurring. Purdue University geologist Eric Calais, who has been studying post-quake Haiti, was more forthright in remarks he made in January. “I haven’t seen a lot of rebuilding,” he said. “I’ve seen a lot of patching, which gives you the false impression that something is fixed when it is just hidden. There will be a bigger, more powerful, more damaging earthquake closer to Port-au-Prince, and it will likely occur within the lifetimes of buildings being built now.”