# The Nation.

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# A Cholera Outbreak in a Haitian Prison Threatens to Kill Hundreds Within Days

A deadly epidemic is surging in a penitentiary built for 800 people but containing nearly 4,000. Without immediate inmate release and medical care, hundreds may soon be dead.

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Last Friday morning, after pacing around a cellmate's decaying body for days, he couldn't take it anymore. Despite the guards' orders, he began lifting up the wet body to drag it from the small space they shared. The guards saw him. Shouting ensued. A few moments later, he too was dead—shot and killed for trying to remove the corpse. What were the guards at Haiti's National Penitentiary so afraid of that they killed this man? "I think it's called kolera or koleria. I don't know how to say it in the [Kreyol] language, but it sounds like that," a man inside the prison told us as he narrated recent events there via a cell phone. To mitigate the risk of retaliation, this man must remain anonymous; we'll call him Moses.

Until a few months ago, Moses was in the United States, where he had lived nearly his entire life. In connection with his undocumented status, he was taken into custody and deported to Port-au-Prince by US Immigration and Customs Enforcement (ICE). Moses was arrested upon arrival on an ICE-chartered flight. He was soon transferred to Haiti's National Penitentiary. Now, he is sitting in an unwanted front-row seat as catastrophe unfolds around him.

Moses and several other currently incarcerated men with whom we've been connected by cell phones report that, sometime last week, cholera found its way into the notoriously brutal National Penitentiary. This was confirmed by the Haitian Ministry of Health on Saturday. Moses reported that over a roughly 48-hour span between Wednesday and Friday, more than 60 people died from cholera. This has been difficult to verify; other sources have said 32 or 33. Moses has since told us that 17 people died on Saturday... This same number of deaths on Saturday was also reported to us by multiple independent sources (both incarcerated people and external sources who work in close relation to the prison), which brings the apparent total death count to somewhere between 32 to 80 people. On Sunday, government officials confirmed 16 deaths inside the prison in one report and then just nine in another report published six hours later, underlining the reality that formally verifying the first-hand accounts we have received is all but impossible under current circumstances.

Cholera is a notoriously virulent infectious disease that is spread via contaminated water and bodily fluids. Without treatment, the mortality rate from cholera can be as high as 50 percent. In the case of Haiti's National Penitentiary, many of those inside are severely malnourished and have been subjected to intensively health-deteriorating conditions for months on end; they are likely to face high rates of mortality if left without treatment. Most of the time, prisoners are locked in cells without toilets. Buckets shared between cellmates serve as latrines. Food and

clean drinking water, already only intermittently provided in ordinary times, have been in shorter supply due to the national fuel and security crisis. News has repeatedly leaked that dozens of incarcerated people have starved to death due to being left for up to two months without food.

To die from cholera is a nightmare both to experience and to witness, as Haitian communities described during the first cholera outbreak in Haiti in 2010. Death can occur within hours of the onset of symptoms, which consist of severe diarrhea, vomiting, cramps, thirst, and irritability.

We can attest from our experiences in response to prior epidemics—from cholera in Haiti to Covid-19 in the US—that outbreaks in densely populated environments are a ravage. This cholera outbreak in the infamous Haitian prison system, where the appalling conditions under which people are detained have generated international outcry for decades, is an unmitigated disaster.

This has compounded already abysmal prison conditions produced by the combination of aggressive pretrial detention practices, extreme foreign-manufactured poverty in Haiti, and chronic disregard for incarcerated peoples' lives. The Haitian National Penitentiary in Port-au-Prince was built to house 800 people. Today, it holds nearly 4,000. As of May 2020, approximately 90 percent of the people inside are held in prolonged pretrial detention—which means they have not been convicted of any crimes. But regardless of why those detained in the prison may be there, no one should be subjected to the horrific, abusive conditions that characterize the Haitian National Penitentiary. That was true even before cholera began leaving piles of dead bodies throughout the prison; it's all the more true now.

Fortunately, we are confident that stopping this outbreak (and the wider cholera outbreak now brewing) is fully realistic: if Haitian authorities urgently prioritize the implementation of what evidence shows are essential measures and if international actors ensure they have the resources they need to do so. The first of these is emergency provision of medical care, which when cholera is diagnosed early, requires oral rehydration treatment and/or administration of intravenous fluids, with addition of antibiotics in severe cases. Vaccination against cholera is also proven to interrupt transmission and can stop outbreaks. Medical tents should be urgently set up with necessary isolation facilities and treatment infrastructure and emergency water and sanitation established. The second of these, which many studies have shown is necessary to stop infectious transmission during epidemics, consists of immediate large-scale releases of people held inside the prison.

Third, for those released who do not require emergency medical treatment, they must be provided with appropriate access to medical care and food, clean water, and soap for their households to interrupt transmission of cholera should they be potentially subclinically infected with cholera or incubating illness.

Finally, looking ahead to a step that must not be forgotten, the families of those who have died should be compensated.

Stopping the cholera outbreak at Haiti's National Penitentiary is essential not only to protect the lives of those trapped inside; it is also necessary to protect surrounding communities. Jails and prisons have long been known to function as "epidemic engines" that quickly spread infectious diseases into broader populations beyond their walls. This has been made especially obvious in the US during the Covid-19 pandemic. Due to the nature of biosocial networks, the long-repressed fact is that if officials neglect the health and welfare of incarcerated people, it always eventually returns as compounding harm for entire national populations.

In light of these epidemiological realities, an effective response to the crisis at the National Penitentiary must not be delayed any further. With each passing hour of inaction, more people

will die. In 2010, cholera was introduced to Haiti by a UN military mission. The resulting outbreak ultimately killed at least 9,791 people and sickened 820,516. Earlier this month, after three years without a reported cholera case, a new outbreak was identified by the country's health ministry, which is now investigating more than 220 suspected cases and more than a dozen deaths. With the outbreak at the National Penitentiary, it's clear that a national health emergency is already underway, and at a political and economic moment at which Haitians can least afford it.

To respond to the public health crisis at hand, much-needed international assistance should focus on empowering Haitians; it should not be used as a tool to assert control over Haitian affairs. Haitians have demonstrated deft ability to control cholera in the past when the resources required to successfully do so are at their disposal.

Unfortunately, international pledges to support Haitians in this work have historically always fallen short. But public health and humanitarian organizations in Haiti are in dire need of resources, with most in possession of only a few days' worth of remaining fuel to power hospitals and transport needed supplies, for example. It is to public institutions and local organizations in Haiti that have already been responding to the nation's needs that international groups must now direct resources to stop the cholera outbreak at Haiti's National Penitentiary, prevent a looming nationwide epidemic, and build toward the future that Haitians deserve.

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Loune Viaud is the chief gender and social equity officer at Partners In Health and was the executive director of Zanmi Lasante in Haiti from 2012 to 2021.

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#### **Eric Reinhart**

Eric Reinhart, an anthropologist of law and public health, is a psychoanalyst and physician at Northwestern University.