

## HAITI: CHOLERA REPORT

In December 2016, the United Nations apologised for the cholera epidemic in Haiti that has killed at least 10,000 and sickened nearly 1 million people since 2010. That apology came after many years of silence from the UN, and was coupled with a promise (i) to prevent future deaths and suffering and (ii) to remedy those that had occurred. Former UN Secretary-General Ban Ki-Moon acknowledged that the UN bears a duty towards the victims, which was a significant step forward in the quest for accountability and justice. But since then, the UN has done nothing to make good on its promises, especially its promises to consult with and remedy the victims.

If Haiti had to deal with numerous problems over the years, one of the few problems that Haiti had not contended with in its recorded history was cholera. Since 2004, the UN has fielded a peacekeeping mission in Haiti (MINUSTAH) to assist with the stabilisation and the rebuilding of the country. Some of those peacekeepers brought cholera with them. The UN did not screen its peacekeepers for cholera, and it also did not build adequate toilet facilities in its peacekeeping camps. As a result, raw faecal waste carrying cholera flowed directly into a stream that runs into a tributary that feeds Haiti's main river. Given that vast numbers of the population rely on the Artibonite River for washing, cooking, cleaning and drinking, cholera quickly spread around many parts of the country.

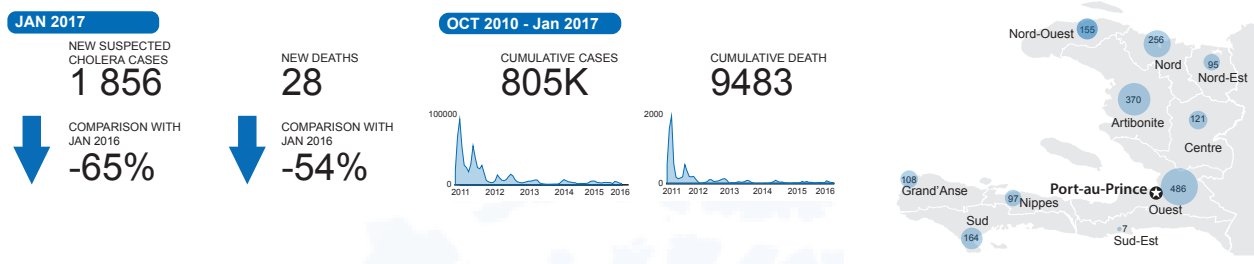


Since the outbreak, the UN has failed to contain and eradicate cholera, and the disease is now pervasive within the country. People continue to be sickened and killed at an alarming rate by this preventable and treatable disease. The UN has also not provided a mechanism through which victims can seek remedies. Peacekeeping missions are legally bound to set up claims boards for victims of civil wrongs, but MINUSTAH has refused to do so for cholera victims. Instead, after years of pressure through a class action lawsuit and related advocacy campaigns, the UN has pledged to provide remedies through a UN-led 'victim-centred approach'. These commitments were made in the context of the launch of "New Approach to Cholera in Haiti", which promises to deliver a package of "material assistance and support" to those Haitians most directly affected by cholera, as a "concrete and sincere expression of the Organization's regret". The UN has

outlined two potential approaches to material assistance, namely community projects in communities most affected by cholera (the community approach) and payments to the families of those who died (the individual approach). Equally the UN has pledged to consult with victims in developing the material assistance package.

However, it has been clear since the launch of the New Approach that the UN favours a collective community approach, and sees a number of challenges to direct payments. What is fast-becoming apparent is that any consultations with victims will only take place after the UN has determined what remedies will look like, and that those determinations will be made based on preferences for development aid and political considerations that favour a community approach, rather than being guided by what victims need.

## SUSPECTED CHOLERA CASES (DELR\* available data)



In March 2017, the UN had still failed to consult with cholera victims despite internal advice and pressure to do so. The task force created in September 2016 and headed by Dr. David Nabarro and Mr. Ross Mountain has met with many stakeholders but never with victims. The public interest lawyers that represent the victims – Bureau des Avocats Internationaux (BAI) – have nonetheless adopted an approach of capacity-building and awareness-raising at the grassroots level in order to enable victims to use their voices and mobilise for their rights. That work is supported by BAI's sister organisation, the Institute for Justice and Democracy in Haiti (IJDH) to bring victim's voices into the UN and member states' Missions to the UN. Alongside the lawsuit filed against the UN in New York courts, IJDH has ensured that the UN receives letters by cholera victims and stories of their suffering. Doing so has empowered victims and has provided constant reminders of their suffering to the UN and its member states.

The UN Development Programme has been tasked with undertaking consultations with victims owing to their expertise on community-based approaches. To date, none have occurred. Seven months after the UN Task Force on a New Approach to Cholera was created, and four months after the UN announced a victim-centred approach, we gathered data from victims about the importance of those promised consultations taking place. The testimony we have gathered focuses on why consultations with victims are needed and about the types of remedies that they are seeking. The data was gathered between 14 and 16 March 2017 in rural localities around Mirebalais, where cholera first broke out and where some of the most affected communities are located. It is also the site where UNDP is launching a "symbolic project" to elaborate and road test the community approach to material assistance.

The sessions took place in communal buildings such as a church or a school, and all victims and their families were invited to attend. Each session began with a video screening of Ban Ki-moon's apology to the cholera victims. It was the first time that most victims had seen the video or had heard the words spoken by the former UN Secretary-General. Overwhelmingly, victims stated that that the most important and meaningful part of the apology part was when Ban Ki-moon acknowledged that 'apologies do not cure diseases'.



Large and small group discussions Large and small group discussions focused on what victims want from the UN. Individuals explained why they want to be consulted, and what types of remedies they are seeking from the UN. The following summaries capture the voices of victims, with direct quotes from participants.



## CONSULTATIONS

As a senior MINUSTAH official said: ‘Consultation process must be a genuine dialogue. If trust can be built then solutions can be found. Just like the government has to recover legitimacy, the UN has to rebuild trust in the UN.’

- It is important that they hear about our suffering. When cholera broke out people would die on the roads, people were dying on the way to hospital. We didn't have money for burials. Neighbours would chip in for funeral costs. We are left with the bill. We need to be paid back for that. What we want is a dialogue to get everyone reparations. They should come to talk to us even if they cannot give us everything we ask for. We will listen, we will respond, we will have proposals for them. They should talk to us and not to the state.
- It is important that they come but really the UN already knows that cholera affected us. It is important that they come bring a little bit of assistance that can help us to get back onto our feet. What is important is that they come with a bit of assistance. The UN has heard what happened and knows our faces. We need them to sit down with us and start to work out how to give us assistance.
- It is important to consult with us. We are the victims. We want to say our priorities. Maybe we can go further together. In any case they can come and hear from us and use it as the basis for their analysis. Consulting local victims groups will enable the UN to have a better sense of priorities. It is important to consult them. It's important to talk about what we have lived through.

Victims also emphasized that consultations are important so that the UN's decision making is not controlled by the State's interests:

- The state is everyone who is elected who are on top of us. We know whenever they are involved in making decisions they don't come to us and ask, they just do what is good for them. They are always looking after themselves; and the people who are victims will not get anything.
- Don't consult with the state – the state in place only wants to enrich itself. The state takes things for itself. We would prefer to be in direct conversation with the UN and not for them to go to the state. We do not want the UN to go to the state. Better that they consult with us about priorities than consult with the state.
- The state abuses our rights – the UN shouldn't go to the state. The state will give false information. They need to have a sense of the real situation down here, to really understand the victims' point of view. There are too many corridors with the State. The truth will get lost.

## COLLECTIVE REMEDIES

Group projects, such as health centres and schools, might help to address the causes of why cholera spread so quickly and why it had such devastating impacts. But victims time and again emphasised that projects in Haiti start and are not finished for many years:

*‘By the time the health centre is built, all of the cholera victims will have died.’*

Victims expressed concern that corruption in the State, at national and local levels, means that collective remedies will benefit those who did not suffer from cholera.

*‘Why should the state be given the money when they will keep it for themselves and we who suffered will never see any benefit from it.’*

*‘We spent money to get to hospital. We don't trust the state. It says it will give us free schools but we still have to pay for them. Hospitals are promised but not built. Roads are promised but not built. If collective remedies happen all we will get is big cars driving past and blowing more dust into our face.’*

Even those victims who do want collective projects emphasised that such projects are not remedies for cholera and that the State has a pre-existing responsibility to provide services.

*'Yes, health centres are good, food is good, all of these things are good. But the state as the obligation to give us these things. We lost our wives, our children, and now the State wants to let them [the UN] give us things the state has obligations to give us. The state will keep the money but it is us who suffered and should have the money.'*

*'Community projects would be good but we need to think about the structure of how they will come. We need to think about the country we are in. Those who are connected will benefit but the little farmers most affected by cholera will not benefit from collective projects. Community projects are good, but for us from this region individual payments are better.'*

*'In general collective projects are good. For example in a very rural zone where people had to go on a goat to find a car to get to hospital, a health centre would benefit them greatly especially if another sickness comes. Community projects are good. They are the state's responsibility but in Haiti the state doesn't do it, so if the UN has money for building health centres then they should do it. But that does not mean we should not get individual payments.'*

Victims emphasized that collective remedies are unlikely to reach the most vulnerable victims:

*'If the UN gives other forms of [collective] help it will help people who have a little bit of education. It will not help those who need to get back onto their feet.'*

*'For people in far-away rural zones, they will not have access to services or to projects if collective ones are provided.'*

Victims also expressed concern that collective remedies would not respond to the direct economic impacts of cholera on households:

*'What about the people where the father of the house died and the family is in a really bad situation? It isn't that new projects are bad – they are good. But these families had a shock. New projects will leave people where they are vis-à-vis other people. They need individual remedies to get them back on the path. Even if cholera came and went quickly, it was a shock.'*

## INDIVIDUAL REMEDIES

Cholera impacted, and continues to impact, people individually, not collectively:

*'We did not suffer collectively; each person suffered individually. We were personally sick in our own bodies.'*

*'We want individual remedies. We want the money to come into our own hands so that if we get sick again we can look after ourselves.'*

*'If the United Nations gives money to the state it will disappear. We sold livestock and land when we were sick. We lost work and family. The money should go into our own hands.'*

Individuals simply want to be given the money they spent to take family members to hospital, to pay for medicines, or to bury the dead. When cholera broke out people literally died in droves on the sides of roads whilst trying to get to hospital. Mototaxis and taxis charged exorbitant fees, not knowing whether taking a victim to hospital would result in the drive becoming sick or dying. In the most rural areas people were put onto horses or planks of wood and carried for many miles to try to reach a road where they could pay someone to drive the sick person to hospital. People talked of selling land or goats, or borrowing money from neighbours, and the impact that has six years later.

*'I just want to buy back my land so that I can have enough money to pay for my children to go to school.'*

*'We just want to be put back on the path, to be given back the money we spent with our fingers.'  
'I buried two children and the money will not bring them back, but it is money that the UN should pay and not me.'*

*'When we were sick we were the ones who had to spend money. We had to sell livestock to go far away to hospital in*

*Mireabilis. To get there we needed a car, and we don't have cars so we had to pay for that and to pay for medicines.'*

*'There are a lot of people who just died. Anyone who got sick had to pay money to get to hospital, and had to pay more than usual because we were in the middle of a sickness so cars and motorbikes were a lot more expensive. In the zones further away you couldn't even get a car to take you. Many people were carried on wooden stretchers and did not make it alive to hospital.'*

*'People need a little bit of assistance because people are still suffering physically from cholera. People who lost family members. Assistance to do commercial activity would help them to recover.'*

*'The people who especially need compensation are children who lost their mother and can't go to school or to university. Many children lost family members and the UN should give them assistance to spend on activities or a garden or school or things to make their lives better.'*

*'There are still a lot of health problems. There should be health assistance like vaccines and treatments to allow people to recover their health because cholera has left them in pain and with problems. It needs to happen quickly. The UN should act quickly.'*

*'What is important is that the UN moves fast because our situation is so bad. Lots of girls cannot go to school because we had to sell land and livestock and get into debt to pay for cholera. We can't earn properly since then.'*

## NEXT STEPS

The claims from the UN is that it does not want to consult with these victims yet. Some say it needs first to consult with the government in Haiti. But such a view does not hold true in a country where the population, and hence the victims, do not always feel represented by the State. Others claim that consultations ought not to occur until the UN knows what money will be provided to pay for remedies. This leads to a cycle whereby States do not want to donate money or use assessed contributions until they know what the money will be used to provide.

The New UN Plan includes both a commitment to consult with victims, and a preference for collective reparations. In our meetings, the victims clearly expressed the willingness to meet with and talk to UN officials, but also expressed a strong preference for individual reparations. Waiting indefinitely to organise consultations with the victims is not a solution. The UN needs to organise these meetings, and hear the victims' voices as soon as possible.

In our meetings with victims, doubts regarding the collective approach appeared clearly. For many individuals, collective projects are not always followed through (by INGOs or by the government). These projects also tend to favour those who are already in position to benefit from them, including through the staffing of the projects once completed (professors of schools; health workers in clinics). The individuals we have met expressed the feeling that these projects will tend to exclude those who are not in position to benefit from these projects, including the population living remotely in the countryside. There are also real risks that the money aimed at these collective projects will be diverted to other use, including for personal gains. Finally, collective projects do not target specifically those who have been affected by the illness, and who are currently struggling to make ends meet. Individual compensation enable to target specific individuals who have suffered and continue to suffer emotionally and economically from the consequences of the illness.

In this context, it is imperative that the UN enters in a direct dialogue with the victims. As one individual summed up: 'if having recognised what they did the UN does not provide remedies it would be meanness and cruelty. It would be an act of bad faith. Not only is it those things but also an injustice because the UN knows the suffering we have gone through and are still living with. Was it a declaration that Ban Ki-moon made for himself, or was it a real responsibility for the UN?'