Disease, Hunger and Death Stalk Refugees Along India's Border

By SYDNEY H. SCHANBERG Special to The New York Times

KARIMPUR, India, June 8—Sickness, hunger and death are common scenes now along India's 1,350-mile border with East Pakistan. Millions of Bengalis — unofficial figures put the number over five million—have fled East Pakistan to escape the Pakistani Army, which since late March has been trying to crush the movement for autonomy, and later independence, in East Pakistan.

The Bengalis have brought cholera with them. Official figures put the death toll here in West Bengal state at 3.600, but reports indicate that it is much higher — probably well over 5,000. A thousand or more others have died in the three other border states where the Bengalis have taken refuge.

Here in this Indian town near the border, a mother had died of cholera an hour before, but the infant, less than a year old, continued to nurse until a doctor came upon the scene and pulled him gently away.

A few feet away on the cold cement porch of the health center, another person had just died — a 70-year-old grandfather, Abinash Malakar.

His son sat, crumpled and crying, beside the stiffening emaciated body. Flies had began to gather. A granddaughter hung, wailing, in the arms of an aunt. This family, from the Jessore district in East Pakistan, had walked for 13 days to reach India.

The toll rises steadily and, with new waves of refugees pouring into India daily, there



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Nadia District, the area hardest hit by cholera.

is no way to predict when the epidemic will end.

Along the roadsides lie the bodies left by those too frightened of the disease themselves

Vultures, dogs and crows fight. Skeletons already picked clean bleach in the sun. A few bodies have been buried in shallow graves, but the vultures have torn the graves

open.
The roads leading from the border are a trail of clothes and bones. A body floats in a marsh or stream. The stench

is acrid and villagers cover their faces as they hurry past.

Mass Graves in Some Areas
In some towns, attempts have been made to bury the bodies in mass graves. Here in Karimpur, which is 120 miles north of Calcutta by road, five relief workers buried several hundred in a 24-hour period. But even at these sites, packs of stray dogs dig in the earth.

In many ways, the scene is a repetition of the horror of the cyclone that killed hundreds of thousands in the Delta area of East Pakistan last November—

leaving bodies for days in marshes, streams and bays.

The tiny, jammed health center at Karimpur—it has 20 beds and over 100 cholera patients—is typical of the overworked health stations along the border.

The sounds of the epidemiccoughing, vomiting, groaning and weeping—echo through the small brick building and across the lawn, also crowded with victims.

Shatish Matabbar—the father of the infant who had gone on nursing after his mother died—stood on the porch in tattered clothes, sobbing out his tale.

"No words can describe what has happened to me," the 45-year-old rice farmer wailed. "My wife is dead. Three of my children are dead. What else can happen?"

2 Children Survive

The infant and an 8-year-old have survived, although the older almost died of cholera. He sat on the floor near his father—naked, staring blankly, underfed.

The family came to India a month ago from their farm in the Faridpur district of East Pakistan.

Why had he left East Pakistan? a visitor asked.

"Why, you ask?" he said, crying again. "Because the Pakistani soldiers burned down my house."

In the last day or two, the death rate in some areas declined a little. This is apparently because foreign medical and relief supplies have begun arriving in sufficient quantities — saline solution to treat the victims and syringes for mass innoculations. Hundreds of thousands have been vaccinated.

But doctors are reluctant to say that the epiemic will be under control soon. For one thing, though India's army medical corps has been called in, medical facilities and personnel are inadequate.

The epidemic is apparently much worse in East Pakistan than in India. Medical facilities in East Pakistan, even in normal times, are meager. In an average year, 150,000 die there of cholera, most of them because they never get any treatment. In a bad year, the toll sometimes runs as high as 300,000.

Fears New Increase

Dr. M. A. Majid, the chief medical officer of the Nadia district, the worst-hit area, said today that he expected the death rate to start climbing again. The cholera vaccine, he said, gives only 30 per cent to 90 per cent protection.

The weakened condition of the refugees helps explain the virulence of the epidemic. Many are on the verge of death when they arrive.

In addition, living conditions are little short of desperate. Though the Indian Government has marshaled all available resources to provide shelter and food, it is impossible to keep

Relief camps—even just tents made by throwing tarpaulins over bamboo frames — cannot be erected fast enough. It is estimated that 3.5 million refugees are either living in the open or in crude thatch leantos of their own making. The monsoon rains have arrived and many refugee towns are mudholes.

There are water shortages and sanitation facilities have virtually broken down. The main streets of border towns are avenues of garbage and flies.

Food lines stretch for hundreds of yards and it sometimes takes hours for a refugee to get his rations.

More refugees are moving toward Calcutta as the other camps become choked. New camps are springing up on the edges of the city—just past the airport and in the Salt Lake

About 50,000 to 60,000 refugees have entered the fringes of the city, and at least 60 deaths have been recorded in this group.

A few thousand refugees have moved into the heart of Calcutta and are camping in the Sealdah Railway Station.

Indian officials are worried that the refugee epidemic may spread to the people of Calcutta—an overcrowded, tense city of eight million that has its own fairly serious periodic cholera problem.



Associated Press
TO SET UP AIRLIFT: Maj. Ivan Choronenko of the Air Force on arrival in New Delhi.
He will help coordinate U.S. part of the relief mission for Pakistani cholera victims.