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EMERGENCY PREPAREDNESS AND DISASTER RELIEF COORDINATION PROGRAM IN THE AMERICAS

INTRODUCTION

The Americas are particularly vulnerable to natural disasters. Major earthquakes have occurred in Peru (1970), Nicaragua (1972), and Guatemala (1976). Volcanic activities caused evacuation of large numbers of people in Guadalupe (1975-1976) and St. Vincent (1979). Hurricanes strike in the Caribbean and along the Atlantic Coast of Central America periodically (for example, hurricane Fifi, Honduras, 1974). Floods, on many occasions, have severely affected the economic and social development and the provision of primary health care of many countries in the Region (Paraguay, Bolivia, Dominican Republic, Brazil, Jamaica, etc.).

OBJECTIVES OF THE PROGRAM

Several resolutions on relief assistance have been adopted by the Governing Bodies of WHO and PAHO.¹ In the last three years, increasing emphasis has been placed by the Directing Council of the Pan American Health Organization on technical cooperation in emergency preparedness before disasters actually strike.²

In October, 1976 the Directing Council of PAHO, "anxious that the international assistance given to countries affected by natural disasters should be better coordinated, rational, and more effective," requested that the Director set up "a disaster unit with instructions to define the policy of the Organization, to formulate a plan of action for the various types of disasters, to make an inventory of the human and other resources available, to train the necessary personnel, to prepare and disseminate the appropriate guidelines and manuals, and to promote operational research to meet the needs of the countries in disaster situations, and to ensure that this unit establish effective coordination with the United

¹CE70.R18, CSP19.32, CD22.25, EB51.R43, WHA28.45, EB55.R62

²CSP19.43, CD24.10 (annexed)

Nations Disaster Relief Coordinator, the International Red Cross, and other national and international bodies providing disaster assistance."

In March 1977 a Unit for Emergency Preparedness and Disaster Relief Coordination was established at PAHO Headquarters, with one professional and one secretarial post.

REVIEW OF THE SITUATION

In compliance with the terms of Resolution CD24.10 and with the continuous support and global coordination of the WHO Emergency Relief Office, the following activities have been carried out:

Definition of a Policy and Formulation of Plans

The definition of a policy is an evolving process based on and improved by the experience acquired in past disasters, especially the earthquake in Guatemala (1976,) and floods in Bolivia and Paraguay (1979), and the volcanic eruption in St. Vincent (1979).

Proposed Program Policy on Emergency Preparedness¹

- To promote the establishment of a permanent focal point for disaster relief coordination and of a technical program on emergency preparedness in the health sector of disaster-prone countries;
- To encourage the Ministry of Health to play the leading role in emergency planning and disaster relief coordination in the health field;
- To promote inclusion of emergency preparedness as a component of all training activities of the Organization of disaster-prone countries;
- To place emphasis on training, including, whenever appropriate, during actual emergencies;
- To promote evaluation and operational research on emergencies.

Proposed Program Policy in Case of Disaster

- To place emphasis on technical cooperation in the assessment of needs and dissemination of information;

¹Sixth General Programme of Work of WHO (1978-1983), paragraph 15.2.2

- To advise Member Countries and donor agencies, on request, on the assistance most compatible with the needs of the affected country and the priorities of the agency;
- To provide supplies, subject to availability of funds, to initiate or resume effective public health activities.

Plans of action to be followed by the Area and Country Representatives were formulated to reflect the proposed policy and disaster relief coordination.

Inventory of Human and Other Resources

The compiling of a roster of emergency experts who could be available at short notice was started in 1977. Over 150 individuals from Member Countries were requested to provide bibliographic data. A low response rate and the prerequisite of extensive experience in management of natural disasters prevented a satisfactory extension of the roster. Medical examinations, issuance of UN certificates, and other administrative procedures are currently carried out in advance for selected individuals.

A computerized mailing list of agencies, officials and individuals active, knowledgeable or interested in emergency preparedness and disaster relief was compiled and recently updated (900 names).

Donor countries (United States of America, Sweden, the Netherlands) and agencies (UNICEF) request PAHO's advice on health supplies or services to be made available in case of disasters, and keep the Organization informed on the current status of their stockpiles.

A survey of available field hospitals in disaster-prone areas is planned for the end of 1979, in cooperation with the Pan American Development Foundation.

Training of Personnel

Seminars and courses on disaster management and emergency preparedness were organized, sponsored or supported in the following countries: Argentina, Colombia, Ecuador, Mexico (Regional Red Cross Seminar), Peru, and Trinidad (CAREC). Experts from Guatemala, El Salvador and Argentina represented the Region in a WHO seminar in Manila Philippines, in March 1978.

Sets of slides on various topics of emergency preparedness (total: 150) were developed and provided on a trial basis to selected professionals in this field. Preliminary contacts were established with UNICEF and with a contractor to improve, expand and widely disseminate the slides, filmstrips and other training materials.

Approximately 350 publications in English and Spanish of particular applicability to the Region were selected, inventoried and made widely available to professionals and agencies in Member Countries.

Monthly computer searches are made on various topics in the field of emergency preparedness. This service is available on request.

The publication of a newsletter (2,500 copies) in Spanish and English contributed to the dissemination of technical information and proposed guidelines to the health sector, academic institutions, civil defense organizations and nongovernmental agencies active in the field.

Promotion of Operational Research

The inclusion of disaster relief as a priority research topic was actively promoted by the PAHO Medical Research Advisory Committee, academic institutions in Argentina, Colombia, Guatemala and Peru, and by potential sponsors. A grant of \$2,577 was approved in 1977 for the study of long-term effects of the earthquake in Nicaragua on mental health. The study is completed and being reviewed for eventual publication. Interest was expressed in the support by funding agencies of applied research. Additional protocols from disaster-prone countries are under preparation (Guatemala, Peru and Colombia).

Preparation of Guidelines and Manuals

The Guide on Health Management Following Natural Disasters, prepared jointly with WHO/HQs, is being finalized and will be published in Spanish, English and French in early 1980. The 100-page guide, addressed to high level planners and decision-makers, offers approaches to solving key problems during emergency situations.

The preparation of guides and manuals on emergency medical care, management of relief supplies, environmental health, and communicable diseases control and surveillance was initiated. These manuals will provide techniques and methods for the implementation of the policies recommended in the Guide on Health Management Following Natural Disasters.

Guidelines on mass immunization, use of water purification tablets, field hospitals, and snakebite management following disasters were prepared and circulated for review at country level.

Technical Cooperation in Case of Disaster

Since the establishment of the Program and the Disaster Unit in October 1976 by the Directing Council, the Region has been spared from large-scale disasters involving massive international assistance.

The Organization provided direct technical cooperation in the following countries: St. Vincent (floods in 1977 and volcanic eruption in 1979); Peru (flash flood in Cuzco in 1977); Honduras (floods in 1977, refugee problems following civil strife in Central America in 1978-1979 and hurricane Greta in 1978); Haiti (drought and food shortage in 1977); Belize (hurricane Greta in 1978); Guyana (power shortage in 1978); Costa Rica (refugee problems following civil strife in Central America in 1978-1979); Bolivia (floods in 1979); Paraguay (floods in 1979); and Jamaica (floods in 1979).

Technical cooperation was provided by PASB staff members in the affected countries on the following matters: communicable disease surveillance, monitoring of water supply, assessment of food needs and nutritional emergency surveillance, design and management of camps, assessment of damages to health facilities, management of rehydration due to diarrhea, extension of medical coverage to displaced people, etc.

Natural Disaster Relief Voluntary Fund

At the same time the Disaster Unit initiated its activities, the Natural Disaster Relief Voluntary Fund (PD) was established and funded at the level of \$100,000 by transfer from savings.¹

The Executive Committee in Resolution II of its 77th Meeting requested the Director to approach Member Governments and private agencies with the objective of obtaining voluntary contributions for the Natural Disaster Relief Voluntary Fund (PD). All Member and Participating Governments were formally invited to contribute in December 1977. With the exception of a pledge of US\$500.00 by the Turks and Caicos Islands, no favorable response was received in support of the Fund.

Informal contacts with other agencies and governments did not meet with great success. Funding organizations expressed some reservations about contributing to a regional fund prior to a natural disaster.

¹Resolution CE77.R2 (annexed)

Following hurricane Greta, which affected Belize in September 1978, syringes, vaccine containers and medical supplies were donated, for a total amount of \$2,417. These supplies aided authorities in adjusting and expanding the routine immunization program to the emergency situation.

In the immediate aftermath of the volcanic eruption in St. Vincent (April 1979), the Organization provided urgently required medical supplies and services, such as chemical tests of water samples carried out in Trinidad and Barbados, and equipment (a spectrophotometer to increase the monitoring capacity of the central water authority), at an estimated cost of \$3,600.

The lack of contributions to the PD Fund limited the Organization's capability to assist the disaster-affected countries "promptly and readily" as instructed in Resolution X of the XXIV Meeting of the Directing Council.

Planned Future Activities

Recent generous contributions from the Canadian Government and anticipated additional support from other agencies will permit a rapid development of the program. The following priority areas are submitted for the consideration of the Governing Bodies:

- strengthening the activities of technical cooperation in Area III and Area IV (Guatemala and Peru), which include the most disaster-prone countries of the Region;
- promotion and support of the establishment of a permanent focal unit in each Ministry of Health;
- formulation of a mechanism to permit selected high-level officials of disaster-prone countries to acquire indispensable, first-hand experience during emergency situations in Member Countries;
- organization of an annual 10-day course, in Spanish, on disaster management, for high-level relief coordinators and administrators in the health sector.

In case of Disasters in the Region:

- Strengthen the technical cooperation of the Pan American Sanitary Bureau in the assessment of needs, and assume the leading role in the coordination of international assistance in the health sector. This activity will be carried

out in close liaison with WHO/HQs, the OAS, the League of Red Cross Societies, Member Governments, other organizations, and within the overall coordination of UNDRO.

- Increase the capacity of the Pan American Sanitary Bureau to advise prospective funding agencies objectively in channeling additional resources to priority needs in the health sector.

Coordination Activities

The Governing Bodies of WHO and PAHO have consistently stressed the need for close cooperation with other agencies providing disaster assistance.

Coordination is constantly strengthened, especially with the WHO Emergency Relief Office (ERO), UNDRO, UNHCR, UNICEF, the League of Red Cross Societies, and the International Committee of the Red Cross. The preparation of manuals, seminars, formulation of guidelines for assessment of needs, etc., is in progress with some of these agencies.

During emergency situations, the exchange of information and immediate and permanent coordination with relevant UN agencies, Member Countries, and regional and bilateral organizations providing assistance to the affected countries are the first priority of the Program.

Material assistance, beyond the capabilities of the Bureau, was sought from the UN system as well as from other international sources on two main occasions this year: to assist the Nicaraguan refugees in Honduras and Costa Rica, and for the flood disaster in Jamaica. In both instances and after an initial evaluation of the health situations, the Unit has been actively engaged in establishing and in maintaining coordination so that the technical and material assistance, both from within and outside the Organization, could be mobilized to flow unimpeded. While the resources within the Organization are adequate for matters related to technical cooperation, it must lean on international resources for material assistance in case of a major disaster. In this respect, the UN system and ICRC play a determining role. A particularly close relationship was developed and maintained with the FONDEM program of the Organization of American States. The Unit reported to the Permanent Committee of the OAS on its activities in Honduras, Costa Rica and Jamaica and participated in the informal meetings convened by FONDEM to coordinate the activities of all those agencies which are concerned with assisting the disaster-affected countries. Among the most active of these are ICRC, UNHRC, PADF (Pan American Development Foundation), USAID and the Canadian Disaster Organization.

Bilateral and other organizations and the Governments of Member Countries have increasingly requested advice from the Bureau and coordinated their intended actions in the health sector during and before disasters. This advisory activity of PASB, undertaken in close liaison with WHO/HQs and, when applicable, under UNDRO overall coordination, provides the Organization with an excellent opportunity to play a substantial role in directing international assistance towards the priority need areas.

82nd MEETING OF THE EXECUTIVE COMMITTEE

PAHO's Disaster Preparedness Program in the Americas was discussed by the Executive Committee under Item 23 of its Agenda.

It was explained that the Program had two major components: promotion and assistance to the countries in emergency preparedness, and assistance to the countries in disaster relief. The Director had been instructed to set up a unit which would (a) define the policy and action plan (establishing a focal point in ministries of health, encouraging those ministries to take the lead in the health field during emergencies, emphasizing training and technical preparation, assessing needs and disseminating information, and providing material assistance); (b) make an inventory of resources; (c) provide training through seminars, courses, educational aids, a data bank, and a newsletter; (d) promote research; and (e) prepare guidelines and manuals (those on health management, sanitation, medical supplies, mass treatment, etc., were already in hand, and others would focus on field hospital use, mass immunization, water purification, and drugs recommended for use during natural disasters).

One of the problems faced by the Organization was lack of financial contributions to the Natural Disaster Relief Voluntary Fund, the pledge from the Turks and Caicos Islands being the only one received to date.

Future activities would focus on seeking extrabudgetary funding, developing activities away from the regional level to the Area and country levels, and holding courses such as the one to be given on disaster management in Spanish in November 1980.

A very informative discussion followed the above presentation touching on many points, some technical others conceptual. The highlights were as follows:

All the Representatives agreed that the PD program was well constructed and contained medium- and long-term arrangements which would enable disaster-prone countries to manage with greater efficiency relief operations related to major disasters.

The Committee was in agreement that a number of situations, other than natural, could have a disastrous effect on health; because of this it was felt that PD should not be restricted to natural disasters but extended, whenever the situation warranted it, to cover those disasters, other than wars, caused by man.

For a better management of the relief operations and preparedness planning, a national focal point located in the Ministry of Health would be a very desirable development; some Members, however, queried if a full time permanent position should be established to that effect (Trinidad).

Training of health personnel was viewed as basic. Such training should be opened to members of the civil defense and other allied services, since the techniques learned in relief operations could be equally useful in the management of disaster situations caused by riots, civil commotions and states of war--situations that are not covered by this program. Preparedness should start in the community, where participation on a voluntary basis should not be difficult to organize (Paraguay). To the extent possible, resources already available within the Region should be utilized in training; examples of such resources are a manual brought out by Brazil and the experience gathered by the Disaster Unit in Chile. The Representative from Canada suggested the publication of lists of resources (such as that on drugs), guidelines and case studies as one way of improving information.

In major disasters the PD is far from being adequate. Canada pledged substantial financial assistance, amounting to US\$385,860, through 1981; the Representative from Paraguay suggested a multidisciplinary international commission for clearing and coordinating all assistance in all the sectors (across the board) in the event of a major disaster.

Following these discussions the Members of the Executive Committee were unanimous in recommending to the Directing Council approval of a draft resolution¹ that would further support the program.

The resolution urges Member Governments to establish a national focal point for PD programs in health, and to train health personnel, and requests the Director and the Governments to strengthen cooperation at all levels in matters of training, planning and assistance.

¹Summary record of the ninth plenary session, Document CE82/SR/9, Item 23, pages 25-33

Amendments to different parts of the original draft resolution were presented by the United States of America, Trinidad, Chile, Peru, Paraguay and Ecuador. The resolution approved by the Executive Committee is annexed.

Annexes

Resolution X, XXIV Meeting of the Directing Council:

Resolution X

Emergency Assistance to Countries of the Americas

The Directing Council,

Bearing in mind the assistance given by the Pan American Sanitary Bureau on the occasion of the earthquake that occurred in Guatemala on 4 February 1976, the provisions of Resolution XXX⁸ approved by the XVIII Pan American Sanitary Conference in connection with the earthquake in Peru in 1970, and the recommendations concerning natural disasters contained in the Ten-Year Health Plan for the Americas;

Being convinced that similar emergency situations are bound to occur in the disaster-prone parts of the Region and are likely to affect countries that do not as yet possess comprehensive emergency relief plans or that need technical assistance in order to update and apply them;

Considering that most of the assistance agencies are not properly equipped to provide help in the health field in carrying out their reconstruction, rehabilitation and planning tasks; and

Being anxious that the international assistance given to countries affected by natural disasters should be better coordinated, rational and more effective,

Resolves:

1. To thank the Director and the Secretariat, and particularly the personnel assigned to Guatemala, for the assistance given to that country in connection with the earthquake of 4 February 1976.

2. To request the Member Governments to develop plans and, where necessary, enact legislation, set standards, and take preventive or palliative measures against natural disasters and disseminate such measures throughout the sectors concerned, coordinating their action with that taken by the corresponding services of PASB.

3. To request the Director to set up within the Pan American Sanitary Bureau, after first compiling and analyzing the appropriate data and information, a disaster unit with instructions to define the policy of the Organization, to formulate a plan of action for the various types of disasters, to make an inventory of the human and other resources available, to train the necessary personnel, to prepare and disseminate appropriate guidelines and manuals, to promote operations research to meet the needs of the countries in disaster situations, and to ensure that this unit establish effective coordination with the United Nations Disaster Relief Coordinator, the International Red Cross, and other national and international bodies providing disaster assistance.

4. To request the Director to set up a natural disaster relief voluntary fund which can be used promptly and readily by the disaster unit.

*(Approved at the tenth plenary session,
1 October 1976)*

Resolution II, 77th Meeting of the Executive Committee:

RESOLUTION II

ESTABLISHMENT OF A NATURAL DISASTER
RELIEF VOLUNTARY FUND

THE EXECUTIVE COMMITTEE,

Bearing in mind the recommendation concerning natural disasters contained in the Ten-Year Health Plan for the Americas; and

Considering Resolution X adopted by the Directing Council at its XXIV Meeting, and in particular operative paragraph 4 which requests the Director to set up a natural disaster relief voluntary fund which can be used promptly and readily by the Disaster Unit,

RESOLVES:

1. To request the Director to contact Member Governments and appropriate private agencies for the purpose of obtaining voluntary contributions for the natural disaster relief voluntary fund.
2. To authorize the Director to transfer from savings into the voluntary fund a sum not to exceed US\$100,000 for initial capitalization, in order to make the voluntary fund promptly available for use in disaster relief, and to further authorize the Director to utilize this initial capital for normal program purposes as the voluntary fund is replenished by contributions.