DISASTERS





PREPAREDNESS AND MITIGATION IN THE AMERICAS

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Editorial

Disaster-stricken Countries Have Made Progress Why then does press coverage leave us with a sense of déjà vu?

he 1985 earthquake in Mexico City; Hurricane Mitch in Central America in 1998, Kosovo, 1999, and now the earthquake in Turkey. Aside from the hazard itself, can we clearly distinguish among these events, or is one disaster pretty much like another? If we are to believe press coverage of public health issues following large-scale disasters, the aftermath is so similar that one can almost cut the name of the city or country from one story and paste it into another.

Reading the accounts of major natural disasters, we cannot escape the feeling that the press paints a stereotypical portrait of the post-disaster situation for the benefit of the public in donor countries. And who in the Western Hemisphere is not a donor?

The scenario often presented in the media leaves us with a sense of déjà vu... images of helpless injured victims suffering from a lack of medical attention because the national authorities are not responding. Nurses, doctors or relief workers are interviewed and only their complaints about needing medical supplies and medicines are given high priority. The overall picture would lead one to believe that the health services are not responding at all.

Often international news teams claim to arrive at the site of the emergency in a remote area before any external rescue teams. That might sometimes be the case, but local health authorities and other health personnel can only dream of having an open-ended expense account that would let them hire aircraft or four-wheel drive vehicles regardless of the cost! Problems that are logistical in nature are translated as a lack of coordination and competence.

Once the work of the medical teams from donor countries has been widely covered, and the emergency medical situation is "in good hands," interest shifts to scenes of people deprived of food and drinking water in less-accessible areas, giving the impression that these items are scarce in the disaster-stricken country. In reality, the problem lies

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Discover the VDL!

The Virtual Disaster Library is here! Turn to page 6 to learn more about how to access more than 250 publica - tions on disasters. It is easy use, free, and available 24 hours a day on the Internet.

Bibliography

Selected

ews from PAHO/WHO

WHO Explores Issue of Supply Management in Kosovo

ollowing the signing of a peace agreement in the Kosovo conflict, a WHO task force visited Kosovo in late June and studied the issue of transparency and accountability in the management of internationally-donated health supplies. Following broad consultation with local counterparts, UN agencies, NGOs and representatives of bilateral donors, the task force recommended the creation of a Kosovo-wide system to capture information on incoming health supplies at the point of entry, before

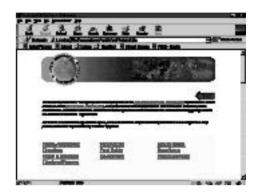
they enter the distribution network of any particular agency. It was recommended that WHO assume this responsibility, within its role as interim Ministry of Health.

A remarkable feature in this particular humanitarian operation is the strong pressure that European NGOs are exercising on the international community and WHO to aggressively monitor compliance with the WHO guidelines on donations of medicines and equipment. These NGOs are quite concerned and are actively lobbying for self-policing on the part of the international community. This encouraging trend should be emulated in the Americas.



Photo: PAHO/WHO, C. de Ville de Goyet

Public Health Guidelines for Disaster Situations



Has PAHO or WHO published guidelines for the safe disposal of unwanted or unusable pharmaceuticals? What are some of the most frequent myths surrounding natural disasters? What are recommended practices concerning vaccinations in disaster situations? These are some of the questions posed to PAHO/WHO in the aftermath of Hurricane Mitch, and they helped form the basis of a new section of our web site with technical information on a variety of public health issues.

More than 20 PAHO public health experts contributed to the preparation of this material. Visit the Web site at http://www.paho.org/english/ped/technical.htm to review this information.

WHO Produces Draft Guidelines on Fire Events

Wild fires that affect forests and other vegetation worldwide can be the result of natural causes or accelerated by man. Regardless of the cause, the smoke generated by wildland fires also affects human health and can lead to loss of lives. Since early August, Bolivia's department of Santa Cruz has been experiencing serious fires across a wide area, apparently the result burning fields in preparation for planting. A prolonged drought and strong winds in the region fueled these fires.

WHO has produced "Health Guidelines for Episodic Vegetation Fire Events" to provide guidance to governments and municipal authorities when large parts of the population are exposed to smoke from fires. The core document summarizes the experience and knowledge from the WHO-

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Staff Changes in the Region

Please note the following PAHO/WHO staff changes in the region:

DR. JEAN LUC PONCELET has moved from PAHO's subregional disaster office in Quito, Ecuador to headquarters in Washington, D.C. He may be contacted at poncelej@paho.org or by fax (202) 775-4578.

DR. Luis Jorge Perez, currently based in Mexico, is also scheduled to join the headquarters staff effective 1 November 1999.

For information on how to contact all of PAHO's subregional disaster offices and special programs, visit our Web site at http://www.paho.org/english/ped/pedcont.htm.

Other Organizations

Funding Agencies Become More Involved in Disasters

Up until recently, the degree of interest in a disaster was directly proportional to its impact. Today there is a growing appreciation of their long-lasting effects and cost-effective measures that can reduce vulnerability. In many governments and global institutions, the political will to tackle these more difficult problems frequently has been absent. The earthquake in Turkey, as has been widely reported in the media, confirms that general feeling. However, several important financing organization are starting to act differently.

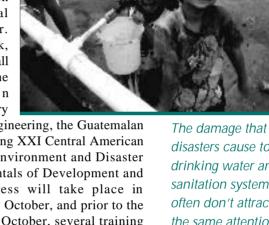
The El Niño phenomenon in much of Latin America became a front-line political concern. Because the impact was so great on the social and economic sector, the countries had no choice but to become involved in disaster management. At a meeting on El Niño, organized by the Inter-American Development Bank in July 1998 (use the new Virtual Disaster Library to consult issue 73 of the *Disasters* newsletter), it was recognized that most of the damages were due to development failures.

In June of this year, the World Bank organized a "Consultative Group for Global Disaster Reduction." This group unanimously agreed that pro-active intervention is necessary to ensure that disaster risk management is an integral part of sustainable social and economic development. As a result, the Consortium for Natural and Technological Catastrophes (NAT-CAT) has been created to reduce social and economic losses in disaster-prone developing countries. This consortium is made up of governments, the private sector and civil society. For more information contact

Ms. Alcira Kreimer, World Bank, fax (202) 522-2125; e-mail: akreimer@worldbank.org. □

Central American Congress on Sanitary and Environmental Engineering

Hurricane Mitch had a severe impact on drinking water and sanitation systems in Central America last year. Within this framework, and as part of the overall activities of AIDIS, the Inter-American Association of Sanitary



hoto: IDB, D. Mangurian

and Environmental Engineering, the Guatemalan Association is organizing XXI Central American Congress on Water, Environment and Disaster Prevention: Fundamentals of Development and Health." The Congress will take place in Guatemala from 24-28 October, and prior to the Congress, from 21-23 October, several training courses will be given, among them Disaster Prevention and Mitigation in Water and Sanitation Systems. The course, organized by the Guatemalan Engineering Association, PAHO's Division of Environmental Health, AIDIS and MASICA will give Central American professionals the tools to include disaster prevention and mitigation considerations in rehabilitation and reconstruction projects for this sector, as well as in projects for new water and sanitation infrastructure. For more information contact: AGISA, at fax: (502) 369-3703; e-mail: agisa99@ hotmail.com.

disasters cause to drinking water and sanitation systems often don't attract the same attention as a collapsed building or a debris-littered road. But the consequences are more devastating and long-lasting, and pose a severe risk to health.

News from PAHO/WHO

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UNEP-WMO expert meeting in Lima, Perú in October 1998 (individual background papers are published in a separate document). A third document—a Teacher's Guide—compiles educational materials that can be used in training courses.

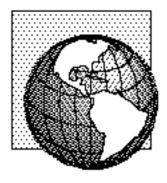
These are the first WHO publications to provide global advice and guidance on managing episodic vegetation fire events, and they were prepared to:

· provide information on how to prevent health

impacts from these events;

- identify efficient, sustainable, economic and culturally acceptable prevention practices;
- provide an early warning system for prevention of public health effects from vegetation fires.

For more information about this set of documents contact Dieter Schwela, World Health Organization, fax: (41-22) 791-4123; e-mail: schwelad@who.ch.



Vember Countries

Caribbean Plans Ambitious Training Agenda

Incident Command Systems: Several Caribbean countries have requested training in the area of Incident Command Systems (ICS) and PAHO is preparing a course that will be integrated into the new mass casualty management training program. The training will cover the structure, functions and responsibilities of the ICS, resource management and the steps to take in preparing for, participating in and demobilizing from an incident. The first test course will be held in the BVI in September, followed by a course in Barbados later that month. Upon completion of the training it is hoped that countries will adapt and use this system as part of their mass casualty response procedures.

Stress Management in Disasters: This course is in its final stages of development. Dr. Cryrilene Bryce, a psychiatrist from Barbados, has completed the first draft of the manual. The course is structured to train emergency services personnel on techniques for managing stress when responding to disaster situations. Several countries have

already requested this training and work has begun in the British Virgin Islands, Barbados, Martinique and Dominica.

Response Planning for Seniors and the Disabled: This training is planned as an awareness activity to increase the preparedness of the social services about the nature of protection and assistance required by seniors citizens and the disabled when a disaster occurs. The course is being developed in the BVI with assistance from PAHO.

Planning for Mass Gatherings-Plans for the millennium: An estimated 10,000 visitors are expected in the British Virgin Islands at the end of the year. The Ministry of Health and the national disaster office have requested assistance in developing a mass gathering plan to prepare the emergency medical services to cope with potential accidents. PAHO, together with an emergency medicine expert from SAMU/French Guiana, is developing guidelines for such situations. Once completed, the plan can be used for other Caribbean countries for similar events. □

(cont. on pg. 5)

St. Kitts: JN France Hospital Ready for the Next Big One

he emergency repairs to the JN France Hospital and the Cayon Clinic in St. Kitts, which were affected by Hurricane Georges last year, have been completed just

in time for the peak months of the 1999 hurricane season. Timely support from donors such as the U.S., the European Union, the U.K. and the Netherlands has enabled the Ministry of Health and PAHO to complete the rehabilitation of the maternity ward, the laboratory/eye clinic and the pediatric wards of the JN France hospital. This rehabilitation has incorporated the necessary mitigation measures to reduce the impact of hurricanes, earthquakes and torrential rains in these critical facilities. The structure of the buildings has been strengthened to withstand earthquakes and the roof, doors and windows replaced to maintain the interior dry in the event of

wind and rain. Impact-resistant polycarbonate windows have been used, thus doing away with the need for external hurricane shutters.

The buildings now await their first "test", which hopefully will be some time in coming, but they stand as a model of retrofitting and have achieved a high standard of disaster resistance. The buildings will be officially handed over to the Government of St. Kitts on 15 September 1999.



Chile: Workshop on Hazardous Materials

The Disaster Program of Chile's Ministry of Health is organizing a workshop on toxicology in September which will deal with the health effects of disasters caused by dangerous materials. Because this type of hazard has cross-border implications, representatives from Chile will meet with other professionals from the neighboring countries of Peru and Bolivia to include integrated guidelines in their disaster plans to deal with this type of disaster. For more information contact: Mr. Luis Busco, Chief, Department of Emergencies and Catastrophes, Ministry of Health, fax: (562) 630-0725; e-mail: lbusco@pasteur.minsal.cl.

Ecuador: Ministry of Health Strengthens Preparedness

With the support of PAHO, the Ministry of Health has published "Memorias del Fenómeno de El Niño en el Ecuador, 1997-1998 (Spanish only). The publication recounts the impact of this disaster on health in Ecuador, looks at the increase in vector-borne diseases, disaster management before, during, and following the arrival of the El Niño, and future steps the health sector will implement based on the lessons learned from this most recent occurrence of El Niño. This document will form part of a comprehensive publication on the health effects of El Niño which PAHO will publish later this year (more information in the next issue of this newsletter.) For information on Ecuador's publication contact Dr. Alejandro Santander, PAHO/WHO, fax: (59-32) 46-46-30; e-mail: alejan3@ibm.net.

With a view toward promoting a disaster preparedness program in the coastal region of Ecuador, the Ministry of Health has created an emergency program to develop health sector disaster management action plans for this specific region of the country. This office has already organized two SUMA training courses for 45 health sector disaster professionals from the six provinces most affected by El Niño. Representatives from NGOs and other institutions working in disasters also participated. In November the region's principal hospitals should

have implemented their emergency plans and simulation exercises are being organized to these. \Box

Guatemala: Nurses Explore Role in Disasters

Guatemala's Social Security Institute organized a workshop in August to analyze and discuss the role of national nursing personnel in disaster response. Forty nurses from different goegraphical areas attended the workshop. Through the discussion it became evident that this particular group of professionals within the national disaster response structure had assumed a leadership position and was responsible, in many instances, for the fact that disaster preparedness enjoyed prominent consideration in a wide variety of health domains in which nurses have a significant impact: emergency services, operating rooms, inter- and intrahospital emergency plans, coordination, etc. One important aspect that was noted was the technical recognition that has been accorded to the nursing profession in Guatemala, and the leadership they exercise particularly at the rural level. For more information contact Dr. Hilda Leal, OPS/OMS, Guatemala, 502-334-3804; e-mail: hildam@gut. ops-oms.org. \Box

Mesoamerican Universities to Meet

Central American universities have achieved important advances in the last two years in raising awareness at the political level of the importance of including the topic of disasters in the curriculum of both public and private institutions. Hurricane Mitch made this task easier. The Mesoamerican University Commission will meet in Managua, Nicaragua at the end of September to review the accomplishments to date and to prepare a regional plan. The advances that have been made in integrating disaster preparedness information into the curriculum of medical and other health faculties of these universities has increased the pool of trained professionals in the area of disaster management. For more information on upcoming plans in Central America, contact Dr. Rene Urroz of the Nicaraguan University Commission, fax: (505) 244-1516; e-mail: medican@mixmail.com. □

Do we have your



address?

If you would like to receive short, periodic news items electronically, send your email address to disaster-newsletter@paho.org.



Review of Publications

The Virtual Disaster Library

e are talking about a library that you cannot visit on foot. But it's easy to find, and once you arrive, you will find much more than a collection of paper documents that have been converted to electronic format. The Virtual Disaster Library (VDL) is the next step in a process, begun more than 20 years ago by PAHO, to improve access to scientific and technical information on disasters in Latin America and the Caribbean.

We are talking about a virtual library made up of technical and scientific information resources, organized and selected for their importance and technical quality, that can be found on the Internet and on CD-ROM. The VDL is:

- an open and dynamic collection of documents from a wide variety of organizations involved in disaster reduction. All documents are available in HTML and PDF formats;
- available 24 hours a day, free of charge, to thousands of users anywhere;
- published in two formats to guarantee the widest distribution possible: CD-ROMS will be distributed to hundreds of libraries and organizations, particularly in Latin America and the Caribbean; the WWW version can be consulted on several Internet servers.

The VDL is part of the Virtual Health Library, created by BIREME, PAHO's Latin American and Caribbean Center on Health Sciences Information (http://www.bireme.br).

What does the VDL Contain?

This first version of the Virtual Disaster Library contains more than 250 publications, in English and Spanish, on disaster preparedness, mitigation and response, directed particularly to Latin America and the Caribbean, but of interest worldwide.

Most of the collection is made up of documents published by PAHO's Emergency Preparedness and Disaster Relief Coordination Program during the last 20 years: scientific publications, disaster chronicles, case studies, conference proceedings. The VDL also includes the complete collection of our

newsletter *Disasters: Preparedness and Mitigation in the Americas*, published since 1979. A number of publications from other UN agencies and national organizations in the Americas are also included on the CD-ROM.

Finally, the Virtual Library has a powerful, easy-to-use search engine which lets you look for publications in several different ways.

Advantages of the VDL

- Your access to information is not subject to time or space constraints:
- A greater number of users has quicker access to information
- Reduced distribution and printing costs
- Easy to update
- Customized retrieval and distribution of information

Some disadvantages

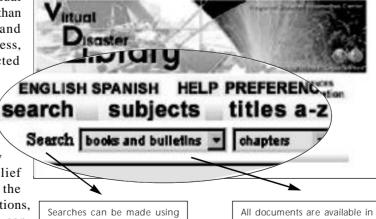
The VDL won't solve all our information needs because this technology brings with it certain problems and challenges:

- Users may need some training (an electronic literacy program!)
- Constant changes in technology
- How to preserve information when the technology used becomes obsolete?

The best way to improve and enrich this collection is to receive comments from users. Our challenge is to expand this library and this will depend, in part, in the cost and speed of

Internet access in the Americas in the coming years. However, technology is not the determining factor. Uppermost on our minds is the human dimension: our users.

The Virtual Disaster Library is in its infancy and we hope you will find it useful and easy to access. Visit the VDL at http://www.paho.org/english/ped/pedhome.htm. Send comments and questions to disaster-publications@paho.org.



Searches can be made using pre-selected subjects (see "Subject" list), by words in a title, by words in any part of the document (string searches), and by the name of the publisher.

All documents are available in HTML format. Most of them are also in PDF, especially when the document is no longer available in its printed version.

Use the VDL online at:

Why a Sense of Déjà vu?

(from pg. 1)

with getting the food and water where it is needed, when it is needed. The result of this misperception is an enormous amount of donated bottled water and household food—donated and amassed in major cities in the U.S. and other countries—which in fact could be purchased locally more quickly and at a fraction of the cost of airlifting it from overseas. Donations of this sort are still piled up in the warehouses of donor countries waiting to be airlifted, or are clogging the distribution channels in the disaster-affected country.

Haven't we heard, for at least the last 30 years, about the likelihood of catastrophic outbreaks and epidemics? Only a handful of doctors or relief workers warn the world of this secondary disaster. We still remember the unfulfilled prediction of a shigellosis outbreak following the earthquake in Nicaragua in 1972 that was supposed to claim more victims than the earthquake itself. Published in a prestigious medical journal, to this day, this prediction has not been revisited by the editors. These unsubstantiated fears (in many instances the predicted disease is not even endemic locally) pressure the authorities to take harsh measures like incinerating or burying bodies in mass graves, or purely symbolic gestures such as spreading lime or disinfectant on corpses. In the process, the rights and needs of local communities to properly honor and bury their loved ones are the casualty of this haste. No wonder that, when disaster response addresses the misconceptions propagated by the media, rather than the deeply felt priorities of the victims, mental health assistance quickly becomes an urgent need.

Why is public health "common sense" in such short supply under stressful conditions? Yes, people can be carriers or hosts of diseases such as cholera, typhoid fever and other feared plagues. But these people are much more dangerous alive than they are buried beneath a landslide or the rubble of a collapsed building. In all fairness, misinformation is less persistent in disasters occurring in Latin America and the Caribbean, where the voice of reason can still be heard, although alarmist opinions continue to find their way into the press.

Disasters are chaotic. Management in crisis situations always implies decision-making under a cloud of uncertainty. Emotions that are distorted

by the moment may impair even the best judgement that otherwise would have relied on experience and training.

One factor that makes Latin America and the



Caribbean stand out from other regions is its level of preparedness and disaster education for health professionals. PAHO/WHO's modest contribution of technical expertise, thanks to support from the governments of Canada, the U.S. and the U.K., helps to improve disaster preparedness for national and local health authorities. This can only happen if it is part of an ongoing program to strengthen local capacity before disasters strike.

Politicians and the media both mold and respond to the perceptions of public opinion. It is the responsibility of professional disaster managers and humanitarian organizations (NGOs and the UN) to break this cycle of misinformation. Let's join forces with highly professional and dedicated members of the mass media to provide the public in donor countries with a balanced and fair view of health needs and priorities in the aftermath of sudden-impact disasters.

The victims of these future tragedies can only benefit if the assistance so generously donated is based on fact rather than on rumors and myths. \Box

Mass vaccination campaigns in the aftermath of disasters are often a misuse of human and financial resources that might be better directed toward other relief efforts.



The articles listed in this section may be of interest to health professionals and others responsible for disaster preparedness, mitigation and relief. They have been reproduced and recently added to the collection of articles available from the Editor of this Newsletter. A complete list of reprints is available upon request. Please quote the reference code listed to the left of the publication title when requesting articles.

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