Under pressure: A different story about relief work in post-earthquake Haiti

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Introduction

At 16:53 local time on 12th January 2010, an earthquake struck Haiti, with a catastrophic magnitude of 7.0. The epicentre was 25 kilometres from the capital, Port-au-Prince. By January 24th at least 52 aftershocks measuring 4.5 or greater had been recorded. The scale of the devastation in this, the third largest country in the Caribbean after Cuba and the Dominican Republic, was horrific (Exhibits 1 and 2).

In its wake, the earthquake left 19 million cubic metres of rubble and debris in Port-au-Prince alone and three and a half million people displaced (Exhibits 3 and 4). Over 188,383 houses were badly damaged and 105,000 destroyed completely. Hospitals and public buildings lay in ruins; nearly all roads were blocked and the Port-au-Prince seaport heavily damaged. Over 300,000 people were injured, 225,000 killed and one and a half million made homeless. In the face of such a calamity the government was paralysed and impotent. As international aid was mobilised and humanitarian workers began to arrive in Haiti they found themselves facing one of the most devastating natural disasters in recent history.

The team and the mission

Peter Manning was a European medical peace work team leader with many years experience of dealing with crisis response situations. He was a member of one of the over 900 NGOs that responded quickly to the emergency, all anxious to aid the stricken country. But with so many organisations and personnel responding to the crisis, each with its own priorities, suppliers and work styles, there was inevitably confusion about who was in charge.

Moreover, the entire process was a logistical nightmare; the damaged infrastructure meant aid could not actually reach Haiti and responders could not get into the country fast enough. Once there, it was virtually impossible for them to move around and reach the areas that needed help. Operating in 36-degree heat with 100% humidity only compounded these problems and added to the challenges faced on a daily basis by emergency teams on the ground.

Peter’s team of medical emergency responders, one of the first to arrive in Port-au-Prince, quickly found itself en route to a small village devastated by the earthquake. They were tasked with giving an initial assessment of the situation within the village and providing basic medical care and humanitarian aid to a community that was largely without shelter, food, clean water and medical equipment. The villagers were desperate for help, having so far received little aid due to a lack of supplies and the inaccessibility of the area.

Peter led a team of five and was responsible for overseeing every aspect of the assessment mission. John was the team doctor, whose role was to assess the medical needs of the villagers and oversee the administration of basic medical care. Two paramedics, Claire and Sebastian,
were there to support John and provide treatment. Finally, Manfred, the logistics officer, was responsible for the general running of the mission.

The accident

Peter had to shout over the loud drumming of the engine of the 4x4 truck carrying him and his team. The interior of the vehicle was a sauna, as the driver slowly negotiated his way through the obstacle course in front of them. The road leading to the village was now virtually non-existent. It was highly dangerous, littered with potholes, huge cracks some over a meter wide and 50 cm deep, and piles of debris. Driving along this road was proving both difficult and time consuming.

Peter continued to speak loudly, doing battle with the roaring engine and the heat. “This is taking so long, is there no other way to reach the village?” he shouted to the driver.

“Sorry Mister, this is it. There are no other roads around here. We will be there soon, maybe in three minutes. I'm not sure what the road is like up ahead, we are the first ones here you know!”

Peter relayed the news to his team in the back of the truck. Once again he had to shout to be heard. “Three minutes until we arrive. Get your heads in the game, people. When we reach the village, our initial…”

BANG!

The driver did not see the huge pothole in the road, as it was covered by palm leaves and debris. The front right wheel of the truck fell into it and disappeared into the ground. In under a second, the rest of the vehicle followed and slammed into the road before flipping over and eventually rolling to a halt.

As the dust began to settle and the ringing in their ears began to fade, the team dragged themselves from the vehicle. It had been a nasty accident but most of them seemed to have escaped with just a few minor cuts and bruises.

“Is everyone okay?” asked John, the team doctor as he looked round at his colleagues.

“I think so,” said Sebastian. “That was lucky - it could have been a lot worse.”

“Where's Peter?”

“Peter, Peter. Are you all right?”

Peter had not got out of the truck after the accident. He was still wedged in the front seat.

“Peter, are you okay?” John moved over to the passenger door of the 4x4 to where Peter was sitting, his face screwed up in pain.
“Not really, mate. I’ve been better! I can’t move my arms or legs.”

“Okay, no problem. Let me take a look at you.”

With the help of Sebastian, John began to examine Peter. Everyone in the team wanted to help and John had to get them to move back to allow both him and Peter space. He wanted to try and diagnose what was wrong and make an assessment of Peter's injuries as quickly as possible. The rest of the team began to dust themselves off and treat their various minor injuries.

The 4x4 vehicle was badly damaged and not going anywhere. The driver was uninjured but sat on the side of the road, wailing hysterically.

“Okay Peter, I need to know where you are in pain,” said John.

“I’m not too bad really, just a little banged up. But I can’t move my arm or legs.”

“Okay, stay exactly where you are, mate, no running around! I’ll be back in a minute.”

John went over to Manfred, the logistics officer, who was trying to calm the driver.

“Peter’s not in a good way I’m afraid. I need to look at him properly to try and find out what the problem is, but it’s going to be hard without any specialist medical equipment. We have nothing with us that will help me diagnose what is wrong. We need an X-ray machine and an MRI to tell whether or not he has any spinal damage. The only thing I can do at the moment is to give him as good a clinical examination as I can, and hope that gives us some indication as to his injuries.”

“So what exactly are we going to do?” asked Manfred.

“I don’t know,” replied John. “Who’s in charge now that Peter is out of action?”

“Well, you are!” replied Manfred.

“No, no I’m not in charge of the team. I’m just the doctor. Anything to do with medicine or medical assistance – fine, that's my domain. But I'm not the decision maker when it comes to incidents like this. My job is to sort Peter out, the rest is up to you – you're in charge of the overall running of this mission.”

“Listen John,” urged Manfred. “I appreciate that you're mainly here for medical matters but technically, you are the next in command. Peter is in no state to make any decisions so you’re going to have to step up and take charge. We will support you in every way we can. As I see it, this whole thing is a medical problem. Now, what are we going to do about Peter?”

“Okay, if that’s the way it is... But please, just do as I say,” replied John reluctantly. He had no desire to be responsible for the entire decision-making process of the mission, which had been tough enough to start with. Now he had to deal with a badly injured colleague in the middle of nowhere with a damaged vehicle, limited medical supplies and no idea where to go in a country where virtually every hospital and clinic had been destroyed by a devastating earthquake.
John takes charge

John’s priority was Peter’s welfare, so he began to conduct a thorough medical exam. With such limited resources, he was under great stress but tried not to let it show in front of Peter.

“I have no way of telling if you have any internal injuries, Peter,” he began. “I can only go on what I see and feel, and what you tell me. The fact that you are unable to move your arm or legs could indicate a spinal injury of some sort. However, this paralysis could also be the result of other things, including perhaps a stroke.”

“Okay, so what do we do now, Doc?” replied Peter, trying to remain upbeat. “First I am going to give you something for the pain. Then we will decide what to do about moving you. Hang tight, Peter, and take these painkillers.”

John gathered the rest of the team around him. Manfred began to speak. “This is one shit storm of a problem, John. How are we going to move him? Where are we going to take him?”

“I know, I know. Calm down. Let’s think about this for a second. We have to get Peter out of the truck and then we need to evacuate him to somewhere he can be properly treated. At the moment, I’m more concerned about stabilising him than anything else.” “Let’s try and radio for help,” suggested Manfred. “Maybe we could even organise an evacuation.”

“Good idea, you start calling and the rest of us will try to move Peter as carefully as possible. I shouldn’t really do that with his symptoms and no neck brace or stretcher, but there's no choice. It's too dangerous to leave him in the car with fuel around. I want him away from the vehicle as fast as possible.”

Manfred began to dial numbers on the team’s satellite phone. Mobile phones were no good since most of the local cell towers had been destroyed in the earthquake. But the line was permanently busy. The satellite had 48 channels and the entire Haiti relief effort was trying to use them at the same time.

John tried to keep Peter calm as he supervised the rest of the team in moving him from the truck. It was not easy but as the area stank of petrol fumes, it had to be done. He wished he could have done it according to the protocol for a suspected spinal injury, but in this case had no choice. It was more important to get Peter clear of the truck. Eventually Peter was pulled clear and carefully laid down on the roadside. John made him as comfortable as possible with a few of the blankets meant for the people in the village.

“How’s it going Manfred, are you through to anyone yet?” asked John.

“No, the line is still busy.”

“Keep on trying. We have to get through to somebody.”
As he turned back to Peter, the second paramedic, Claire, knelt down beside him and whispered, "I don’t mean to add to the problems but we need to do something soon. Have you noticed it’s starting to get dark. It’s nearly four-thirty and curfew starts at six, John. And you know how dangerous it is. The police will have roadblocks everywhere and the local gangs will be out looking for anything or anyone they can get their hands on. We have no security escort and the driver will not want to drive anywhere once the curfew begins.”

John knew Claire was voicing the fears shared by everyone, especially the driver. In the chaotic aftermath of the Haiti quake, looting and crime were rife. Desperate to get their hands on food, water and medical supplies, people would stop at nothing to get them. Kidnappings carried out by organised criminal gangs had been commonplace in Haiti before the earthquake. Although the quake had temporarily put a stop to the practice, the fear of a resumption was ever present in the minds of the team and especially the local driver.

“Damn it, what do you want me to do? I’m trying my best here. We have no way of moving Peter at the moment. I can’t conjure up an evacuation out of thin air. We are just going to have to stay put until Manfred can get through on the sat phone.”

“Alright, I was just making you aware of the time and the curfew problem.”

John paused. “Sorry Claire, I’m stressed out. I know that time is against us but there’s nothing I can do about it right now.”

“I’m through!” Manfred’s shout interrupted him. John and Claire rushed over to where Manfred was standing with the phone in his hand, shaking his head.

“What’s happened?” cried John.

“That was the UN emergency number we were given. I finally got through to them but they can’t help. They’ve told me to try the Navy which has a helicopter. Otherwise we’re on our own!”

“What’s going on, John?” Peter asked.

“Well, the bad news is the UN are overwhelmed, as I am sure you’re aware, so they can’t help us. The good news is they have given us a number for the Navy which has a helicopter to airlift you to safety. Manfred is trying to get through to them right now. We’ll have you out of here in no time.”

John was trying to remain optimistic but inside, he was wondering how he was supposed to deal with this unexpected responsibility. After all, he was a medical doctor – not a team leader. He had begun the day on a mission to help the local village as they had been ordered. Now, the rest of the team was expecting him to take control of a major medical emergency they were not equipped to handle, and get them out of a serious situation.
After twenty minutes of frantically trying to reach the Navy, Manfred finally got through. “We need a helicopter evacuation immediately,” he said. “One of our team has been badly injured.” Manfred began to explain the situation. Five minutes later the line went dead. He turned to John. “They’re not coming, John.”

“What the hell do you mean?”

“They asked if he was responsive and breathing and I told them yes. I explained the symptoms and suspected spinal injury as well as the accident details. They told me that if he was breathing and responsive then he didn’t warrant a helicopter evacuation.”

“I don’t believe it,” shouted John as he kicked the dirt road beneath his feet. “What the hell do I do now?” John looked at the rest of the team who all looked back at him, and then down at Peter lying on the ground.

What happened next

After his outburst, John calmed down and after a few minutes’ thought began to issue some orders. Claire was asked to continue on foot to the village they had been trying to reach before the accident happened, in the hope that she could find a vehicle to evacuate Peter. She left carrying the spare jerrycan of fuel from their truck that fortunately, had remained intact after the accident.

After some discussion between John and Manfred, it was decided they would head for the Port-au-Prince airport field hospital. Manfred had called every medical facility left standing as well as the temporary facilities set up by aid workers. From each they had met the same response. Nobody could help; none of them could spare an ambulance or had the necessary equipment to diagnose Peter’s injuries. And by then it was too close to curfew to head over to one of them anyway. It was not surprising, thought John. They all had their own problems to deal with as they tried to treat the injured and dying.

“There’s nowhere else to go,” he told the team. “There are no hospitals left and every medical facility is under huge stress already. I don’t think there is an X-ray or MRI machine left in Haiti!” The pressure was now really getting to him, as the crack in his voice revealed.

“If we at least get to the airport, then Peter can stay at the field hospital until we can organise an evacuation by plane in the morning.”

Just as the three remaining team members were deciding how to lift Peter into whatever vehicle Claire found, two headlights appeared out of the dusk coming towards them. It was Claire in a broken-down Toyota pickup truck that didn’t look as if it would make it another hundred meters, let alone to the airport hospital on the other side of the city.

“Thank God,” exclaimed Manfred.
As the truck pulled up Claire jumped out and explained that the driver had needed some serious persuading to come out after dark. He wanted $500 immediately and would go no further until he had the money.

“We haven’t got any damn money,” John yelled.

Peter began to moan louder and beckoned Manfred over.

“In my backpack, the emergency kitty!” he groaned. As team leader, Peter had been responsible for the emergency fund and always carried at least $1000 with him. He was thankful that today he had remembered to pack the money – as was John.

After paying the driver and losing further time arguing with him about going to the airport, they carefully lifted Peter and carried him towards the pickup truck. The vehicle was very cramped inside, so Peter was laid out in the back of the pickup while the other four team members and the original local driver, whom John agreed to drop off on the way to the airport, were crammed in at the front. They were finally on their way in the dark. But their problems were by no means over. In fact, they were just beginning.

The journey
Negotiating their way through Port-au-Prince in the dark was not easy. The going was painstakingly slow on the almost impassible roads. They were facing the same problems they had faced for days; the roads were destroyed and covered in rubble and debris. The driver wanted to drive without lights for fear of attracting attention. John and the team quickly dissuaded him; one car accident that day was more than enough.

The city streets were a cross between a ghost town and a war zone. Virtually every building was destroyed and with no electricity or power it was pitch black and deathly quiet. During the day those rich enough to afford it ran generators, but these were turned off at night. Otherwise, they would be stolen by the following morning!

They drove at 20 kilometers an hour, winding and dodging the obstacles in the road, trying to make Peter as comfortable as possible every time they went over a bump or piece of rock. The suspension on the old truck was terrible and only added to the stress John was under as he tried to care for Peter.

The driver insisted on driving in the middle of the road and everyone was terrified that they might hit an oncoming vehicle at any moment. It was likely that any vehicle on the road at this time would have their lights off to avoid attention and remain undetected by the police and military during curfew. Despite John’s protests, the driver stuck to the middle of the road. He was scared that someone would jump out from the side of the road and stop the truck. It was
only the thought of how much $500 would help him and his family in this time of crisis that kept him driving towards the airport.

Every second that went by felt like an hour to John. He was wondering how severe Peter’s injuries were, what the correct diagnosis actually was and whether they would make the airport. He was also concerned that armed police might well stop them at a roadblock and he would have to explain why they were out after curfew, something that was strictly forbidden.

Finally, after what seemed like an eternity, the temporary floodlights of Toussaint L’Ouverture International Airport came into view and they pulled up at the makeshift field hospital.

John got out and instructed the rest of his team not to move Peter until he had spoken to the doctor at the field hospital. It did not take him long to find a doctor as one came rushing out of the entrance, waving his arms and shouting.

“You can’t stay here. We can’t help you; I told you on the phone we can’t help you. You have to leave right away. We have enough problems already.”

John took a deep breath and began to speak. “We have nowhere else to go. You have to help us, our colleague is badly hurt and we need immediate medical assistance.”

“I’m sorry, we can’t help you. He is not a member of the UN force. This hospital is for UN workers only I’m afraid. There is a clinic back in the city that you can go to.”

“For crying out loud, if you knew what we had been through today. I have spoken to that clinic already and they sent me here.”

But John’s words fell on deaf ears. The field hospital was only for UN and military personnel. Only the most exceptional circumstances would allow some flexibility in applying this policy. Peter was responsive and breathing, so the field hospital doctor deemed this was not a serious enough emergency to overrule his operating guidelines.

**Returning through the city**

They drove back into the city. Another $200 in the pocket of the driver who wanted further compensation for braving the dangers of driving back through Port-au-Prince at night. By now, the entire team was exhausted. They had been in a major car accident and operating under stress for 18 hours. John was still caring for Peter as best he could in the back of the pick up, but there was little he could do other than keep him warm and calm and observe him closely. He held out very little hope that the temporary clinic would take him in at all, let alone at this time of night.

An hour later they finally reached the clinic where a local doctor met them. John began to explain the situation to the doctor and all seemed to go well until the doctor asked him,
“So what is your diagnosis of the patient? Do you think it is a spinal injury?”

“To be honest, I don’t think so,” replied John. “I can’t be sure and we desperately need the equipment to diagnose him properly, but I think he has suffered a stroke as a result of the accident.”

Manfred then spoke up, “John, I know you are the doctor but that really sounds like the wrong diagnosis to me. How can you say it is a stroke? We were in a major car accident. He could have any form of internal injury, spinal problems, or worse.”

“That’s what I think, Manfred. As I said, I can’t be sure. I’m not in a position to give an accurate diagnosis. I can only go on what I have observed.”

Before Manfred could respond, the clinic doctor spoke up. “It doesn’t matter. We have no facilities to treat him anyway. If it is a stroke then that is a level three condition and we are barely equipped to treat level two conditions. Our resources are stretched too thin already. I’m sorry but he can’t be admitted here.”

The look on John’s face said it all. He was desperate and at his wits end. “So what do we do then?” he asked the other doctor.

“I don’t know.”

“We have nowhere else to go. We're finished.”

“Why don’t you take him to the airport field hospital?” the doctor suggested.

“We have just come from there, damn it! They sent us here to you. They will not take civilians from NGOs, only UN workers and military personnel.”

“I will sign a declaration for you, stating that he is with the UN, then they will have to take him in,” replied the doctor.

“That won’t work. We were there an hour ago and they said no!”

“It doesn’t matter. Take this form and show it to the doctor at the field hospital.”

**Back at the airport**

Back at the airport field hospital after a third perilous journey through the dark streets and the last of the emergency cash fund spent, Peter was finally admitted with the help of the declaration. The doctor was less than happy, but reluctantly accepted him for an eight hour stay. At least, the team could now get some much-needed sleep, knowing that they had to be back in eight hours to pick up Peter again.
Six hours later John was back at the airport trying to find a flight to evacuate Peter to the hospital in Santo Domingo, the capital of the neighbouring Dominican Republic. After what seemed like an endless battle to gather any information at all about flights out of Haiti that morning, he finally discovered that there was just one flight leaving for Santo Domingo. It was a small twin prop, six-seater plane that was due to deliver mail to the Dominican Republic. After a brief search, he found the plane on the airstrip and was greeted by the mail clerk.

As John described the situation and recounted the events of the last twenty hours, the mail clerk appeared to be not just disinterested but almost hostile. John explained that they needed to evacuate Peter immediately, and that this flight was their only option.

“No way,” said the clerk. “This plane only carries mail. We have a lot of important documents and correspondence to get to the Dominican Republic and in any case, this plane is not designed to take injured people.”

At that moment they were joined by the pilot, slicked back hair and aviators sunglasses hiding his eyes. “What the hell is going on?” he asked.

“I’m trying to tell this man that there is no room on the plane for his patient,” said the clerk. “We are overweight as it is with the mail.”

“What patient?”

“Some injured aid worker. They want to send him to Santo Domingo on this plane, and I’ve told him that it’s impossible, but he won’t leave.”

Speaking calmly, John asked, “Sir, are you the pilot?”

“Yes I am, and this is my plane.”

“Good. As I have tried to explain to this man here we have an emergency. I have a medical peace worker who was badly injured in a car crash yesterday. There is no hospital or clinic in Haiti with the right medical equipment to diagnose him properly or treat him. I have to evacuate him to Santo Domingo, where they he can be diagnosed and treated properly. Yours is the only plane going there. He just has to be on it!”

“What do you need?” the pilot asked.

“Space for the injured man and one paramedic to accompany him.”

Once again the clerk voiced his disapproval. “I’ve already told him we’re too heavy. We can’t take them. It’s just not going to happen.”

The pilot turned to John and smiled. “Load him on the plane. He can go with one other person. The mail won’t be delivered today!”
Within a few minutes it was done. Peter was put on the plane by Sebastian and Claire – in itself a logistical challenge. The door to the plane was tiny and reached by four small steps. It was a struggle to get Peter into the plane and laid out flat on the two seats available. Claire remained on the plane, sitting in the foot well, to accompany Peter to Santo Domingo. John and Manfred watched as the small twin prop plane taxied down the runway.

As the plane took off, John reflected on the last 24 hours. They had proved to be some of the most difficult and stressful he had ever lived through. As a medical peace worker he had worked in many locations and faced all kinds of situations over the years. He knew that although in theory you could be prepared to deal with every possible problem, as soon as your feet touched the ground everything could change. “Life throws unforeseen situations at you all the time,” he thought, as yesterday’s events had proved. As the plane banked overhead, his thoughts turned to Peter. The accident and everything that had happened since had made him realise he was able to take charge when it mattered, and make decisions under pressure.

As he and Manfred walked back across the tarmac, he wondered if there was a bar still standing in Haiti where he could get a cold beer and start writing his report on the events of the last two days. The head of mission back at the headquarters would be the one to read his report. John wondered to himself whether or not the head of mission would think he had managed the incident well.
Exhibit 1

Haiti facts
Hispaniola is the second largest island in the Greater Antilles. Haiti, located on the western side of Hispaniola, is the third largest country in the Caribbean after Cuba and the Dominican Republic. In 2015, the population numbered 10.4 million people; over 1.2 million of whom lived in the capital city, Port-au-Prince. The official languages are French and Haitian Creole.

Haiti was discovered in 1492 by Christopher Columbus and has a long history as a European colonial power (Britain, Spain and France). It became independent in 1804.

(Source: http://www.lonelyplanet.com/maps/caribbean/haiti/)
Exhibit 2

Haiti before the earthquake

- Haiti was 145th of 169 countries in the UN Human Development Index, which is the lowest in the Western Hemisphere.

- More than 70% of people in Haiti were living on less than $US2 per day.

- 86% of people in Port-au-Prince were living in slum conditions – mostly tightly packed and poorly built concrete buildings.

- 80% of education in Haiti was provided in often poor-quality private schools. The state system generally provided better education but had far from enough places.

- Half of all people in Port-au-Prince had no access to toilet facilities and only one-third had access to tap water.
The 2010 Haiti earthquake

Haiti was dealt a cataclysmic blow in January 2010, when a magnitude 7.0 earthquake struck 10 miles south west of Port-au-Prince, the country's capital. It was the region’s worst earthquake in 200 years. The earthquake levelled many sectors of the city, devastating government buildings, foreign aid offices, and countless slums.

The medical challenges facing the humanitarian community in the early days of the disaster response were vast. There were more than 300,000 people injured, 60% of hospitals in ruins, one out of ten in-country medical professionals killed by the quake, 4,000 survivors requiring emergency amputations, a shortage of anaesthetic, almost no facilities for blood transfusions and a shortage of clean water. Thousands of people died of their injuries. In the weeks after the quake, the scope of challenges shifted but didn’t shrink: delays in treatment, inadequate post-operative care, the infection of open wounds, and overcrowded and unsanitary conditions in the camps created new obstacles for medical providers, which continue to this day.

The control tower at Toussaint L’Ouverture International Airport was severely damaged, as was the Port-au-Prince seaport, rendering both the airport and the harbour unusable for immediate rescue operations. Roads were blocked with tons of debris or the surfaces were broken up completely. The main road linking Port-au-Prince with Jacmel remained blocked ten days after the earthquake, hampering the delivery of aid.

There was considerable damage to communications’ infrastructure. The earthquake wiped out landlines across Port-au-Prince and left only intermittent mobile service for the first few days. The humanitarian community relied on expensive and difficult-to-access satellite phones throughout the early stages of the relief effort, and these quickly became overloaded. Communication between personnel was almost impossible.

Assessing the scope of the devastation, Prime Minister Préval said, "Parliament has collapsed. The tax office has collapsed. Schools have collapsed. Hospitals have collapsed." He called the death toll "unimaginable." Fatalities were reported to be around 230,000 by early February.

**Impact of the January 12th earthquake**

- 7.0 Magnitude Quake struck near Port au Prince
- 3,500,000 people were affected by the quake
- 220,000 people estimated to have died
- 300,000+ people were injured
• Over 188,383 houses were badly damaged and 105,000 were destroyed by the earthquake (293,383 in total), and 1.5m people became homeless

• After the quake there were 19 million cubic metres of rubble and debris in Port-au-Prince – enough to fill a line of shipping containers stretching end to end from London to Beirut

• 4,000 schools were damaged or destroyed

• 25% of civil servants in Port au Prince died

• 60% of Government and administrative buildings, 80% of schools in Port-au-Prince and 60% of schools in the South and West Departments were destroyed or damaged

• Over 600,000 people left their home area in Port-au-Prince and many of them went to stay with host families

• At its peak, one and a half million people were living in camps, including over 100,000 at critical risk from storms and flooding

• Unrelated to the earthquake but causing aid response challenges was the outbreak of cholera in October 2010. By July 2011 5,899 had died as a result of the outbreak, and 216,000 were infected

Source: The Disasters Emergency Committee www.dec.org.uk
Images from post-earthquake Haiti

This shows the level of basic sanitation after the Haiti earthquake. These damaged toilet public cubicles were all that was available for use for months after the earthquake.

The local market in Port au Prince. Rubbish and debris are everywhere and serious hygiene issues are apparent. The photo also shows that the amount and availability of produce was very limited.
This shows the level and extent of destruction caused by the earthquake. One of the major city buildings of Port-au-Prince stands in ruins.

The makeshift tents that formed the living accommodation and temporary hospitals for the hundreds of thousands of people who lost their homes and were injured as a result of the disaster. Conditions were cramped and allowed the spread of disease and infection.
A tiny percentage of the hundreds of thousands of tonnes of rubbish and debris left after the earthquake. These piles of debris littered every street in and around Port-au-Prince and made it very difficult to access areas around the capital as well as within the city. It made the application of humanitarian aid even more difficult and virtually impossible in the immediate weeks following the quake.

Photos: J Riener and M Schlichtinger.