

STAND WITH HAITI

ONE-YEAR REPORT



January 12, 2011, marks the first anniversary of the devastating earthquake that flattened much of Port-au-Prince and several nearby cities. With more than 20 years of experience in Haiti, a network of 12 hospitals and health centers, and more than 4,400 Haitian staff, Partners In Health (PIH) and our Haitian sister organization, Zanmi Lasante (ZL), stepped in immediately, both to treat thousands of desperately wounded people and to help restore and strengthen public health facilities and services.

Within weeks, we had developed and begun implementing a \$125-million, 2.5-year “Stand with Haiti” plan to help Haiti recover and rebuild over the long term, working in partnership with Haiti’s Ministry of Public Health and Population (MSPP). Key elements of the plan include:

- *providing comprehensive primary health care to more than 100,000 people living in four of the spontaneous settlements of tarps, tents, and makeshift shanties that have sprung up in Port-au-Prince;*
- *expanding clinical and social support services at our network of hospitals and health centers in the Central Plateau and Lower Artibonite to meet the needs of tens of thousands of people displaced by the earthquake and the communities that have taken them in;*
- *strengthening specialized medical services for which the earthquake had greatly increased a widespread, long-standing, and frequently unmet need, including surgery, rehabilitative medicine, and mental health;*
- *rebuilding and reinforcing the public health and health professional education systems in Haiti.*



Over the past 12 months, we have made substantial progress in all of these areas, buoyed by an outpouring of financial support, and with the invaluable help of numerous partner organizations and volunteers. We have recorded more than 240,000 patient visits at our clinics in spontaneous settlements, have made important investments in infrastructure, staffing, and training at hospitals we operate jointly with the MSPP in the Central Plateau and Lower Artibonite, have more than doubled the size of our rehabilitative medicine and mental health departments, and have begun construction of a 320-bed national referral and teaching hospital in Mirebalais. When a cholera epidemic broke out in Haiti in mid-October, PIH and ZL again took a leading role as first responders, helping develop and implement plans to establish cholera treatment centers, and mobilizing effective community education, prevention, and treatment campaigns.

However, a year after the earthquake, more than a million displaced people are still living in spontaneous settlements. Conditions in the settlements, and the lack of progress in relocating residents to transitional or permanent homes, are emblematic of the difficulties still plaguing recovery efforts. Comprehensive plans for rebuilding and reform in all sectors – including housing, health, agriculture, and business development – are stalled because of a myriad of implementation and financial factors.

Addressing the broader challenges of earthquake recovery, PIH and ZL have advocated for a human rights-based approach that engages and employs the Haitian people, strengthens public institutions and governance, and works not just to repair the damage caused by the earthquake, but also to address the extreme poverty and lack of infrastruc-

ture that greatly worsened the disaster's impact and weakened the country's ability to respond.

PIH/ZL's Stand with Haiti recovery plan embodies all of these principles. Since the earthquake, we have employed hundreds of Haitians in the settlements and in poor rural areas. Hundreds more will get jobs and training during construction of the teaching hospital in Mirebalais. This flagship public teaching hospital also expresses our commitment to strengthening the public sector and building quality infrastructure and services that will encourage people to live and work in areas outside Port-au-Prince. And to ensure that funds actually reach the intended beneficiaries, every dollar that we have received for Haiti relief has been spent or programmed to implement the Stand with Haiti plan, as detailed below.



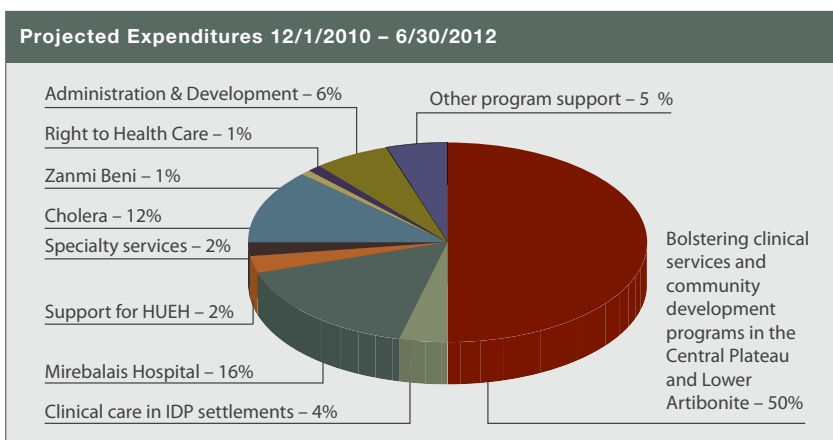
Stand with Haiti Fund

The \$125-million Stand with Haiti plan, announced less than a month after the earthquake, clearly outlined our programs and priorities for the 2.5-year period from January 2010 through June 30, 2012. Following the outbreak of the cholera epidemic in October 2010, the Stand with Haiti Fund has been expanded to include an additional \$10 million to support cholera prevention and treatment activities.

As of November 30, 2010, PIH had received \$97 million for relief and reconstruction work in Haiti. A substantial amount of these donations were contributed specifically to support the Stand with Haiti plan, and designated for long-term rebuilding and strengthening of Haiti's public health and health professional education systems. Of that amount, we had expended \$51 million through the end of November 2010. The table below provides a summary of how that money has been spent.

Expenditures on Haiti Relief and Reconstruction, January 12, 2010 – November 30, 2010	
Medical care in Port-au-Prince settlement camps	\$4,236,000
Strengthening of comprehensive care and facilities in the Central Plateau and Lower Artibonite	\$35,565,000
Specialty services (rehabilitation, mental health)	\$475,000
Support for the General Hospital in Port-au-Prince (HUEH)	\$1,522,000
Medical volunteer program	\$1,423,000
Rebuilding public health and medical education systems (Mirebalais Hospital construction)	\$1,221,000
Cholera prevention and treatment	\$374,000
Zanmi Beni (home and school for children with disabilities)	\$375,000
Right to Health Care (care for earthquake survivors in the US)	\$637,000
Program support (training, information technology, advocacy)	\$2,116,000
Administration and Development	\$2,796,000
Total	\$50,740,000

All funds that have not yet been expended have already been allocated for expenditure over the next 18 months. The graph below shows how we intend to use those funds, as well as the additional \$38 million that we must raise to fully fund and implement the Stand with Haiti plan.



Providing Medical Care in Settlement Camps in Port-Au-Prince



Just two weeks after the earthquake, Zanmi Lasante set up health clinics in four of the spontaneous settlements of tents, tarps, and makeshift shanties that had sprung up wherever earthquake survivors could find open land around Port-au-Prince. Eleven months later, three of these ZL clinics continue to provide comprehensive primary health care services, free of charge, to more than 100,000 people living in these settlements and surrounding communities.

Each clinic is staffed by a team of physicians, nurses, pharmacists, and laboratory technicians. They are supported by dozens of settlement residents who have been trained and employed as community health workers, improving outreach into the community and providing jobs and income. On average, the clinics have been testing and treating nearly 10,000 patients each week, recording more than 240,000 patient visits through the end of November.

The most common diseases and conditions treated include: coughs and respiratory infections; malaria; diarrheal and gastrointestinal infections; malnutrition; and urinary tract infections. The clinics also provide testing for HIV and tuberculosis. And when a cholera epidemic broke out in mid-October, ZL

mobilized community education and outreach campaigns in the settlements, and set up a specialized Cholera Treatment Unit in Parc Jean-Marie Vincent, the second largest settlement in Port-au-Prince with over 50,000 people.

In addition, specialty clinics and services have been established to respond to the needs of the most vulnerable settlement residents, including women, children, the disabled, and people suffering from depression, anxiety, and trauma-related mental health problems. *Sante fanm* (women's health) clinics provide reproductive health care, pre- and post-natal care, and space where women can nurse their babies in comfort and safety. At every clinic, a nutrition program headed by a specially trained nurse screens children for malnutrition, and provides the ready-to-use therapeutic food (a fortified peanut-based paste) produced by ZL in the Central Plateau. Eight newly hired psychologists lead mental health and psychosocial support teams that had recorded more than 11,000 appointments through November 30.

Settlement Clinic Facts

- Number of patient visits: **240,669** (through Nov. 30)
- Number of visits to Proje Sante Fanm: **25,372**
- Children treated for acute malnutrition: **4,316** (through Oct. 31)
- Staff employed at settlement clinics: **500**

Expanding Comprehensive Health Services in the Central Plateau and Lower Artibonite



Within hours after the earthquake, patients with crushed and broken limbs and other severe injuries began arriving at the network of 12 PIH/ZL hospitals and health centers in the Central Plateau and Lower Artibonite regions north of Port-au-Prince. PIH/ZL staff responded immediately by opening up new emergency wards and bringing in volunteer surgical teams and supplies needed to run operating rooms around the clock at four of our largest facilities – Cange, Hinche, St. Marc, and Petite Rivière de l'Artibonite – with the help of dozens of partners.

Even while we were rapidly ramping up our surgical capacity, PIH/ZL anticipated the looming need for post-operative care, physical therapy, rehabilitative medicine, and mental health and psychosocial services for earthquake victims. Staff were hired and trained to create a new rehabilitative medicine team. And the mental health and psychosocial support team that had previously focused almost all of its efforts on a program to support children affected by HIV more than doubled its size to meet new patient needs (see section on strengthening specialty services).

Weeks after the earthquake, PIH/ZL also initiated plans to strengthen clinical and community-based

services to meet the increased demands created by an influx of tens of thousands of people displaced by the earthquake at all of our sites. Surgical wards were renovated and improved at l'Hôpital Saint Nicolas in St. Marc and in the health center at Petite Rivière de l'Artibonite. Plans have been completed and construction has begun for new internal medicine wards in both Petite Rivière and Verrettes. Since the outbreak of cholera in the area, the partially constructed wards have been adapted for use as cholera treatment centers. Zanmi Lasante has also scaled up the social support, community development, and poverty alleviation programs fundamental to breaking the vicious cycle of poverty and disease. Providing access to food, clean water, education, and job opportunities has



Expanding Comprehensive Health Services in the Central Plateau and Lower Artibonite

become even more critical for poor families and communities that have taken in relatives and friends displaced by the earthquake.

Since the earthquake, our agriculture program, Zanmi Agrikol, has expanded production of the fortified peanut paste used to treat severe acute malnutrition, and has provided tools, seeds, training, and a guaranteed market for hundreds of local farmers. We have also doubled the number of agricultural agents we employ in order to help more than 1,000 poor farm families improve their crop yields, dietary diversity, and food security.

In partnership with charity: water, a US-based non-profit organization, PIH/ZL is constructing eight spring-capping projects – ensuring access to clean drinking water in some of the most remote communities where we work – and has built and distributed hundreds of dry latrines and biosand filters in communities where water and sanitation resources were inadequate even before the influx of earthquake survivors and the cholera outbreak.

In the aftermath of the earthquake, ZL has also expanded our longstanding support for educational opportunities in the Central Plateau and Lower Artibonite to support children displaced from Port-au-Prince. We have enrolled 400 new students in the 29 Ecole Populaire schools that we support; have hired more teachers, bringing the total on our payroll to 225; and have almost doubled the number of children receiving school fee assistance from 10,000 to 19,260.



Central Plateau/Lower Artibonite Facts

- Population served: **1.4 million**
- Hospitals and health centers: **15**
- Earthquake victims treated during first month: **2,961**
- Tons of ready-to-use therapeutic food produced (7/1/10 – 12/1/10): **28.6**
- Students receiving school fee assistance: **19,260**

Strengthening Specialty Services

The earthquake greatly increased the need for specialized medical services such as rehabilitative medicine and mental health. PIH/ZL has strengthened these services at our own facilities and advised the MSPP (Haiti's Ministry of Public Health and Population) on a national strategy to improve services nationwide.

REHABILITATIVE MEDICINE



More than 300,000 people were wounded by the earthquake. Many suffered crush wounds, compound fractures, amputations, and other serious injuries that require ongoing rehabilitation and physical therapy. PIH/ZL is accompanying 50 patients with amputations, partnering with Hanger International and l'Hôpital Albert Schweitzer (HAS) in Deschapelles to provide prosthetic limbs and round out care through home visits. Two of our patients with prosthetic limbs are now members of the ZL rehabilitation team,

providing coordination and social support for other patients with disabilities.

The PIH/ZL rehabilitation team also provides services to Haitians living with disabilities in 10 communities in the Central Plateau. Currently most services are based in Cange, but the rehabilitation team has plans to expand services. Because patients with disabilities are often the least able to access medical care, they are visited in their homes where they are given comprehensive care, including assessment, physical therapy, family and community education, provision of assistive devices such as crutches and wheelchairs, and assessment of the home for barriers to accessibility. PIH/ZL hopes to provide a model of community-based rehabilitation services that can be used throughout Haiti to respond to the MSPP's call to provide care and integrate Haitians living with disabilities.

Partnering with Spaulding Rehabilitation Hospital and Partners Harvard Medical International, we will soon break ground for a rehabilitation center at l'Hôpital Saint Nicolas in Saint Marc. This center will provide rehabilitation services for the Saint Marc community and beyond, and also house a program to train rehabilitation technicians. Through these efforts, we hope to increase the quality and quantity of rehabilitation professionals in Haiti. The center will serve as a model of disability-centered design, construction, education, and services created within the public sector.

Strengthening Specialty Services

MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT



PIH/ZL staff recognized immediately after the earthquake that in addition to visible wounds, almost every Haitian had been scarred emotionally by the terror of the experience and the loss of family members and friends. We responded by more than doubling the size of our mental health and psychosocial support team. That expansion included hiring 17 new psychologists, installing one at each of the seven hospitals we operate and deploying eight to settlements around Port-au-Prince. In addition, we trained community health workers in the settlements to identify, refer, and support people suffering from anxiety, depression, and other mental health problems. Through the end of November, our

settlement clinics had recorded more than 11,000 mental health appointments.

PIH/ZL's mental health and psychosocial team is also supporting the MSPP in its effort to develop a national system of decentralized mental health services. We are collaborating with the MSPP to develop culturally appropriate national protocols for care of mental health problems, and building a Mirebalais-based mobile training team that will consult, provide services, and supervise the extended ZL network of social workers, psychologists, and physicians in providing integrated, quality care.

Mental Health/Psychosocial Facts

- Mental health appointments in settlements: **11,135** (through Nov. 30)
- Patients receiving individual therapy in settlements: **2,490**
- Psychologists hired since earthquake: **17** (3 prior to earthquake)
- Total mental health/psychosocial team: **65** (25 prior to earthquake)



Rebuilding the Public Health and Health Professional Education Systems

PIH/ZL has long worked in partnership with the Haitian Ministry of Public Health and Population (MSPP) to strengthen public health infrastructure and services in the Central Plateau and Lower Artibonite. Since the earthquake, we have expanded our commitment to rebuild Haiti's public health and health education systems in those areas and support the MSPP's efforts to reconstruct, reinforce, and decentralize the systems on a national scale.

L'HOPITAL DE L'UNIVERSITE D'ETAT D'HAITI

The earthquake collapsed several buildings and badly damaged others at l'Hôpital de l'Université d'Etat d'Haïti (HUEH) – Port-au-Prince's largest hospital and the country's only public teaching hospital. Within 48 hours, a team of PIH/ZL medical and engineering staff arrived to assess the situation and provide clinical and infrastructure assistance. During the following weeks, we helped restore electricity, brought in volunteer surgical teams and urgently needed equipment and supplies, and responded to the Haitian administration's request to coordinate more than a dozen large non-governmental organizations, as well as the US Army and other militaries.

Our role at the hospital has changed over the course of the year. By the end of June, the Haitian staff resumed full responsibility for clinical operations. PIH/ZL has continued to assist the hospital in a variety of ways. We helped negotiate and manage a \$3.8 million grant from the American Red Cross (ARC) to support salaries for existing staff at the hospital, and partnered with the ARC to implement a new performance-based pay system, for which we provide ongoing in-kind administrative support.



Rebuilding the Public Health and Health Professional Education Systems

MIREBALAIS NATIONAL TEACHING HOSPITAL



Less than six months after the earthquake, PIH broke ground for a new, 180,000-square-foot, state-of-the-art teaching hospital in Mirebalais, a city approximately 35 miles north of Port-au-Prince. Prior to January 12, we had planned to build a smaller, community hospital on this site. But after the earthquake devastated medical facilities and the only teaching hospital in Port-au-Prince, the MSPP approached PIH/ZL with a request to expand plans into a larger teaching hospital. When it opens its doors in early 2012, the Mirebalais Hospital will be Haiti's largest public hospital outside of the capital city. The new hospital will have 320 beds and will offer clinical facilities not currently available at any public site in Haiti, including both adult and neonatal intensive care units, and an operating theatre complex with six operating rooms built to US standards and equipped to handle the most complex surgeries.

The Mirebalais Hospital project is the centerpiece of PIH's efforts to build long-term capacity in the health system, and to expand and improve health education in Haiti. It will address the dire need for medical care in Mirebalais, a city with no functioning hospital whose population has swelled to 160,000 since the earthquake. The hospital will also serve as a national

referral center, offering a level of care never before available at a public hospital in Haiti. And at a time when Haiti desperately needs skilled health professionals, it will provide high quality education for the next generation of Haitian nurses, medical students, and resident physicians, with the support of MSPP and medical faculty from US and Haiti alike.



Mirebalais Hospital Facts

- Number of square feet: **180,000**
- In-patient beds: **320**
- Expected number of patients per day: **500**
- Operating rooms: **6**

Advocating for a Rights-Based Approach

Since shortly after the earthquake, PIH and ZL have advocated consistently and forcefully for a human-rights based approach to relief and reconstruction. In February, PIH and ZL joined several partner organizations in issuing *A Call for a Human Rights-Based Approach to Humanitarian Assistance for Haiti*. A few weeks later, ZL Director of Operations Loune Viaud testified in support of the approach at the Inter-American Commission on Human Rights. Other PIH/ZL staff presented at meetings and conferences in cities across the United States, and spent countless hours in Congressional offices and on the phone with Congressional staff and members – as well as governmental agency leadership and field staff – to describe and advocate for wider adoption of PIH/ZL’s approach of accompaniment and engaging Haitian citizens and communities in rebuilding their country.

PIH’s chief of mission in Haiti, Dr. Louise Ivers, and her senior aide, Kimberly Cullen, recently published the results of a human rights assessment conducted in April in Parc Jean-Marie Vincent, the second largest settlement in Port-au-Prince. PIH/ZL has operated a clinic in this settlement since late January 2010. The survey data confirmed the appalling conditions in the settlements, and documented how minimum established standards for disaster response were not being met in many key areas, including food, shelter, sanitation, and security. For access to toilets, for example, the minimum standard is one latrine for every 50 people; in Parc Jean-Marie Vincent, more than 400 people shared each latrine. Unfortunately, for many residents, conditions have only worsened since last spring. Progress on relocating IDP camp residents is minimal; and in many settlements, food distribution has halted and access to potable water



and sanitation has deteriorated.

When the shanties and tents spread across every available patch of open ground last January, international relief agencies and the Haitian government hoped and expected to make better shelter available within months. But plans to provide transitional housing on a large scale foundered for many reasons, including complicated legal issues with landowners and the painstakingly slow process of removing rubble.

The Haitian government wants settlement residents to move back to their previous homes, if they are structurally sound, or to the land where they stood. But residents are understandably reluctant to go. Bad as conditions are in the camps, most residents in the April assessment reported that they had better access to some essential services, such as clean water and health care, than they did in the poor neighborhoods and slums where they rented sub-standard homes before the earthquake. Little wonder then, that they are in no great rush to pay exorbitant rents to live in squalid slums without access to essential services like water, sanitation, schools, and health care.

Advocating for a Rights-Based Approach

So what could be done to break the logjam and kick start reconstruction? In a recent article published in *Foreign Policy*, PIH co-founder Dr. Paul Farmer offered five lessons from Haiti's disaster that could guide a recharged recovery:

Jobs are everything.

More Haitians must have access to employment if the country is to rebuild itself. As Paul notes, "Haiti has 9.8 million people, and at least half were unemployed even before the earthquake." Providing employment would help give people the means to relocate—especially if decent wages were paid for work that would lay the groundwork for healthy communities by removing rubble, building infrastructure like water and sanitation facilities, and planting trees in a country that is almost entirely deforested.



Don't starve the government.

Local people know best – we need to empower and trust Haiti's government, and the public sector generally. We must use aid to strengthen the public sector and the government, not to bypass them, and ensure that aid money is not just promised, but delivered.

Give them something to go home to.

At least 1.3 million people were made homeless by the earthquake and are now living in spontaneous settlements in and around Port-au-Prince. Neither the capital nor the country can build back better if its people do not have access to housing, water, food, and sanitation. Enticing people home will mean providing exactly what they lacked before: housing, education, and health care.

Waste not, want not.

The international community must keep its promises to Haiti. To date, the country has only received 38 percent of the money promised by foreign governments and NGOs for 2010. This support must actually reach its intended recipients without getting eaten up by overheads.

Relief is the easy part.

Disaster relief is not reconstruction. 'Building Haiti back better' means sustaining those temporary gains and adding education, health care, services, and good governance. Additionally, stimulating economic growth to provide a springboard for improving education, health care, services, and good governance is essential.

PIH and our partners will continue to advocate for long-term funding and improved foreign aid distribution and implementation to assist widespread recovery in Haiti.