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For more information:
www.handicap-international.fr

ACKNOWLEDGEMENTS

Handicap International would like to thank the thousands of individual donors who responded to its fundraising appeal in support of its actions in aid of the victims of the earthquake in Haiti. Taking into account the donations made by the Fondation de France, **public donations now account for nearly 70% of the funding for Handicap International's actions in Haiti in the six weeks following the disaster.**

On 3 February, the French ambassador to Haiti, Mr Didier Le Bret, was awarded the Claude Erignac prize for his effective and courageous handling of the crisis. He decided to give half of the prize money to Handicap International to support the association's aid effort in Haiti, with the other half going to set up a fund for the embassy's Haitian staff.

Handicap International's activities in Haiti are also supported by:

- public bodies: the UK Department for International Development, the French Ministry for Foreign Affairs, the World Food Programme, the Luxembourg Ministry for Foreign Affairs, the Conseil Régional d'Ile-de-France, the City of Lyon, the City of Munich, and the Région Rhône-Alpes;
- private institutions and companies: the Fondation de France, Fondation Abbé Pierre, Sanofi Aventis, EDF, the American Friends Service Committee and the Fondation SEB.

Handicap International has benefited from a number of very strong partnerships with numerous international aid organisations in the field, including ACTED, Action contre la Faim, La Chaîne de l'espoir, Christian Blind Mission (CBM), Douleurs sans Frontières, Healing Hands for Haiti, Médecins du Monde, Médecins sans Frontières, Merlin, and International Organisation for Migration (IOM), along with numerous Haiti stakeholders, associations, health facilities and the Secretary of State for the Inclusion of People with Disabilities.

INTRODUCTION



A violent earthquake measuring 7.3 on the Richter scale hit Haiti at 4.45 pm (local time) on 12 January 2010. Handicap International's team, consisting of some one hundred people, which was present in the field when the earthquake struck, all survived the disaster. It was therefore able to provide an emergency response in the days immediately following the disaster.

The association has built up extensive expertise in earthquake situations, including in El Salvador and India (2001), Iran (2004), Pakistan (2005) and China (2008), as well as Indonesia (2005 and 2009), to mention just our most recent operations. It is now clear that its actions in aid of the victims of the earthquake in Haiti will last for several years.

The earthquake was the most powerful to hit the region in 200 years. Its epicentre was located 15 km from the capital, Port-au-Prince. The total number of people killed is estimated at more than 230,000, with 300,000 people injured and more than 1.2 million left homeless in one of the world's poorest countries.

In the hours following the earthquake, Handicap International's head office in Lyon decided to release 150,000 euros of general funds and to expand its team in Haiti. A project manager specialising in the post-earthquake case-management of injured people, Aleema Shivji, arrived in the field on 14 January. She was quickly joined by physical rehabilitation professionals and logisticians. Our team of local staff has also been expanded. Handicap International now has a total staff of some 250 persons, a number that continues to grow as we face up to scale of the needs on the ground.

Our response to the disaster is based, on the one hand, on providing support to the injured and, on the other hand, the management of a humanitarian logistics platform. Handicap International is also involved in distributing emergency kits and setting up temporary shelters for those affected by the disaster. The association is also preparing to produce emergency orthopaedic materials for amputees in the next few days.

SUMMARY

ACTIONS PERFORMED AND PLANNED

Health

On 26 January 2010, the UN entrusted Handicap International with the mission of coordinating, for the whole of Haiti, all rehabilitation activities for injured persons, the fitting of orthopaedic materials and support for people with disabilities, in partnership with the German organisation, CBM (Christian Blind Mission).

As part of its role, Handicap International is organising the coordination of international aid stakeholders, while the CBM is coordinating Haitian organisations working in these fields, under the general coordination by the WHO of the Health cluster.

- **Support for people with injuries and disabilities, in hospitals and communities:** injury care, hospital referrals, post-operative follow-up, rehabilitation, follow-up in communities and camps
- **Distribution of orthopaedic materials and mobility aids**
- **Psychosocial support:** individual support and discussion groups for traumatised victims
- **Fitting of temporary emergency orthopaedic materials** (end February) **then fitting of permanent orthopaedic materials** (from July) **for amputees**

Humanitarian logistics

- **Transport of humanitarian aid by the inter-agency logistics platform**
- **Distribution of emergency kits for the homeless** (while facilitating access to aid for people with disabilities and the vulnerable)
- **Setting up of temporary shelters** (taking into account the specific needs of people with disabilities and the vulnerable)
- **Clearance operations / “Cash for work” project**

STAFF IN THE FIELD

On 11 February, our team numbered some 250 people, including around 40 expatriate staff.

Programme management: 6 expatriate staff

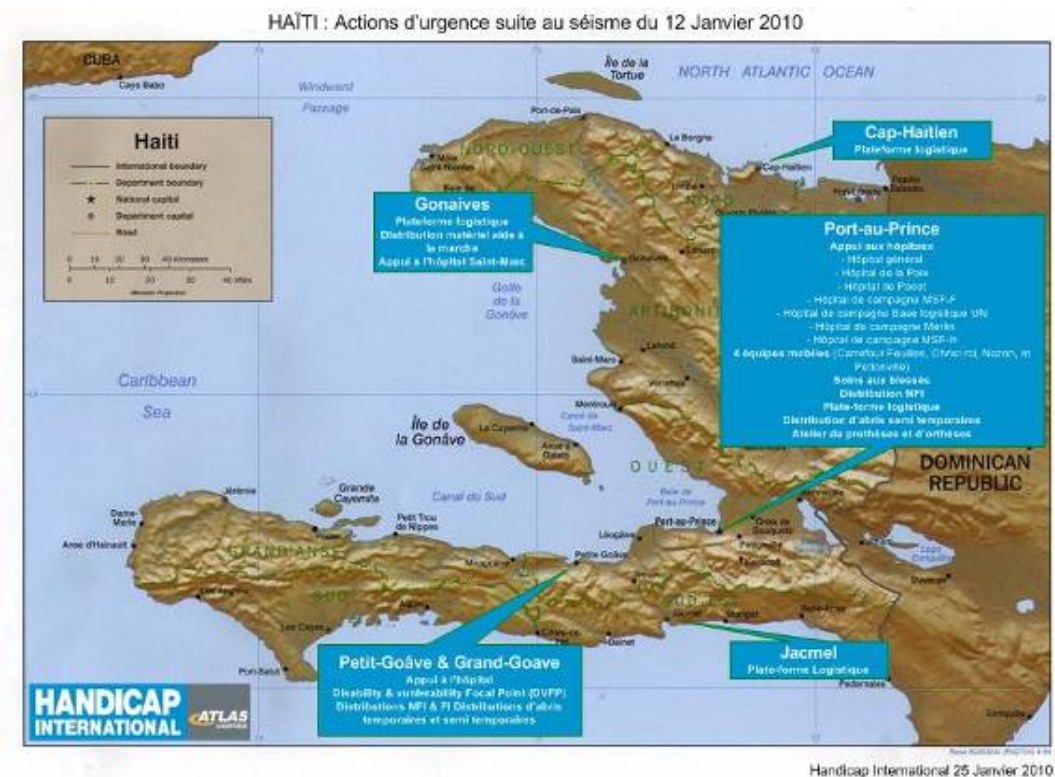
Humanitarian logistics: some 165 staff, including 15 expatriate staff + 1 logistician based in Santo Domingo

Health: some 80 staff, including 22 expatriate staff

The team will be expanded again over the coming weeks.

LOCATION OF PROJECTS

- Port-au-Prince
- Cap Haïtien
- Gonaïves
- Jacmel
- Petit-Goâve and Grand-Goâve



HEALTH

During the first three weeks of our emergency response:

- active in 12 hospitals in Port-au-Prince and one hospital in Petit-Goâve
- more than 800 injured persons provided with support
- more than 900 rehabilitation care sessions performed
- more than 300 awareness-raising sessions for friends and relatives in caring for the injured
- more than 600 people benefited from psychosocial support sessions
- almost 1000 items of equipment distributed
 - mobility aids: crutches, walking sticks, wheelchairs, walkers, etc.
 - orthopaedic equipment: neck braces, corsets, splints, etc.
 - basic equipment for the injured: mattresses, hygiene equipment, etc.



The Health team is currently supported in the field by some 80 staff members in the field, including 22 expatriate staff, divided into six mobile care teams and five "Disability and vulnerable" focal points. We are planning to rapidly increase this number to around 100 people (including some 20 expatriate staff).

The Haitian staff recruited are primarily nurses and community workers. They are being given intensive training in the case-management of people with fractures, amputees and paralysed persons, as well as the lifting of patients and the use of mobility aids.

Since 14 January, several tonnes of freight have been transported from France, including a dozen clinic tents, mobility aids and orthopaedic materials. These deliveries are on-going.

From the end of February, the team will begin supplying emergency orthopaedic materials to lower-limb amputees.

300,000 people injured

The Haitian government now estimates the number of people injured in the earthquake to be over 300,000. This considerable number constitutes a challenge of historic proportions for humanitarian aid stakeholders, given the reduction in care capacity in Haiti caused by the earthquake. Most people arriving in operational health centres with injuries (mainly fractures) have been unable to access immediate and suitable care, which has given rise to complications or infections. Most injuries become infected as a result. This very often leads to amputation, since medical teams intervene too late to save the limb in question. Initially, hospital facilities did not have time to collect information and therefore offered little in the way of reliable information about follow-up requirements. They were completely overwhelmed.

From 16 January onwards, the association began caring directly for the injured. Extra rehabilitation staff (doctors, physiotherapists, occupational therapists, nurses, etc.) from the US, Canada, France and the Philippines arrived over the following days. Four other physiotherapists from the Belgian section of Handicap International travelled to Haiti to work with teams from Médecins Sans Frontières over the next two months. The team will be expanded again in the future. It is currently providing direct care to the injured and amputees.



Support in hospitals

Our teams are intervening directly in 10 hospitals in Port-au-Prince and one hospital in Petit-Goâve. They include staff in two additional hospitals, where they are responsible for the case-management of injured persons, and those distributing orthopaedic materials in five others.

During the weeks immediately following the earthquake, only the most serious cases were admitted, given the massive influx of injured persons. Amputations represented an exceptionally large proportion of the operations performed. Some patients with closed fractures were unable to stay in hospital, with priority being given to the most urgent cases.

The situation has eased since the end of January but remains extremely difficult. Many patients who had not received care until then were beginning to arrive in hospitals with complications; some amputations performed under extremely difficult circumstances required corrective surgery. Some private establishments have restored fee-based activities; many international medical teams have left the country or are on the point of doing so.

In agreement with hospital managers, members of Handicap International are providing post-operative rehabilitation care, distributing walking aids and orthopaedic equipment, and are setting up a long-term follow-up system for patients. This support in hospitals and other medical facilities in Port-au-Prince aims to help injured and/or paralysed persons avoid developing permanent disabling after-effects. This support is expected to be scaled-up over the coming weeks and will continue until April at the earliest.



Four mobile care teams in communities

Our mobile teams are visiting communities to provide medical support for the injured who have been unable or unwilling to go to hospital, as well as for those who have left hospital and whose injuries require follow-up care. These teams travel around four of the capital's most disadvantaged neighbourhoods and districts (Carrefour, Carrefour Feuilles, Christ-Roi and Pétionville), temporary camps for the homeless, and gatherings of the most underprivileged groups.

This community presence enables us to provide nursing care, distribute mobility aids, provide long-term rehabilitation care for people with injuries and disabilities, refer the most serious cases to adapted facilities, and to implement psychosocial support, which will be expanded over the coming weeks in the form of more specific workshops.

Advice is also given to the person's entourage to ensure their injured friend or relative receives basic care. **More than 300 training sessions in caring for the injured have already taken place.**

"Disability and vulnerable" focal points

As an extension of the activities of our mobile teams, **five "Disability and vulnerable" focal points** were opened in Port-au-Prince (in Bourdon, Pétionville, Champ de Mars, the general hospital and the CDTI hospital) in early February, in association with the German organisation CBM and the Secretary of State for the Inclusion of Persons with Disabilities. Four other focal points will be set up soon, in the capital and in Petit-Goâve, with the support of Haitian disabled persons associations.

Housed in clinic tents, initially on sites close to hospitals, these facilities enable us to provide follow-up care to patients on leaving hospital. More generally, they provide free aid to people with injuries, to the elderly and people with disabilities, in the same way as mobile teams.

The operation of these focal points is currently scheduled to last for the next six months. They are expected to be gradually located further away from hospitals in order to reach out to people in their own communities.



Psychosocial support

By intervening directly to support people affected by this deadly earthquake, the team was able to measure the scale of the shock suffered by large numbers of injured people who now find themselves in a disabling situation and who have often lost family members. In order to help people rebuild their lives after this drama, a psychosocial support section of activity has been set up. **Some 600 people have already taken part in psychosocial support sessions organised by Handicap International.** Two French nurses from the Douleurs sans Frontières association and one medical/psychological assistant have joined Handicap International's team to develop this activity.

Specific discussion groups for amputees have been organised with the support of the Haitian staff from the Healing Hands for Haiti association.

More than 2000 amputees

Handicap International's health team in Haiti produced a [report](#) at the end of January on the post-earthquake situation for people with disabilities. It estimates the number of amputees at above 2000. This conservative estimate is the result of direct visits to 17 hospitals, and information gathering by telephone or by email in most of the country's other health facilities in which operations have been performed, and from the relevant authorities. The number of amputations recorded is more than 1500, and we know that many other operations of this type are underway or planned. In the long-term, **the total number of amputations caused by the earthquake of 12 January is expected to reach between 2000 and 4000**, again based on estimates from Handicap International's team in Haiti.



Fitting of orthopaedic materials

A very large number of people are expected to need artificial limbs. At least 1000 lower-limb prostheses will be needed over the coming weeks, according to a study by Handicap International. Haiti only had one fitting centre before the disaster, managed by the Healing Hands for Haiti association, and it was largely destroyed, making Handicap International's work all the more necessary, in coordination with some six other organisations which are also planning to perform fitting activities.

Fitting activities will begin during the second half of February, after the initial amputations have healed. **Handicap International will produce between 300 and 400 emergency artificial limbs and one hundred orthoses (splints, corsets, etc.) over an initial six-month period.** These temporary limbs will then be replaced by permanent orthopaedic materials, of which production will begin in July. The association's goal is to create and coordinate a long-term capacity to provide rehabilitation and fitting services in the country by training Haitian staff to ensure its future success.

On 6 February, the arrival of an initial cargo provided the components necessary to produce 50 temporary artificial limbs. Between now and the end of the month, enough equipment to produce 300 temporary artificial limbs will have arrived in Haiti. A temporary orthopaedic materials workshop will be set up in mid-February, in a tent on land belonging to the Haitian health ministry, close to the airport. It will be kitted out with equipment retrieved from the Healing Hands workshop, and supplies of additional equipment from Europe and North America.

The workshop's supervisory staff began to arrive on 10 February. A South African project manager and technicians from France, El Salvador and Togo will support the activities performed by the Haiti association Healing Hands for Haiti, while additional Haitian staff receive training.

Handicap International is also looking into the possibility of setting up an additional orthopaedic materials fitting facility in the Port-au-Prince area or elsewhere in Haiti, where major needs are identified.

HUMANITARIAN LOGISTICS

During the first three weeks of our emergency response:

- More than 800 tonnes of humanitarian aid was transported on behalf of some fifty organisations



This transport activity has been intensifying since the last week of January, with aid now arriving by sea at several ports in Haiti and Santo Domingo.

Handicap International's logistics team in Haiti now numbers some 165 people (including 16 expatriate staff) spread over five operational bases (Port-au-Prince, Cap-Haïtien, Gonaïves, Jacmel and Petit-Goâve), in addition to a site in Santo Domingo.

It manages a fleet of 45 off-road lorries and three storage warehouses with a total surface area of over 6000 sq.m. This fleet of off-road lorries, which can each transport 3.5 tonnes of merchandise, will soon be joined by larger-capacity lorries (8 to 15 tonne payload) by calling on the services of Haitian transporters whenever possible, in order to help support the economic recovery of the country.

Management of the inter-agency logistics platform

The logistics platform, consisting of a fleet of 45 six-wheel drive off-road lorries, managed by Handicap International in partnership with the World Food Programme (WFP), was back in service two days after the earthquake. On 14 January, two lorries loaded by the WFP with 1,200 litres of water and four tonnes of energy biscuits was able to leave Gonaïves for Port-au-Prince. On 15 January, eight additional lorries left with fuel and water treatment equipment belonging to Action Contre la Faim.

The redeployment of this fleet (currently numbering 29 lorries in Port-au-Prince, 13 in Jacmel and 3 in Gonaïves) has ensured a constant turnover of vehicles to reduce congestion at the airport in Port-au-Prince, where most humanitarian aid is arriving. The association is already working in partnership with some fifty organisations and the next few weeks will see another increase in activity, with the arrival of additional lorries.

In Port-au-Prince, Handicap International has two warehouses covering 3,500 sq.m. and 2,500 sq.m. respectively, to store a proportion of this aid before it is sent out to secondary distribution points. The association also manages a 300 sq.m. warehouse in Petit-Goâve. Mobile storage units will soon be added to these facilities.



Distribution of emergency kits, food and the setting up of temporary shelters

An estimated 1.2 million people have been left homeless by the earthquake in Haiti. Without a roof, these people have also lost everything they owned. Since the beginning of February, Handicap International has provided a response to this situation in Petit-Goâve and Grand-Goâve. Located around ten kilometres from the epicentre of the earthquake, these two intervention areas were destroyed to an extent of 60%, with 50,000 people affected in these regions alone.

The association dispatched **emergency kits** to Haiti consisting of sheets, ropes, mats, water filters, jerrycans and kitchen utensils. These emergency kits have a unit cost of €58 and enable the population to create temporary shelters.

The International Organisation for Migration (IOM) and the French NGO ACTED have donated 1000 additional sheets to Handicap International as a means of ensuring their distribution. We have also distributed food and hygiene kits. Additional air freights of emergency kits and tents have been organised by the association. These kits will be distributed from mid-February onwards.

Distribution activities will take into account the specific needs of people with disabilities, the vulnerable and the elderly, particularly in terms of facilitating access to aid and catering for specific mobility conditions.

In the towns of Petit-Goâve and Grand-Goâve, the situation assessment performed by Handicap International has revealed a need for the association to take a more long-term perspective in Haiti, particularly in terms of reconstruction activities, given the extent of current needs.

The organisation also distributed food aid to the population of Petit-Goâve this week, benefiting 500 people.

Clearance operations / “Cash for work” project

In mid-February, Handicap International will take charge of clearing certain areas with the help of the local population, thereby providing them with an opportunity to earn an income. The first areas to be cleared will be roads, temporary reception areas, or those designed for sanitary use (particularly toilets).

500 clearance kits (containing shovels, picks, jumper bars, sledgehammers, buckets, helmets and protective gloves, and safety vests), at a unit cost of €80, were transported from France on 6 February to the area and will be allocated to teams of around a dozen persons.



BACKGROUND

THE SITUATION IN FIGURES

- **According to the Haiti government, as of 9 February 2010:**
 - o The human cost of the disaster now exceeds **230,000 people killed and more than 300,000 injured**, including several thousand requiring surgical operations.
 - o Between 50% and 90% of homes have been destroyed or damaged in the areas most affected.
 - o Almost all communication channels have been interrupted following the earthquake.
 - o Public institutions (the National Palace, Ministerial Palace, Parliament, the majority of ministries, town halls, and police stations), several churches, schools and hospitals have been destroyed, along with the headquarters of the Minustah in Port-au-Prince.
 - o More than 1.2 million people have been made homeless.
 - o The earthquake led to large numbers of displaced persons moving from the affected areas to regions believed to be less at risk. The number of displaced persons is estimated at around half a million.

- **According to the UN, as of 8 February 2010:**
 - o The distribution of supplies to provide temporary accommodation continues to be a priority in all affected areas. As of 8 February, only around 272,000 people received aid in this field, while the number of homeless people is estimated at over 1.2 million.
 - o In the health field, trauma-related consultations, which represented more than 20% of consultations until now, are slowly decreasing in number, but still represent more than 10% of consultations. There has not been a notable increase in infectious diseases. Acute respiratory infections are the most commonly reported (15% to 25% of consultations) along with acute diarrhoea (7% to 12% of consultations).
 - o The clearance effort remains a major challenge. It is estimated that less than 5% of toilet requirements are currently being met (one toilet per 50 persons), which represents a major public health risk in temporary encampments. 18,000 toilets need to be built to serve 900,000 people. Waste management is also a problem.
 - o The arrival of thousands of people from Port-au-Prince in villages along the border with Santo Domingo has exacerbated the food situation in these areas, where conditions were precarious even before the earthquake.