

**Partners In Health (PIH)
Emergency Relief and Rebuilding in Haiti
January 2010**

Partners In Health requests your support for emergency relief and rebuilding in Haiti following the recent, devastating earthquake that has struck the island nation. Your support would be of immense help to our emergency response and our longer-term efforts to rebuild the health system, lives, and livelihoods in coming months.

The situation in Haiti

On January 11, 2010, a major earthquake – the worst that the country has experienced in over 200 years – struck the capital of Haiti, crumbling the city of Port-au-Prince (PAP) and causing massive destruction. The loss of life has clearly been catastrophic, although it will be difficult to count until the devastation has been cleared and families have been able to account for their missing.

In the aftermath of the earthquake, Partners In Health (PIH) and our partner organization in Haiti, Zanmi Lasante (ZL), immediately began mobilizing to provide relief efforts. Our immediate priority after the quake was to check in with our sites in Central Plateau and Artibonite. We are relieved that the 5 hospitals and 7 health centers we operate in these regions have not been damaged by the earthquake and are functional. However electricity is out, and the phone networks are intermittently in service, leaving satellite phones and internet our most reliable form of communication. We are still trying to gather information and locate staff, especially those who were in PAP or who were traveling to and from the city at the time of the earthquake. At this point we have accounted for nearly everyone, for which we feel deeply fortunate. Our Zanmi Lasante staff are of course also very concerned about their family members in PAP, and many have returned to the city to verify the status of loved ones and to contribute the relief effort there.

What PIH and Zanmi Lasante are doing

PIH has been working very closely with the UN, Government of Haiti, United States Government, other non-profit organizations and relief agencies to determine the immediate needs for PAP and the surrounding areas, and how to best deliver care to those who need it most. PIH is not primarily a disaster relief organization, but with a dozen clinical sites across the Central Plateau and Artibonite regions – several of which are only two hours outside of PAP – and a local staff of more than 120 doctors and nearly 500 nurses and nursing assistants, we are well-positioned to respond. We are taking a two-pronged approach to meet both the immediate needs of those most affected by the quake, and a longer-term approach, knowing that rebuilding efforts will be pressing in the coming months.

Providing emergency medical care and relief supplies in PAP

First, PIH and ZL have since been working non-stop to get medical personnel and supplies to provide care for earthquake victims. We are organizing the logistics to get medical staff and supplies needed for setting up field hospital sites in PAP where we can triage patients, provide emergency care, and send those who need surgery or more complex treatment to our functioning hospitals and surgical facilities in the Central Plateau and Artibonite. PIH's Chief Medical Officer and another PIH physician David Walton arrived in PAP Thursday morning and are working with other Zanmi Lasante doctors and staff already in the city to organize medical efforts there, most likely at several locations and via mobile clinics. Already, PIH is transporting essential medicines that are crucial to our first response (such as antibiotics, pain medications, sedatives, sutures, saline, sterile water, alcohol pads, surgical masks, hypodermic needles, fluids, and oral rehydration salts) as well as emergency response items such as tents, blankets, soap, and hygiene items. Currently, PIH is relying on our existing stock of medicines and supplies, but these will soon need to be replenished. PIH operates an extensive system of warehouses and depots and has an

electronic stock management system that can aid these recovery efforts. We are also organizing private planes of medical supplies, tents, blankets, water, and other essential items, as well as experienced medical volunteers, into PAP and the Dominican Republic over the next several days.

Once transportation channels are clear, we are ready to transport additional supplies, equipment, food, and aid into the capital. Ideally, we will be able ship via air cargo into directly into PAP or would be able to use existing supply channels that have been set up by U.S. Government partners or the UN. While the airport is still closed we are relying on our own fleet of vehicles and drivers to move items from their point of origin into PAP and among PIH facilities. Funding will be required to cover additional fuel costs and human resources associated with these heightened transport efforts.

Bolstering the capacity of PIH clinical facilities in the Central Plateau and Artibonite

Second, we are ensuring that our facilities in the Central Plateau and Artibonite are ready to serve the growing volume of patients from PAP. Operating and procedure rooms are staffed, supplied, and equipped for surgeries and we have converted a church in Cange into a large triage area. We have stocked our existing operating theatres with trauma materials such as orthopedic products, anesthesia, intravenous lines, and bandages, in order to respond to the influx of injured patients that we expect to arrive from Port-au-Prince. Already our sites in Cange, Belladere, Lacolline, Hinche and St. Marc are inundated with earthquake victims coming from the capital city in need of surgical or trauma care. We are establishing a supply chain through the Dominican Republic to ensure that our hospitals remain stocked and equipped with medicines and medical supplies, equipment, and fuel so that they can continue to respond around the clock to the incoming patients.

We will need funds to support our existing sites so that they are able to provide care to the influx of patients arriving from Port-au-Prince, now and in the coming months, and will provide for the procurement and transportation of essential medicines and supplies into PAP and our sites. This support would leverage the tremendous outpouring of in-kind donations that we have been offered from corporations, medical supply companies and other aid organizations.

Long-term recovery

With over twenty years of experience working in Haiti – and having survived natural disasters that have so tragically plagued Haiti in its history, including most recently the successive hurricanes that displaced over one million last year – PIH and Zanmi Lasante know all too well the incredible amount of resources and effort it will take to rebuild following a disaster. And the recent earthquake is a truly unprecedented catastrophe in the Haiti's history; with nearly one-third of the country's population affected (the population of PAP is roughly 3 million), the long-term ramifications are going to be significant and far-reaching. Thus we are mobilizing resources both for immediate aid and long-term recovery and rebuilding efforts.

Both emergency medical care and long-term medical and health services will be needed to meet the needs of the injured and displaced population. Medical services in Port-au-Prince (PAP) are virtually non-existent, with most of the capital city's hospitals destroyed or too damaged or unstable to function. Right now, PIH's clinical sites are inundated with patients coming from PAP who have nowhere else to go. While the volume is currently mostly trauma patients, we know that in the coming months and beyond, those displaced by the quake will need access to comprehensive primary health care. Eighty percent of the country's medical facilities and personnel are located in PAP, and it will be a long time before those facilities are rebuilt and able to deliver care.

Therefore, PIH and Zanmi Lasante are bracing for significant, sustained patient volume at our 12 clinical facilities in the Central Plateau and the Artibonite, and we will continue to strengthen these sites,

bolstering their capacity by continuing to keep our outpatient clinics staffed, our pharmacies stocked, our operating rooms up and running. Building on our long-term partnership with the Government of Haiti and the Ministry of Health, we will continue to invest in public health infrastructure and the local workforce to ensure the long-term sustainability of our efforts. With the exception of our main medical campus in Cange, all of the facilities where PIH and ZL work are public and owned by the Ministry of Health. Additionally, because of Paul Farmer's recent appointment as Deputy UN Special Envoy, working with President Bill Clinton, we will coordinate with UN efforts to strengthen health systems and relieve poverty in Haiti over the long term.

We will also need financial support to help people rebuild their lives and livelihoods and meet needs for housing, food, and economic support in a myriad of ways. PIH and Zanmi Lasante's approach to breaking the cycle of disease and poverty has long included community-level development and poverty alleviation programs, such as programs to bring clean water to villages, provide educational opportunity for children, agricultural assistance and food security initiatives, housing construction, and income-generating activities. All of these social support programs will need to be amplified as Haiti grapples with the extent of the displacement and economic damage caused by the quake, and potentially, as significant migration out of PAP occurs.

Funds raised for earthquake relief will be put to all of all of these efforts described above.

Conclusion

The situation in Haiti, already the poorest country in the Western Hemisphere, is grim, and news continues to flow in from our staff with haunting descriptions about the death and destruction they are facing. One member of our staff who traveled to PAP last night wrote in and said, *"All I can say after today is my heart is crying for Haiti. Tonight, everywhere in the city, as we drove through the national plaza, there are thousands of people sleeping outside. While I was in PAP there were still aftershocks being felt...it's really serious destruction and loss of life."* PIH and Zanmi Lasante are working tirelessly to respond as effectively we can to those who desperately need our help, and we are most grateful for your support.

About Partners In Health

Partners In Health is an international organization based in Boston, Massachusetts that works in a total of 12 countries to deliver high quality health care and break the cycle of disease and poverty. Haiti has long been the heart of PIH's work, and the foundation for our expansion into Africa and beyond. In 1983, Dr. Paul Farmer and Ophelia Dahl worked with several Haitian leaders in the village of Cange, a squatter settlement in Haiti's impoverished Central Plateau, to establish a community-based health project. In 1987, Dr. Farmer and others founded Partners In Health (PIH) in Massachusetts to support activities in Cange; at the same time they created Zanmi Lasante (meaning 'Partners In Health' in Haitian Creole) as our sister organization in Haiti. Today, Zanmi Lasante is the largest health care provider in Central Haiti, serving a catchment area of 1.2 million across the Central Plateau and the Lower Artibonite, and employs over 4000 people, almost all of them Haitians, including doctors, nurses and community health workers. The small clinic in Cange has become a full-service medical complex that includes a 104-bed hospital, infectious disease treatment, pediatric inpatient and outpatient care, a women's health center and emergency obstetrical care, pharmacy and laboratory services, and numerous community development programs. Beyond Cange, Zanmi Lasante has worked in close partnership with the Ministry of Health to strengthen the delivery of comprehensive medical care through a dozen public hospitals and health centers in Central Haiti and the Lower Artibonite, where we have renovated dilapidated clinics, trained

staff, and provided essential supplies, medicines, and equipment. To combat the root causes of poverty and disease, Zanmi Lasante also implements social and economic programs in nutrition, agriculture, water and sanitation, and education. In 2008 Zanmi Lasante recorded 2.6 million patient encounters through clinic visits, mobile clinics, and vaccination campaigns, a substantial increase from 1.9 visits the year before.

From Haiti, over the last 20 years PIH has expanded our medical mission to other settings of extreme poverty, political conflict, or international neglect. We conduct treatment and training programs for multidrug-resistant tuberculosis, a disease that disproportionately afflicts poor countries and is particularly deadly in combination with HIV, in Peru, Russia, Lesotho, and most recently, Kazakhstan. We support community-based rural health programs in Mexico, Guatemala, and Burundi. In addition to Haiti, we operate comprehensive, integrated primary care and infectious disease treatment programs in three African countries: Rwanda, Malawi, and Lesotho. Finally, we have a health promotion program for poor and marginalized HIV patients in inner-city Boston, Massachusetts, where PIH is headquartered.