Haiti from tragedy to opportunity

Special report, one month on
strategy 2020

Strategy 2020 voices the collective determination of the International Federation of Red Cross and Red Crescent Societies (IFRC) in tackling the major challenges that confront humanity in the next decade. Informed by the needs and vulnerabilities of the diverse communities where we work, as well as the basic rights and freedoms to which all are entitled, this strategy seeks to benefit all who look to Red Cross Red Crescent to help to build a more humane, dignified, and peaceful world.

Over the next ten years, the collective focus of the IFRC will be on achieving the following strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disasters and crises
2. Enable healthy and safe living
3. Promote social inclusion and a culture of non-violence and peace
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The scale of the disaster left even veteran disaster responders stunned, people who had seen first hand the savagery of nature elsewhere, in the Americas, in sub-Saharan Africa and in countries like Iran, Indonesia, Pakistan and China. The magnitude-7 earthquake – the biggest to hit Haiti for 200 years – may have left as many as 200,000 people dead and up to a million homeless. But figures cannot express what happened. The capital, Port-au-Prince, and outlying areas lay in ruins.

No one escaped the tragedy. As always when disaster strikes this Caribbean nation, Haitian Red Cross volunteers were among the first to respond but this was like nothing they had known before. As they scrambled to assist their communities they themselves were grieving. They, too, had lost homes and loved ones, and friends and relatives were among the missing. The perseverance of 2,000 of them was nothing less than heroic.

Within a week of the 12 January quake, more than 400 Red Cross and Red Crescent workers from around the world were with them and many more were on the way. Before the end of the month 600 had been deployed with 30 National Red Cross or Red Crescent Societies in country, a strong regional presence – Caribbean, Central and South American – among them.

They set up emergency hospitals, got basic health care functioning, and by month’s end were treating 1,600 patients a day. Relief supplies had been delivered to more than 122,000 people, 14 million litres of water provided, and 70 relief flights had landed in Haiti or the neighbouring Dominican Republic to support what was fast becoming one of our largest and most complex operations in recent memory.

Introduction
Haiti’s chance to rise

Roots of catastrophe

Amid the rubble of Port-au-Prince, Tadateru Konoé, president of the International Federation of Red Cross and Red Crescent Societies, summed up the challenge. “We must confront a natural disaster that is not only one of the biggest of the past decade,” he said, “but is affecting one of the very poorest countries in the world.”

Poverty lies at the root of the catastrophe and countless lives were lost because little had been invested in measures to limit the impact of natural hazards. The level of damage and the resulting overwhelming needs are a direct result of poverty and under-development.

The disaster of Haiti is not the earthquake. What we are seeing here is what happens when an extreme natural event occurs in the lives of people who are already frighteningly vulnerable.

Our challenge now is to help Haiti recover from the earthquake and to overcome its past deprivation. The experience the Red Cross and Red Crescent has gained from five years of post-tsunami work will be invaluable, for we must ensure that Haiti’s devastated communities receive not only the help that they need now but the help they will need for a long, long while to come.

This is a rare opportunity to effect large-scale change where it is so desperately needed. It is also an opportunity to put power into the hands of the people affected by the disaster. This is already being done as we prioritize community outreach and beneficiary communications that empowers and equips people to be true partners in their recovery. The recovery process will take years – perhaps even a generation – but it is our best chance to turn Haiti’s fortunes around. Together, we must transform tragedy into opportunity.
Three weeks after the Haiti earthquake the need for partnership was never greater, according to Bekele Geleta, secretary general of the International Federation of Red Cross and Red Crescent Societies (IFRC). With the expected start of rains in May, and right behind them the hurricane season, more pressure poured on the agencies responding to the disaster.

Tell-tale signs could be seen in the ongoing use of staff who had suffered themselves in the earthquake. They were in urgent need of rest and recuperation. The helpers needed help. They needed time to grieve and time was at a premium.

For the IFRC, the greatest urgency lay in emergency shelter and non-food relief – on which it leads a UN-designated cluster of agencies – and in the provision of latrines before Port-au-Prince is awash with human excrement.

In makeshift settlements like the Renault Camp on the edge of the ruined capital, a shelter can be sheets draped over branches with a piece of old cardboard for flooring. The Red Cross and Red Crescent has provided tens of thousands of people with plastic sheeting, tools and basic household necessities, but the density of the displacement brings with it immense complexity.
Outlying areas underserved

Dire situations exist outside Port-au-Prince as well. Two hours south of the capital, Leogane was the epicentre of the quake. Downtown, the Gustave Christophe football stadium is as bad as it gets. Up to 10,000 people are reported to be sleeping here, in appalling, flimsy shelters, packed together like sardines.

This city of 180,000 people – minus the 10,000 or more who perished in the disaster – resembles Mogadishu or Beirut at the height of their conflicts. It is levelled. Experts estimate 80 per cent of Leogane is damaged, but even the standing structures are cracked beyond repair or are next to buildings that will have to be demolished.

Because Port-au-Prince has suffered most of the earthquake damage most international assistance is focused on the capital as well. Outlying and rural areas have been left under-served as a consequence despite severe distress. Meanwhile demand for community services there is growing apace as more and more people arrive from Port-au-Prince, vacating the capital in search of food, shelter, and livelihood.

John Holmes, the UN’s Emergency Relief Coordinator, was frank. “Despite the heroic efforts of so many colleagues on the ground and the continuing efforts of all who are working to support them from outside the country, the magnitude of the disaster and the conditions in Haiti continue to pose huge challenges.” And the approaching rains left little time to spare.
Concern for coordination

Whether it is shelter and relief, water and sanitation, health or recovery – in or outside the capital – the International Red Cross and Red Crescent Movement knows a coordinated response is essential. How it structures operations is crucial: with consensus based on what is happening on the ground and agreed upon within all its institutions.

There are options but the primary goals are clear: rebuilding the community, meeting the evident needs of the most vulnerable people and filling key gaps in Haiti’s reconstruction, and rebuilding the Haitian Red Cross, restoring the capacity it requires as a prime humanitarian organization.

Shelter programmes will deal with both transitional and long-term needs, from shelter kits and safe building information to the reconstruction of permanent housing. They will recognise, as well, survivors’ differing needs. Some people will return to where they came from, others will be unable to.

Health as well as water and sanitation approaches will be low-tech and sustainable, complementing the work of other agencies by working from the periphery of the earthquake area towards the centre where everyone else has focused. Among other things, community-based health and first-aid services will be provided, along with psychosocial support and access to safe water.

Livelihood, food security and economic recovery efforts will deal with individual, household and local enterprise needs, including the re-establishment of local markets, and short-term salary support to teachers, doctors and nurses. Community health and education services must be re-established not only to meet the current needs but with an eye to contingency planning for future disasters. It means developing and equipping temporary and permanent health centres and schools, promoting protection and awareness, and empowering community organisations.

Dire need to reduce vulnerability

And then comes disaster risk reduction. Had investment been made in quake-resistant buildings and other risk reduction measures far fewer lives would have been lost in Haiti. It is a message relevant around the world where only a miniscule amount of official development assistance is spent on proactive attempts to reduce vulnerabilities.

After the Indian Ocean tsunami and now Haiti, the world must do more than nod agreement. Intensified efforts to reduce the risk can dramatically lessen disaster impact.

Right now in Haiti there is dire need of contingency planning for the hurricane season, advocacy for life-safe buildings, as well as action on the threats to short and long-term food security, environmental management, and community-based risk reduction.
Haiti’s special complications

Among a raft of challenges programmes may have to confront, some are specific to Haiti. High loss of life will likely influence the labour pool and the supply of local expertise, creating a capacity gap. The logistical constraints of Haiti’s island location will complicate procurement and the delivery of materials. With large resources expected for recovery, limited space and opportunity for implementation may bring significant competition among agencies.

Effective urban recovery will require significant reconstruction of infrastructure and solutions to questions of land title and land-use planning. A significant flow of people to rural areas is being witnessed and whether they will stay or return to the capital is unknown. The impact of the aid process — such as the potential for inflation and the consequent impact on food security — may produce counter-currents to successful recovery.

Effective coordination and operational structures will be sorely needed.
The Haitian Red Cross: connecting

They were among the first to respond because they were already there. When Haiti’s January earthquake struck, it struck their home communities. As around the world aid agencies scrambled, and logisticians sought fast routes to the Caribbean, the Haitian Red Cross was up and running.

At the St. Pierre square in Pétionville, a small suburb to the east of Port-au-Prince, hundreds of survivors had gathered, shocked and dazed, many injured. Some had escaped with scrapes and scratches but others had sustained deep gashes, open head wounds, crushed bones and badly fractured arms and legs.

Across the road, in the garage beneath the Mayor’s office, local Red Cross volunteers had established a first-aid station. The space was cramped, cars filled much of the garage, but a steady stream of people was passing through. Wounds were being dressed, broken bones seen to.

“It’s not the best place,” said volunteer Rita Aristide, a veteran Red Crosser steeled by the aftermath of hurricanes, “but people are coming and we are caring for them.”
Today thousands of people like Rita are central to the International Red Cross and Red Crescent Movement’s response. Haiti’s national Red Cross society has broad disaster experience, and lessons learned from the likes of the 2007 hurricanes, Dean and Noel, or 2008’s Fay, Gustav, Hanna and Ike, have left staff and volunteers with skills their partners can rely on.

As an auxiliary body to its government in humanitarian matters, the Haitian Red Cross works closely with the authorities and the National Risk and Disaster Management Office. With the IFRC, it has been meeting every day, from day one, with government representatives to discuss progress and priorities in the earthquake operation.

But as with everything else in the disaster, the Red Cross suffered greatly and rebuilding and strengthening its capacities will be part and parcel of Movement programmes. Services must be re-established, future growth planned, and premises constructed, a Central Blood Bank among them. Time and resources must be invested to identify strengths and gaps.

Grassroots connection for a global response
The trust the public has in the Haitian Red Cross has already been felt in operations. Relief distributions have stepped up a gear to within reach of their first target: the delivery of non-food assistance to 5,000 families a week. Unlike others reported in the media, Red Cross distributions have been generally smooth and secure. An IFRC team leader said, “We don’t use barbed wire or...
armed security. We rely on our emblem and the goodwill people have for the Haitian Red Cross.”

The goodwill provides a grassroots connection for a global response, an asset used, too, as the IFRC prioritizes beneficiary communications: getting life-saving information to and from the earthquake survivors it wants to support.

**Communicating with disaster-affected communities**

Beneficiary communications works right across the disaster environment, in preparedness and early warning, as well as in emergency and post-emergency settings. It is a way to keep in touch with affected people, promote mutual understanding, and help increase the quality and effectiveness of aid. It is also an essential service. It has been an operational priority from the outset and will empower people to become real partners in their recovery.

Passing on alerts and advice is part of it, ensuring people know what is happening. But so is hearing where they are, what they need, and what they think of the support they are getting.

It took off fast in Haiti. The National Society and the IFRC teamed up with a mobile phone company to text more than a million subscribers a day with health, shelter and sanitation messages. The push of a button achieved what would normally take an army of volunteers days.

The text campaign is part of an integrated beneficiary communications strategy that will also use more traditional methods, such as TV and radio spots, newspaper advertising, community meetings and megaphones. But with the nationwide mobile phone network quickly repaired in the wake of the earthquake, phones are a principal means of communication.

Another initiative, involving the Thomson Reuters Foundation, is taking shape to allow a two-way exchange with target groups through an innovative service known as the Emergency Information Service (EIS) that combines SMS and geo-mapping technologies.

The IFRC is working in close collaboration with CDAC, a working group on Communicating with Disaster Affected Communities that brings together leading relief agencies as well as media development organizations to maximise aid effectiveness, accountability and transparency to those vulnerable to or affected by crisis. The group includes the Thomson Reuters Foundation, Internews, UN-OCHA, Merlin, BBC World Service Trust, Save The Children, Irish Red Cross and British Red Cross, and is currently on the ground working to deliver crucial information to the people of Haiti.

*For further information please visit: [http://crisescomm.ning.com/](http://crisescomm.ning.com/)*
The parallels are inescapable. A disaster of staggering proportion. Scenes of total devastation. A toll almost beyond comprehension.

For those who had stood on the coast of Aceh and tried to understand that a debris-strewn plain had been, days before, a vibrant community, Haiti brought sickening memories. Except what a wave rising higher than the coconut trees had simply removed from the landscape, an earthquake here had simply flattened.

Aid workers on standby grabbed the packed bags and dashed en masse to the airport. So did journalists and camera people. Within hours, the Haiti earthquake dominated the media as the tsunami had done from the Indian Ocean a little more than five years previously.

Celebrity stars banded together for multi-locational telethons. The money flowed. Donors committed. There would be generous funding for Haiti as there had been for the tsunami. So can the former learn from the latter?

How to be more effective

Mindful of the extraordinary scale and scope of the tsunami recovery operation, the Red Cross and Red Crescent ensured that the monitoring and evaluation of it was comprehensive. More than 200 reviews and evaluations took place in its lifetime, allowing the adjustment of programmes that became more effective, inclusive, accountable and sustainable. Lessons learned have been applied to ongoing operations and to more recent disasters. They have also informed the development of Strategy 2020, the IFRC’s guiding document that ensures there are links between past operations and future responses.

Among tsunami lessons learned – a shared experience of external and internal partners, governments and other agencies – here are a relevant top handful.

*To fully establish recovery as an essential component of disaster response, institutional recognition and strong leadership is needed.*

The tsunami operation revealed a need to develop expert capacity beyond the traditional fields of emergency preparedness and response. Holistic programming is required to help communities recover, support rebuilding, and focus on reducing future vulnerability to disasters. Re-establishing essential services such as water, sanitation and shelter; protecting health, including through psychosocial programmes; restoring livelihoods; and enhancing food security are examples.
Plans linking relief, recovery and development must be created from the beginning of a disaster operation. This requires time for consulting with communities, governments and partners.

Red Cross and Red Crescent disaster response units now routinely include recovery experts to ensure community needs are understood and planned for, and considered from the outset.

Beneficiaries and communities must be placed at the centre of programming, included in design, implementation and monitoring.

In the Maldives, the Red Cross and Red Crescent worked closely with communities to identify their most vulnerable households. One approach used was a ‘well-being’ ranking, where community volunteers reviewed every household and allocated points based on agreed criteria. The households most in need were given assistance. Assisted households also indicated how they could contribute to the project and what type of support they needed.

Risk reduction must be an integral part of recovery to truly rebuild safer and more resilient communities.

After the tsunami, early-warning and disaster preparedness programmes were stepped up. Indonesian Red Cross staff and volunteers are trained to use a mix of high and low-tech means to warn people of risks. This includes hand-held walkie-talkie radios, SMS, sirens and megaphones. Because volunteers are present within the community they can also encourage people to participate in disaster training and become part of an early-warning network.

Partnerships can expand an organization’s reach and help meet the full range of community needs, especially in areas where expertise and capacity is limited.

In Sri Lanka, the Sri Lankan Red Cross Society, Red Cross and Red Crescent partners, the World Bank and UN-Habitat set up a Community Recovery and Reconstruction Partnership to help people rebuild their houses and community infrastructure. The partners pooled their expertise in community mobilization, water and sanitation, house engineering, social mobilization and commercial and development banking to the benefit of families affected by the tsunami. Other partnerships with the private sector and other aid organizations helped support livelihoods projects.

Capacity building of host National Societies like the Haitian Red Cross must be strategic, sustainable and focused on areas prioritized by the host, even during large-scale recovery programmes.

The tangible benefits of the Red Cross and Red Crescent tsunami operation in the Maldives prompted a groundswell of community interest in the establishment of the first National Society there. The Maldivian Red Crescent attained legal recognition in 2009 and began planning programmes based on local needs.

The Haiti earthquake, of course, is not the tsunami. If the parallels are clear so are the differences. The tsunami affected a dozen countries, the earthquake focussed on a single one, going straight for its heart, crippling government and centralised services. And nowhere did the tsunami impact upon such a poor, distressed and under-developed state.

Still, the lessons learned in five long years around the Indian Ocean have much to contribute to easing Haiti’s plight and planning its long-term recovery.
International Federation of Red Cross and Red Crescent Societies

Haiti: from tragedy to opportunity

• Special report, one month on

February 2010
Perspective

If Haiti, the poorest and least-developed nation of the Western hemisphere was already on its knees, then today it lies face down. Eighty per cent of its 8.7 million inhabitants already lived in poverty and half the population subsisted on less than $1 a day. The 12 January earthquake robbed many of even those limited means and left them in need of more than simple recovery. They need extensive help to totally rebuild their lives.

Disasters are a common Haitian story. Since a previous earthquake destroyed Port-au-Prince back in 1770, the records show an endless procession of tropical storms, hurricanes, floods, as well as quakes and the occasional tsunami.

The past decade or more has been unrelenting. Among the worst, in 1998, Hurricane Georges destroyed 80 per cent of Haiti’s crops. In 2004, Tropical Storm Jeanne claimed 1,900 lives, and floods took 2,600.

And in 2008 three hurricanes – Gustav, Hanna and Ike – and Tropical Storm Fay left hundreds of people dead, tens of thousands homeless, and aggravated chronic malnutrition in several parts of the country. The damage to homes and infrastructure was unprecedented and more than 165,000 families were affected. Losses were estimated at close to $1 billion, which is almost 15 per cent of Haiti’s gross domestic product.

Any country of its size would reel from such devastation. But prone as Haiti is to disasters, they are but part of the story. Alongside the poverty, political and social instability, an economy in ruins, chronic unemployment, overwhelming challenges in health, as well as severe deforestation and environmental degradation that undermines farming, inflates food prices, and leaves the country more vulnerable to flooding, have been among the country’s deeper problems. Disasters have only fed on them.

How great, then, is the challenge when on top of all that, the country’s capital, the hub of a centralised administration, home to more than 2 million people, is levelled? A third of the population lived in the wider affected area.

A sprint and then a marathon

Although real progress is being made, even the immediate needs are of a magnitude rarely seen, not least in the provision of shelter. What has not fallen down in the capital will mostly need to be razed. Haiti’s President René Préval has said they have lost 20,000 commercial buildings and 225,000 homes.

An estimated one million Haitians are in pressing need of shelter, and easing their plight fast is paramount. In the capital, tens of thousands of people are struggling in more than 500 makeshift camps. Still more are living outside their homes, too frightened to move inside them but reluctant to leave their
neighbourhood. With the rainy season due to begin in May and the hurricane season in June, the situation is made more critical.

Of equal concern, Port-au-Prince was left without sanitation. Excretia disposal in particular remains of great concern, and as conditions only worsen so does the risk of potential epidemics of water-borne disease.

Nor are concerns contained in the capital. Around 263,000 survivors, the government says, have left the earthquake zone for rural areas to the north and west. Getting assistance to them is cause for more unease. Food prices are rising and people there struggle to meet basic food needs. Moreover, it is feared that, because of lack of rain, the February/March harvest will be comparatively poor in the bread basket of the region.

These snapshots underline a few immediate challenges. As the IFRC’s Secretary General, Bekele Geleta, put it, “Disaster response is a sprint but disaster recovery is a marathon.”

Sustainable long-term recovery plans, he says, must be at the heart of all we do. Most important of all, the people of Haiti must move towards a safer future.
## ERU* deployments (as of 10 February 2010)

<table>
<thead>
<tr>
<th>ERU Type</th>
<th>Number of Personnel</th>
<th>National Societies</th>
<th>Working location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Field Hospital</td>
<td>53</td>
<td>German Red Cross/Finnish Red Cross</td>
<td>Carrefour</td>
</tr>
<tr>
<td>Rapid Deployment Hospital</td>
<td>30</td>
<td>Norwegian Red Cross/Canadian Red Cross/Magen David Adom (Israel)</td>
<td>Port-au-Prince, Jacmel</td>
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<tr>
<td>Basic Health Care (Fixed)</td>
<td>16</td>
<td>Japanese Red Cross</td>
<td>Port-au-Prince</td>
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<tr>
<td>Basic Health Care (Mobile)</td>
<td>18</td>
<td>Finnish Red Cross/French Red Cross/Swedish Red Cross</td>
<td>Port-au-Prince</td>
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<td>Basic Health Care (Mobile)</td>
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<td>German Red Cross/Swiss Red Cross</td>
<td>Port-au-Prince</td>
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<tr>
<td>Basic Health Care (Mobile)</td>
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<td>French Red Cross/Qatari Red Crescent</td>
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<tr>
<td>Relief/Shelter</td>
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<td>American Red Cross</td>
<td>Port-au-Prince</td>
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<tr>
<td>Relief/Shelter</td>
<td>6</td>
<td>Belgian Red Cross/Luxembourg Red Cross/French Red Cross</td>
<td>Port-au-Prince, Sant-Domingo</td>
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<tr>
<td>Logistics</td>
<td>6</td>
<td>British Red Cross/Spanish Red Cross</td>
<td>Santo Domingo</td>
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<tr>
<td>Logistics</td>
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<td>Swiss Red Cross</td>
<td>Port-au-Prince</td>
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<tr>
<td>Water and Sanitation</td>
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<td>French Red Cross</td>
<td>Léogane/Petit Gave</td>
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<td>IT/Telecom</td>
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<td>IT/Telecom</td>
<td>5</td>
<td>Danish Red Cross</td>
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<tr>
<td>Mass Sanitation</td>
<td>7</td>
<td>Austrian Red Cross</td>
<td>Léogane</td>
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<tr>
<td>Mass Sanitation</td>
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<tr>
<td>Base Camp</td>
<td>14</td>
<td>Italian Red Cross</td>
<td>Port-au-Prince</td>
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<tr>
<td>Base Camp</td>
<td>7</td>
<td>Danish Red Cross</td>
<td>Port-au-Prince</td>
</tr>
</tbody>
</table>

21 ERUs 232 16 National Societies

*ERU = Emergency Response Unit

ERU’s are pre-trained teams of specialists, provided by Red Cross and Red Crescent Societies from around the world. They are specialized in fields such as relief distribution and shelter, logistics, basic health care, field hospitals, water and sanitation (including producing water for hospitals), telecommunications, base camps (to house Red Cross and Red Crescent delegates), etc. These teams of experts have pre-packed sets of standardized equipment ready for immediate use in emergencies. They are meant to fill the gaps created by an emergency, destruction of medical structures, of water mains, until recovery or reconstruction can be carried out. The units are self-sufficient and can stay up to four months in the affected country.
**FACT** composition (as of 9 February 2010) –
*all are working in Port-au-Prince*

<table>
<thead>
<tr>
<th>Function</th>
<th>National Society</th>
</tr>
</thead>
<tbody>
<tr>
<td>Team Leader</td>
<td>IFRC</td>
</tr>
<tr>
<td>Deputy Team Leader- Operations</td>
<td>Spanish Red Cross</td>
</tr>
<tr>
<td>Deputy Team Leader- Support Services</td>
<td>British Red Cross</td>
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<tr>
<td>Reporting</td>
<td>IFRC</td>
</tr>
<tr>
<td>Relief Coordinator</td>
<td>IFRC</td>
</tr>
<tr>
<td>Health Coordinator</td>
<td>Norwegian Red Cross</td>
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<tr>
<td>Water and Sanitation Coordinator</td>
<td>British Red Cross</td>
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<td>Shelter</td>
<td>Swiss Red Cross</td>
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<tr>
<td>Recovery</td>
<td>British Red Cross</td>
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<td>Movement Coordinator</td>
<td>Norwegian Red Cross</td>
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<td>Reporting</td>
<td>IFRC</td>
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<td>IT and Information Management</td>
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<td>Delegates’ health</td>
<td>IFRC / Finnish Red Cross</td>
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<tr>
<td>Finance</td>
<td>Icelandic Red Cross</td>
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<td>Logistics Coordinator</td>
<td>IFRC / American Red Cross</td>
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<td>IFRC / American Red Cross</td>
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<td>Security</td>
<td>IFRC</td>
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<tr>
<td>Senior Administrator</td>
<td>Danish Red Cross</td>
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</tbody>
</table>

*FACT = Field Assessment and Coordination Team*

FACT teams are deployed in the very first hours following a disaster, at the request of the National Society in the affected country. They are composed of personnel provided by Red Cross and Red Crescent Societies from around the world or by the IFRC, who are experts in different fields, such as relief coordination, logistics, health, nutrition, public health and epidemiology, water and sanitation, finance, administration, psychological support, administration, reporting and communications. They are usually deployed for two to four weeks.
## Additional National Society deployments

<table>
<thead>
<tr>
<th>National Society</th>
<th>Main Activity in Haiti</th>
<th>Working Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Colombian Red Cross</td>
<td>Water Distribution for Hospital Hygiene Promotion Relief Distribution Medical personnel</td>
<td>Port-au-Prince Carrefour Jacmel</td>
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<td>Croatian Red Cross</td>
<td>Mass Sanitation</td>
<td>Léogâne</td>
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<td>Dominican Republic Red Cross</td>
<td>Relief Distribution Water Health</td>
<td>Port-au-Prince Quoi de Bouquet Jacmel</td>
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<td>Grenada Red Cross</td>
<td>Reporting Administration</td>
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<tr>
<td>Iranian Red Crescent</td>
<td>Relief and medical teams Relief Distribution Mobile Clinics</td>
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<td>Irish Red Cross</td>
<td>Beneficiary Communications</td>
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<td>South Korean Red Cross</td>
<td>Mass Vaccination Hospital Personnel</td>
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<td>Turkish Red Crescent</td>
<td>Relief Distribution</td>
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</table>

*Additional National Society deployments as of February 2010*
Humanity
The International Red Cross and Red Crescent Movement, born of a desire to bring assistance without discrimination to the wounded on the battlefield, endeavours, in its international and national capacity, to prevent and alleviate human suffering wherever it may be found. Its purpose is to protect life and health and to ensure respect for the human being. It promotes mutual understanding, friendship, cooperation and lasting peace amongst all peoples.

Impartiality
It makes no discrimination as to nationality, race, religious beliefs, class or political opinions. It endeavours to relieve the suffering of individuals, being guided solely by their needs, and to give priority to the most urgent cases of distress.

Neutrality
In order to enjoy the confidence of all, the Movement may not take sides in hostilities or engage at any time in controversies of a political, racial, religious or ideological nature.

Independence
The Movement is independent. The National Societies, while auxiliaries in the humanitarian services of their governments and subject to the laws of their respective countries, must always maintain their autonomy so that they may be able at all times to act in accordance with the principles of the Movement.

Voluntary service
It is a voluntary relief movement not prompted in any manner by desire for gain.

Unity
There can be only one Red Cross or Red Crescent Society in any one country. It must be open to all. It must carry on its humanitarian work throughout its territory.

Universality
The International Red Cross and Red Crescent Movement, in which all societies have equal status and share equal responsibilities and duties in helping each other, is worldwide.
Haiti: *from tragedy to opportunity*

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The International Federation of Red Cross and Red Crescent Societies promotes the humanitarian activities of National Societies among vulnerable people.

By coordinating international disaster relief and encouraging development support it seeks to prevent and alleviate human suffering.

The International Federation, the National Societies and the International Committee of the Red Cross together constitute the International Red Cross and Red Crescent Movement.