

Part III
ANNEXES

Annex 1

EXTERNAL AGENCIES PROVIDING HEALTH RELIEF

Every country is a potential source of health relief for some other disaster-stricken nation. Bilateral assistance, whether in personnel, supplies, or cash, is probably the most important source of external aid. Several intergovernmental or regional agencies have established special funds, procedures and offices to provide emergency assistance.

This annex uses selected examples to illustrate the broad variety of extranational agencies that provide health assistance after natural disasters. Because the list is short, not all experienced and dedicated agencies providing valuable emergency assistance are included in it.

United Nations Agencies

United Nations Disaster Relief Office (UNDRO)

On 14 December 1971, the United Nations General Assembly established the Office of the United Nations Disaster Relief Coordinator.

UNDRO's responsibilities after disaster are, as set out in the Resolution, to: (1) furnish precise information as to relief requirements; (2) mobilize and coordinate disaster relief from United Nations agencies and the international community in general in response to a request for assistance from the stricken state; (3) maintain a clearing house in Geneva to exchange information and match needs with supplies and services from donor sources; and (4) make advance arrangements for emergency assistance which donor countries and organizations are prepared to furnish.

By agreement with UNDRO, United Nations Development Program (UNDP) Resident Representatives also represent UNDRO in individual countries. They provide a channel for requests from governments in all disaster-related matters. When a disaster strikes and with assistance as necessary from staff dispatched by UNDRO, they lead the United Nations team in assessing emergency needs and locally coordinating aid from the United Nations system and other international sources. UNDP can also furnish some financial aid in emergencies and, if necessary, adapt its country development programs to rehabilitation and reconstruction needs.

World Health Organization (WHO)

WHO is responsible for coordinating international health action. The Pan American Health Organization (PAHO) and other WHO regional offices act as focal points for national health authorities and donors after disasters in their respective areas.

WHO can provide technical cooperation in assessing health-related needs, coordinating international health assistance, inventorying health relief supplies, carrying out epidemiologic surveillance and disease control measures, assessing environmental health, managing health services, formulating cost estimates and relief projects, and procuring relief supplies.

WHO and its regional offices can provide limited material assistance by reprogramming country development activities or from other sources.

United Nations Children's Fund (UNICEF)

UNICEF assists programs in most developing countries for the health, education, and welfare of children and mothers. These activities employ materials that can usefully be diverted to meet emergencies in disaster areas or can be drawn from an emergency stockpile in the UNICEF warehouse at Copenhagen. The Executive Director of UNICEF has a substantial cash reserve at his disposal for rapid use in emergencies and can divert funds from regular programs to emergency operations with the agreement of the government concerned. In consequence, though UNICEF's main interest after a disaster is the medium-term restoration and long-term development of services to children and mothers, it is geared to provide substantial emergency assistance for those vulnerable groups. It can also procure relief supplies on behalf of UNDRO, other United Nations agencies, and other relief organizations. UNICEF coordinates its health activities closely with WHO.

World Food Program (WFP)

WFP furnishes large amounts of foodstuffs in support of economic and social development projects in developing countries. In addition, it has substantial resources with which to meet emergency food needs, some of which can often be furnished from project food stocks already in a disaster-stricken country. WFP also purchases and ships food needed in emergencies on behalf of donor governments, UNDRO, or stricken countries themselves, and its field staff can help coordinate the receipt and use of food aid from all sources. WFP cooperates closely with WHO in the nutritional monitoring of emergencies.

Food and Agriculture Organization (FAO)

FAO provides technical cooperation and promotes investment in long-term agricultural development. It also tries to prevent food shortages in the event of widespread crop failures or disasters. The Director General has at his disposal a ready source of food aid in the commodities pledged to WFP for his use in emergencies. In both relief and short-term rehabilitation operations, FAO specialists help assess needs in the agricultural and food sectors and prevent animal diseases.

Intergovernmental Organizations

Organization of American States (OAS)

OAS operates the Inter-American Fund for Assistance in Emergency Situations (FONDEM), which is administered by a committee of representatives from OAS, the Inter-American Development Bank, and PAHO. Subject to the availability of voluntarily contributed funds, FONDEM provides food, medical supplies, and other relief to member states affected by disaster.

European Economic Community (EEC)

EEC has set aside more than \$280 million for emergency aid over five years for the African-Caribbean-Pacific (ACP) countries that signed the Lomé II Convention in 1980. Sixty million dollars from the Community's general budget were allocated in 1979 for disaster relief in other countries. EEC assistance is divided into (1) life-saving assistance to be used shortly after the signing of financing agreements for relief goods such as medical supplies, water treatment equipment, tents, blankets, or food bought locally or from EEC countries; (2)

rehabilitation funds, mostly to restore social and economic activities to normal by providing such things as insecticides, fertilizers, fuel, and vehicles and spare parts; and (3) in addition, emergency food aid in the form of cereals, milk powder, and butter oil which can be donated to populations affected by disasters.

Nongovernmental Organizations

League of Red Cross Societies

The League, headquartered in Geneva, is a world federation of 126 national Red Cross, Red Crescent, and Red Lion and Sun societies. It coordinates relief operations internationally and operates within an affected country through the member national society or its own staff if no local society exists. The League obtains cash donations and specific emergency items through international appeals and donates them through the national society.

Assistance provided by the League or national societies consists of food, shelter, medical supplies, volunteer workers, and in some cases self-supporting field hospitals and medical teams. Its long experience and considerable flexibility and resources make it a most valuable nongovernmental source of support and cooperation with the health sector.

International Committee of the Red Cross (ICRC)

ICRC is a private and strictly neutral Swiss organization whose basic concern is people affected by war and civil conflicts. If a natural disaster should befall war refugees, for example, ICRC can provide aid in kind and services, particularly nutritional and medical assistance.

CARE (Cooperative for American Relief Everywhere)

CARE, whose headquarters is in New York, provides emergency relief in the form of food, hand tools, and similar goods to disaster-affected communities. Its postdisaster projects include rehabilitation of water supply systems, rebuilding houses, and provision of basic sanitary or health facilities. MEDICO, an affiliate, maintains health-care and training teams in 10 countries. CARE's policy is to cooperate closely with and respond to requests from government authorities.

CARITAS International

This organization, more formally known as the International Confederation of Catholic Charities, is a federation of national CARITAS organizations in 91 countries. CARITAS International stimulates, coordinates, and supports the relief activities of its member societies.

Catholic Relief Services (CRS)

CRS, an American organization, responds rapidly to emergencies by providing food, clothing, medical supplies, and shelter. Assistance is coordinated with the national CARITAS organization and the local Catholic clergy. CRS employs health professionals such as public health advisers and nutritionists who work closely with national health authorities.

Lutheran World Relief Federation (LWR)

LWR represents Lutheran churches of various denominations in the United States. It can provide assistance in kind following disasters as well as loans for longer-term reconstruction.

rehabilitation funds, mostly to restore social and economic activities to normal by providing such things as insecticides, fertilizers, fuel, and vehicles and spare parts; and (3) in addition, emergency food aid in the form of cereals, milk powder, and butter oil which can be donated to populations affected by disasters.

Nongovernmental Organizations

League of Red Cross Societies

The League, headquartered in Geneva, is a world federation of 126 national Red Cross, Red Crescent, and Red Lion and Sun societies. It coordinates relief operations internationally and operates within an affected country through the member national society or its own staff if no local society exists. The League obtains cash donations and specific emergency items through international appeals and donates them through the national society.

Assistance provided by the League or national societies consists of food, shelter, medical supplies, volunteer workers, and in some cases self-supporting field hospitals and medical teams. Its long experience and considerable flexibility and resources make it a most valuable nongovernmental source of support and cooperation with the health sector.

International Committee of the Red Cross (ICRC)

ICRC is a private and strictly neutral Swiss organization whose basic concern is people affected by war and civil conflicts. If a natural disaster should befall war refugees, for example, ICRC can provide aid in kind and services, particularly nutritional and medical assistance.

CARE (Cooperative for American Relief Everywhere)

CARE, whose headquarters is in New York, provides emergency relief in the form of food, hand tools, and similar goods to disaster-affected communities. Its postdisaster projects include rehabilitation of water supply systems, rebuilding houses, and provision of basic sanitary or health facilities. MEDICO, an affiliate, maintains health-care and training teams in 10 countries. CARE's policy is to cooperate closely with and respond to requests from government authorities.

CARITAS International

This organization, more formally known as the International Confederation of Catholic Charities, is a federation of national CARITAS organizations in 91 countries. CARITAS International stimulates, coordinates, and supports the relief activities of its member societies.

Catholic Relief Services (CRS)

CRS, an American organization, responds rapidly to emergencies by providing food, clothing, medical supplies, and shelter. Assistance is coordinated with the national CARITAS organization and the local Catholic clergy. CRS employs health professionals such as public health advisers and nutritionists who work closely with national health authorities.

Lutheran World Relief Federation (LWR)

LWR represents Lutheran churches of various denominations in the United States. It can provide assistance in kind following disasters as well as loans for longer-term reconstruction.

Annex 2

BIBLIOGRAPHY

Ahearn, F., and B. R. Castellón. Problemas de salud mental después de una situación de desastre. *Boletín de la Oficina Sanitaria Panamericana* 85(1):1-15 (1978).

Berenson, A. S. (ed.) *Control of Communicable Diseases in Man*. 12th ed. Washington, American Public Health Association, 1980.

de Ville de Goyet, C., et al. Earthquake in Guatemala: epidemiologic evaluation of the relief effort. *Bulletin of the Pan American Health Organization* 10(2):95-109 (1976).

Glass, R. I., et al. Earthquake injuries related to housing in a Guatemalan village. *Science* 197:638-43 (1977).

Gurd, C. H., et al. The health management of Cyclone Tracy. *Medical Journal of Australia* 1:641-44 (1975).

Mason, J., and P. Cavalié. Malaria epidemic in Haiti following a hurricane. *American Journal of Tropical Medicine and Hygiene* 4(4):1-10 (1965).

Manning, D. *Disaster Technology: An Annotated Bibliography*. Oxford, Pergamon Press, 1975.

Romero, A., et al. Some epidemiologic features of disasters in Guatemala. *Disasters* 2:39-46 (1978).

Savage, P. E. *Disasters and Hospital Planning: A Manual for Doctors, Nurses and Administrators*. Oxford, Pergamon Press, 1979.

Somner, A., and W. H. Mosley. West Bengal cyclone of November 1970. *Lancet* I:1029-36 (1972).

The Treatment and Prevention of Diarrhoeal Disease. Geneva, World Health Organization, 1976.

Western, K. *The Epidemiology of Natural and Man-Made Disasters; the Present State of the Art*. Dissertation for the Academic Diploma in Tropical Public Health, London School of Hygiene and Tropical Medicine, University of London (1972).

Whittaker, R., et al. Earthquake disaster in Nicaragua: reflections on the initial management of massive casualties. *Journal of Trauma* 14(1):37-43 (1974).



PAN AMERICAN HEALTH ORGANIZATION

PAN AMERICAN SANITARY BUREAU • REGIONAL OFFICE OF THE
WORLD HEALTH ORGANIZATION

Price: US\$6.00