

Deployment to Haiti Following Hurricane

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Rusted metal hospital bed frames, piles of mud-covered debris, water lines on the walls reaching upwards of eight feet—these are all images encountered during a surveillance of La Providence Hospital in Gonaïves, Haiti. Hurricane Jeanne ravaged the Caribbean and inflicted severe damage to the 200,000 inhabitants of Gonaïves. The treacherous storm left in its aftermath thousands of people dead or missing, leveled buildings, and mental and physical repercussions that will be felt for months to come. Dr. Mireille Kanda, Deputy Director of the National Center on Minority Health and Health Disparities, and I were asked to perform a rapid assessment of the departmental hospital in Gonaïves, which suffered extensive damage due to the destructive path of Hurricane Jeanne on 18 September 2004. As representatives of the Department of Health and Human Services (HHS), we utilized our French- and Creole-speaking skills as well as backgrounds in providing health care to vulnerable populations to perform our mandate.

Our mission began on 3 October upon arriving in Port au Prince, Haiti, as we met with HHS Secretary, Tommy Thompson, in addition to the U.S. Ambassador to Haiti, representatives from the Centers for Disease Control and Prevention (CDC) and the U.S. Agency for International Development, the Haitian Minister of Health, Dr. Josette Bijoux, and other key parties, to obtain a briefing on the current state of health-related disaster relief efforts. After Secretary Thompson's departure, Dr. Kanda and I were left to confer with various stakeholders in the relief efforts and begin our evaluation of the hospital.

While in Port au Prince, we were able to gain further insight into both the political situation as well as disaster relief measures by talking with several important actors. Mr. Matthew Brown, Country Director for the CDC Global AIDS Program in Haiti, was instrumental in providing an on-the-ground perspective of the situation. Dr. Kanda and I proceeded to gather additional information by consulting with the Haitian Ministry of Health, the president of the Haitian Red Cross, epidemiologists and engineers from the Pan American Health Organization/World Health Organization (PAHO/WHO), and physicians from CDC who had gotten a first-hand look at the extent of the destruction. During our mission, we quickly discovered that arranging meetings and traveling in general from point to point were time-consuming tasks. The Haitian capital of Port au Prince is a network of narrow intersecting streets for which vehicles, pedestrians, and animals at times, competed. The drive from the hotel at which we stayed to the CDC offices could last anywhere from 15 minutes to well over an hour, depending on the time of day. Along the sidewalks were people selling anything from clothes and art to fruits. Dispersed among the trees sprinkling the hillsides of Port au Prince were houses packed tightly together so as not to waste any potential

space. To maneuver about the city, we always traveled with a driver who was adept in navigating the roads.

We attempted a trip to Gonaïves that was thwarted due to the mobilization of United Nations troops to address some unrest in the city. On 7 October, we were finally able to leave. Dr. Yves-Marie Bernard of CDC, Celibon, our driver, Dr. Kanda, and I convened at the rendezvous point to travel with the United Nations convoy to Gonaïves. Taking the lead of the convoy were Brazilian troops, followed by a few other vehicles including ours, and several trucks transporting food from the World Food Program. The route to Gonaïves took us northward partially along the coastline. The 4 to 5 hour journey took almost 10 hours as part of the convoy, along miles of unimproved roads at times. Upon arriving at the entrance of Gonaïves, we encountered a newly-formed lake in the region called the Savanne Désolée, which was previously dry. This lake, a result of the massive flooding from Hurricane Jeanne, was at a minimum a few feet deep and quite expansive. As we began to traverse the lake the sun descended in the sky and we soon found ourselves surrounded by darkness, with only a few intermittent lights to mark the way. Our Toyota Highlander seemed to be trekking along well until the motor cut off and water began to rise in the vehicle, finally stopping at the level of the seat. Mosquitoes swarmed around us as we hurried to lift any valuables up to prevent them from getting wet. Celibon waded into the water to further examine the situation and Dr. Bernard installed himself on the roof to have a bird's eye view. Eventually we were able to hook our vehicle to one of the larger food trucks to pull us out, but found that the motor no longer started. We were towed into Gonaïves, and were reminded each time with a jarring jolt that the truck towing us started or stopped.

The following morning, Dr. Kanda and I met with several local stakeholders including Dr. Wedner Pierre, the Director of the Health Department for the Artibonite Region; the Hospital Administrator Mr. G.E. Honorat; the Hospital Director, Dr. Paul St. Gilles; the Hospital Medical Director, Dr. Jode Pierre; and Dr. Neyde Garrido, the local PAHO coordinator. We witnessed first-hand the scope of damage that Hurricane Jeanne caused to the area and to the hospital in particular. The 165-bed La Providence Hospital, built around 1915, was the main reference hospital for the entire Artibonite region. Even with the limited ambulance services that were available, patients needing comprehensive emergency care had to be transported through the newly-formed lake and along bumpy roads to hospitals that were at least 24 miles away. Cleanup efforts were already underway although it was evident from even a cursory look that the restoration efforts would take months. The hospital buildings were still surrounded with a considerable amount of mud. The edifices sustained a prolonged insult by the mix of floodwaters, debris, waste, and excrement brought on by the whirling storm. Although a few of the operating suites were spared serious damage, the pharmacy, which supplied the region, was completely destroyed. Even more than a week after the hurricane hit, mud was piled several feet deep and all materials in the pharmacy were ruined. It was clear that this physical damage was devastating; however, as important was the psychological trauma that inhabitants of the region incurred from the loss of their homes, livelihoods, and fellow

citizens.

The national and international response to the health care needs of the Gonaïves population subsequent to the floods was swift, and temporary centers for health care were rapidly established. Epidemiological surveillance was set up to identify and respond to any emerging epidemics as well as monitor the endemic diseases of the area such as malaria. Thus, the immediate health care needs of the population had been identified and acted upon. The longer-term challenge was to devise and implement a plan for the provision of health care to the people of Gonaïves and the Artibonite Region. With this understanding, Dr. Kanda and I returned to United States on 9 October to compile our information and formulate a report. With the input of several collaborative Operating Divisions within HHS and the U.S. government, our recommendations for potential action were submitted.

Reflecting on this first deployment with the Office of Force Readiness and Deployment, I felt a mix of emotions. It was an honor to be asked to perform this duty, and I feel fortunate to have the opportunity to represent the U.S. Public Health Service Commissioned Corps, the profession of pharmacy, and my particular institution. While the health needs of the Gonaïves population are substantial, I hope that my actions can help to contribute to a beneficial outcome in this matter. Despite the widespread devastation and somewhat tumultuous political situation, I encountered a multitude of people who were very welcoming and helpful. Being able to witness a glimpse into the lives of the Gonaïves inhabitants and overall Haitian population as well allowed me to reflect on the appreciation I should have for the blessings that I have received and the power of the human spirit that can transcend even the most difficult situations.