

Hurricane Emergency Response Plan

The Directorate for Civil Protection (DPC)
Port-au-Prince, Haiti



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Preface

Haiti is the poorest country in the Western Hemisphere, with a population of over 11 million people. In 2021, Haiti had a GDP per capita of US \$1,815, less than one-fifth of the Latin America and Caribbean (LAC) Region's average of US \$15,092.¹ On the UN's Human Development Index, Haiti ranked 170 out of 189 countries in 2020.¹ Additionally, from 2010 through 2021, Haiti reported a Gini Coefficient of 0.41, indicating a high rate of income inequality.² A significant contributing factor to this disparity is Haiti's divide between urban and rural areas. With over two-thirds of the poor residing in rural regions that often lack adequate conditions for agricultural production, income and other disparities between these areas persist.¹ Poverty has further been exacerbated in Haiti due to severe economic contraction over the past three consecutive years during the COVID pandemic. Any previous gains in poverty reduction have been lost, increasing an estimated 30.32% when using the extreme poverty line (\$2.15/day).¹ According to the World Bank, Haiti's development and economy continues to be adversely impacted by ongoing political instability, unceasing gang violence (fighting for control of the business districts), and fragile civil infrastructure.¹ The provision of even minimal public services are hampered by the lack of funds, poor and corrupt governance, economic instability, and ongoing violence, including violence against hospitals, healthcare workers, and emergency response and aid workers.

This poor economic backdrop only exacerbates Haiti's extreme vulnerability to natural disasters. Haiti ranks among the most vulnerable countries worldwide to natural hazards, particularly hurricanes, floods, and earthquakes, with more than 96% of the population at risk of these disasters.¹ Haiti's geographic location in the Caribbean and position in the Atlantic hurricane belt, make the country highly prone to hurricanes, especially between June and December.³ Warm waters and favorable atmospheric conditions in the area often lead to the formation and intensification of hurricanes.³ Hurricanes in the Atlantic Ocean typically move east to west, often placing Haiti in their direct path. When not directly affected, Haiti's location makes it more susceptible to experiencing hurricane outer bands, resulting in high winds, storm surges, heavy rainfall, and flooding.³ Haiti's topography also exacerbates the impact of hurricanes and threats to its populations as its mountainous terrain and valleys increase the risk of landslides, flash floods, and increased runoff during hurricanes. The use of charcoal from burned trees to provide energy as a cost-effective alternative to oil has led to the majority of Haiti's forests being cleared. These forests promoted survival during severe rainstorms by limiting flooding, but as less than 1% of Haiti's original forests remain, occurrences of flooding during hurricanes and periods of heavy rainfall have become more frequent.⁴

Recent large-scale natural disasters have left Haiti's already poor infrastructure crumbling and in disarray. One of the most recent devastating disasters in Haiti occurred on August 14, 2021, when an earthquake measuring magnitude 7.2 on the Richter scale, struck the southern region of Haiti, impacting approximately 1.6 million people.¹ The earthquake resulted in almost 213,000 injuries and 2,246 deaths.¹ Poorly constructed and substandard buildings and lack of enforcement of even rudimentary building codes, caused many structures and buildings to be destroyed. According to the World Bank, almost 84% of all public buildings including schools,

health facilities, and government buildings, and 54,000 homes were decimated.¹ A post-disaster needs assessment (PDNA) determined that the 2021 earthquake resulted in an estimated US \$1.6 billion in damages and losses, equivalent to 11% of Haiti's GDP.¹ This region had previously been impacted by Hurricane Matthew in 2016, which caused losses and damages estimated at 13% of the 2015 GDP, as well as by the devastating 2010 earthquake that claimed around 250,000 lives and caused a 67% reduction in the country's GDP.¹

The ongoing devastation from these naturally occurring disasters, caused in part by human activity such as deforestation for cheap sources of fuel, is leading to the further deterioration in the health and quality of life of the Haitian people. Infant and maternal mortality remain at high levels, and implementation of basic public health prevention interventions are stagnating or declining, especially for the poorest households. Public health and healthcare programs, led in part, by organizations such as Partners In Health have been adversely affected by ongoing political instability and violence targeting aid and response workers.⁵ In recent months, for example, new outbreaks of cholera have been identified including cases in the heavily populated capital cities.⁶ The re-emergence of cholera infections is a constant concern for Haiti as sanitation infrastructure is frequently disrupted during hurricanes and other natural disasters.^{7,9}

In addition to the factors mentioned previously, climate change is expected to greatly impact Haiti's vulnerability to natural disasters with increases in the frequency, intensity, and impacts of extreme weather events predicted in the near future.⁸ The country still lacks adequate preparedness and resilience-building mechanisms and without much-needed updates to its infrastructure and resource coordination, Haiti will continue to suffer serious losses due to hurricane disasters.

Signature Page

I have read and reviewed the following Hurricane Emergency Response Plan. By signing below, I approve adopting and implementing the Hurricane Emergency Response Plan in Port-au-Prince, Haiti.

Jerry Chandler, Director General of Direction
Generale de la Protection Civile

Date

Permanent Secretariat for Risk and Disaster Management.

Date

Assistant General, Direction Generale de la Protection Civile

Date

Director, Ministry of the Interior and Local Authorities (MICT)

Date

Mission Statement

The mission of The Directorate for Civil Protection (DPC) is to coordinate scientific and technical research that will aid Haiti's disaster preparedness and post-disaster response. Under the direction of The Ministry of the Interior, the DPC is tasked with coordinating and monitoring all disaster response actions by governmental and non-governmental organizations in affected areas. The responsibility of assessing losses and damages also falls under the DPC purview.

Statement of Purpose

The purpose of this plan is to establish an integrated and proactive approach to hurricane disaster management in Port-au-Prince, Haiti. This plan provides an outline of key authorities, organizations, and the methods of communication necessary to prepare and respond to properly hurricanes to reduce the loss of life and property.

Authorities

UN Disaster Assessment and Coordination (UNDAC): Can deploy on short notice (12-48 hrs.) anywhere in the world and is part of the international emergency response system for sudden-onset emergencies. UNDAC responds during the first phase of sudden-onset emergencies.

Caribbean Disaster Emergency Management Agency (CDEMA): A regional inter-governmental agency for disaster management in the Caribbean Community (CARICOM) with the primary responsibility of coordinating emergency response and relief efforts to Participating States.

Caribbean Disaster Relief (CDRU): The main tasks of the CDRU include the management of relief supplies, emergency telecommunications support, and identifying appropriate personnel for repairing critical lifeline facilities.

Regional Disaster Response Team (RRT): Developed by WHO/PAHO comprises public health experts in health services, epidemiology, water/ sanitation, mental health, and health information. RRT can establish an emergency operations center and work with national authorities to coordinate the overall health response.

UN Development Program (UNDP): Provides early recovery efforts.

USAID Disaster Assistance Response Team (DART): Deployed during the first phase of a hazard or disaster to head up search and rescue efforts.

Rapid Needs Assessment Team (RANT): Deployed within the first 2-3 days after the impact of the hazard and is responsible for an initial damage report and assessment of humanitarian needs.

International Organization for Migration (IOM): Partners with local officials to provide emergency shelter and non-food items during disasters, medical kits, and consultations.

Food and Agriculture Organization (FAO): Assists with agriculture.

Educare Haiti: A non-profit organization based in Haiti that responds immediately to disasters and consists of a team of doctors, and medical students who aid in phase 1 and phase 2 of a disaster.

U.S. Military and Haitian Military: Respond immediately to disasters and coordinate joint efforts in all stages of disaster response.

Definitions

Hurricane: a tropical cyclone with winds of 74 miles (119 kilometers) per hour or greater that is usually accompanied by rain, thunder, and lightning, and that sometimes moves into temperate latitudes.

Epidemics after Natural Disasters: Natural disasters, particularly meteorologic events such as cyclones, hurricanes, and flooding, can affect vector-breeding sites and mosquito-borne disease transmission. Cholera and dengue fever have emerged in Haiti as a result of recent natural disasters.

Disaster response: Disaster response is the second phase of the disaster management cycle. It consists of several elements, for example, warning/evacuation, search and rescue, providing immediate assistance, assessing damage, continuing assistance, and the immediate restoration or construction of infrastructure.

Disaster risk governance: The system of institutions, mechanisms, policy and legal frameworks and other arrangements to guide, coordinate and oversee disaster risk reduction and related areas of policy.

Cholera: Cholera is an acute diarrhoeal infection caused by ingestion of food or water contaminated with the bacterium *Vibrio cholerae*. Cholera remains a global threat to public health and an indicator of inequity and lack of social development.

Communication Plans

United Nations: The United Nations (UN) has a significant presence in Haiti and coordinates various activities related to humanitarian aid, development, and disaster response. The UN uses various communication technologies to facilitate communication among the different agencies and with the affected populations. For example, the UN established an Emergency Telecommunications Cluster (ETC) in Haiti to provide communication services such as satellite phones, radios, and internet-based platforms to the agencies involved in the response efforts.

Government of Haiti: The government of Haiti is responsible for coordinating the response efforts and ensuring effective communication among the different agencies involved. The government uses various communication channels such as radio, television, and social media to disseminate information to the affected populations. The government also works closely with the UN and other international organizations to coordinate the response efforts.

Non-Governmental Organizations (NGOs): Various NGOs operate in Haiti and are involved in humanitarian aid, development, and disaster response. These NGOs use various communication technologies such as radios, mobile phones, and the Internet to communicate with each other and with the affected populations. The NGOs also work closely with the UN and the government of Haiti to coordinate their activities.

International Organizations: Various organizations operate in Haiti, including the International Red Cross, Doctors Without Borders, and the World Health Organization. These organizations use various communication technologies to facilitate communication among themselves and with the government of Haiti and the UN. For example, the International Red Cross established a radio station in Haiti to disseminate information to the affected populations.

Mutual Aid Agreement

The DPC coordinates disaster operations once the Centre d'Opérations d'Urgence (COU) is activated by the Minister of the Interior. National and regional coordination of the following governmental and nongovernmental organizations (NGOs) will be overseen by the permanent secretariat for risk and disaster management. The provision of life-saving resources to Haitian residents and visitors including water, food, first aid, and shelter will be organized and distributed through these partnerships.

- Haitian Red Cross
- Caribbean Disaster Emergency Management Agency (CDEMA)
- United Nations Children's Fund (UNICEF)
- UN Disaster Assessment and Coordination (UNDAC)
- World Bank
- UN Development Program (UNDP)
- United States Agency for International Development (USAID)
- Federal Emergency Management Agency (FEMA)

Threat and Hazards Assessment Table

Natural	Technological	Human-caused
Resulting from acts of nature	Involves accidents or the failures of systems and structures	Caused by the intentional actions of an adversary
<ul style="list-style-type: none"> <p>Floods</p> <p>The country's topography, lacking infrastructure, and precipitation patterns influence its risk for flooding. Between 1980 and 2020, the country experienced an average of 57 floods annually.¹</p> <p>Hurricanes</p> <p>Haiti is located within the hurricane belt making it prone to many storms throughout the hurricane season. In 2016, Hurricane Matthew devastated the country as a category 4 hurricane, leaving 1.4 million people in need of humanitarian assistance because of landslides, flooding, and destroyed infrastructure.²</p> <p>Earthquakes</p> <p>Haiti is located between the North American and Caribbean tectonic plates. It sits along two major fault lines, leaving the country extremely susceptible to earthquakes. The 2010 earthquake killed 222,000 thousand people. Researchers have warned that the seismically active Enriquillo fault system may cause more devastating earthquakes in the future.³</p> <p>Epidemics</p> <p>Poor sanitation and water supply networks after large-scale natural disasters such as the 2010 earthquake have left the country vulnerable to the spread of infectious diseases such as cholera, malaria, and dengue fever. The cholera epidemic that lasted from October 2010 to February 2019 led to 820,000 cases and caused over 9,000 deaths. Recent civil unrest has resulted in a re-emergence of the disease with 20,000 cases reported as of January 2023.⁴</p> 	<ul style="list-style-type: none"> <p>Neglected Infrastructure</p> <p>Haiti's urban areas are particularly fragile due to insufficient urban planning and a lack of building codes. Almost 200,000 buildings were destroyed during the 2010 earthquake because of poor construction methods. Earthquake and storm-resistant construction could prevent death and destruction in the country's major cities.</p> 	<ul style="list-style-type: none"> <p>Violent Crime</p> <p>Safety and security have declined within the country in the past 5 years. Rival gangs have taken over many neighborhoods in Port-Au-Prince, the country's capital. Over 200 gangs are operating throughout the country leading to high rates of murder, injuries, and kidnapping. Control tactics employed by gangs to harm the local populations include denying access to drinking water and medical care.⁵</p> <p>Sexual Violence</p> <p>Rival gangs have used sexual violence against women and children to punish those residing inside gang territory. According to the UNFPA, gender-based violence increased by 377 percent in 2021.</p>

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Concept of Operation (CONOPS)

Assessing the Needs of Hurricane-Affected Population

The initial process will be conducted by monitoring all hurricane threats and properly issuing weather alerts. The Hurricane evacuation plan will be implemented to focus on the most vulnerable areas first. These vulnerable areas are identified as any heavily populated area located near a coastal plain, flood plain, or watershed. Prior to the hurricane's landfall citizens and tourists in vulnerable areas will be directed to the nearest shelter. The people who are unable to safely evacuate will utilize last-minute emergency measures that will be communicated using multiple communication channels. Once the hurricane makes landfall a shelter-in-place will be issued for all citizens. All major roads will be closed and only passable for emergency service vehicles. Once the hurricane passes, a damage assessment will be conducted, and search & rescue teams will be deployed. An EOC (Emergency Operations Center) will be operational at the designated centralized location. Red Cross staff and volunteers will provide emergency shelter support, assist with food, water distribution, and perform recovery efforts alongside local authorities and other organizations, (American Red Cross). Healthcare facilities in the area will be under great strain. The American Red Cross and The International Federation of Red Cross and Red Crescent Societies (IFRC) will send in medical teams and supplies to aid those in need of medical care. The IFRC prepositions disaster responders on the ground, (American Red Cross). These two organizations will send ahead of the event tons of aid, such as shelter toolkits, tarps, buckets, jerrycans, kitchen supplies, blankets, personal protection equipment (PPE), and mosquito nets, (American Red Cross). Humanitarian corridors are organized in the Dominican Republic to preposition non-food items. Relief organizations will coordinate the distribution of shelter commodities to support nearly thousands of people. Emergency distribution centers are designated throughout the affected area.

Citizens will be able to access medical treatment, food, water, clothing, and emergency shelter at the designated areas (the location of these emergency assistance and distribution centers is communicated beforehand through multiple channels). If any local hospital has minimal to no damage reported, they will remain open, operational, and medical staff will be deployed as needed. A second alert will be issued urging all residents not to drink water or bathe. The alert will not be lifted until the drinking water is tested for Cholera by DOC (Department Operations Center). Additionally, epidemiological surveillance and investigation will also be conducted to determine and pinpoint the source of any possible Cholera contamination.

If the drinking water or food sources are contaminated with Cholera citizens with symptoms will be tested and treated according to WHO (World Health Organization) guidelines. The symptoms of Cholera usually include severe, acute diarrhea, vomiting, muscle cramps, intense thirst, weakness, and restlessness, (World Health Organization). Symptoms can

develop between 12 hours and 5 days after ingesting contaminated water or food, (World Health Organization). However, some citizens may not develop any symptoms at all, yet they may still be infected (*silent carriers*). The bacteria can be present in their feces for 1-10 days and can potentially affect other people, (World Health Organization). The recommended treatment for Cholera is intravenous therapy to restore the loss of fluids, antibiotic treatment, and zinc for children younger than 5 of age, (Centers for Disease Control). To combat any future Cholera outbreaks Haiti will coordinate efforts with the GTFCC (Global Task Force on Cholera Control) designated by the WHO. Efforts may include oral Cholera vaccines, Cholera kit distribution, water, sanitation interventions, treatment of infection, and community engagement. Ongoing efforts will continue to assist all citizens and communities affected by the hurricane.

Matching Available Resources to the Needs

A coordinated and reasoned response will be led by The Directorate for Civil Protection (DPC) and The Haitian National Risk and Disaster Management System (SNGRD). A well-coordinated and well-planned response is necessary to ensure that the efforts of governmental agencies, non-governmental organizations, and volunteer groups provide essential resources to the populations directly affected. It is critical that donations are spent appropriately, and that strict monetary oversight is provided by a responsible (external) entity, such as USAID. Once the Declaration of the Centre d'Opérations d'Urgence (COU) and the National State of Emergency by the Minister of the Interior and Prime Minister statements are made, additional national and international funding to mount the response will be made available. Some examples of appropriate responses are noted below.

- Food
 - “Food for the Poor”, a local organization that has been operating and helping Haitian communities for 40 years, provides food distribution boxes.
 - Since 2007, another organization, “Food for the Hungry Haiti” (FHH), has been operating in Haiti through its development and emergency programs, offering aid to lessen food insecurity among the country's most vulnerable households.
 - Due to previous disasters and the difficulty of traveling throughout the island when roads are damaged, WFP Haiti and USAID have 3,500 metric tons of food ready to be distributed throughout the nation in case of emergencies. This includes food that can sustain up to 270,000 people for a month, such as rice, beans, and vegetable oil. Nearly 4.4 million Haitians required immediate food assistance even before the disaster. More than 1.2 million of them experience extreme starvation. By delivering life-saving supplies and aid workers to impacted areas, the UN Humanitarian Air Service (UNHAS) helicopter, which is under the management of the WFP, assists the government and organizations on the ground.

- Shelter

- In the immediate aftermath of a disaster, the government offers temporary shelters for those who have lost their homes, with the help of the United Nations and other organizations such as the International Organization for Migration.
- In collaboration with Habitat for Humanity, Shelterbox, which has been operating in Haiti since the 2010 earthquake, provides emergency shelters in the form of tarpaulins, fixings, thermal blankets, solar lights, kitchen sets, sleeping mats, mosquito nets to prevent disease spread by insects like malaria, and water carriers in the wake of the 2021 earthquake. Communities also receive an allowance to distribute to households to purchase building supplies or employ laborers to clear debris and assist with construction. Essential ShelterBox assistance has been provided to more than 28,000 families.

- Power

- In general, most people of Haiti have an urgent need for access to power. Despite numerous innovative approaches to ensuring power availability to most households in Haiti- power disparities remain. There are many different and effective approaches to restoring power following disaster events, although the problem for Haiti is that in many communities, there often is no power to be restored. During and in the immediate aftermath of disaster events, if wind turbines are available for the generation of renewable energy, they could be used. Haiti should harness the country's constant winds and generate power.

- Water

- Haiti already suffers from poor access to clean water and sanitation services with only one-third of Haitians having access to basic sanitation and 52% having access to potable drinking water.¹ These conditions are only exacerbated by hurricanes and permit the uncontrolled spread of waterborne diseases. Appropriate responses to combat further losses in water and sanitation services are listed below.
- Advise residents to fill up water tanks prior to hurricane landfall.
- Residents are to be advised to not drink contaminated water via emergency alerts and communications from shelter and medical facilities personnel.
- Immediate deployment of sanitation services to assess damages and repair water and sanitation facilities by the National Directorate of Potable Water and Sanitation (DINEPA).
- Rehabilitation of drinking water distribution facilities and sanitation facilities in schools by on-call trained personnel once hurricane conditions clear out.
- Provision of water purification tablets supplied by Project Medishare at temporary shelters and medical facilities.
- Distribution of chlorine tablets, filters, jerry cans, and the set-up of flexible water tanks throughout Port-au-Prince in collaboration with Solidarités International, IRFC, and the American Red Cross.

- Pharmaceuticals
 - The development of a Strategic National Stockpile (SNS) is needed to permit the rapid mobilization of life-saving pharmaceuticals and medical supplies.
 - Mandate an increase in pharmacy operating capacity before landfall.
 - Increased availability of Tetanus shots for wounds (TD and Tdap vaccines.)
 - Increased availability of Hepatitis A/B vaccines
 - Increased availability of common pharmaceuticals in hospital-based pharmacies before hurricane landfall.

- Medical Facilities - Makeshift Triage
 - If medical facilities and hospitals are overwhelmed or destroyed by the storm:
 - Mobilize primary health care clinics and emergency triage zones throughout the city through partnerships with The Red Cross and Médecins Sans Frontières teams already present in the country.
 - Transform intact community structures into makeshift medical centers, schools, churches, etc.
 - Utilize staff and medical volunteers from Project Medishare
 - If necessary, additional support from the US military and other international partners, in the form of technical medical teams and hospital ships.

- Staff
 - All capable and existing medical and social staff mobilized and redirected to respond to the needs of those affected.
 - Prior coordination with staff regarding reporting responsibilities after hurricane landfall.
 - Appointment of emergency response coordinators within preexisting and makeshift medical facilities to organize staff and supplies.
 - Provision of on-site childcare support for staff reporting to work.
 - Deployment of mental health response teams to medical facilities and temporary shelters.
 - In the event of severe destruction, The Caribbean Disaster Emergency Response Agency (CDEMA), at the request of the DPC will deploy its CARICOM Disaster Relief Unit (CRDU) into the country to supplement Haiti's emergency response efforts.

Evaluating the Effectiveness of the Response

Evaluation Standard:

- Response Time: The amount of time it took for emergency personnel to reach the affected areas following the hurricane. This standard will be evaluated by the disaster response organizations responsible for emergency response operations. Evaluation should be conducted within 24-48 hours of the hurricane's landfall.
- Coordination: The degree to which various organizations and stakeholders collaborated and coordinated during the response efforts. This standard will be evaluated by an independent third party with expertise in disaster management and coordination. Evaluation should be conducted at the end of the response phase, approximately two weeks after the hurricane's landfall.
- Resource Allocation: The efficiency with which resources, such as food, water, medical supplies, and shelter, were allocated to those affected by the hurricane. This standard will be evaluated by an independent third party with expertise in logistics and resource management. Evaluation should be conducted at the end of the response phase, approximately two weeks after the hurricane's landfall.
- Accessibility: The degree to which affected populations had access to relief services and assistance. This standard will be evaluated by an independent third party with expertise in humanitarian assistance and community engagement. Evaluation should be conducted at the end of the response phase, approximately two weeks after the hurricane's landfall.
- Health and Safety: The response's capacity to mitigate health and safety risks to the affected population, such as disease outbreaks and injuries caused by the hurricane and its aftermath. This standard will be evaluated by an independent third party with expertise in public health and epidemiology. Evaluation should be conducted at the end of the response phase, approximately two weeks after the hurricane's landfall.
- Communication: The effectiveness of communication channels, including the utilization of social media, in disseminating vital information to the affected population. This standard will be evaluated by an independent third party with expertise in communication and media. Evaluation should be conducted at the end of the response phase, approximately two weeks after the hurricane's landfall.
- Recovery and Reconstruction: The efficacy of recovery and reconstruction efforts in affected areas. This standard will be evaluated by an independent third party with expertise in disaster recovery and reconstruction. Evaluation should be conducted at the end of the recovery phase, approximately six months after the hurricane's landfall.

Evaluation Plan:

1. Conduct a needs assessment to identify the most critical issues and gaps in the response efforts.
2. Identify stakeholders and partners to involve in the evaluation process, including community leaders, government officials, and NGOs.
3. Develop a comprehensive survey instrument that addresses each of the evaluation standards and includes questions related to satisfaction, access, and effectiveness of response efforts.
4. Conduct in-depth interviews with key stakeholders, including community leaders, government officials, and response organizations, to gather additional feedback and insights.
5. Use statistical analysis and data visualization tools to analyze survey and interview data and identify patterns and trends.
6. Develop a detailed report that outlines the findings, identifies strengths and weaknesses, and provides recommendations for improving the response efforts in the future.
7. Share the evaluation report with all stakeholders and partners, including affected communities, to ensure transparency and accountability in the evaluation process.

Annex 1: Drills & Exercises

Haiti Hurricane Emergency Response Plan Training Seminar	
Objectives of your Training Seminar (What mitigation strategy are you advocating?)	<p>Hurricane Preparedness</p> <ol style="list-style-type: none"> 1. Inform community members about the potential impact of hurricanes and how hurricanes can form and develop. 2. Explain the different levels of risk associated with different types of hurricanes, including wind damage, flooding, and landslides. 3. Teach community members how to prepare for a hurricane, including creating a family emergency plan, stockpiling supplies, and securing their homes. 4. Explain the importance of evacuation and provide information about local evacuation routes and shelters. 5. Teach community members how to stay safe during and after a hurricane, including avoiding downed power lines and contaminated floodwater. 6. Explain how to assess and respond to post-hurricane damage, including checking for gas leaks and other hazards.
Estimate Length of Training	There will be a one-hour presentation and a half-hour question and answer-session.
Target Audience and max size of audience.	The target audience is the general population of Haiti, particularly those living in areas prone to hurricanes. This may include individuals and families, as well as community leaders (church officials), local officials, and emergency responders. Max size of the audience: 100 people
Who would be a good candidate (e.g., structural engineer, health dept. official, first responder?) as Facilitator of this session? Why?	Disaster preparedness officials who can educate the community about the effects of impending hurricanes or the best ways to prepare for them would make suitable candidates to lead the hurricane training sessions. And if we were to provide various hurricane training sessions to disaster-prone areas, various meetings could be run by different respected and trusted community leaders who could effectively convey impending threats and the need for preparedness to individual community members.
What do you want community members to do as a result of their attending this session?	<p>As a result of participating in these workshops, community members should have:</p> <ul style="list-style-type: none"> • Created and reviewed their family emergency plans, gathered the appropriate supplies, and began to protect their homes. (i.e., shopping for nonperishable food and water prior to hurricane landfall and safely packaging important documents and essential medications to be self-sufficient for at least 72 hours) • Talk to your neighbors, family, and friends to ensure that everyone is on the same page regarding preparation for impending disasters, can do so, and most importantly, is aware of the importance of evacuation or sheltering-in-place, if it becomes necessary and knows where to go. • To understand the risks associated with a hurricane disaster in the region. (Flooding, power outages, the spread of disease, infrastructure damage, etc.) • In general, it's crucial that members leave meetings with a better understanding of what to do and how to be prepared for disaster.

<p>Strategies to increase community uptake of your mitigation.</p>	<ul style="list-style-type: none">• Making connections among neighbors and establishing a sort of buddy system to check on one another in case of emergencies is one method to boost community involvement. By interacting with neighbors, people can identify who has skills or talents they can share, such as who is best suited to prepare food or gather equipment if necessary to repair something like a leaky roof or who is knowledgeable in the medical field, such as basic first aid, which will be crucial.• For the same reason, support networks should create a communication plan and prominent community leaders should be engaged in preparation efforts to help raise awareness.• Most importantly, it would be important to hold routine, regular hurricane training meetings because it's important to update people on new strategies and news in the communities about who's best suited to help in what areas like medical supplies, food, and other necessities.• Distribution of pamphlets: To be provided in schools, churches, and community centers outlining evacuation routes, shelter locations, hurricane prep tips, and resources.• Providing free emergency care packages stocked with flashlights, first aid kits, water purification tablets, and nonperishable canned goods to individuals in high-risk and vulnerable communities.
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Annex 2: Short-term Recovery

Necessities	Possible Resources	Distribution Strategies
Water	<ul style="list-style-type: none"> • United States Agency for International Development (USAID): Bottled water donations • Red Cross (Haitian and American) • The United Nations International Children's Emergency Fund (UNICEF): Water trucking operation to disperse clean water. 	<ul style="list-style-type: none"> • Distribution of water purification tablets in temporary housing areas. • Bottled water will be distributed at several centralized locations throughout Port-au-Prince and overseen by the Red Cross. • The Episcopal Diocese of Haiti will set up and distribute bottled water and other essential needs in the Central Peninsula in partnership with other local churches. • Water tankers are to be set up in Port-au-Prince and water is to be distributed via carrying jugs.
Food	<ul style="list-style-type: none"> • UNICEF: Provision of canned goods, non-perishables • Red Cross • The Caribbean Disaster Emergency Management Agency (CDEMA) • USAID 	<ul style="list-style-type: none"> • Red Cross staff and volunteers will oversee the distribution of food supplies in cooperation with the Haitian government. • Deliveries will be sent to a centralized location and further be distributed to schools, churches, shelters, and hard-to-reach communities. • Ready-to-eat meals will be available upon request in hospitals and temporary housing areas, as supplied by the Red Cross, UNICEF, CDEMA, and USAID.
Housing	<ul style="list-style-type: none"> • Red Cross • CDEMA: CARICOM Disaster Relief Unit (CRDU) 	<ul style="list-style-type: none"> • CDEMA is responsible for sourcing tents. • Identifying schools, churches, and community centers that could serve as temporary housing areas with a central triage/help center. • Set up temporary tent communities every 5-10 miles where possible. • Utilize partnership with Episcopal Diocese to distribute tents to those in need. <ul style="list-style-type: none"> ○ Women, children, and members of under-served communities will be prioritized. ○ Put up signs in Haitian Creole, French, and English indicating nearby temporary shelters to avoid hospitals overflowing with those seeking shelter.

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