One year on
Haiti Earthquake Response

World Vision
foreword

Shortly after the Haiti earthquake I was in the capital, Port-au-Prince, taking part in relief food distributions among a seemingly endless crowd of women. What, I was asked, does the future hold? That was an important, but difficult, question.

One year on, the answer remains unclear. Haiti has suffered immensely throughout her history. We pray that we can find some order and a way to meet the deep needs all over Haiti.

The majority of her people already lived lives of relentless hardship before being rocked by one of the most devastating earthquakes in modern times.

Simply returning the country to what it had been before is not an option. Every indicator—water supply, sanitation, health, nutrition, education, income—was a summary of despair even before the earthquake.

Nor is it acceptable to pour vast amounts of money into a broken system. We and our partners target every investment to ensure long-term, sustainable good for the greatest number of children, families and communities.

Responding to an earthquake of such magnitude would be complicated even in the best-resourced nations. The factors that made Haiti so vulnerable to this calamity compound the difficulties of responding to it.

World Vision’s response to the earthquake began immediately. Many of our colleagues were victims themselves and were struggling to find their families in the rubble. Nevertheless, enough were able to respond that we had our first distributions within 24 hours.

Today, in addition to the development work we have been doing for 30 years, we are providing post-earthquake emergency relief reaching hundreds of thousands of families in five regions across the country. Activities range from a combination of child protection, health, education, water, sanitation and shelter services down to single activities, supplying water or building latrines. We have begun work to get people’s livelihoods back on track, making them more resilient to future shocks, while helping youths and children engage in rebuilding their country.

We invite your partnership on this journey and, along with the people of Haiti, we covet your prayers for the successful rehabilitation of a land whose time for good news has come.

Kevin J. Jenkins
President and Chief Executive Officer
World Vision International
• 350,448 people received urgently needed household supplies such as toilet paper, soap and toothpaste, cooking supplies, bed sheets, blankets, buckets, mosquito nets, foot lockers and mats.

• 229,763 households received food aid in the first three months of the response.

• 70,938 children in 454 schools benefited from school feeding programmes between August and October.

• More than 180 feeding centres provided food to 49,200 children not in school.

• 132,153 people were provided with 189.6 million litres of drinkable water.

• 5,653 children registered to play, sing, dance and draw in one of 22 Child-Friendly Spaces.

• More than 1,150 young children ages 3 through 8 attend one of 15 Early Childhood Development Learning Spaces that provide community-based learning.

• 113,409 tarpaulins and 7,497 tents were provided to families in need.

• Transitional shelters were provided for an initial 620 families.

• More than 14,770 people participated in cash-for-work programmes.

• 1,988 people participated in cash-for-training programmes, learning skills such as gardening techniques, masonry and carpentry.

• Five fixed and four mobile health clinics served 11 camps in Port-au-Prince and two mobile clinics served three camps at the border.
Haiti is the poorest economy in the Western hemisphere.¹

86% of people in rural communities live on less than $2 per day.²

40% of households are unable to access basic nutritional needs.³

81% of the population lacks access to adequate sanitation and 42% lacks access to safe water.⁴

The transportation, infrastructure and agricultural sectors continue to suffer as a result of four tropical storms in 2008.⁵

380,000 children are without at least one parent; of those, some 50,000 are orphans.⁶

40% of children do not attend school.⁷

Only 1 in every 50 Haitians has a steady, wage-earning job.⁶

Haiti has the second-highest population density in the Western hemisphere. Four out of every 10 children live in homes with mud floors or in severely overcrowded conditions, with more than five people living in each room.⁶

97% of all land is deforested, leading to increased risk of flooding, erosion and mudslides.⁶

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¹ World Bank
² UNDP
³ Haiti Earthquake Post-Disaster Needs Assessment (The Post-Disaster Needs Assessment [PDNA] report was prepared by a joint team composed of representatives of the Government and members of the international community, under the direction of the Government of the Republic of Haiti.)
⁴ Alertnet Country Statistics
⁵ UN OCHA
⁶ UNICEF
⁷ U.S. Dept. of State
Three million people are affected, including 1.5 million children and youths under 18, out of a population of 9.8 million.

More than one million people are left homeless.

The earthquake leaves 222,570 dead and 300,572 injured.

105,000 homes are destroyed and more than 208,000 damaged.

More than 1,300 educational institutions and more than 50 hospitals and health centres are collapsed or unusable.

60% of the government, administrative and economic infrastructure in Port-au-Prince is destroyed.

52% of households are food-insecure; one-third of households have lost their entire food supply.

An influx of displaced people into rural areas puts an unprecedented level of strain on rural households, decreasing their standard of living and leaving them more vulnerable to external shocks such as sudden price increases.

World Vision finds that on average less than half the households in surveyed rural regions have sufficient access to water for drinking and household needs.

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1 OCHA
2 UNICEF
3 UNICEF, 2008
4 AlertNet
5 Govt. of Haiti
6 Haiti Earthquake Post-Disaster Needs Assessment
7 UNICEF, 2010
8 FAO, 2010
9 World Vision Baseline Survey, May 2010
The United Nations Humanitarian Country Team includes 26 organisations implementing earthquake response programmes.

Eleven “clusters,” or interest groups of humanitarian organisations, enhance coordination, information-sharing and response standards.

Food, clean water, shelter, sanitation, health, child protection, livelihood and education assistance are prioritised for communities.

The socio-economic situation remains fragile, with more than one million people still displaced.

As of mid-December 2010, a cholera outbreak had claimed more than 2,100 lives, with some 47,000 persons hospitalised.

Children under 5 remain susceptible to developing short- and long-term illnesses.

By December, a total of 19,000 transitional shelters had been built by all aid groups operating in Haiti.

Land tenure issues pose a challenge in shelter reconstruction.

The Interim Haiti Recovery Commission is in place to develop and refine Haiti’s development plans, assessing needs and gaps for investment and ensuring that the implementation of plans is coordinated, effective and transparent.
On 12 January 2010, a 7.0-magnitude earthquake struck the nation of Haiti, the most powerful quake to hit in more than 200 years. The impact and aftershocks were devastating.

Survivors struggled to find shelter. Limited food and water, overcrowding and unsanitary conditions characterised the capital of Port-au-Prince and other affected urban centres. The young, old, sick and injured were forced to sleep on the streets without basic supplies as aftershocks jolted through the ruins.

An Urban Emergency

Responding to a disaster in an urban setting is a complex undertaking for humanitarian agencies. World Vision has identified two challenging factors in the Haiti emergency response:

Livelihoods (means of support): Household access to cash is more critical in an urban context than in a rural setting since urban households in Haiti have less capacity to supplement their food sources; it is also difficult to distinguish between the ongoing, chronic needs of poor urban households and the more acute vulnerability provoked by a disaster.

Governance and infrastructure: People in Haiti’s urban areas do not usually own the land they live on. They are either tenants or squatters who already lack adequate access to water or electricity. The challenge of relocation, resettlement and rebuilding requires unprecedented vision, coordination and planning from the Haitian Government in collaboration with the humanitarian sector.

World Vision, already present in Haiti, sent staff and pre-positioned aid and immediately activated its Global Rapid Response Team to undertake the largest single-country emergency response in the organisation’s history.

The scale of destruction in such a high-density urban setting, combined with the loss of major government and administrative structures, presented an unprecedented situation with massive challenges in the transportation and coordination of aid. The degree of human suffering was staggering.

Amidst the complexities, World Vision, in partnership with local actors and other agencies, worked to meet the basic and urgent needs of children and their families and ease the distress of affected communities.

Emergency relief supplies such as food, water, shelter supplies, blankets, and cooking and hygiene kits were immediately distributed. Supplies were shipped into the damaged port while warehouses were set up in Jimani (on the Dominican Republic border) and Miami as storage points for the overflow of supplies en route to Haiti.

World Vision undertook a series of rapid assessments in Port-au-Prince and existing operational areas (La Gonave, North, Plateau Central, and South regions). Programming extended across all of these areas to help masses of people.
looking for refuge and livelihoods. World Vision also participated in inter-agency and United Nations (UN) assessments and the inter-agency Post-Disaster Needs Assessment (PDNA) led by the Government of Haiti and the UN Cluster Survey Report.

A programme design process ensured World Vision projects supported both host communities and earthquake-affected families. A baseline study helped to better understand the status and vulnerability of households and communities and gauge aid effectiveness.

Drawing on three decades of experience in Haiti, findings from assessments and a consultative programme design, World Vision developed an initial 90-day plan and an integrated 12-month response. Both prioritised child well-being, food assistance, livelihoods, health and nutrition, shelter, non-food items, water, sanitation and hygiene, and advocacy. Accountability, disability, environment, gender, disaster risk reduction and protection remain cross-cutting parts of the programme.

Emergency Household Aid

After the earthquake many households were unable to meet even their most critical basic household needs. One of World Vision’s first responses involved distributing urgently needed items to 350,448 people.

Hygiene kits included items like toilet rolls, soap and toothpaste. In addition, cooking supplies, bed sheets, blankets, buckets, mosquito nets, foot lockers and mats were also distributed. These items are typically provided in the emergency phase of a disaster, but in Haiti they have remained an important response throughout the first year.
Prior to the 2010 earthquake, children, who make up almost half of Haiti’s total population, were already in a precarious situation, with high child mortality\(^1\) and limited access to adequate nutrition, education and protection.

In the wake of the earthquake, children were at increased risk of violence and exploitation, particularly the 100,000 children living without immediate family members. Without basic services, support systems and information on protection, children were and continue to be the most vulnerable survivors.

The Haiti Ministry of Education estimates that 80\% of schools in Port-au-Prince and 60\% of the schools in the South and West were destroyed or damaged. While many schools have since reopened, the majority have remained private and many families, including those displaced by the earthquake, are unable to afford the fees.

Establishing a place for children to play, learn and receive psychosocial support has been a core part of World Vision’s work in camps after the earthquake. This also includes educational activities, finding appropriate care, identifying separated children and conducting family tracing and reunification.

Since the earthquake, 5,653 children have registered to play, sing, dance and draw in one of World Vision’s 22 Child-Friendly Spaces (CFS) around the country. Sessions are run on child rights, good hygiene, sanitation and environmental issues. CFS staff also assist the wider community with activities and support for parents.

For children who have lost their families, World Vision’s family tracing and reunification provides interim care while seeking to reunite children with existing relatives. When this is not possible, children are placed with foster families or in short-term institutions that provide emergency care. Clothing, toothpaste, a toothbrush and staple food items like rice and oil are provided to children and their family or foster parent to help ease the addition of another family member into the home.

At the end of November, 1,784 separated children had been registered, of whom 694 have been reunited with family. Close to 40\% of the children

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\(^1\) 72 per 1000, UNICEF, 2008
\(^2\) UNICEF
World Vision has worked with have been reunited with family members.

The response in Haiti marks one of the first times in an emergency response that World Vision has set up Early Childhood Development Learning Spaces. Early childhood learning aims to give young children activities that help prepare them for formal schooling. More than 1,100 children ages 3 through 8 join in activities each week in 15 locations in Port-au-Prince.

Another important part of World Vision’s child-focused efforts is partnering on inter-agency child protection initiatives, including child registration, anti-trafficking, cross-border protection and separation prevention training initiatives in Haiti. World Vision is a leading member of the Global Movement for Children’s (GMC’s) international coalition of organisations and networks advocating for the rights of children and ensuring children have a voice in the Haitian reconstruction process.

Tipa Tipa Training

Training people to work with children in Child-Friendly Spaces and Early Childhood Development Learning Spaces has been an important and urgently needed response in the earthquake’s aftermath. In World Vision’s programmes, teachers are trained in partnership with local organisation Tipa Tipa (Creole for “Step by Step”). Tipa Tipa instruction encourages imagination and interaction and creates a learning space and routine that is critical for children. World Vision has trained 250 former teachers and young people living in camps who showed an aptitude for teaching in Tipa Tipa, a method recognised by the Ministry of Education. These educators work in World Vision learning spaces and Child-Friendly Spaces across the country.
Shelter is one of the most urgent needs in Haiti. According to the Haiti Post-Disaster Needs Assessment, more than 208,000 homes were damaged and 105,000 destroyed by the earthquake. An estimated 1.5 million people were in need of shelter assistance, many of them living in 1,300 camps in and around the capital.

Although crucial, shelter work is enormously challenging in Haiti. Land tenure is often unclear. Many sites are blocked by debris which will take years to clear and many roads are too narrow for heavy equipment. Most camps are on privately owned land and permission must be granted by landowners before any work can commence on site. The Government has not yet allocated enough public land for relocating displaced people and there is a chronic scarcity of land available for resettlement. Evictions from camps established on privately owned land have become a major concern.

Despite the extraordinary hurdles, World Vision continues to address shelter needs in coordination with other agencies. This is primarily done through cluster groups managed by the UN who share information and encourage close coordination among all agencies. The same groups work together to encourage the Government to allocate further land and provide long-term shelter plans.

World Vision’s own programme has so far included two phases: shelter in the immediate aftermath and a medium-term transitional shelter programme.

In the immediate aftermath, thousands of families were provided with emergency shelters. Since January 13, more than 113,400 tarpaulins and almost 7,500 tents have been distributed. Transitional shelter construction is now under way to provide more durable, semi-permanent shelter for families in Port-au-Prince and rural areas. Shelters are built on a concrete foundation and meet international humanitarian standards, can last many years, and can be modified for people with disabilities.

By December, more than 620 transitional shelters were built in Corail camp and on the island of La Gonave. The construction process involves meeting with community members, mayors and members of the Communal Section of Administration Council. With the community, World Vision verifies the families most in need of transitional shelters. Families sign a Memorandum of Understanding clarifying responsibilities and verifying land ownership.

Many families are unable to return to their homes because they were either badly damaged or completely destroyed. Increasingly, as camps close and families reconsider shelter options, World Vision is providing supplies such as wheelbarrows, shovels, and pick-axes to those who may return to damaged properties.
Corail

In April 2010, the Government began relocating families to an area outside of Port-au-Prince known as Corail-Cesselesse. As part of the Government’s “Safer Shelter Strategy,” families living in camps in high-risk, flood-prone areas of the city were offered several options, including 1) return to existing homes or land, 2) move in with a host family or 3) relocate to new land provided by the Government.

Several agencies, including World Vision, publicly expressed concern to the Government that the families were being relocated before the land could be adequately prepared. However, because of the high-risk location of some of the government-identified temporary settlements, World Vision agreed to provide support in the relocation process—responding with tents and food rations while other agencies assisted with water, sanitation and other needs.

More than 6,500 people moved to Corail. But life there has been far from easy. The treeless landscape makes it extremely hot during summer and prone to flooding when it rains. There have been many ongoing difficulties with the site, making management challenging for humanitarian agencies. In addition to the arrival of squatters, there have been construction obstacles, land tenure issues and uncertainty over the Government’s long-term plans.

World Vision, in partnership with other agencies, is helping to alleviate conditions by building 1,162 transitional shelters, providing school and supplementary feeding, and instigating drainage improvements with some cash-for-work benefits. To help address the educational needs at Corail, World Vision is building a school for 1,200 children who currently lack access to education.
A melodic, earthy singing echoes between the rows of newly built little houses. It is a song that makes the place feel a little bit like home. Jeanne and her children moved into one of the new homes in Corail camp in April.

She stops singing and, shaking her head, says, “No, we do not miss the tent; we like our new home. It is much better.” Her four children nod their heads in agreement.

Since the earthquake, Jeanne has taken in three additional children who lost their parents to the disaster. They were the first family to move into a World Vision transitional shelter at Corail after seven months of living in a tent. Response director Ton van Zutphen presented her with papers proving ownership of her new home.

Transitional shelters have been crucial support for many families who do not have the means to rebuild collapsed homes or the ability to finance alternative rental accommodation.

Jeanne explains, “I was renting before the earthquake in Delmas (an area within the capital). I paid rent every six months in advance. But my home collapsed during the earthquake and I had nowhere else to go. This home now is everything I have.”

In Haiti, landlords are not obligated to compensate tenant losses. After the earthquake, thousands of families like Jeanne’s, who paid advanced rent, were left without anywhere to live and without financial means to rent elsewhere.

Jeanne doesn’t have consistent work. She had a business before the quake selling staples such as rice, milk, spaghetti and soap. “I lost everything in the earthquake,” she says.

Jeanne was able to find short-term employment through World Vision’s cash-for-work programme. For 12 days she earned money working on the canal around the camp to help reduce the impact of notoriously heavy rains.

“I’m still using money I earned from (the canal project) to feed my children. I’ve also been able to start a small business selling some foods to the people here at Corail and I will use the money from selling these things to buy more food to sell,” Jeanne says.

“If I had a lot of money I would expand the business,” she continues. “My business was working well at Delmas before the earthquake and I miss living there. If I had a lot more money I would go back to Delmas, but for now this is where I must stay.”

Aid agencies can never provide a panacea in a context like Corail. But transitional shelter and cash-for-work programmes will help many families like Jeanne’s begin to get back on their feet after this unprecedented disaster.
Single mom Maraseille Saintulise is ecstatic. She has just pushed open the door of her new home in Corail after she and her 11-year-old son, Etienne, spent almost a year sleeping rough following the collapse of their home.

A few onlookers peer in through the open door and listen to Maraseille’s exclamations of joy with understanding smiles. They know what it’s like to have slept out on the street and in flimsy, shared shelters with no privacy. They know what it’s like to live in tents that grow excruciatingly hot during the day and leak in the rain. They, too, have felt cramped and suffered fevers and skin rashes from constantly biting insects. They know what it’s like to have lived in fear of hurricanes and cholera, knowing that they have little protection against either. Indeed, about a million people in Port-au-Prince still suffer this way. So for them, Maraseille’s reactions are perfectly comprehensible.

World Vision programme officer Faith Chastain says community members were consulted on the design of the shelters. Among the enhancements they asked for were a porch on which to cook food and entertain visitors, an extra window for ventilation, and an additional door. “A lot of people wanted an extra door because they felt the only reason they survived the quake was because of a back door,” Faith says.

Community members also had input into the layout of the shelters. They rejected a barracks-style layout of uniform rows in favor of one that angled the shelters in different ways to create a more natural neighbourhood feel.

Faith says the close attention to planning and design has inevitably introduced delays in construction of the shelters, but the forethought will pay off in terms of their lifespan, comfort and practicality. “You can build quick or you can build strong, but you can’t always do both.”

At the handover ceremony, World Vision community liaison officer Luckens Saint James thanks those moving into shelters for their patience, asks them to be considerate to neighbours and keep their shelter clean, and explains that they are responsible for any modifications.

Each signs a handover document explaining that they now own the property. For many, such as Maraseille, it is the first home they have owned in their lives, and better than rooms they previously rented. Maraseille says the rented room she and Etienne lived in previously was only about two-thirds the size of the transitional shelter. “This is the first house I ever owned,” she says.
Haitians suffered high levels of malnutrition even before the earthquake. About 3.8 million people, or 40% of households, lived below the poverty line (earning less than $1.25 a day) and were unable to cover their basic food needs. After the earthquake, food insecurity deepened due to unstable incomes, shortages of work and skilled workers and an inadequate production sector. The movement of people to rural areas has also strained host communities already suffering seasonal food shortages. World Vision’s May 2010 baseline study showed many households had insufficient income and agricultural production, and struggled with landlessness and food price increases.

Food has therefore been a critical part of World Vision’s work in Haiti. In the first three months of the emergency response, World Vision distributed food to more than 229,760 households. Rations included rice, beans, oil, corn-soy blend (a protein source fortified with micronutrients) and salt. By June, general food distributions were phased out by the Government in favor of more targeted food distributions to support specific vulnerable groups such as people with disabilities, women and children. In partnership with the World Food Programme (WFP), World Vision conducted school feedings, supplementary feeding and food-for-work.

More than 70,900 children in 454 schools have benefited from the school feeding programme, which encourages families to send their children to school where they receive a meal of rice, pulses, oil and high-energy biscuits. More than 180 feeding centres across three communes reach 49,200 children who are unable to go to school. Food is prepared by cooks from 50 local women’s community groups. Most food-for-work programming is carried out in camps to help families recovering from the earthquake. So far about 7,240 people have worked in the programme.

At Corail, 7.9 metric tonnes of food was provided over three months to more than 1,000 children under 5 years old, as well as pregnant and lactating mothers. The supplementary food is part of efforts to provide extra nutritional support to vulnerable groups.

Food support was also extended to host families and displaced people who took refuge in rural areas. By the end of November, and in partnership with USAID, 15,147 metric tonnes of food—including corn-soy blend, soy-fortified bulgur, lentils, fortified vegetable oil and pinto beans—had fed more than 245,086 people. The programme continues to reach families in eight regions. Safety-net rations help people with special needs such as pregnant and lactating women, young children, the disabled, the elderly and people living with HIV and AIDS.
The enormous plate of rice and beans looks as though it would satisfy the hearty appetite of a construction worker, but it takes hardly any time at all for Magdala Dauphin, a slender girl of 13, to consume more than half of it.

She explains that the midday meal at Corail camp, set up for thousands still homeless after Haiti’s massive quake, is the first thing she has eaten all day.

To meet the pressing food needs of children here, World Vision has set up a lunchtime feeding programme for school-age children. Another World Vision programme provides mothers with a nutritious porridge to feed hungry children under 5 years old.

World Vision field coordinator Nadine Seraphin says that when the programme started two months ago, she saw a lot of malnourished children. “They were sick children. They were so skinny. I would send some of them to the camp clinic for attention,” she says.

Now she says the children are improving. Most are boisterous and happy. “Every day, some parents come to me and tell me, ‘You know, this programme is very important for us because we have nothing here—no money, we are not working.’ They are very appreciative,” says Nadine.

All the same, running such a programme has its challenges in Haiti. Operations had to be suspended for five days when it was feared that Hurricane Tomas would blow down the tents where the feeding takes place. The threat of cholera is also a constant concern. Children are required to line up at a hand-washing station and thoroughly wash their hands before they can enter the tent to eat, and cooking utensils and pots must be disinfected.

The kitchen where the food is prepared provides welcome employment for camp residents. Chief cook Jean Pierre Francoise now works as a supervisor in the kitchen following months of hardship.

She previously spent two years in cookery school and hoped one day to open her own restaurant. That plan has had to take a back seat since her home was destroyed in the earthquake. But she is not giving up. “Now, I have a dream to teach other mothers in the camp how to cook well,” she says.
The earthquake destroyed many livelihoods. Incomes were lost, businesses ruined and assets such as animals, crops and merchandise were wiped out. Casual labourers were left without work. Hundreds of thousands of families are now unable to meet basic needs, such as food, water, healthcare and shelter.

Rebuilding livelihoods is essential for recovery in Haiti, but it will take years. World Vision is providing support through short-, mid- and long-term recovery projects.

In the post-emergency phase most activities involve cash-for-work, which helps families fund children’s education, food, medical treatment and other essentials. To date, World Vision has provided short-term employment to 14,779 people through cash-for-work.

In the short term, cash-for-work helps to improve access to an immediate source of income. In the long term, it stimulates local markets and small trade, promoting resilience and gradually restoring stable economic markets.

World Vision’s cash-for-work activities have included preparing sites for shelter construction; road or track maintenance; building latrines and showers; and digging drainage canals to reduce the impact of heavy rainfall, control mosquitoes and prevent malaria and dengue. Cash-for-work has also been integrated into disaster risk reduction and agricultural and ecological training, transferring skills to people who can then apply appropriate local solutions in their own communities.

World Vision’s first-year response has also included cash-for-training, aimed at establishing microenterprises. People who had lost their small businesses, or who intended to start a new one, participated in business management training sessions, each receiving a cash grant of $144 to inject into businesses or address basic needs. World Vision reached 1,988 people through cash-for-training, the vast majority of them women.

People with disabilities are particularly vulnerable when livelihoods are lost. World Vision established a small-scale cash transfer programme to help 100 people set up small businesses. Additionally, business training has been provided to 2,089 people in Port-au-Prince, Mirebalais, Hinche and La Gonave. Collaboration with other agencies, including Handicap International, has been an important part of our activities.

Reforestation, installation of keyhole gardens and community nurseries, and training in basket-making have also begun. Up to 75,000 seedlings have been transplanted to help address erosion. Old tires are being used as vegetable plots to help families supplement food supply, and trainings have been given in managing small gardens and compost preparation. Through a partnership with the Food and Agriculture Organisation, 3,000 families are being trained in farming, and seeds have been distributed to 21,280 households.
Providing health services in a country without adequate, equitable health infrastructure is complex. In Haiti, the earthquake exacerbated these challenges, especially the existing shortages in qualified and experienced staff, lack of suitable sites for clinics and a shortage of medical supplies and equipment.

With the brunt of devastation in Port-au-Prince, World Vision’s initial health response began in the capital before expanding to regional areas where many communities hosted thousands of people who had fled urban centres.

In the first year, health projects were designed to meet the immediate health needs of vulnerable and disabled people living in temporary settlement camps. Urgently needed medical supplies were rushed to 14 public and private hospitals in Haiti. Static and mobile clinics also received gifts-in-kind (GIK) and engaged nurses to provide routine healthcare, safe delivery kits for pregnant women, nutritional checks of children under 5, antenatal checkups, child immunisations and health education on the prevention and treatment of sexually transmitted infections. At the beginning of the response we operated 17 clinics. Since then some camps have closed and people have moved into more permanent accommodations. Currently, five fixed clinics and four mobile ones serve 11 camps in Port-au-Prince. An additional two clinics at the Fond Parisien border provide basic healthcare to three camps. More than 54,065 visits were recorded in clinics providing health, hygiene and nutrition services. Additionally, targeted support for disabled people included financial assistance, hygiene kits, household items and special medical treatment such as prosthetic limbs from World Harvest.

Infant feeding practices needed to be addressed as many mothers were suffering from stress and struggled to breastfeed. Training sessions helped to improve breastfeeding practices and nutrition for children and pregnant or lactating mothers.

World Vision Mother’s Clubs offered supplementary feeding and nutrition counseling to women and children suffering from malnutrition, benefitting more than 5,000 women every month.

Hygiene and health support in camps included clean delivery kits for expectant mothers (supplied by the United Nations Population Fund) and advice on hand washing, the prevention and treatment of diarrhoea, HIV, malaria, and ongoing psychosocial support.

Theatre groups have reinforced important messages on basic hygiene, malaria, rubbish disposal, mental health and HIV prevention. Children’s theatre clubs also perform and reiterate health and hygiene messages in the camps while hygiene kits are distributed.

A small but vital community-based mental health programme has begun reaching out to people suffering emotionally since the earthquake. World Vision research in camps found that approximately one-third of those surveyed were experiencing symptoms consistent with diagnosable depression, with women and young people without schooling particularly at risk. In response, World Vision is facilitating Interpersonal Psychotherapy Groups, 16-week programmes where groups of 12 can share experiences, discuss problems and build relationships. The aim is for groups to continue.
supporting each other when the programme is finished. World Vision strongly advocates for increased support of mental health in Haiti, where issues like depression have been rife since the earthquake, and where appropriate public services, while some do exist, are scarce.
Ginette’s eyes stare without comprehension, she is unable to raise her head and she looks more like a newborn than her actual age, 14 months. Ginette displays all the symptoms of a severely malnourished child. She has been brought by her mother, Valdort Nadia, 24, to one of World Vision’s Baby-Friendly Spaces (BFS)—clinics for pregnant mothers and babies. This BFS is situated in a tent in Parc Acra, a makeshift camp.

Valdort’s plight is not uncommon in post-quake Haiti. She explains that she lost her husband and home in the earthquake. She also lost her business as a street vendor selling small grocery items. “I have no husband, I have no work, I have nobody to support me,” she says. “Sometimes I don’t have money to buy food and soap.”

The point about soap is telling. As a cholera epidemic sweeps the country, washing hands with soap can make the difference between living and dying. Despite the severity of Ginette’s condition, World Vision health manager Dr. Estrella Serrano is quietly optimistic about her chances. The clinic will treat Ginette with antibiotics to counter opportunistic infections, enter her in a deworming programme and put her on a diet of Plumpy’nut—a protein-rich food specially designed for malnourished children. World Vision-trained volunteers in the camp will visit her to check on her progress.

Fortunately, World Vision BFS coordinator Nevestant Evens says that extreme cases like Ginette’s have become rarer since the clinic opened. The clinic advises mothers on breastfeeding and how to ensure their children get a balanced diet. He adds that for some, the antenatal care in the camp is probably better than they enjoyed prior to the quake. “We show mothers how to take care of themselves and their babies to maintain good health,” he says. “[Now], children are most likely to be malnourished only if they have lost their appetite due to sickness.”
There is never a one-size-fits-all approach to responding to needs during humanitarian emergencies. Shortly after the January 12 earthquake, World Vision identified a pressing need to respond to widespread psycho-social problems—the often hidden after-effects of a disaster of this scale—and in a society where there is little awareness around mental health, some creative approaches were needed.

“People don’t talk about it,” said World Vision’s Dr. Reginald Lubin. “They don’t know there is support. So people with mental health issues are often discriminated against.”

As part of its programming, World Vision enlisted the help of a local drama troupe. The troupe toured the camps performing plays, spreading vital messages in Creole to children and adults alike about how to recognise the signs or symptoms of mental illness.

“We needed to teach the community how to react. So many people have lost everything, and there are different signs of depression. We let them know that we have people trained at World Vision who can bring them help, and that there are places they can go,” said Dr. Lubin.

The drama troupe was extremely well-received. Getting people to openly engage on a topic that is generally taboo was a huge success for World Vision. The organisation has also used the troupe to spread messages about health, hygiene and HIV, and is now considering another script about cholera.

“The key is humour” said Dr. Lubin. “We use humour in the role-playing because that’s the way it will work. People have had enough sadness. They won’t just listen to sad things all the time.”
Water and sanitation systems in Haiti are well below international standards. Even before the earthquake, 81% of people lacked access to adequate sanitation and 42% lacked access to safe water. The earthquake compounded problems, further reducing access to water and decreasing water quality through contamination.

Water, sanitation and hygiene (WASH) work has been critical to the earthquake response. World Vision first began WASH efforts in Port-au-Prince with bottled water and purification tablets and later installed water tanks in camps, providing potable water for daily washing, cooking and drinking. Families received containers for collecting water from one of 87 water tanks that were installed by World Vision. World Vision has provided 189.6 million litres of chlorinated drinking water to 132,153 people in 40 locations across Port-au-Prince. And more than 720 latrines and 580 showers have been installed in camps.

Before the earthquake, Port-au-Prince had a basic liquid waste disposal system that fed waste into a solid and liquid waste dumpsite on the outskirts of town. The system was severely damaged by the earthquake, with cross-contamination between the liquid waste and water systems. Dangerous health risks led to an urgent need for adequate and separate sanitation and water facilities.

Drainage improvement, mosquito control, solid waste collection and hygiene promotion activities have also been carried out in camps, and work has commenced on the rehabilitation of Port-au-Prince’s water irrigation network. Tools and training support have been provided to repair water leaks throughout the city. As households begin to return to their homes and camps decrease in size, World Vision will look for ways to build and rehabilitate community water points, latrines, showers and water tanks.

**did you know?**

World Vision is working with the Service Métropolitain de Collecte des Résidus Solides, the Haitian government’s main waste management authority, to improve the situation of the municipal waste management site at Truitier, the only recognised dumpsite in the city of Port-au-Prince. This project includes the distribution of chemical enzymes into liquid waste, which then reduce odour and break down the waste ready for treatment. One settlement pond for treating sewage has been built, a second is under way, and roads have been constructed for increased access to the dumping sites.
In October 2010, a cholera epidemic emerged in Haiti. The cases originated in the Artibonite Department and quickly spread to the Central Plateau, West, North and South departments. World Vision responded immediately, deploying medical teams to affected areas and providing medical supplies, hygiene kits and water treatment equipment to hospitals and communities.

World Vision’s cholera response is two-pronged, encompassing both prevention and treatment. Our priority is assisting communities where we have existing earthquake response and long-term development programmes.

In camps in Port-au-Prince, World Vision has increased clean water distribution and installed hand-washing stations, and has also implemented water testing, cleaning and desludging of latrines, and mass soap distributions and cholera awareness campaigns for children and adults.

Treatment of cholera requires rapid rehydration and the provision of antibiotics to fight the bacteria. The first line of treatment is provided through a network of community-based oral rehydration centres (ORCs), which treat milder cases and refer moderate and severe cases to cholera treatment units (CTUs) and cholera treatment centres (CTCs) respectively. World Vision plans to operate ORCs and open CTUs in underserviced areas of Port-au-Prince, La Gonave, Central Plateau, and the Fond Parisien border area. There are also plans to open CTCs in Fond Parisien and La Gonave.

Meanwhile, World Vision continues cholera prevention work on La Gonave and in the North, South, Artibonite and Central Plateau departments, all of which are among the most vulnerable to the spread of the disease.

Conditions conducive to the spread of cholera in Haiti, including a lack of potable water, inadequate sanitation and health facilities, and poor hygiene practices give experts reason to predict up to 400,000 cases in the first year.
Haiti is extremely vulnerable to hurricanes, flooding and landslides. Disaster risk reduction work (DRR) has been critical for helping families and their communities to be better prepared in the event of a disaster.

DRR also helps reduce stress, anxiety and fear by helping communities feel less vulnerable and more aware of potential hazards, threats and shocks. It encourages them to plan ahead and prepare adequately for the safety and security of their families.

Complementing DRR awareness, transitional shelters have been made flood- and earthquake-resistant, and where possible, site selection also takes into account potential hazards. While reforesting Haiti is a major task, several small-scale reforestation projects, including one planting seedlings in Canape Vert (a national park in Port-au-Prince), are helping to raise awareness and tackle deforestation. Canal and drainage improvements are also being done in many camps to reduce the impacts of localised flooding.

Crucial emergency supplies like tents, mats, sheets, blankets, kitchen sets, mosquito nets, hygiene kits, water containers, water purification tablets, flashlights, tarpaulins, baby kits and ropes are being prepositioned around Haiti in case of another emergency.

In the long term, DRR will be incorporated into all ongoing development plans.

**Hurricane Tomas**

In November, Hurricane Tomas hit Haiti. For 24 hours, heavy rains and winds lashed the western half of the country, displacing families, destroying agriculture and livelihoods, and flooding regions. The storm’s impact was far less than had been expected and the response work was relatively contained. On high alert for nearly a week, the Government and international community worked with local communities to raise awareness, preparing for the storm and securing operations. Emergency shelter and supplies were distributed to support families displaced by floodwaters. Although programmes were only marginally affected, World Vision offered direct support in La Gonave through the provision of emergency food and water.
A focused, integrated and responsive advocacy strategy is central to tackling the complexity of the crisis in Haiti. In the first year, the advocacy programme has focused on three issues: settlement for the displaced, ensuring effective use of aid, and protecting vulnerable children.

Haiti’s struggle results not only from the earthquake, the cholera outbreak and Hurricane Tomas, but from the failure of the governance system to prepare for, prevent and respond to such challenges. This governance structure also includes the United Nations stabilisation mission (MINUSTAH) and the multiple organisations that provide public services across Haiti. Advocating in this context requires an understanding of accountability from all governance actors and an intentional effort to promote government capacity for interventions.

Early in the response, World Vision conducted a Rapid Advocacy Assessment, including a child participation survey, to help establish the important themes and messages that would guide World Vision’s advocacy work. Child protection, education and opportunities for youth, food security and agricultural reform, shelter and land reform, disaster risk reduction, aid effectiveness and healthcare emerged as important themes. Safer shelter was the clear priority for displaced populations, while child protection concerns were prioritised to increase the effectiveness of the Children in Emergencies programme. Aid effectiveness was a necessary focus given the immense amount of funding committed by donor counties for both humanitarian response and reconstruction and development of Haiti.

World Vision has spoken out on behalf of and with children and affected communities, representing their voices and demanding accountability from the various parties responsible for ensuring children’s rights. The aim of this work is to achieve policy change that reflects the needs expressed by the most vulnerable, by both creating policies where none exist and improving them where they do. World Vision has been in direct communication with the Government of Haiti, including the president, prime minister and various governmental ministries. Direct engagement of the United Nations and its agencies and other international and local partners has been undertaken, and World Vision has leveraged its global presence to advocate for priority issues in the Latin America and Caribbean region and in Geneva, New York, Washington, Brussels, Brazil and Canada. World Vision has led the creation of the Global Movement for Children (GMC) in Haiti, which has endeavored to harmonise child-focused advocacy and child participation activities.

World Vision has contributed to policies on shelter, relocation and forced evictions in Haiti with the United Nations, the Interim Commission for the Reconstruction and Development of Haiti, and the Land and Property Working Group of the Protection Cluster. Numerous papers and reports have been published, including “Futures in the Balance: A Way Forward for Haiti’s Children” and “Rebuilding a Resilient Haiti,” to further outline World Vision’s advocacy agenda and steps critical to transforming the lives of children and youth in Haiti. Policymakers have also been lobbied through interventions for increased funding for children at various international events in New York and the Dominican Republic.
To ensure that the impact of advocacy work is sustainable and that children, youth and their communities are empowered to participate in decision-making processes, World Vision has focused on programmes to inform, train and mobilise these groups in civic action.

Advocacy efforts have contributed to the mobilisation of hundreds of children from across Haiti to voice their ideas and concerns on the rebuilding and development of their country. Through the partnership with the Haiti Global Movement for Children, children and young people have met with government officials to present their views and contribute to the ongoing conversation around reconstruction efforts.
World Vision recognises that there are many actors responding in an emergency. Coordination is essential to improving the quality, effectiveness and efficiency of the response and reducing the burden on recovering communities. The highest level of interagency, community, government and donor coordination has been critical for the Haiti response. While coordination can be time-consuming for humanitarian agencies, it is vital. It is through coordination that beneficiaries and areas of need are properly identified, assessed, assisted and monitored by those best placed to deliver services in an efficient and impact-assured way. Thirty years of work with the Government and other agencies has given World Vision a solid grounding in the Haitian context. This experience has been critical in the early response and the continuing work with both beneficiaries and aid providers.

who does World Vision collaborate with in Haiti?

- World Vision is an active member of, and in some cases leader in, the interagency “clusters” system, a grouping of United Nations agencies, non-governmental organisations, and other aid organisations that work to improve information management, coordination of activities and response standards and practices. There are eleven clusters within the system: Protection; Camp Coordination and Management; Water, Sanitation and Hygiene; Health; Emergency Shelter; Nutrition; Emergency Telecommunications; Logistics; Education; Agriculture; and Early Recovery.
- A participant in the Humanitarian Country Team, World Vision helps to ensure that the activities of organisations are coordinated and that humanitarian action in-country is principled, timely, effective, and efficient, and that it contributes to longer-term recovery.
- World Vision is engaged with the International Council for Voluntary Agencies (ICVA), InterAction, and the Comité Permanent Inter-organisations (CPIO) to coordinate on humanitarian standards, accountability and response efforts.
- Partnerships with local and international organisations have ensured the provision of locally appropriate services to target communities. World Vision partners with many local Haitian organisations as well as the United Nations and international humanitarian agencies such as Oxfam, Save the Children, Mercy Corps, the American Red Cross, Handicap International, and Samaritan’s Purse. Ongoing coordination with the Government is also a priority.
- As in any disaster, World Vision adheres to the coordinating mechanisms and professional standards set by the United Nations’ Office for the Coordination of Humanitarian Affairs (OCHA) and the United Nations’ Inter-Agency Standing Committee (IASC), which is an “inter-agency forum for coordination, policy development and decision-making involving key UN and non-UN humanitarian partners.”
While World Vision continues to respond to basic and immediate needs in Haiti, we also seek to identify innovations and partnerships that can strengthen our work, increasing our impact for the people we serve.

The Innovation and Partnering Sector is a new endeavor for World Vision’s emergency response. Haiti’s proximity to, and strong support from, the United States and Canada brought to light a rich market of opportunity where World Vision could begin to explore non-traditional methods of economic recovery.

World Vision is currently involved in an innovative pilot project in partnership with Digicel, an international telecommunications corporation. The project incorporates mobile banking technology into our cash-for-work programming, addressing challenges in providing timely and safe payments for cash-for-work participants.

World Vision is continually seeking opportunities to contribute to employment for vulnerable people in Haiti. One example of a successful partnership is World Vision’s establishment of a relationship with a donor specialising in textiles, which eventually led to the short-term employment of 36 women living in camps. In the pilot project involving local manufacturer Caribbean Crafts, the women have been producing bracelets made of recycled materials that are being sold in the United States.

In the upcoming year, World Vision will continue to pursue and develop strategic partnerships that will result in increased employment opportunities in Haiti. Furthermore, we will continue to seek innovations that will strengthen both our emergency and long-term development work to ultimately benefit the children of Haiti.

**Last Mile Mobile Solutions**

Using mobile computer technology, World Vision developed an electronic system to improve distributions, eliminating long waiting times for families and increasing accountability. The Last Mile Mobile Solutions system, which was trialed in Africa, is now being used in Haiti to register families and distribute food, shelter and other essential supplies. Photo identifications are created for each family indicating their needs. Handheld computers scan the cards at distribution points. Once registered, vulnerable families are easily tracked and can be assessed for further support. By December, World Vision had used the technology in 55 distributions to at least 31,000 people registered in the system. Data reports and records can be generated by the automated system, which has thus far been used to distribute food, cash, hygiene kits and shelters in Haiti.
World Vision is committed to the most vulnerable groups and communities in its areas of operation and has ensured that, from the first weeks of the Haiti disaster, response programming has been underpinned by accountability measures. Accountability not only emphasises providing feedback to donors, but embraces mechanisms to ensure high standards of programme quality and meaningful community participation.

global accountability

World Vision International is a signatory to the People in Aid Code of Best Practice in the Management and Support of Aid Personnel and of the Code of Conduct for The International Red Cross and Red Crescent Movement and NGOs in Disaster Relief. World Vision is committed to implementing the Humanitarian Accountability Partnership (HAP) Standard in Humanitarian Accountability across its humanitarian programmes. World Vision’s commitment to accountability and to meeting these international quality standards in programmes is captured in the World Vision Programme Accountability Framework, which outlines how field programmes can ensure that transparency, consultation, participation and methods for handling feedback and complaints are integrated into our programmes.

In recent years, World Vision has strengthened its application of accountability through a range of initiatives including the launch of an internal Accountability Community of Practice as well as consolidation of a global mandate for accountability across the organisation. Furthermore, World Vision is piloting a quality assurance model extending beyond programming and operations to support units such as human resources, finance, and procurement. The findings will help finalise a quality assurance framework for use in future humanitarian responses, enhancing organisational accountability, transparency, quality and effectiveness of programme operations.

did you know?

In recent years, World Vision has strengthened its application of accountability through a range of initiatives including the launch of an internal Accountability Community of Practice as well as consolidation of a global mandate for accountability across the organisation.

accountability in the field

World Vision has formed a Humanitarian Accountability Team (HAT), which aims to improve accountability in meeting the basic and urgent needs of children and their families in Haiti. The HAT works closely with communities living in camps to share information on who we are, how we work, and what we are doing in the target location as well as protection messaging.
Community consultation

Community consultation is undertaken frequently through assessments, household visits, beneficiary registrations and verification, project design, camp management committees and conflict mediation. Many front-line staff and community mobilisers are hired within project locations and provide regular input into programme implementation.

Another important accountability mechanism is a complaints and feedback process, which includes the dissemination of feedback forms to capture beneficiary complaints and feedback each day. Issues resolved/unresolved/requiring further action are communicated back and, where applicable, emphasis is placed on community suggestions to resolve the issues. Suggestion boxes have been installed in project sites to build safe and strong communication channels.

design, monitoring and evaluation

Design, monitoring and evaluation (DME) of projects is another key way World Vision promotes learning and accountability, as well as good development practise. Using effective DME ensures that interventions are appropriate for each context and enables World Vision to remain responsive in constantly changing environments. In Haiti, assessments have gathered information using focus group discussions, key informant interviews, contextual analysis and technical assessments.

Regular monitoring is undertaken using indicators developed during the programme design phase. Reflection and learning events are held regularly to ensure that monitoring results, community feedback and context implementation issues are examined and necessary changes are made to ongoing programme implementation. Evaluations examine the impact of projects and are used to improve future programming.

As in any emergency response, World Vision ensures staff are trained on the Sphere Standards, HAP accountability tools and Red Cross, Red Crescent and NGO Code of Conduct, highlighting and reinforcing that services are provided free of charge, on the basis of need alone, and should not be exchanged for goods or any kind of favors.

World Vision is committed to the highest levels of accountability in the Haiti earthquake response and will continue to practice integrity and transparency in the implementation of programmes.
Haiti Earthquake Response
Financial Accountability—Year One

Funds raised
US$194 million

Overhead rate†
US$13 million

Fundraising, administration and other non-ministry costs

Funding for response programme
US$181 million

Funds spent†††
US$107 million

- Advocacy $228,000
- Economic recovery $3,500,000
- Education $890,000
- Food security $34,600,000
- Health $4,600,000
- Protection programming $2,400,000
- Shelter $22,400,000
- Disaster mitigation $2,200,000
- Water and sanitation $7,300,000
- Monitoring and evaluation $523,000
- Programme management $11,100,000
- Resources distributed through partner organisations $17,000,000††††

Donations by country

- USA 54.9%
- Canada 21.9%
- Germany 3.2%
- Japan 1.6%
- Korea 1.8%
- Switzerland 1.2%
- Other (1%): Includes Austria, Finland, Italy, Malaysia, Netherlands, New Zealand, Singapore, Spain

† actual funds raised through September 30, 2010 and $22.5 million in grant funding (cash and food) committed for 2011 (all numbers are unaudited)

†† actual overhead through September 30, 2010 and projected overhead on committed grant funding for 2011 (all numbers are unaudited)

††† actual expenditures through November 30, 2010, with forecasts through January 12, 2011 (all numbers are unaudited)

†††† This total reflects cash raised through multi-organisation fundraisers and disbursed to participating charities as well as gifts-in-kind provided to partner organisations for distribution in Haiti.
Many challenges lie ahead in the reconstruction and transformation of Haiti. Due to the complexity of the crisis, and the compounding impact of cholera, the relief phase is still far from over, even though some recovery work has begun.

World Vision has committed to a minimum five-year earthquake emergency response. The organisation had been present in Haiti for three decades prior to the disaster and will continue to initiate and expand long-term development programmes that encourage well-being, especially of children and vulnerable groups.

In the years ahead, World Vision’s core goal in Haiti will be to help develop safe and sustainable communities, in collaboration with partner agencies, the Government and local authorities. The aim is to ensure that the needs of communities are properly addressed while building local capacity for disaster mitigation and reducing the potential for conflict.

Prior to the onset of the rainy season in June 2011, World Vision will complete construction of transitional shelters on the island of La Gonave and in the Corail resettlement camp. While thousands of homes and facilities are constructed, World Vision will continue to improve quality of life for families in camps, with activities in water and sanitation, health, education, child well-being and livelihoods.

In the long term, World Vision will work with families to appropriately transition services from camp-based to community-based models—meeting the needs of people still living in camps while working with those who are returning to their former neighbourhoods or starting again in new communities.

Sustainable solutions are World Vision’s ultimate goal. However, as the cholera outbreak spreads across Haiti in 2011, rapid prevention and response will continue to be critical. World Vision’s response will include cholera treatment units (CTUs), cholera treatment centres (CTCs) and a focus on infrastructure development in some of Port-au-Prince’s most vulnerable regions.

Infrastructure development is key if agencies such as World Vision are to contribute to improving the future of Haiti. World Vision is working in school construction and rehabilitation, sustainable water and sanitation solutions, and interventions combining disaster risk reduction and economic livelihoods.

In years to come, it will be critical to support programmes that strengthen the accountability of national and local institutions. This includes investments to increase the productivity and income security of the poorest households, reinforce the resilience of communities to disasters, and empower families to care for and protect their children.

World Vision seeks to achieve the best possible outcomes for the Haitian people, implementing programmes that strengthen communities and support the development and well-being of children.
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World Vision is a Christian relief, development and advocacy organisation dedicated to working with children, families and communities to overcome poverty and injustice. Inspired by our Christian values, we are dedicated to working with the world’s most vulnerable people. We serve all people regardless of religion, race, ethnicity or gender.