## CHAPTER 2

## DISASTERS AND PUBLIC HEALTH

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Over the last decade people concerned with public health have become increasingly concerned with natural disasters and their human consequences. There are a number of reasons for this. First, major disasters involving international aid are reported several times a year; as a result of better reporting by the mass-media, they appear to occur more frequently and they become more devastating as the population density in disaster-prone areas increases. Second, there is a strong feeling that nowadays disasters should be amenable to some kind of management to prevent them or mitigate their impact, or at least to improve rescue and relief.

Natural disasters can be defined as ecological disruptions exceeding the adjustment capacity of the affected community. They are of many types : earthquakes, floods, tidal waves, landslides, typhoons, volcanic erup-These are generally of sudden onset and imply unforeseen, serious, and immediate threats to public health. Droughts associated with famine, though they are predictable and develop slowly, may also be considered as natural disasters since they create similar problems requiring external assistance. There are many examples of such devastating events. In 1970, the top of the Huascaran mountain in Peru slipped into the Huaylas Valley engulfing several villages and killing tens of thousands of people in a matter of minutes. A few months later, approximately 250 000 people died when a typhoon flooded the coastal area of East Pakistan (now Bangladesh). Earthquakes were responsible for 5000 and 25 000 deaths in Managua (1972) and rural areas of Guatemala (1976), respectively, and perhaps three quarters of a million deaths in northern China in 1976. More recently, between 15 000 and