

Spending donations: Too often it is forgotten that all disasters are first tackled at the local level by local people using their own resources and skills. International donations supplement their efforts.

Somalia, 1992. James Nachtwey/Magnum.

conflict, where ICRC delegates can play an important role.

But in rapid-onset disasters, such as earthquakes and floods, even the earliest-arriving foreign teams are almost always too late to be effective and they have difficulty fitting in to the local relief structure. For disasters of a longer duration, they often end up carrying out work which could equally well be done by local people.

The key to saving lives and reducing suffering caused by disaster lies not simply in faster response but in better disaster preparedness, both in

the disaster-prone country and internationally. Experience has shown that good disaster preparedness programmes reduce the likelihood of extreme natural events turning into disasters. They also make local disaster response more effective and make better use of international relief assistance by providing a well-run structure of competent local counterpart organisations and individuals to work through.

Within disaster-prone countries, preparedness needs to be practised by local disaster response agencies at three levels:

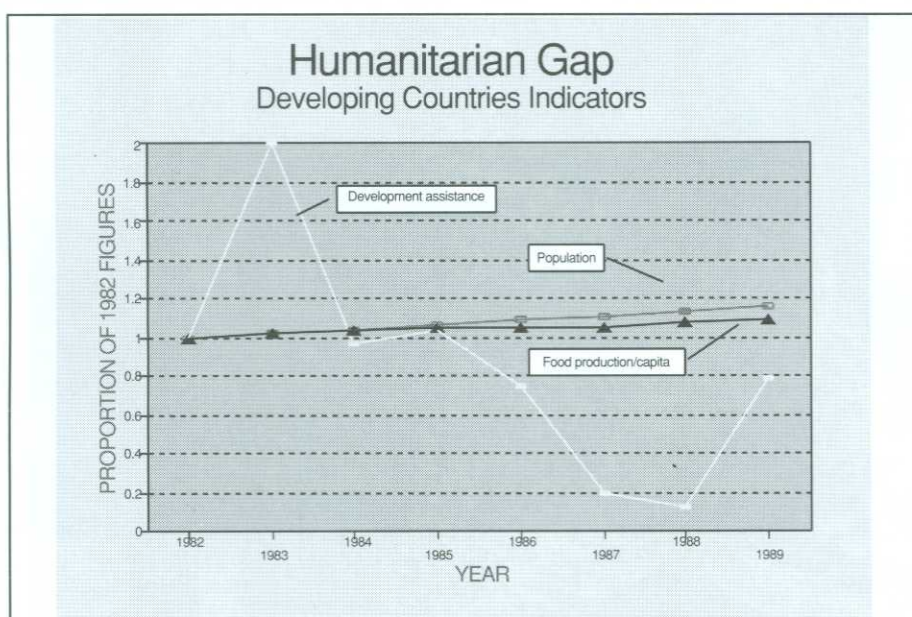


Figure 2: The humanitarian gap. Over the past decade, development assistance to the less developed countries has fallen. At the same time population has continued to increase with food production lagging slightly behind. (Source: World Resources Database 1991.)

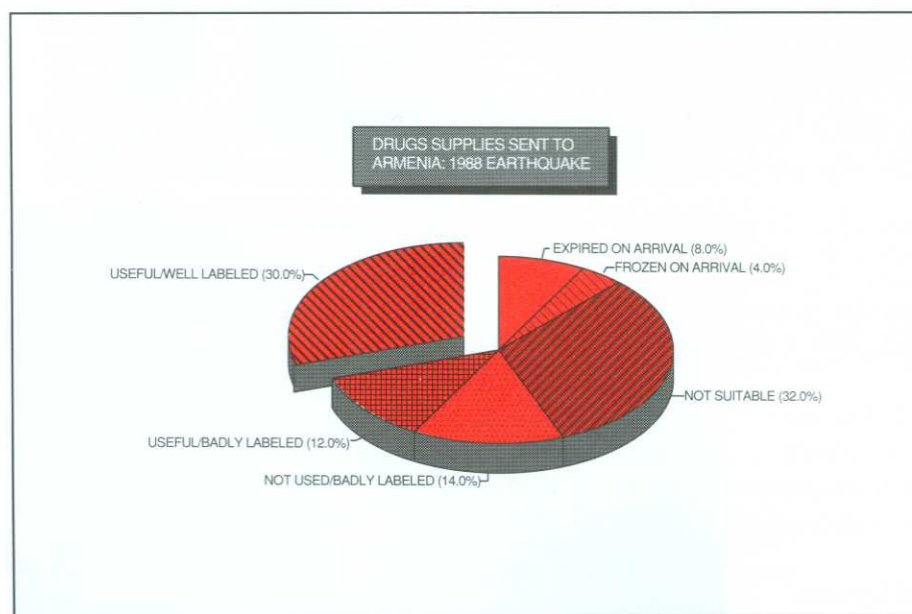


Figure 3: Inappropriate assistance. Only 30% of the drugs shipped into Armenia for relief use after the 1988 earthquake were immediately useful. (Source: Autier et al., *The Lancet*, 9 June 1990, pp 1388-1390.)

Firstly, they have to prepare their organisations to respond to the common emergency situations of the country, integrating disaster preparedness into normal development activities through training and strengthening local structures. The key is asking "who is affected by disaster?" and "how can they be helped to better respond to disasters?"

Secondly, local agencies must develop a clearly-defined role for themselves within their country's national disaster preparedness plan.

Finally, any country may suffer an emergency event or situation

which outstrips its internal resources. Countries need to prepare for the likely influx of aid that such a disaster will bring, and to deal with many new foreign organisations offering assistance.

If local disaster response agencies and their governments are able to progress on all three of these fronts, then some disasters will actually be prevented, the initial impact of others will be reduced and effectiveness of the aid response system will be greatly increased making the best possible use of limited resources.

Figure 4: Federation relief spending by global region. Across the world, the Federation's spending on disaster relief is on the increase. Although concentrated in Africa in the recent past, relief spending in 1992 showed a tremendous rise in Europe as the new states of eastern Europe and the former Soviet Union requested assistance. (Source: The Federation)

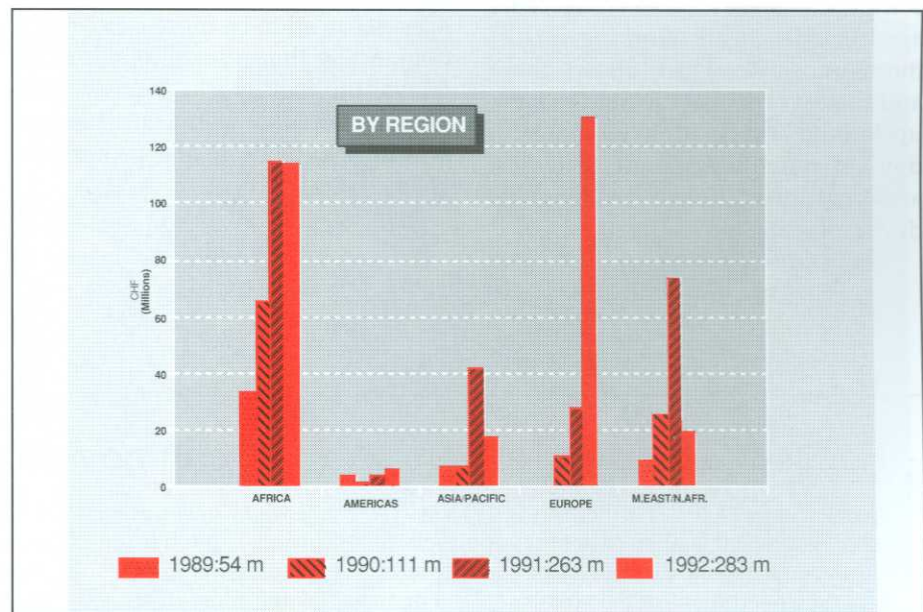
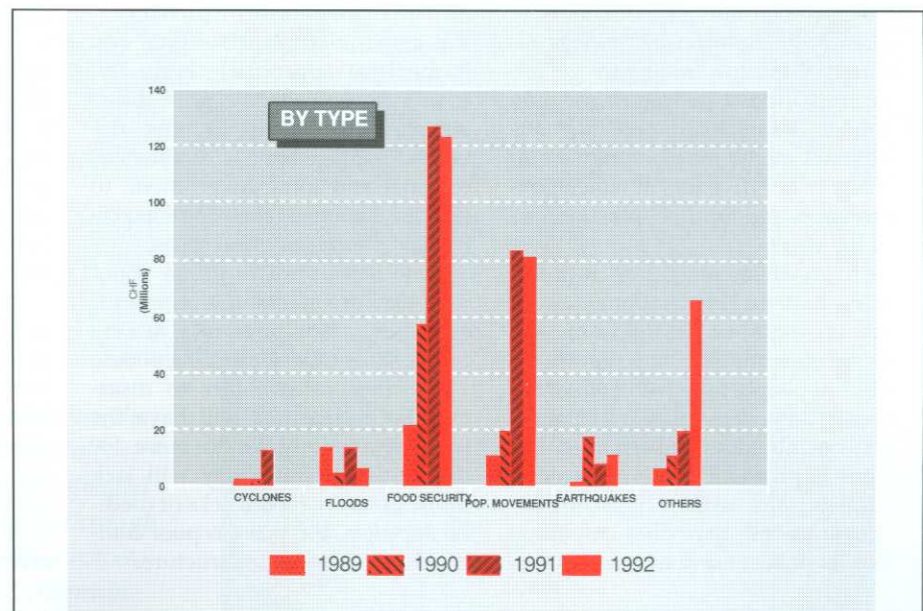


Figure 5: Federation spending by disaster type. In the past four years, the vast majority of Federation relief spending has been for the victims of food shortages and those displaced from their homes, including refugees. (Source: The Federation)



Technological advance

While technological advances open up new possibilities for disaster, as witnessed at Bhopal and Chernobyl, they also make possible better disaster preparedness and response. Satellite remote sensing helps forecast rainfall and crop yields, for example, providing an early warning of potential famine or floods.

Computers and telecommunications allow relief teams to communicate instantaneously with their headquarters, from anywhere in the world. One recent innovation in this area has been the setting up of a computer network between the relief agencies which are working in former Yugoslavia which allows them and their workers in the field to have up-to-date information 24 hours a day on relief needs and activities, and on political and diplomatic developments.

The same technology has also

allowed researchers to build comprehensive pictures of which areas of the world and which people are most at risk from disasters. However, the vulnerability and risk maps created by such research are still largely an academic tool. The lag-time between ideas being developed by research and their practical application for disaster reduction is still measured in years rather than months.

A major challenge for disaster managers is to find better ways of working with researchers and making the best use of their results. Researchers need the practical experience of the response agencies; agencies need to be more assertive in demanding that researchers must be relevant to their work. A close working relationship between the two will be critical in raising professionalism and effectiveness.

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Focus 3: Disaster response - what can governments do?

Hearing about a disaster thousands of miles away, it is often easy to say "somebody should do something", and the government of the country affected is usually high in the list of those expected to 'do something'.

Of course, the government may already be doing a lot, but its efforts will all too frequently go unnoticed. Indeed, people whose only sources of information are the international media may be unaware of many major disasters in which governments and local people did most of the work.

Even when emergency organisations and the international media are on the spot, the role of the national government and the efforts of local people may well not get the credit they deserve. Governments are not always the best organisations at promoting themselves in a disaster, and usually it is not the "government" that does anything, but its police, army or medical ser-

vices. The presence of government officials or ministers is often misinterpreted as exploiting a crisis.

For many of the most disaster-prone countries in the world, such as India, China or Ethiopia, the size of the country means that the central government in the capital city is the least appropriate body "do more". Those countries with disaster plans are likely to have devolved management of disasters to regional and local government, to take advantage of their local expertise and shorter reaction times.

The most disaster-prone countries are also some of the poorest countries, since poverty - among countries as much as among people - increases vulnerability to disasters. Poor countries will have the least opportunity to do more for their citizens since they will lack transportation, food stocks or medical supplies, and possess poor communications and infrastructure.

This lack of resources is not only an enormous drawback in assisting people after disasters take place. It also limits everything that a government can hope to do for its citizens in reducing their vulnerability to disasters.

In many countries, the unique legal position of the National Red Cross or Red Crescent Society gives it a pivotal national role in disasters, and often the Society is given government support, finance and other resources, as well as a coordinating role to manage other national and local staff.

Thus the sight of the Red Cross or Red Crescent emblem may well be evidence of government action, allowing international and national resources to be channelled fast and effectively to do more for all citizens affected by disasters, and working at all times to reduce people's vulnerability to future disasters.



Government disaster response: Within the limits of their resources - finance, staff, supplies - governments of disaster-affected countries respond rapidly to needs through their local emergency and health services. Mexico, 1985. Susan Meiselas/Magnum.

Disaster overview

Earthquakes, volcanoes hurricanes, floods, droughts and other natural phenomena are not just massively destructive in the short term, with an impact which appears to be increasing every year, but their effects on such human and economic factors as employment, balance of trade, indebtedness from reconstruction and loss of capital continue to be felt for many years after the event.

In the Philippines, the Mount Pinatubo volcanic eruption in 1991 left hundreds of thousands of people homeless. More than a year later 40,000 families (approximately 240,000 people) were still in "temporary" shelters, dependent on costly outside assistance. The 1991 floods in Anhui, China, killed thousands and destroyed the crops and homes of millions, leaving a long-term

economic impact. Iran's 1990 earthquake killed 40,000 but left thousands more disabled for life.

High winds and sea surges remain the most devastating natural hazards in most parts of the world, although earthquakes rank high in their capacity to kill. Droughts, though less spectacular, can eventually cause very large losses of human lives through starvation, disease and social disruption.

Although part of the perceived increase in disasters and their effects may be linked to better reporting and communications, it is clear that a wide range of factors - population pressures, conflict and refugee flows, environmental degradation, and rapid and unplanned urbanisation - have all helped increase the frequency of disasters and human vulnerability to them.

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Focus 4: Foreign medical teams versus local preparedness

Very few natural disasters have a special "epidemiological profile". Only earthquake disasters and a few sudden-onset disasters, such as flash floods, landslides and volcanic eruptions, present diseases or injuries rarely found in "normal" situations, such as high prevalence of fractures, with or without crush-syndrome, which require special assistance with sophisticated equipment. As the countries prone to earthquakes are now well identified, such equipment is available in many cases.

Twenty years of disaster epidemiology have shown that, in most disasters, people face the same health problems as in day-to-day life, but on a larger scale and with more limited resources. Such problems are diarrhoeal diseases, respiratory infections and - in some circumstances, mainly if preventive activities are neglected or populations are displaced or overcrowded - measles outbreaks or other communicable diseases.

Technological disasters are more

complex. Numbers affected are often limited but the death rate might be close to 100%. Given adequate financial and material support, local health systems are usually able to cope with victims and those affected but new concerns have appeared, such as the need for psychological support.

Local medical practitioners are better able to respond to immediate needs and the local health system is far better adapted to common local problems than any expatriate team. They are culturally fully integrated, with an extensive knowledge of typical symptoms (including psychosomatic) expressed by local people. They are operative without delay, if they have not been too affected themselves. They are also more able to ensure that treatment schemes are followed up.

In major earthquakes, such as those in Iran in June 1990 and Turkey in 1992, local health systems were able to cope with the high number of surgical cases removed from the rubble. Expatriate surgical

teams found themselves unemployed. External staff add to the affected community's burden, because they are not integrated into local systems. Even if "fully autonomous", arriving with food, water, shelters and interpreters, they need time to mobilise, travel, get on site and start work. During this time, a lot can be and is actually done by local staff and volunteers, if adequately trained and coordinated.

Rather than expatriate teams, the priority need is more local preparedness. This means local personnel, staff and volunteers, who know what should be done, how to organise it on a large scale in disasters and how to keep the community better informed of the hazards they are prone to as well as how to respond to any alert. This is already happening with the development of national, provincial and then local disaster plans, including mobilisation and training of volunteers in various organisations, such as National Red Cross or Red Crescent Societies.