

January 25, 2010

## Democratic Party of Japan Haiti Earthquake Aid Needs Assessment Mission Report Summary

### 1. Assessment Mission Members

Mission Leader: Yukihiisa Fujita, Member of the House of Councillors  
Director-General, DPJ International Department

Mission Member: Nobuhiko Suto, Member of the House of Representatives

Accompanying Staff  
Member: Yuka Uchida, Manager, DPJ International Department

2. **Schedule:** January 18 (Monday) to January 24 (Sunday) 2010

### 3. Objectives and Summary

In response to the significant damage caused by the major earthquake that occurred in Haiti on January 13 (JST), and based on the policy announced by Prime Minister Yukio Hatoyama at the party convention, the DPJ Standing Officers Council took the decision to send an Aid Needs Assessment Mission to Haiti with the aim of assessing the need for support for victims and the extent of the damage.

According to the Haitian Minister of Health, over 150,000 people lost their lives due to the massive tremor, the largest ever death toll caused by an earthquake alone. Moreover, the earthquake struck the capital city directly and destroyed many government functions, making this disaster totally different from past calamities.

The DPJ has previously sent assessment missions to the disaster zone following the Sumatra earthquake and tsunami, and major earthquakes in Pakistan and central Java and has made many proposals to the Japanese government. Based on that experience, we have also surveyed how disaster relief should be provided by Japan, a country of many earthquakes.

In addition to providing some of the donations of approximately 5 million yen collected from DPJ politicians to two hospitals in Haiti and a Japanese medical NGO, we will use the remainder of the money to make donations to various other NGOs as relief efforts get fully under way.

The major difference between the Haiti earthquake and other natural disasters is that countries are

engaging in “disaster relief diplomacy”. The earthquake has been labeled as a “major global disaster” and therefore countries have been judging the political and diplomatic significance of responding to this disaster, determining their degree of support and commitment in a top-down manner. We are also seeing a new type of diplomacy where, if necessary, prominent officials such as US Secretary Of State Hillary Rodham Clinton and UN Secretary-General Ban Ki-Moon visit the disaster area for themselves. We were able to confirm the crisis management response and disaster support diplomacy of various countries on the ground.

We recommend that the Hatoyama Administration position disaster relief diplomacy as one pillar of fraternal diplomacy and start work to create the appropriate organizational structures.

#### **4. Proposal: International Disaster Relief as a Pillar of Fraternal Diplomacy**

##### (1) Establishing Criteria and Decision-Making Structures for the Dispatch of Rescue Teams

- When a disaster occurs and the situation on the ground is unclear, it is correct to say that when in doubt, a team should be sent. After the Haiti earthquake, the government dispatched an emergency assessment team and a Japan Disaster Relief (JDR) medical team to participate in the second stage response. While we recognize this contribution, the JDR search and rescue team, which is responsible for helping save lives in the initial stages after a disaster, should have been dispatched immediately.
- Following the earthquake, the Japanese embassy in Port-au-Prince and the Chargé d’Affaires’ residence were both destroyed, and communications became impossible. Haiti’s presidential office building, various ministries and the National Assembly building were also destroyed leading to the collapse of governmental functions. Compared to previous natural disasters, it was incomparably difficult to obtain information. However, we believe that if an earthquake with an intensity of seven on the Japanese scale occurs and information cannot be passed on, then in such circumstances the rescue team should be dispatched in any case.
- Doctors participating in an Israeli Defense Force medical team were issued with orders, and were dispatched by air to the disaster zone without knowing where their final destination would be. The airport in Port-au-Prince (Toussaint Louverture International Airport) was closed, and so they were instructed to land in the Dominican Republic, but since that would have caused them to exceed the 72-hour time limit for the provision of emergency medical aid, they decided to fly to Port-au-Prince where they made a landing at the closed airport.
- Rescue teams cannot arrive in time if they wait for requests from the disaster-hit country or for official telegrams from the local Japanese embassy. JDR rescue teams dispatched overseas have not managed to save a single life in recent years. In the past, there were problems with the

lack of specialized aircraft and equipment, but now those problems have been overcome and Japan's rescue team is one of the leading teams in the world in terms of the equipment it has available. The proposals made by the DPJ assessment teams after the Sumatra earthquake and tsunami, and the earthquakes in Pakistan and Java has contributed to improvements including rescue teams making use of charter flights and using improved English language materials.

- We were struck by the following comment made by a medical team member: "The rescue team should have been dispatched. Making a fast start is very important. The initial response for domestic disasters is also too slow. We were full of expectation and just waiting for the government order to go".

### (2) Improving International Emergency Medical Assistance Activities

Thanks to the commitment and passion of related parties, Japan's emergency medical assistance has been making rapid strides, but the possibility remains that we are falling behind the times. In providing support to Haiti, there were limits to the surgical procedures we could provide, and it was impossible to ignore the feeling that we were behind other countries and NGOs who specialize in providing such procedures. While it is certainly true that our electronic equipment, such as digitalized x-ray generators, was well received, the largest need following a major earthquake is for surgical procedures, so it is difficult to be regarded highly unless such procedures can be provided. We must improve our response to emergency medical needs in times of disaster, including the issue of supplying anesthetic.

### (3) Making Japan's Emergency Medical Assistance Activities Unique

Of the mid and long-term problems frequently pointed out on the ground, one major issue is psychological issues such as PTSD which emerge once the direct effects of the earthquake have subsided.

We believe that it is desirable to set Japan apart from other countries which have field hospitals focusing on surgical procedures by adding some Oriental elements, for example Japan's traditional healing culture and spiritual care, acupuncture or moxibustion, to emergency medicine.

We also think that people would be able to appreciate the long-term benefits of Japanese medical service if we were to introduce the type of "converted bus" ambulance seen in Japan which can be used for transporting patients, helping them to return home, providing visits and consultations after they return home and also for use as a mobile clinic.

### (4) Bridging the Gap to Local Medicine, Bridging the Gap to a Stable Lifestyle

We believe that the reputation of Japan's emergency medicine would be solidified if we did not simply withdraw two or three weeks after a disaster but instead left behind simple clinics which

could then co-operate with local medical institutions and NGOs in order to build up local medical services.

We also are convinced that unique Japanese equipments and devices would be warmly received as part of efforts to promote local sanitation and health. Here we include:

1. Refuse collection vehicles (which can crush and process a large volume of rubbish)
2. Ambulances (which family members can also board and which have a range of different functions)
3. Water distribution vehicles (which have been well received in Palestine and other areas).

#### (5) Caring for Diplomats as Victims of the Disaster and Readying Backup Diplomatic Systems

- On this occasion Japanese embassy employees were victims of the earthquake. Fortunately there were no deaths or injuries, but from the day of the quake those who have lost their houses have been living in temporary accommodation while they continue to make a massive contribution to the difficult task of confirming the safety of Japanese nationals. Support measures are required which treat diplomats as disaster victims. Furthermore, as occurred following the Sumatra earthquake and tsunami, diplomats who are responsible for identifying dead bodies are deeply psychologically affected and require appropriate psychological care. We consider the decision to allow diplomats affected by the disaster to return briefly to Japan to be appropriate.
- The Japanese embassy and Chargé d’Affaires’ residence were both destroyed and it became impossible to use satellite communications, backup generators or stockpiled fuel. A safe, information on Japanese nationals, computer systems and accounting documents remain inside the destroyed embassy. We must rapidly improve our building standards for diplomatic missions to take account of prospective disasters and also review our backup communication systems.
- It was fortunate that Ambassador Shinomiya, who serves as ambassador for both the Dominican Republic and Haiti, and is based in the Dominican Republic, was not in Haiti at the time of the earthquake. As the only member of the embassy staff who escaped the disaster, he was therefore able to lead the survey team in carrying out disaster assistance activities.

#### (6) Cooperating with the US and Other Countries through Providing Support to Haiti

- Providing disaster assistance in Haiti is, to a certain extent, a way of providing assistance to the US, which sees Haiti as being in its backyard and whose domestic politics are affected extensively by Haiti, and also to the UN which is at the center of the disaster relief activities

despite having lost a large number of its employees. A Self Defense Force C130 transport plane took 36 Americans back to the US, and from the perspective of cooperating with the US, such assistance is welcome.

- The UN lost approximately 80 staff including the Secretary General's Special Representative to Haiti, Hédi Annabi, the largest ever loss of life among UN staff. UN Secretary General Ban Ki-Moon described the earthquake as the worst humanitarian crisis of the decade and traveled to Haiti himself to provide support. The UN has shown a strong determination to provide assistance and has requested disaster funding of approximately 57 billion yen.

#### (7) Producing Intermediate and Long-Term Support Plans

Haiti's central government functions have collapsed and all of the country's hospitals have been very badly damaged. Japan should become actively involved in providing mid to long-term assistance ranging from interim disaster assistance to reconstruction assistance and then development assistance. As the poorest country in the western hemisphere, there is much potential for reconstruction and development assistance in Haiti to contribute to Haiti's growth as a nation. In particular, many earthquake victims are sleeping out in the open at the moment, and it is extremely important to provide tents and then move on to providing support for the construction of accommodation. Providing assistance in building for Japanese style earthquake-resistant accommodation will protect against future disasters and make a valuable contribution.

Haiti shares an island with the Dominican Republic and the latter, while not such a rich country itself, has offered generous support. From the perspective of coexistence between the two nations, Japan should also consider providing support for the Dominican Republic alongside support for Haiti.

### **5. Summary of Assessment Visits and Meetings**

#### (1) Meeting with Acting Special Representative of the Secretary-General (SRSG) Edmond Mulet (UN Special Representative) and Assistant Secretary-General of the UN Department of Peacekeeping Operations (January 20, 11:00-11:30, inside the UN compound)

At the start of the meeting, House of Councillors member Fujita passed on the condolences of Prime Minister Hatoyama regarding the loss of 80 lives among UN staff when the major earthquake occurred. He also passed on the message from Senior Vice Minister for Foreign Affairs Koichi Takemasa who hopes that a conference for assistance to Haiti scheduled for January 25 (Sunday) in Montreal, Canada will prove fruitful. He also explained that in addition to providing 5 million

dollars and dispatching Japan Disaster Relief Team, the Japanese government is also considering the dispatch of a Self Defense Force medical team of around 100 personnel.

Acting SRSR Mulet gave the following explanation about the current situation. The overall security situation is "stable and peaceful". Some media reports that gangs are looting in Port-au-Prince are exaggerated. Many police in Haiti are at their posts, and the situation is gradually improving. Relief supplies are starting to arrive and are being distributed over an ever wider area. 47 rescue teams are active in the area. Going forward, we will likely see increasing mechanisms for co-operation among the various groups and teams. The Japanese medical team has a good cooperative relationship with the Sri Lankan army in the city of Léogane and as such, they have been sent to an optimum location. One worry for the future is that following the earthquake around 2000 gang leaders escaped from jail.

House of Representatives member Nobuhiko Suto mentioned that he had heard in the Western media that mass burials of victims had angered local people. Mr. Mulet replied that there are currently two burial sites and each individual body is being photographed for confirmation. Mr. Suto also asked about the risk of a possible outbreak of contagious disease. Mr. Mulet replied, "There is currently no sign of an outbreak of contagious disease. There is a shortage of distilled water, but we are expecting a delivery of 10,000 gallons and the delivery of water is proceeding smoothly". He added confidently, "We expect to be able to provide food to 1 million people over the next 2 weeks and 2 million people over the next four weeks," however, also said, "Yesterday we had enough food for 100,000 people, but we were only able to deliver food to 25,000 people because of a shortage of trucks and other methods of transport".

(2) Courtesy Visit to President René Préval (12:20-12:40, National police building inside the airport perimeter)

Since the Presidential Palace was severely damaged by the earthquake, we paid a courtesy visit to the President of Haiti at the national police building inside Port-au-Prince airport. Upper House member Fujita passed on messages of condolence for victims of the earthquake from Prime Minister Hatoyama, and also explained Japan's assistance and donations which have been collected from DPJ lawmakers. He also said that, he would attend a UNOCHA ministerial meeting in Montreal on January 25 to provide assistance for Haiti and that hoped suitable assistance would be arranged together with Foreign Affairs Senior Vice Minister Takemasa. The President replied the various negotiations and adjustments would be required to execute efficient assistance activities and noted one example of aircraft landing and taking off at Port-au-Prince airport.

In response, Mr. Fujita asked what concrete policies would be required to provide assistance. The President responded that he intended to set up a committee on January 22 to discuss arrangements for assistance with the UN, the EU and other partners and he hoped that the committee discussions

would result in useful conclusions. The President once again thanked Japan for providing assistance, and the meeting ended with firm handshakes between the President and Diet members Fujita and Suto.

(7) Haiti Community Hospital (HCH) Visit (Port-au-Prince, January 21, 2010 9:00-9:40am)

We visited the Haiti Community Hospital, a non-profit organization in Port-au-Prince. According to the Director of the hospital, following the earthquake, a large quantity of aid supplies had arrived from hospitals and medically-related NGOs. In addition to these supplies, we also saw foreigners who had come to participate in the relief effort, and the Director explained to us that they were considering accepting assistance from a Japanese NGO. A large number of patients were lying down in a variety of tents pitched outside the hospital. Many patients were apparently afraid of remaining indoors since they did not know when the next tremor might strike. Inside the hospital everything appeared well ordered, but we were told that immediately following the earthquake, the corridors had been overflowing with patients, and covered in blood.

In consideration of the hospital's past record and of the role it is playing during the current earthquake, we made a donation of 10 000 dollars from the contributions received from DPJ Diet members. House of Councillors Member Fujita explained that if the HCH was to submit a proposal explaining the hospital's needs in relation to undertaking medical care of quake survivors via the Japanese Embassy in Haiti, the DPJ would consider providing further assistance.

(8) Haiti National University Hospital Visit (Port-au-Prince, January 21, 2010, 10:00-10:45 am)

The US military was maintaining a strict security presence in the vicinity of Haiti National University Hospital. This hospital is receiving patients from the US Navy hospital ship USNS Comfort, and piles of aid from the Comfort were visible. US military doctors were also carrying out emergency medical treatment. In addition to around 100 US military personnel, around 10 Canadians and a European emergency team were also participating in the relief effort at the hospital.

A Japanese national, Mukkaka Ota (tentative translation) is working as a doctor at the hospital, and he was in the middle of performing emergency surgery at the time of the DPJ mission's visit.

Following the visit, as we were returning to our car, we crossed paths with the Reverend Jesse Jackson, who had just arrived to pay a visit to the hospital.

We also donated 10 000 dollars to this hospital from DPJ Diet members, and Representative Fujita once more explained that if the hospital were to submit a proposal regarding future needs, the DPJ would consider providing further assistance.

(11) Meeting with Shigeru Suganami, President of the Association of Medical Doctors of Asia (AMDA) (meeting also attended by Toru Takegama, Chairman of the Association of Japanese Nationals in the Dominican Republic)

DPJ members Fujita and Suto met with Shigeru Suganami, President of AMDA, who was in the capital of the Dominican Republic San Diego making preparations to provide medical relief assistance to Haiti. Suganami explained the difficulties of starting operations within Haiti itself, following the collapse of the government infrastructure there, and said that ADMA was currently considering setting up its operations in one of two locations in the border region. Both Diet members explained the current conditions in Haiti. They made a donation of 10 000 dollars from DPJ Diet members, and Fujita explained that if AMDA submitted a proposal outlining future needs etc., the DPJ would consider providing further assistance.

**6. Pictures Taken by the DPJ Haiti Earthquake Aid Needs Assessment Mission**



With SRSG Edmond Mulet



With President René Préval



International Red Cross/Red Crescent Site



Israeli Defense Force Field Hospital





Israel Defense Forces Field Hospital



Japanese Chargé d'Affaires' Residence in Haiti



Japanese Embassy in Haiti



Japanese Embassy in Haiti:  
Showing Severe Cracks and in Danger of  
Collapse



Haitian National Assembly Building



In Front of Haitian Central Post Office



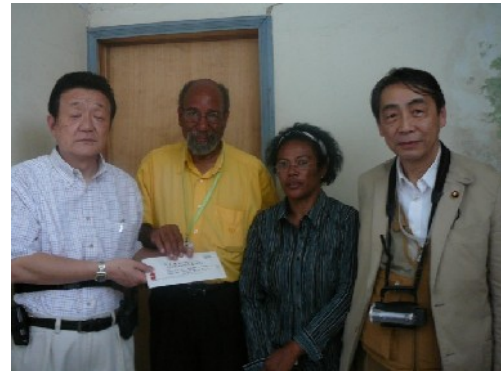
With Members of Japanese Advance Team



Haiti Community Hospital



Making a Donation to Haiti Community Hospital



...And to Haiti National University Hospital



Haiti National University Hospital



JICA Japan Disaster Relief Team

Patients waiting by the gate for the clinic to open



JICA Japan Disaster Relief Team



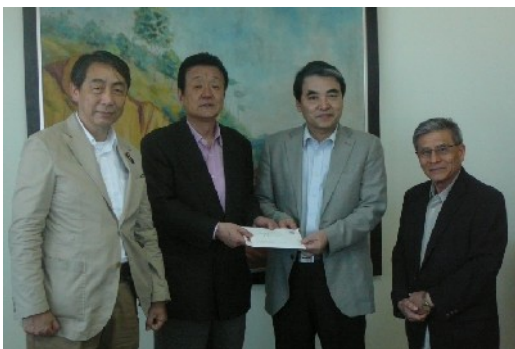
JICA Japan Disaster Relief Team



JICA Japan Disaster Relief Team



MINUSTAH (UN Stabilization Mission in Haiti)  
Sri Lankan Army Base



With AMDA (Association of Medical Doctors for Asia)  
President Shigeru Suganami