



President's message. The earthquake in Haiti

*Karl Stobbe, MD,
CCFP(EM), FCFP
Beamsville, Ont.*

*Correspondence to:
Dr. Karl Stobbe;
kstobbe@srpc.ca*

Shortly after the earthquake in Haiti, I was asked the question, "What can the SRPC do to help?"

It would appear that we're perfect for the job. Canadian rural physicians are true generalists. We meet our patients' needs using the tools at hand. Médecins sans Frontières is aware of this and preferentially recruits rural doctors. The SRPC is currently managing projects in 3 developing countries and exploring projects in 3 others. Yet after conferring with our International Committee chair, the SRPC's official answer to the question about Haiti was, "Send money." Here's why.

Some authors describe health care needs in disasters as 4 overlapping phases.¹ During the first 2–3 days, traumatic injuries dominate. Then, for about 2 weeks, there are complications caused by delayed treatment of initial injuries. Then, an increase of regular health problems, such as obstetric, pediatric and psychological conditions, exacerbated by the disaster predominate. Finally, an accumulated need for elective care is seen. In most disasters, foreign medical help arrives after 3–14 days.¹ "In fact, only a handful of survivors owe their lives to foreign teams. Most survivors owe their lives to neighbours and local authorities."²

The inevitable shortage of charter flights that occurs when a wide variety of governmental and nongovernmental organizations, plus concerned individuals, travel to a disaster zone raises the expense. Flights go to the highest bidder, not the most needed services and supplies. Blocked or destroyed roads cause problems with transportation from the airport to the place of need. This

results in increased costs and delays the arrival of help.³ Further, "Unilateral contributions of unrequested goods are inappropriate, burdensome, and divert resources from what is needed most." "Past sudden-impact natural disasters ... have shown the need for international contributions in cash and not in kind."²

Canadian rural doctors are accustomed to working with running water, electricity, equipment and supplies, as well as a health care team, including nurses and administrative personnel. Remaining local health care facilities and personnel require support and augmentation, not competition from foreign teams. This requires some prior knowledge of the local health care system. "A hasty response that is not based on familiarity with local conditions and meant to complement the national efforts only contributes to the chaos."³

Canadian rural doctors and the SRPC have much to contribute in disaster relief at home and abroad, but it takes planning and preparation. We can't run to a disaster zone and expect to be useful. Discussions at our Rural and Remote Medicine Course, Apr. 22–24, 2010, will clarify our role in future humanitarian disasters — as individuals and as an organization.

REFERENCES

1. von Schreeb J, Riddez L, Samnegard H, et al. Foreign field hospitals in the recent sudden-impact disasters in Iran, Haiti, Indonesia, and Pakistan. *Prehosp Disaster Med* 2008;23:146-51. Available: http://pdm.medicine.wisc.edu/Volume_23/issue_2/vonschreeb.pdf (accessed 2010 Feb. 13).
2. de Ville de Goyet C. Stop propagating disaster myths. Center for International Disaster Information. Available: www.cidii.org/articles/paho.htm (accessed 2010 Feb. 13).
3. Krin CS, Giannou C, Seppelt IM, et al. Appropriate response to humanitarian crises. *BMJ* 2010;340:c562.

Society of Rural Physicians of Canada

Société de la médecine rurale du Canada

PRESIDENT / PRÉSIDENT

KARL STOBBE, MD, CCFP(EM),
FCFP
Beamsville, Ont.

PRESIDENT-ELECT

PRÉSIDENT DÉSIGNÉ

JOHN WOOTTON, MD
Shawville, Que.

SECRETARY / SECRÉTAIRE

GARTH CAMPBELL, MD
Beausejour, Man.

TREASURER / TRÉSORIER

TODD YOUNG, MD
Springdale, NL

MEMBERS-AT-LARGE

MEMBRES EXTRAORDINAIRES

DARLENE KITTY, MD, CCFP
Chisasibi, Que.

GABE WOOLLAM, MD
Happy Valley-Goose Bay, NL

ADMINISTRATIVE OFFICER

RESPONSABLE ADMINISTRATIF

LEE TEPPERMAN
SRPC Office, Shawville, Que.

SRPC / SMRC

Box 893,
Shawville QC J0X 2Y0;
819 647-7054,
877 276-1949;
fax 819 647-2485;
admin@srpc.ca
srpc.ca