

drastic climatic changes with devastating results, including: (1) shifting of seasonal winds, with the creation and spreading of deserts in the northern areas; (2) alteration in crop patterns with social upheaval; (3) starvation; and (4) the inundation of large areas of land. When this chaos begins, developing countries such as Nigeria, Kenya, etc. also will be affected, along with developed countries. The solution to the problem of CFCs in principle, though not in practice is simple: STOP MAKING THEM!! But one cannot burn carbon without producing carbon dioxide. Which is why new ways to produce energy must be used?

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### (A79) Information for Action? Analysis of Needs Assessment Reports Available on the Internet Following the 2010 Haiti Earthquake

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On 12 January 2010, a powerful earthquake struck Port-au-Prince, Haiti. To help ensure outside assistance, information that describes and quantifies the severity of the disaster is needed urgently. Several studies have suggested that needs assessments are seldom performed, and that initial media images direct relief interventions rather than needs. This study sought to assess the extent of information on the situation that was available rapidly after the earthquake. The aim was to document and analyze information on severity and needs available on the Internet during the first week after the Haiti earthquake, and to compare the results with official severity data. Reliefweb is the most used information-sharing Internet portal following humanitarian disasters. All documents related to the Haiti earthquake published on Reliefweb during the first seven days after the earthquake were selected. Indicators that described the severity of the earthquake were searched for, including the number of affected and dead and the assumed needs of the population. Results were compiled and cross tabulated for frequency and compared with official outcome data. A total of 822 reports were posted. An estimate on the number of dead was available in 10% of the reports, ranging from 40,000 to 100,000. The most commonly reported number of affected was three million. The estimated numbers of dead and affected were similar to the official data. Not one posting described the method used for the estimates they provided. These results indicate that the severity of the earthquake was relatively well documented after four days. However, a striking finding was the lack of description of how the data had been collected. It remains difficult to determine the reliability of needs estimates, as they were done and posted by the relief organizations themselves. No independent attempt to estimate the needs was found.

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### (A80) Second Thoughts about the Health System and Dilemmas in Wide Disasters, Using Haiti as a Case Study

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In the Indonesian earthquake a total 21 USAR teams comprising upward of 688 rescue personnel and 67 dogs. The cost of which was estimated at tens of millions of dollars did not succeed in extricating any trappers. In Haiti, there were around 350000 casualties and 250000 dead. In this disaster 43 international USAR missions comprising over 1700 rescuers were deployed. These teams succeeded in rescuing approximately 134 trapped people, an average of about 3 trapped people per mission. During this period one field hospital treated a total of 1,111 people, 737 of these patients were hospitalized, 243 surgical procedures were carried out, of which at least 200 were life-saving procedures. In addition many other life-saving procedures that were not directly related to the injuries inflicted as a result of the earthquake were also carried out. Without the resources of the field hospital it is very possible that most of the trappers would not have survived. It mean; One field hospital (personal: 120 people) was able to save more people than 43 USAR teams, all of the highly dedicated and professional, who worked day and night to extricate people trapped.ngs. It seems that there is no need to carry out a complex economic analysis in order to determine the cost benefits and understand the significance of providing field hospitals and clinics as soon as possible after the occurrence of a disaster stemming from an earthquake. A consensus/brainstorming conference is needed.

**The aim:** To formulate a logical and balanced approach to configuring and dispatching rescue and medical missions. The major goal of the conference would be to establish the guidelines for rescue missions that will result in the rescue of the maximum number of people, and to provide guidelines for the provision humanitarian aid in parallel to the rescue missions.

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### (A81) Process Improvement in Disaster Relief: Improvement of Disaster Resource Utilization through Systematic Organization

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**Introduction:** Upon arrival of the SUNY Downstate Medical Center team for their disaster relief mission in Port au Prince, Haiti, it was observed that obstacles to patient care were directly related to difficulty in locating supplies and medications in a timely manner. In addition, staffing schedules had not been correlated to patient flow patterns.

**Methods:** A survey was conducted at L'Hôpital de l'Université d'Etat d'Haïti (HUEH) in Port au Prince, Haiti by Emergency physicians and nurses from SUNY Downstate Medical Center. The following variables were obtained to assess existing resources: number and types of providers available, provider staffing schedules, medication/supply inventories and management systems. Basic ED operation and supply system flow maps were created.

**Results:** The assessment revealed a large volume of patients presenting in the early morning. Night shifts were inconsistently staffed with ED physicians. Although medications and supplies were reported to be available on-site, they were not tracked, inventoried, or centrally managed. As a result, this