



## Haiti, we can see your halo

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**T**he more one responds to humanitarian disasters, the easier it gets." This is a phrase I have heard all too often. *Easier*? Perhaps the logistics, the details of what to do and how to do it, might get easier as the disaster-response community learns, but I am not sure that in some ways it *ever* gets easier. After having now worked in 4 serious natural disaster zones, I can say that Haiti was not any "easier" than the others.

If we had been able to predict one of the most devastating places in the western hemisphere to have a 7.0 magnitude earthquake, it certainly could have been Port-au-Prince, Haiti. With 55% of the population living in extreme poverty before the 2010 earthquake, infant mortality estimated at 54 per 1000 live births, an adjusted maternal mortality ratio of 670 per 100 000 live births, 22% of the population younger than the age of 5 years being severely or moderately underweight, 42% of the population lacking access to safe water,<sup>1</sup> and challenges with governance and instability over the years, was this earthquake just adding another insult, the last straw, to a badly worn country? Perhaps, but maybe not.

The underlying poverty struck me as intensely as anything else. Of course, the fractured buildings and the complete collapse of people's lives, dreams, and aspirations were apparent at every turn, but so was the degree of poverty: The people who lived under tarps, focusing on how to feed their children for the day and trying to keep their families dry during the rainy season. The father who painstakingly hauled his 10-year-old unresponsive daughter to the distant hospital after she had been in a coma for 5 days, clinging to the hope that we could try to cure her. At this point he had free access to health care—something that he normally does not have. It is estimated that about 47% of the population in Haiti lacks access to basic health care.<sup>1</sup>

Many factors made Haiti a difficult place to be: The daily notes that I received from the translator begging for money to feed his family who had not eaten for 3 days. The constant medical decisions that needed to be made with scarce resources. The level of awareness one needed to have for security threats. The knowledge that needle-stick injuries were quite common.

There is a fine line between hope and despair. Some days it wavered like a trapeze artist, staying on target but facing hurricane-force winds rising up to confront even the strongest optimist.

### Unfortunate realities

Ethical dilemmas were part of everyday life and medical decision making. The one thing that can supersede making a decision in the best interests of the patient is the issue of personal and team security. Fortunately, this is not as common a predicament when practising medicine in Canada. In Haiti, security is of paramount importance, and sometimes patient decisions are influenced by this prevailing issue. We heard stories of colleagues who had been kidnapped while doing their humanitarian work. This is unfortunately not a new problem for the international community, as targeted attacks on foreign relief workers have occurred in many other circumstances.

Late one afternoon, a 9-year-old girl with burns over 40% of her body needed to be transferred to a facility that could better manage her injuries. There was a facility that could take her and manage her wounds immediately. The problem was that it was too late in the evening to do a transfer without possible security threats. Her best interests were now threatened because of security. This seems to go against every grain embedded in us as health care providers. The situation felt like a tug-of-war. Even now, weeks later, I am still not sure what the right answer was.


One Sunday morning no local nurses came to work at the hospital. No nurses for the entire hospital! How is this acceptable? Intravenous lines running dry. Dressings not changed. Pain medications not given. The story goes much deeper than this. Health care workers had not received payment even for 6 months before the earthquake. Determined, committed, and trained individuals were coming to work for many months never knowing if they would be paid, not knowing if they could support their families; some had lost everything. Many Haitian-trained doctors leave the country for complicated reasons. How can one be expected to maintain enthusiasm, commitment, and determination if there is no money to feed and clothe your children and family?

### Hope for Haiti

So what about the future of Haiti? The Harper government has proposed a long-term commitment of Canadians to support Haiti. How should we Canadians move forward to provide that support? Perhaps this is an opportunity for change, for new directions in a country wrought with so many challenges. Some believe that there is no hope; that the situation is futile; there has

already been huge investment in Haiti by the health sector, with more than 250 partners and with arguably only marginal health effects.

Having had my shirt tugged at one too many times, having seen the look in the father's face as he pled for his child, and having met committed doctors and nurses who want to see change are all experiences that make me believe things can be different. Haiti is indeed a place of contrasts. The combination of the negative and the positive is the reality of what Haiti is like. Dad pleading for his daughter and the tugging at my sleeve tells me that something needs to be different, and the committed doctors and nurses demonstrate that there is a will for things to be different. There is not going to be a magic formula, but we cannot give up. In Canada, our medical and residency programs are gearing more toward global health curriculums. We are all learning about true partnerships with colleagues in the south, how we can learn from each other, and how global

health is really about poverty and inequities. We also have a lot to learn from our partners in Haiti. Canada and Haiti have indeed had strong ties in the past, and this is the time to stand up in solidarity. We must all advocate for strong governance in Haiti so that we, together with our Haitian colleagues, might give more hope to a country so much in need. The future for Haiti is wide open and there remains both hope and opportunity for change. Let us do it together. 

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**Competing interests**

None declared

**Reference**

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