Independent Review of the U.S. Government Response to the Haiti Earthquake

Final Report

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Foreword

The 2010 earthquake centered near Port-au-Prince, Haiti, was unique in the nature of the devastation, the scale and scope of the response (particularly by the United States), and the public interest in its aftermath. Despite its uniqueness, however, it did present the opportunity for learning about the quality and coordination across key US disaster response assets that may be deployed in future large disasters. Recognizing this, the US Agency for International Development, along with its sister Federal agencies, sought to complement the large number of agency-specific After-Action Reports with a careful, clear-eyed look at the "whole of government" response.

This report recognizes and applauds the heroic and altruistic measures taken by hundreds of US Government personnel, from diplomats, aid workers and soldiers on the ground to the highest level officials in Washington, starting within minutes after the quake. The authors also recognize that in any humanitarian disaster, and particularly one as large, complex and visible as this one, the rush to respond to human suffering can look – in retrospect – imperfect in many ways. This report documents those imperfections so that across the US Government we can create stronger and more robust systems for coordination and efficient deployment of resources during future responses.

The report on the lessons learned from the first six months of the response to the 2010 Haiti earthquake was prepared by an independent expert team. While the team was contracted by USAID and obtained some logistical support from USAID's Bureau of Policy, Planning and Learning and Office of Military Affairs, neither USAID nor any other US government agency was asked to provide clearance on the report's content. Therefore, the text of this report represents the findings, conclusions and recommendations of the expert team, and does not necessarily represent the views of the US government.

Broad US government input has been sought throughout the preparation of this study. To provide on-going input and facilitate contacts within key agencies, a Technical Support Group was convened at the outset of the process, in June 2010 with multiple representatives from USAID and the Departments of State, Defense, Homeland Security, and Health and Human Services. In July 2010, a large interagency workshop was hosted by the National War College, at which 130 USG officials were brought together to identify key themes that merited special examination by the independent experts. More than 168 people, most within the USG, were interviewed (see Annex 10.2). Finally, each agency was asked to review draft versions of the document and to provide comments, which were considered by the independent team and, in some cases, led to important modifications. In the final stage, agencies were offered the opportunity to provide comments on the findings, conclusions and recommendations; these are included in Annex 10.8 of this report for the three agencies that decided to pursue this option (the Department of Defense, the Department of Health and Human Services, and USAID). Sincere gratitude is due to the many individuals who contributed to the report.

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Lastly, conclusions and recommendations expressed in this document reflect the views of the authors and do not reflect the views or opinions of USAID, other U.S. Government agencies, or Macfadden.

Opening Note from the Independent Evaluation Team

Drawing collective lessons from disaster response is a difficult exercise, as individual perspectives can be very different or even opposing. But each individual perspective can, nonetheless, be defensible on its own merits. Lessons from disaster responses are also colored by moral imperatives which may override concerns of efficiency. In the end, decisions on which lessons to keep and which to reject remain in the hands of public policymakers.

Learning the lessons from the Haiti earthquake experience was no different.

For this report, we undertook many interviews and were privy to diverse perspectives, some of which converged but many did not. There are numerous individuals who we did not meet, due to time constraints and lack of availability, whose insights would have improved our understanding of the relief process. We also should have returned to discuss our findings with many of our interviewees. What was clear to us, from the start, was the extraordinary dedication and hard work of many individuals at all levels of authority. Their collective engagement in trying their best to help the victims of the Haitian catastrophe is in itself the first lesson in generosity and commitment to the misfortune of others.

We had hoped to invest greater efforts in measuring more accurately the quality of aid and its impact on beneficiaries. However, a disquieting lack of data on baselines against which to measure progress or even impact forced this task to the back burner. We realized that devoting more energy to this task could take up all the time and human resources we had available. Thus, some useful lessons in that direction remain unclear.

Another issue addressed in this report but lacking in-depth analysis is the relationship between development goals and disaster relief. While this is widely recognized as an important issue in the international community, the U.S., other donor governments, and the UN need better common policies and tools to address the matter. This inadequacy will be increasingly felt as reconstruction progresses in Haiti.

Some of the lessons presented in this report are easier to implement than others, and policy choices will have to be made to determine which ones can be pushed through and which will require more time and effort.

We emphasize that strengthening U.S. Government response to overseas disaster relief sits squarely in the territory of the U.S. Agency for International Development (USAID), not only within its Office of U.S. Foreign Disaster Assistance, but throughout the agency and its Missions abroad. That is where the first reforms must begin.

Commissioning this study is not only an expression by USAID and other government actors of sincere commitment to strengthening the effectiveness and efficiency of U.S. international disaster response, but the statement of work for the study also shows clarity of thinking and vision. The scope was arguably broad, but we hope the report responds satisfactorily to the challenge and, at the very least, opens doors for review or reform of processes in the future.

Finally, we should not lose sight along the way that all of these efforts, at the end of the day, should help the victims of disasters in the poor countries of the world, whose reserves are small and whose survival often depends on fast, effective, and equitable aid.

Debarati Guha-Sapir

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1. Executive Summary

On 12 January 2010, the deadliest natural disaster in modern history occurred in Port-au-Prince, Haiti: a 7.0 magnitude earthquake affected over 2 million people, displacing 1.6 million, injuring 300,000 and killing 230,000. Many reasons have been identified as to why the earthquake caused such extensive damage. First and foremost, the Government of Haiti (GOH) lacked the capacity and resources to mount a swift and effective response after the event – a consequence of being one of the poorest countries in the world. In addition, lack of building codes and absence of building regulation enforcement led to the collapse of many key government and private buildings, as well as thousands of homes. Haiti is very prone to natural disasters and has suffered major human and material losses from storms, floods, and droughts in the last decade.

Haiti's geographical and political importance to America led to an unprecedented response by the United States Government (USG), supported by the international community who reacted from far and near. The day after the earthquake, the President of the United States asked for a "whole of government" response, mobilizing many agencies and departments in the response. In addition to the U.S. Agency for International Development (USAID) and Department of State (DOS), the standard responders in international disasters, many other U.S. agencies weighed in with management personnel, equipment, special expertise, and other forms of support. Many individuals, starting from the highest levels, devoted themselves to the intervention, working around the clock without respite and well beyond the call of duty. The human tragedy brought out the best in the government team, where all involved were fully and sincerely engaged in doing their best to help the beleaguered Haitian community. These efforts were unequivocally extraordinary in their scope, commitment, and compassion. Whatever mistakes were made or inefficiencies generated in the process were clearly largely due to the unprecedented nature of this exercise.

The ultimate objective of the study is to improve the U.S. Government response to global catastrophes by informing decision makers about the strengths and shortcomings of the Haiti response, and by offering recommendations about how best to organize response to major humanitarian crises. The scope of the study focused on the U.S. Government's relief and assistance to the Haitian Government and people in responding to the disaster. Due to the circumstances surrounding the magnitude of the earthquake and the location of the epicenter, additional humanitarian and diplomatic lines of effort were required by the U.S. Government, including: providing assistance to the U.S. Embassy community; providing assistance to American citizens; and assuring general security and stability were maintained in Haiti. While this study does not review the additional lines of effort, it does take into consideration its effect on the broader U.S. relief and recovery assistance provided in Haiti.

The aim of this review was to examine three broad areas of action primarily related to relief and recovery assistance to the Haitian Government and people: (1) internal U.S. Government coordination; (2) partner coordination; and (3) response effectiveness. The timeframe of the report is from the date of the event, 12 January, through 30 June 2010. All data collected and analyzed correspond to this timeframe. The report draws on more than one hundred and fifty interviews and several hundred documents to identify lessons learned in the first six months of the response. Many of these lessons are shortcomings and need changes in the system, but many are successes. If the report focuses on the shortcomings, it is to learn from mistakes and make the management of catastrophes a little easier in the future than it was this time around.

The proximity of Haiti to the U.S. and the historical relationship between the two countries played important roles in determining the United States Government's role in responding to the earthquake. In March 2009, ten months before the disaster, Secretary of State Hillary Clinton declared Haiti a foreign policy priority for the United States and worked closely with the GOH to strengthen diplomatic and humanitarian relationships. The Memorandum of Understanding (MOU) signed between President Preval and Ambassador Merten allowed the U.S. to rapidly assume responsibility for the sea and airports, which facilitated the flow of international aid.

In response to the disaster, the U.S. Government contributed more funding to relief in Haiti than any other foreign government. The total sum contributed was also greater than any amount previously pledged by the U.S. Government to a foreign disaster. Over $1.1 billion was spent during the first six months following the disaster, mostly through the U.S. Agency for International Development and Department of Defense (DOD). U.S. citizens contributed an additional $1 billion to the Haiti relief effort through private donations.

The response to the earthquake in Haiti introduced several innovations with implications for future humanitarian responses.

These include new management paradigms, new strategic planning processes, new operational mechanisms to coordinate civilian-military activities, and new or emerging information and communication technologies. However, the most important positive outcome of the management of the response was that predictions of ongoing deaths, infectious disease outbreaks, mass migration, and political insurrection did not occur during the first six months of the response. While cholera occurred nine months after the disaster, the overall immediate response saved countless lives. The following summarizes accomplishments and challenges faced by the U.S. Government and its partners in providing relief and recovery assistance in responding to the earthquake in Haiti.

Quality of the Response

Urban Search and Rescue. The U.S. Government deployed six Urban Search and Rescue (USAR) teams to Haiti, contributing more than $35 million towards such efforts. American USAR teams made 47 live rescues. In total, 43 international USAR teams rescued 136 individuals in Haiti. The Government of Haiti terminated search and rescue efforts on 26 January 2010.

Potable Water. Following the earthquake, access to potable water was identified as a top priority. The Water and Sanitation (WASH) cluster worked quickly to coordinate water trucks, provide water bladders, and restore Port-au-Prince's water system. By the beginning of February, Port-au-Prince's municipal water authority was producing more water than before the earthquake due to improved access to fuel: water production had increased to between 120 and 150 million liters per day. By the end of April, 1.3 million people were receiving treated water.

Nutrition. Many humanitarian organizations were involved in providing nutritional services to Haitians affected by the earthquake. Although it took a couple of weeks until a fixed-point food-distribution system could be implemented, the World Food Programme (WFP) immediately began food distribution around Port-au-Prince following the earthquake. According to the Inter-Agency Standing Committee (IASC), over 500,000 children aged 6-59 months and pregnant and lactating women received supplementary feedings, with coverage varying from 52%-87% of the targeted population.

Health. The U.S. Government and entire world's response to provide medical care was extraordinary. U.S. Government civilian agencies and military personnel immediately provided emergency medical and health-related assistance to Haiti. A number of American teams and personnel, including Disaster Medical Assistance Teams (DMAT) from Health and Human Services (HHS), the USNS Comfort, and a MediShare hospital, provided care to Haitians. The deployment of many specialized and surgical assets often provided a standard of care far better than what had been present before the earthquake, but also led to a number of amputations and complex operative procedures. This created problems for the long-term care of post-operative Haitians. Guidance as to the applicable standards of care and processes for making decisions about standards of care was not provided consistently to U.S. responders. Thus, medical personnel on the ground were not adequately prepared to practice in accordance with local and catastrophic standards of care. Prior to the earthquake, many of these specialty services were not available to most Haitians, and the current Haitian health system could not provide long-term wound and fracture care. Also, many of the providers rapidly rotated out of the country, so there was limited continuity of care. The GOH Ministry of Social Affairs estimates that there are between 4,000-5,000 newly disabled people due to the earthquake. The U.S. Government strategy specifically includes monitoring and supporting rehabilitation and disability care for earthquake trauma patients.

In an effort to monitor disease trends and detect outbreaks, Haiti's Ministère de la Santé Publique et de la Population (MSPP), the Pan-American Health Organization (PAHO), the Centers for Disease Control and Prevention (CDC), and other agencies launched two reportable surveillance systems: an Internally Displaced Persons Disease Surveillance System and a National Sentinel Surveillance System. Since the earthquake, the U.S. Government has collaborated with the GOH and the MSPP in reconstructing the Haitian health care system, particularly emphasizing the importance of disaster preparedness for future emergencies given the impact of past hurricanes.

Migration and Settlement. Approximately 1.5 million Haitians were displaced as a result of the earthquake, triggering the creation of over 1,000 spontaneous settlement sites. In the first two months of the response, there were 277,000 tarps and more than 37,000 tents distributed. As the response shifted from the emergency phase to the relief and reconstruction phase, the types of shelters distributed shifted from tents and tarpaulins to long-term transitional shelters. Transitional shelters are more durable, as they consist of a concrete foundation and a timber or steel frame, but take longer to build. These shelters offer more privacy, space, and protection compared to emergency shelters. As of 2 June, 96,504 transitional shelters had received funding

to be built, including 47,500 shelters funded by USAID/Office of U.S. Foreign Disaster Assistance (OFDA). However, by the end of June, only 5,000 of the USAID/OFDA funded shelters were actually constructed. Much of the delay stems from the problem with rubble removal and land rights issues, which serve as key barriers to non-governmental organization (NGO)-implemented shelter programs.

Food Security and Distribution. Within a week after the earthquake, WFP had provided over 200,000 people with over 1,000,000 food rations. Targeted food aid programs were designed to assist displaced people and host families accommodating displaced individuals in and outside of Port-au-Prince. By the end of March, when the Government of Haiti decided to end general food distribution, about 4 million Haitians had received food assistance. Within the first six months of the response, USAID/Food for Peace (FFP) provided $125 million in Title II funds and delivered 106,110 metric tons of Title II food aid to Haiti. It is important to note that while the price of most staple foods did rise after the earthquake, it seems that most prices returned to pre-earthquake price levels, likely due to large-scale food aid distributions (see Figure 4 and Figure 5).

Rubble Removal. The removal of rubble was and still remains a pervasive problem in relief efforts. The earthquake generated 20-25 million tons of rubble, and much of the debris needed to be cleared in order to rebuild homes, communities, and livelihoods. The U.S. Government assisted in these efforts through the U.S. military and NGO partners. It is estimated by members of the Project Management Coordination Cell (PMCC) that less than 1% of the total rubble has been cleared from the city at the time of this report. Plans for removing the rubble are underway; however, given the current supply of trucks and equipment available, all plans would require years, not months, to remove all the debris.

Cash-for-Work. The purpose of cash-for-work (CFW) programs is to promote economic and political stability by stimulating the economy through job creation. In initial relief efforts, CFW rapidly restored purchasing power and stimulated the markets to re-open. Following the earthquake, USAID provided funding for many cash-for-work programs in a variety of sectors, including rubble removal, transitional shelters, agricultural development, and WASH interventions. As of 15 April, there were 25,691 individuals employed through cash-for-work programs. By mid-June, USAID provided over $19 million to partners implementing exclusive cash-for-work programs and $53 million to partners implementing programs with a cash-for-work component.

The Response in Washington

Unlike the tsunami that struck the Indian Ocean in 2005, the earthquake in Haiti occurred in America's backyard, only 600 miles south of Florida. Proximity to the U.S. and the complex history of U.S.-Haiti relations led to a great commitment from the U.S. Government to help save lives and relieve suffering among the Haitian population and among Americans living in Haiti. This also brought about an increased level of media scrutiny and Americans' desire to help. In a post-9/11 and post-Katrina United States, politicians could ill afford to be seen as ignoring the Haiti disaster. This led to a level of urgency to respond with every resource the U.S. Government possessed, beginning with the White House.

In almost all disasters, the affected country has principal responsibility for responding to the disaster in partnership with the United Nations (UN). However, both the Government of Haiti and the UN were devastated by the earthquake, requiring greater assistance and leadership from the international community. Therefore, Washington-based U.S. Government leadership was critical for and, ultimately, successful in providing this assistance. Hours after the earthquake, President Obama pledged full U.S. support for Haiti and called for swift and coordinated action, leading to a "whole of government" response for the first time in an international emergency. This approach brought new resources to humanitarian relief efforts, creating opportunities for increased capacity, but also for increased complexity and inefficiency. For instance, during the first few weeks of the response, policymakers became deeply involved in tactical decisions in Haiti. This made daily operations in the field difficult, as responders' time was diverted from providing full-time relief efforts in the field to respond to requests from Washington.

President Obama named the newly appointed USAID Administrator, Rajiv Shah, as the Unified Disaster Coordinator and identified USAID as the lead federal agency to coordinate the response for the U.S. Government. Administrator Shah was sworn into office on 7 January; only five days before the earthquake. USAID coordinated the humanitarian response, provided immediate relief through grants to non-governmental organizations, and developed strategies for recovery and

reconstruction. Through grants, USAID has provided victims with food aid, shelter, medical care, and other critical services. However, the agency lacked the political standing and operational capacity to completely fulfill its leadership mandate. OFDA was charged with managing U.S. foreign disaster assistance funds appropriated to USAID and helping to coordinate the use of such funds with other international partners to respond to the disaster.

The Department of State (DOS) supported USAID and served as the lead diplomatic agency. The DOS worked closely with the U.S. Embassy in Haiti by providing resources that enabled the U.S. Embassy to host humanitarian assistance interagency personnel. Members of the State Department worked closely with the GOH to develop long-term development and reconstruction plans.

The DOD launched Operation Unified Response (OUR) to provide critical support to the humanitarian mission. The U.S. military applied its unique skills in logistics, transportation, assessment, and security to re-establish operations at the seaport and airport, assist in debris removal, provide patient care on the USNS Comfort and USS Carl Vinson, provide general security for humanitarian activities, and assist in engineering projects. Due to the unusual circumstances governing the response, the Joint Task Force (JTF), which was critical to the rapidity of the response, was set up immediately. Most military staff indicated that the SOP was flexible enough for the Haiti emergency and could have been fully applied. Furthermore, policymakers' lack of articulated requirements and goals for standing down the JTF, and the devastating conditions on the ground, prolonged its mission in Haiti. Additional concerns have been expressed about the size of the military response and its technical knowledge in humanitarian operations. While the military has undisputed expertise for executing large-scale logistical and security responses, it is less proficient in delivering direct humanitarian aid.

The main difficulties in Washington arose from the need to adapt to the reality of a multi-agency response on such a grand scale. Due to this large-scale response and the involvement of high-level policy staff, an interagency task force was established to coordinate the response across all U.S. Government agencies. This interagency Haiti Task Force was set up concomitantly in the Response Management Team (RMT) space, which strained the two management structures. As a result, the coordination of activities was de facto conducted in parallel through the Interagency Haiti Task Force and the Response Management Team, creating a stressful environment for command and control. The variety of coordinating meeting schedules in Washington and in Haiti, as well as the different reporting requirements and schedules for different agencies, further aggravated the operating conditions for response staff in Washington and Haiti. These problems were compounded due to a lack of pre-defined roles and responsibilities among participating agencies, particularly the role of USAID as the lead agency for the humanitarian response and the position of DOS in its role as the lead diplomatic and foreign policy agency.

However, despite these obstacles, the level of cooperation between agencies in the interagency task force was widely praised. The use of interagency liaison officers was especially noted as positive and considered to have played a key role in communications and coordination.

The Response in Haiti

The U.S. Government response in Haiti was unprecedented in its size, approach, and scope because of the acute and unique needs of the country. The earthquake devastated the GOH and UN and severely limited their capacity to respond to the disaster. As such, there were important deviations from the standard U.S. Government response to foreign disasters in order to support the GOH and UN with the response. These included the use of the Office of Response Coordinator (ORC); the mobilization of many U.S. Government agencies that do not normally respond to international disasters; and the rapid deployment of people, equipment, and supplies into the field before the embassy or USAID Mission had determined specific needs. Coordination among all the various federal agencies was complicated due to the lack of human and material resources available to the U.S. Government in Haiti and the significant losses suffered by U.S. Government personnel working in Haiti at the time of the earthquake. While providing personnel and supplies to Haiti was seen as critical to the response by political leaders in Washington, there is always a need for the rational deployment of assets and people so that the first responders in-country have the logistical and infrastructure capacity on the ground to absorb such large volumes and use them effectively in the overall response. The proper sequencing of resources provided by the U.S. Government is critical to effective response management in the field.

The use of new managerial hierarchies coupled with the need to adapt to new procedures led to difficulties on the ground for the USAID Mission and embassy, which struggled to meet their own mandates while adapting to the unfamiliar and rapidly evolving management structures. Parallel lines of command and control within USAID and the absence of clear protocols that defined responsibilities based on comparative advantages and assets resulted in time loss, inhibited service efficiency, and decreased logistical support for relief staff. This situation was aggravated by the arrival of numerous U.S. Government agencies in Haiti with unclear terms of reference, and often without appropriate country clearance by the embassy. Some agencies with disaster and emergency healthcare expertise in the U.S. but little prior international humanitarian experience (such as FEMA and certain departments within HHS) experienced operational problems and therefore were not maximally utilized. U.S. Government technical agencies with a narrow disciplinary focus and prior international experience (such as the CDC, U.S. Geological Survey (USGS) and FFP) had fewer operational issues, were better organized, and had fewer complaints about how activities and events unfolded.

Transitioning from relief to long-term reconstruction and development was initially manifest (in March 2010) through funding for transitional programs such as cash-for-work and government support programs. In addition, DOS and USAID collaborated with the Government of Haiti and other multi-lateral donors to develop the National Action Plan for Reconstruction and Development in Haiti. The U.S. worked closely with the Government of Haiti to establish the Interim Haiti Recovery Commission (IHRC) and the Bureau for the Resettlement of Internally Displaced Persons (IDPs). While the U.S. Embassy and USAID managed the implementation and execution of these programs, Washington-based policymakers also provided strategic planning and technical assistance. U.S. Government agency operations in Haiti were compromised by rapid staff turnover and multiple waves of staff deployment. One such example is OFDA, whose staff resources were stretched to the limit. While widely recognized as highly competent technically, the depth of the OFDA Disaster Assistance Response Team (DART) in terms of staffing could not cope with the demands that were placed on it for assessment, grant making, civil-military coordination, donor coordination, reporting, information management, and transitional planning.

Initially, the major US-funded NGOs that were already present in Haiti took important action independently, which was critical during the first week of the response when no coordination mechanisms were functioning. The creative and dynamic response of the NGOs was fully supported by the USAID and OFDA staff in country, which rapidly approved changes in the scopes of work for their NGO partners, allowing for resources to be re-directed to meet the new needs of their beneficiaries. Following the first week of the response, the NGOs were coordinated through the UN cluster system, in which the U.S. Government participated. The Haiti emergency has demonstrated that there is a need in USAID to improve the quality and rapidity of disaster response but also to invest in overall strategic planning. In that context, a detailed review of USAID's strengths and weaknesses can identify cost-effective areas within the Agency that best respond to its mission of development and humanitarian aid. Additionally, existing agreements may be broadened with Departments, such as DOD, whose resources are complementary to that of USAID, to further rationalize costs as long as these services are less expensive than those available commercially. USAID should focus on strengthening its own unique expertise and most importantly, develop its strategy to fulfill the mandate as a lead agency in disaster relief and development.

USG Information and Data Management Systems

During the Haiti response, limitations related to information management followed two major lines. First, there were limited data available for tactical and operational decisions; and second, there were overwhelming requests for data and information from policy leaders in Washington that made systematic data collection more difficult. These demands were often driven by reports in the media. Some recognized that the former (limited availability of operational data) led to the latter because policy leaders, the Congress, and the White House all had important information needs. The latter (frequent requests for information) detracted from the on-ground response because of the need to constantly answer questions and "chase down" facts.

The U.S. Government did attempt to coordinate data and information sharing across the interagency; however, due to the massive quantity of the data collected by the military, NGOs, UN, USAID, international donors, and even private citizens, the creation of a common operating picture for the overall response coordination was practically impossible to achieve. The main impediment to establishing an effective common operating picture was not the amount of data available, but rather the quality of the data. Since multiple U.S. agencies worked in parallel

to conduct needs assessments and report responses, a number of different data sets of varying data quality were created. As a result, there was great difficulty in sharing and standardizing information. An effective central data management system was clearly lacking in the response.

Indeed, post-disaster surveys produced unusable results due to quickly planned surveys and the absence of standardized data collection methods. Planning of surveys is often done precipitously, paying little attention to details that are of great importance to overall data quality. When survey planning is poorly done, it requires more time to clean the data, which can impact the quality of the results and cause delays in releasing the findings. Delays in the release of reports reduce the value of the survey as data becomes out of date. One clear example of this from the earthquake response is Rapid Interagency Needs Assessment in Haiti (RINAH). While the assessment was conducted from 23 January to 6 February, logistical, security, and methodological concerns delayed the publication of the report over one month.

Overarching Recommendations

The following are seven key recommendations drawn on overall analyses:

1. Structural strengthening of USAID/OFDA as lead federal agency for international disaster response

USAID should be empowered to lead international disaster response effectively. There is a need to strengthen USAID's institutional structures, increase its staff size and capacity, broaden its interagency agreements at higher levels, and upgrade its technological systems. All federal agencies and departments should adhere to the USAID command and control structures, if the President appoints USAID as the lead agency. These measures will enable improvement of USAID/OFDA's capability to perform in catastrophes and build its capacity to coordinate partners in an interagency response. A "whole of government" approach should not be used in future international disaster response until a framework is created to manage the full engagement of the U.S. Government. USAID, as an agency, is best placed to lead development and humanitarian crisis response, both of which should be expertise-led initiatives. Indeed, USAID should continue to take the lead in international disaster response, but its capacity to respond should be strengthened and enhanced, and the agency should be given additional political support to respond. This includes, but is not limited to, the ability to determine the need for and the deployment of additional federal resources during an international disaster response. Strengthening the disaster response expertise and capacity of the local Mission is essential, especially in disaster-prone countries. The USAID Mission in the country, under Chief of Mission Authority and guidance, should head coordination among U.S. agencies and the host country and with other non-U.S. donors and players in the response. USAID should expand its official staff to levels that are appropriate to its mandate of operations. Reinforcing the USAID Mission staff directly, rather than setting up new structures such as the Office of the Response Coordinator, may prove to be a better solution. Other services of USAID should be able to support the extraordinary needs of OFDA when necessary, by providing short-term staff who are trained for action in humanitarian crises. In the same vein, USAID should reduce its reliance on outside contractors and expand its staff levels to improve its effectiveness. In addition, USAID's budget autonomy will enable rapid action and organization of its resources for more efficient relief/development. All of this points to the creation of a special entity within the USAID Mission to help coordinate and manage the response, rather than establishing parallel structures with repetitive roles, responsibilities, and reporting structures.

Agency-wide strengthening of USAID is a short-term goal that is more tangible than other recommendations, such as the development of an international response framework. As such, this recommendation should not be overlooked.

2. Bridging the divide between diplomatic response and humanitarian relief

Most international disasters involve elements of diplomacy, emergency relief, and development; Haiti was no exception. DOS primarily covers the diplomatic and foreign relations side of disaster response, as well as American Citizen repatriation, while USAID is responsible for the immediate relief, rehabilitation, and long-term development actions needed in-country. Both agencies have established protocols and procedures for disaster response and in some areas, these procedures overlap. Given the scope and scale of the response in Haiti, there was confusion between DOS and USAID at times about which agency was in charge of which components of the response. While USAID was appointed as lead federal agency in the response, many decisions were in fact made by senior DOS officials.

Therefore, there is a need to clearly separate and delineate the functions of DOS and USAID for future large-scale disaster responses. Mechanisms to strengthen the coordination and collaboration between the political/diplomatic service and those of the humanitarian and development agencies need to be fostered. This will improve the understanding and coherence to meet both the short-term emergency response and the longer-term development aims in the affected country. These mechanisms should be made permanent so that diplomatic and development services can be mutually beneficial for all future disaster responses. S/CRS is a relatively new entity that has potential to bridge the span between DOS and USAID. S/CRS should be reviewed by both DOS and USAID to determine whether it can serve as a platform to begin working towards improving coordination among the political/diplomatic and humanitarian/development arms of the U.S. Government in the area of large-scale international disaster response. Should it be determined that S/CRS is not the appropriate vehicle to achieve increased interagency coordination between DOS and USAID, then the two agencies need to work together to establish a mechanism or set of procedures to accomplish this necessary measure.

3. Convene an interagency committee on global humanitarian crises coordinated by the NSC for "whole of government" response situations

When responding to catastrophes, high-level leadership is needed to coordinate response across the U.S. Government. We recommend the creation of an interagency committee on global humanitarian crises, led by the National Security Council Staff, to coordinate response to catastrophes such as the Haiti earthquake. Transparent criteria that define "extraordinary circumstances" or "catastrophes" should be prescribed. The committee would set priorities and call upon specialists from U.S. Government agencies and other institutions (such as universities and technical institutes) in order to coordinate humanitarian policy across the executive branch. This will ensure a unified approach amongst the diverse agencies. The USAID Administrator should be a member of this NSC-led committee. This committee should focus on making policy- and strategy-related decisions, rather than providing operational and technical guidance, in order to ensure it does not interfere with daily field operations.

4. Strengthening of an International Response Framework

In the case of Haiti, the existing inter-service agreements and protocols between different departments and specialized technical agencies were not sufficiently clear and comprehensive to manage a "whole of government" response. The weaknesses of the protocols and agreements, whether related to staff exchanges, budgetary responsibilities or operating procedures, significantly compromised the efficiency of the whole operation and created tensions between groups who were all prepared to do their best within their own frame of reference.

The difficulties in the management of the response in Haiti revealed the need for a detailed management framework which defines responsibility, the command and control hierarchy, and reporting relationships, especially addressing the rapid mobilization of U.S. Government staff, specialized capabilities, and assets that can be utilized to their maximum effectiveness in the most efficient manner.

Existing framework agreements, liaison structures, budgetary provisions, staff deployments, and other key components should be reviewed in depth and a reformed management structure should be established for future "whole of government" responses. A well thought out, detailed management framework for international disasters which draws upon wide-ranging experience and expertise will not only help USAID to coordinate federal interagency participation in overseas disaster relief response, it will set out the structures, guidelines, and roles for all other actors for a "whole of government" response, where coordination and policy guidance will need to ramp up to larger scales and more wide-ranging areas compared to a standard large-scale disaster. The framework should develop a unified command structure, designate roles, and be scalable, flexible, and adaptable. It should reinforce the existing U.S. Embassy, USAID Mission, and USAID/OFDA structures in addition to strengthening and modernizing pre-existing agreements between agencies. Most importantly, the framework should address issues related to the mobilization of resources, the upgrading of information systems and communications, and the establishment of common terminology throughout agencies, reporting, and management. The National Response Framework (NRF) used for domestic disaster response could be a fruitful starting point for the development of an international framework. It is a framework that has been developed over years and tested on the ground and provides effective functional guidance. The NRF also has a permanent team which re-evaluates its relevance and

keeps it updated continuously. This constant update and review function is key for effective action frameworks of this type and, thus, our recommendation would also include dedicated staff to ensure such a framework represents the latest available information and incorporates all recent institutional changes. In Annex 10.4, we suggest possible components of an International Response Framework (IRF) that could be used to manage all U.S. Government foreign disaster response.

Finally, we would like to underline that while the IRF may solve some of the problems of interagency management and coordination, it should not be seen as a solution for USAID's capacity to respond when staffing in the field and in Washington, DC is insufficient to meet the ever increasing demands.

5. Civil-military collaboration in humanitarian crises

Humanitarian Assistance/Disaster Relief (HADR) has evolved as an important mission of the DOD. "The Department of Defense should be prepared to lead stability operations activities to establish civil security and civil control, restore essential services, repair and protect critical infrastructure, and deliver humanitarian assistance until such time as it is feasible to transition lead responsibility to other U.S. Government agencies."[1] This requires improving the DOD's capacity and expertise to meet this mission. Integrating the U.S. military into humanitarian response activities is both important and complex. Military activities can best focus on humanitarian assistance and disaster relief such as logistics, assessment, security, and, in limited areas, the direct provision of humanitarian assistance when no other option is available, such as local government agencies, NGOs, or private sector providers. However, this scenario is extremely rare and, hence, the use of DOD capabilities for direct humanitarian assistance needs to be better controlled and monitored by civilian authorities.

While the military has task-specific resources for disaster response that are unmatched, its role in humanitarian response is controversial. In contrast to its logistical expertise, the military has limited experience in delivering humanitarian aid, and it is a costly alternative to other response organizations. Military leaders felt that better policy guidance from Washington may have limited the military response, which was broader than anticipated. We recommend that a careful review of the role of the military in disaster response be conducted. This will enable more specific policies and guidance to be created that will prescribe specific activities for the U.S. military.

In order to maximize the benefit of military involvement in HADR operations, the mandate and role of the military should be clearly defined by policymakers before deployment, to delineate an exit strategy with condition-based end points. As disaster response is an internationally managed event, such policies must take into account these pre-existing structures. Military activities should focus on HADR such as on logistics, assessment, and security, but not the direct provision of humanitarian assistance. There also needs to be closer collaboration with the NGO and international communities. All of this should be done as early as possible to avoid potential for over-utilization of U.S. military assets and dominance over humanitarian operations in the field.

To meet its important HADR mission in supporting civilian-led humanitarian responses, the military should retain institutional knowledge and expertise. The DOD should continue to support their "HADR Center of Excellence" and create HADR career paths that allow for personnel to develop and maintain appropriate knowledge and skills. There is also a need to create HADR-related training programs for staff and leadership for both long-term development and "just-in-time" deployments.

6. Monitoring quality of aid and its impact

Data collection and information management in Haiti was complicated, difficult, and limited. This led to policy-level decisions that were often driven by media reports rather than tactical and strategic information from the field. Also, it prevented the assessment of the overall quality and efficiency of the U.S. response.

From within the DART, dedicated staff should be deployed exclusively to collect, centralize, validate, and report findings to partners and authorities as appropriate. Specific methods and standard reports should be developed to meet the operational needs of the on-ground response, as well as the strategic needs of Washington and the media. This information should be systematically shared between U.S. Government agencies in the field and in Washington. In addition, NGOs receiving U.S. Government funds through OFDA's granting process should be required to conduct assessments using standard

[1] Department of Defense. 2009. DODI 3000.05. 16 September.

reporting methods and forms. Finally, internationally agreed upon guidelines (e.g. sample questionnaires, indicators, methodology, and reporting templates) for rapid needs assessments should be developed. All donors should agree on this approach and avoid funding fragmented initiatives that compromise the overall process, raise expectations, and frustrate beneficiaries. Tools for rapid evaluation of impact of relief aid on the victims should be developed to ensure effectiveness of aid and correct targeting. Ultimately, such tools will enhance the quality and effectiveness of U.S. Government aid, as well as produce robust and relevant data for planning and management. The Interagency Needs Assessment Task Force is a good start to this endeavor and should include technical institutions, as well as the UN and NGOs.

An effective common shared information portal is needed to establish situational awareness among all responding organizations and governments. Information managers and specialists should be assigned to manage these websites. Their responsibilities should include verifying the validity and reliability of the data before uploading it onto the site. It is better to have several high-quality reports and datasets than to have vast amounts of questionable information.

7. Deployment of USG assets to international disasters

Deployment of relief resources to an international disaster location without requests from the host government, the UN system, and/or the U.S. Embassy is generally unadvisable. However, there are catastrophic events that can incapacitate one or more of these structures, making it necessary to deploy relief supplies to the country without the benefit of rapid assessments or specified needs. The earthquake in Haiti demonstrated the need for immediate response without adequate ground-sourced information on which to base the amount and type of resources required to meet the immense demand for assistance.

In these rare cases, the U.S. Government must respond as quickly and effectively as possible. However, efficiency is also a key element in disaster response, especially so as to avoid logistical bottlenecks and ensure that the maximum utility of relief supplies and manpower are able to be used immediately in country. "More" does not necessarily mean "better" in disaster response. Sequencing of the shipment, delivery, and utilization of relief supplies and personnel must be done in a rational manner. The chaotic nature of the response in Haiti exemplifies the need to include efficiency in the planning and execution of large-scale disaster responses by the U.S. Government.

In order to achieve increased effectiveness and maximize efficiency in future large-scale disaster responses, USAID and the DOS need to develop a menu of packages available from the DOD, since it is primarily the DOD which has the unique capabilities of lift, logistics, manpower, technical assets, and equipment needed to respond to catastrophic emergency situations within 24 hours. This menu would include engineering packages, medical packages, security packages, assessment packages, logistics packages, and intelligence packages, among others. Each package would be scalable with built-in flexibility, depending on the magnitude and complexities of the disaster. Depending on current needs of the U.S. military to conduct its on-going war operations, the use of military resources for HADR operations would have to take into account force readiness and military demands in its conflict theaters.

Similarly, other federal agencies that have special capacities for response in international disasters could design packages to be used in response. These measures could be directed by USAID and DOS, in concert with each federal agency and the DOD. It would serve as a precursor to the IRF and help in its development, since it is a necessary step regardless of whether the IRF moves forward or not.

All packages would be designed by experts in international disaster response together with key staff from each agency so as to avoid any unnecessary components and ensure each package contains adequate types of resources.

Based on the vast experience of the combined staff at USAID, the DOS, and the DOD, an essential set of packages could be identified for immediate response needs in catastrophic situations. There is sufficient evidence from past emergencies to identify a minimum package of services, assets, and supplies that should be mobilized in response to large-scale disasters. These could be tailored for different types of natural disasters and mobilized rapidly without the need for assessments so that the initial response is conducted within hours of the emergency and supplies can reach the disaster site as quickly as possible. Knowledge of the assistance packages in advance will assist the U.S. Embassy and USAID Mission in the field to plan for the arrival and distribution of relief supplies and personnel. Once the initial packages are in place, additional resources can be requested as required, following rapid assessments.

2. Introduction

The 7.0 magnitude earthquake that struck Port-au-Prince, Haiti at 1653 on 12 January 2010 was the worst natural disaster in the country's history. As the Inter-Agency Standing Committee (IASC) reports, "the underlying poverty and vulnerability across Haiti renders the qualification of 'directly affected by the earthquake' somewhat irrelevant in any case, considering that everyone in the country has been affected in some way." The earthquake affected almost all areas of Haiti, with 1.5 million displaced, 230,000 killed and 300,000 injured.[2 3] The earthquake collapsed buildings throughout Port-au-Prince and surrounding areas. Over 60% of the government infrastructure was destroyed, including 28 of 29 Ministry headquarters. An estimated 97,000 dwellings were destroyed and 188,000 buildings were damaged.[4 5] Based on data compiled by the Inter-American Development Bank (Figure 1), the earthquake in Haiti was the deadliest natural disaster in history, causing the greatest number of deaths on a per capita basis. It was also the most devastating economically, with damages of up to 117% of Haiti's annual GDP. It is estimated that reconstruction will cost about $11.5 billion.[6]

The U.S. established its presence in Haiti immediately, with the U.S. Coast Guard (USCG) and the U.S. Agency for International Development Disaster Assistance Response Team (OFDA DART) arriving within 24 hours and the U.S. military securing the airport by 14 January. Other countries and international non-governmental organizations (NGOs) quickly followed suit (see Figures 2 and 3 for a detailed timeline of the response). This disaster presents a unique opportunity to rebuild improved Haitian systems and to improve living conditions in Haiti. As such, reconstruction and rebuilding should be planned and carried out carefully in order to ensure that the needs of the host community are met and that social tensions are not created between recipients of humanitarian assistance and Haitians still lacking access to basic services. This report will be important for guiding forthcoming U.S. actions in Haiti and future U.S. government responses to foreign disasters.

Table 1. Large Natural Disasters

Rank	Country	Year	Description	People killed	People killed per million inhabitants	Damages (US Millions, 2009)
	Haiti	2010	Earthquake	200,000 - 250,000	20,000 - 25,000	7,200 - 8,100
1	Nicaragua	1972	Earthquake	10,000	4,046	4,325
2	Guatemala	1976	Earthquake	23,000	3,707	3,725
3	Myanmar	2008	Cyclone Nargis	138,366	2,836	4,113
4	Honduras	1974	Cyclone Fifi	8,000	2,733	2,263
5	Honduras	1998	Cyclone Mitch	14,600	2,506	5,020
6	Sri Lanka	2004	Tsunami*	35,405	1,839	1,494
7	Venezuela	1999	Flood	30,005	1,282	4,072
8	Bangladesh	1991	Cyclone Gorki	139,252	1,232	3,038
9	Solomon Is	1975	Tsunami	200	1,076	n.a.
10	Indonesia	2004	Tsunami*	165,825	772	5,197

*Indian Ocean Tsunami caused a total of 226,000 deaths over 12 countries.
n.a. Not available
Source: Authors' calculations based on EM-DAT and WDI databases.

Figure 1: Deadliest Natural Disasters since 1979 (Source: IDB Working Paper Series No. IDB-WP-163)

[2] Active Learning Network for Accountability and Performance in Humanitarian Action. 2010. *Haiti Earthquake Response: Context Analysis.* July.
[3] USAID/DCHA. 2010. *Haiti Earthquake* Fact Sheet #57. 4 June.
[4] Joint Center for *Operational Analysis. 2010. Operation Unified Response: Haiti Earthquake Response.* May.
[5] FEMA. 2010. *Haiti Earthquake Response: Quick Look Report.* 3 June.
[6] Cavallo, E., Powell, A. and Becerra, O. 2010."Estimating the Direct Economic Damage of the Earthquake in Haiti." *Inter-American Development Bank Working Paper Series* No.163. February.

Haiti

Haiti has existed in a state of chronic, low-level disaster for the past 30 years. Geographically, it is located in a disaster-prone area, especially vulnerable to hurricanes. In 2008, Haiti was struck by four severe hurricanes in a little over a month. Haiti is the poorest country in the Western Hemisphere; 75% of the population survives on less than $2 per day.[7] Since 1982, the population of Port-au-Prince has expanded by 42%[8], reaching an estimated 3 to 3.5 million inhabitants.[9] Before the earthquake, more than 85% of the urban population was living in slums.[10] Its public infrastructure was in terrible condition, lacking adequate hospitals, schools, roads, electricity, and water for its citizens. Roughly 40% of the population in Haiti did not have access to health care. In 2006, 42% of the population lacked access to safe water and 81% did not have access to adequate sanitation.[11] More than 2.4 million people were food-insecure.[12] Many important public services, such as education, sanitation, and health care, were run by subsidized private sector institutions or non-governmental organizations, funded through years of international donor programs that further marginalized the role of the government. As a result, the government was in a weakened state when the earthquake struck, lacking the means to respond effectively on its own. Following the removal of President Aristide, in 2004 the United Nations established MINUSTAH as a peacekeeping force to support the government and provide for civil protection and stability.[13] The loss of senior UN staff crippled its ability to respond quickly and left the government without its key technical and financial partner.

U.S. Government

Hours after the earthquake struck Haiti, President Obama pledged full support to the country and called for a swift and coordinated response to the disaster. This led to a "whole of government" response for the first time in an international emergency. More than 12 major federal agencies were mobilized and sent staff and resources to Haiti within the first week. The U.S. Government thus became one of the first responders to the disaster in Haiti and has had the largest presence there of any country in the world. The U.S. Government has contributed the largest amount of funding to Haiti (see Figure 21, Section 7), totaling over $1.1 billion in humanitarian funding. Most of the funding has been channeled through USAID and the Department of Defense (DOD). USAID has coordinated the humanitarian response, provided immediate relief through grants to non-governmental organizations and worked toward developing long-term strategies for reconstruction and recovery. Department of State (DOS) maintained strong diplomatic ties to Haiti and directed foreign policy. DOD launched Operation Unified Response (OUR) and deployed Joint Task Force-Haiti (JTF-Haiti) to restore operations at the port and airfield, assist in debris removal, coordinate patient care aboard the USNS Comfort and USS Carl Vinson, provide general security for humanitarian activities, assist in engineering projects, and assist in the evacuation of U.S. citizens to the United States. The dedication of all those that responded, their unrelenting commitment to saving lives and helping the Haitian people, and the cooperation and creative problem-solving to reach these ends was widespread.

The disaster in Haiti was unique. In the majority of these cases, the host government and UN will take the lead role in the response. However, for many reasons, the disaster in Haiti required a more robust response from the U.S. Government. In that context, it is important for the U.S. Government to address policy questions that are germane to these types of emergencies, including:

(1) Strengthening the capacity of the U.S. Government, through the Office of U.S. Foreign Disaster Assistance (OFDA), to respond to international disasters;

(2) Translating the concept of "whole of government" response to better manage the U.S. Government response to international catastrophes;

(3) Clearly identifying the role of foreign policy in international disaster response for both humanitarian assistance and long-term strategic and structural support to foreign governments; and

(4) Better defining the role of the U.S. military in responding to international humanitarian crises and the provision of humanitarian assistance and disaster relief.

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[7] Active Learning Network for Accountability and Performance in Humanitarian Action. 2010. *Haiti Earthquake Response: Context Analysis.* July. London.

[8] We have calculated an increase in population size based on Port-au-Prince census information in 1982 and 2009. Calculation: (1,551,792/3,664,620)*100=42%

[9] Institut Haïtien de Statistique et d'Informatique. 2010. "Haiti: Departments, Major Cities, Towns & Agglomerations." *City Population Website*. Last modified March 15, 2010. Available from: http://www.citypopulation.de/Haiti.html. Accessed on 15 September 2010.

[10] Active Learning Network for Accountability and Performance in Humanitarian Action. 2010. *Haiti Earthquake Response: Context Analysis.* July. London.

[11] PAHO. 2010. *Haiti: Population Health Assessment prior to the 2010 earthquake.* 21 January.

[12] WFP. 2010. "Haiti Overview." *World Food Programme Website*. Available from: http://www.wfp.org/countries/haiti. Accessed on 20 September 2010.

[13] MINUSTAH. "Restoring a secure and stable environment." *United Nations Stabilization Mission in Haiti Website.* Available from: http://www.un.org/en/peacekeeping/missions/minustah/. Accessed on 20 September 2010.

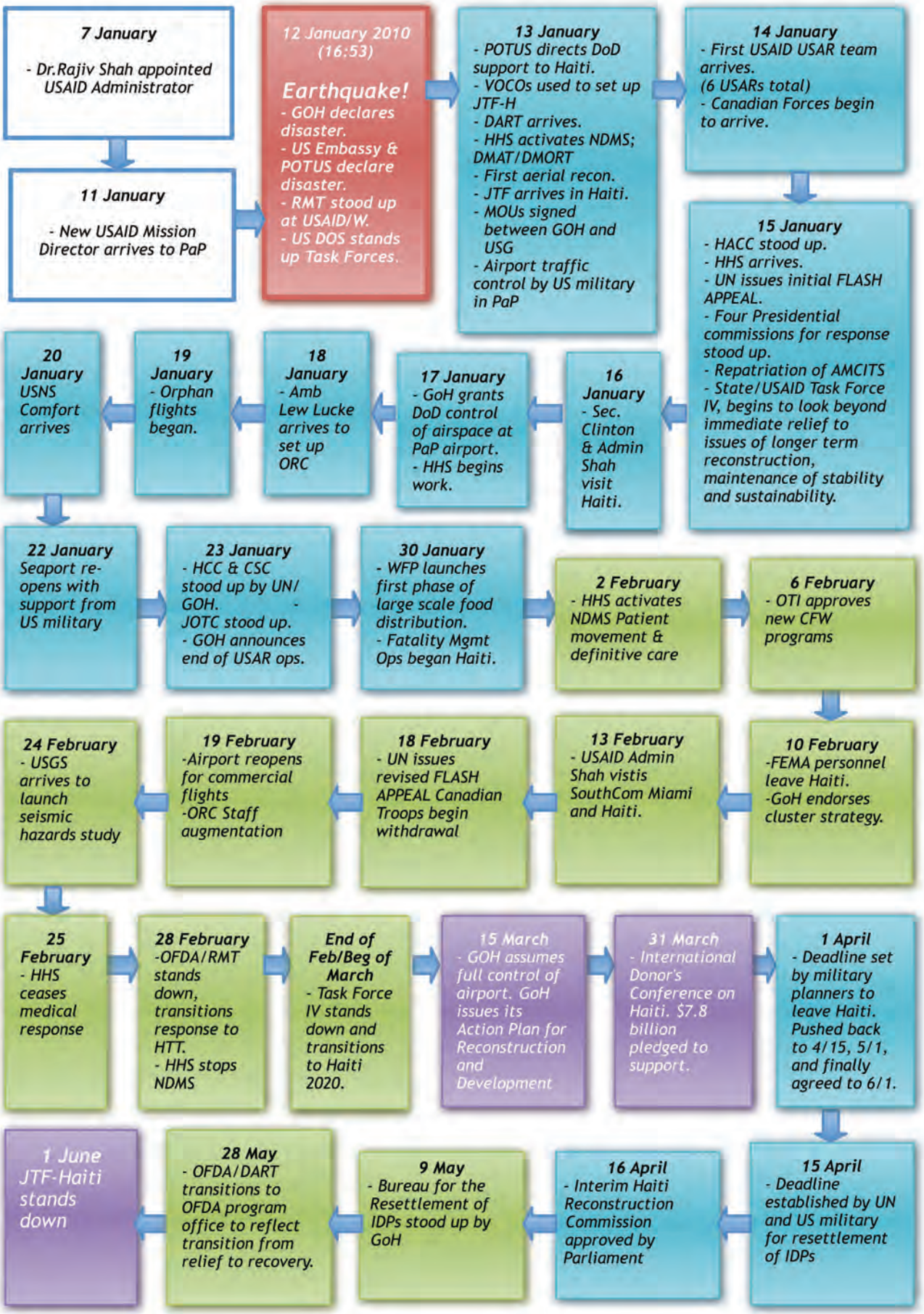

Figure 2:Timeline of Events

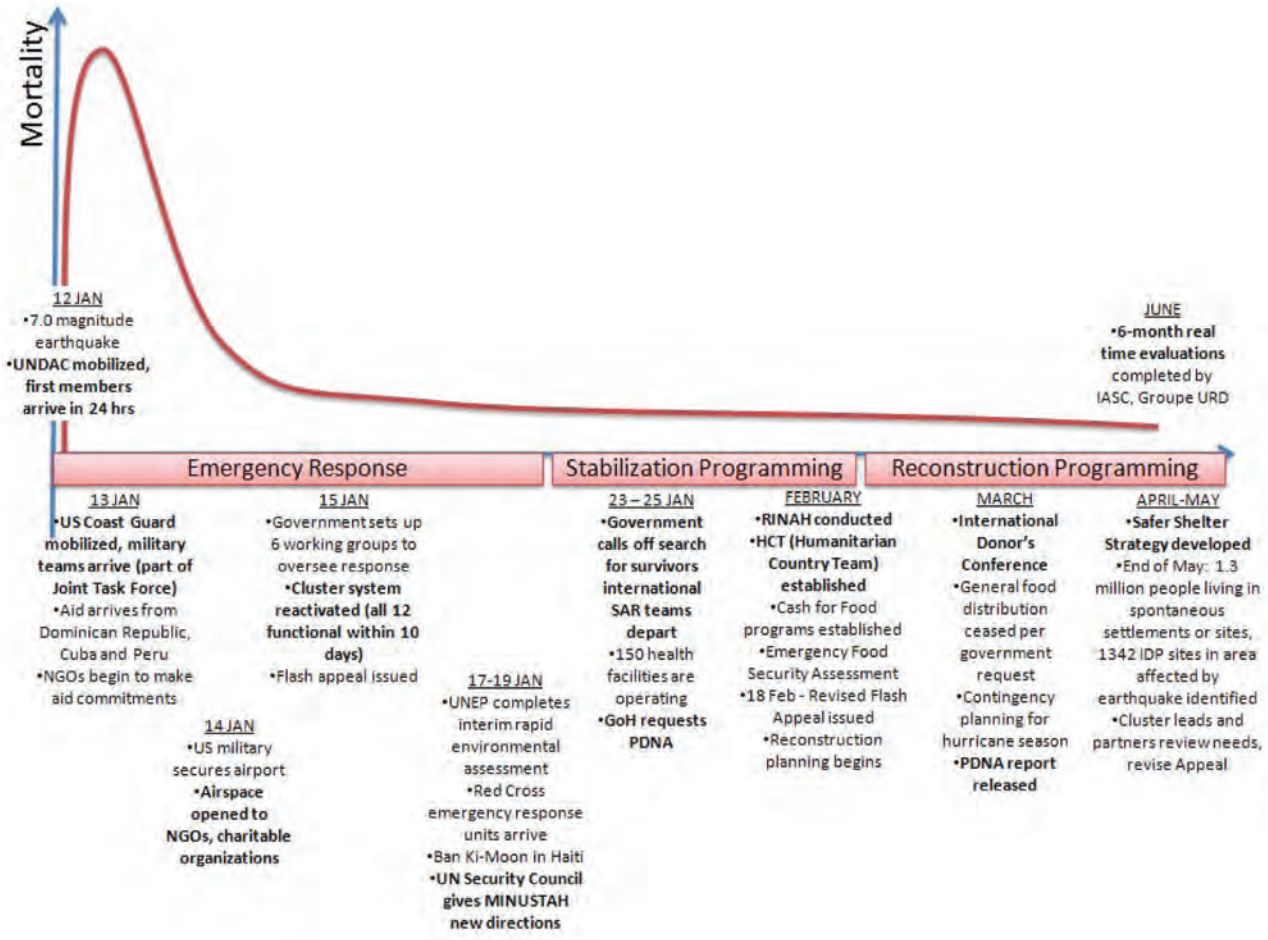

Figure 3: Summarized timeline of humanitarian action in Haiti (Source: Adapted from Grunewald and Renaudin 2010)

Study Methodology and Objectives

This review was undertaken by a group of independent experts to draw lessons from the U.S. Government experience in Haiti and recommend strategies that would strengthen a future response of the U.S. Government to humanitarian crises overseas. The methodology for preparing this review was based on information regarding the humanitarian action in Haiti, drawn from multiple primary and secondary sources. This included: (1) facilitation of the Haiti Earthquake Interagency Lessons Learned Workshop with over 130 participants; (2) 163 key informant interviews including representatives from the U.S. Government, Government of Haiti, U.S. military, UN, NGOs, and other multilateral donors;[14] (3) literature review and desk-top research of 279 documents;[15] (4) 14 focus group discussions; (5) site visits to the UN Headquarters in New York, Joint Force Command (JFCOM) in Virginia, a Southern Command (SOUTHCOM) in Miami, and Port-au-Prince, Haiti; and (6) qualitative analysis. The period covered by this report is from the date of the event, 12 January, through 30 June 2010. Data and information that relates to events after this period are not included in this report, even if they are now available. For the detailed scope of work, please see Annex 10.7.

An Executive Dinner was organized by the USAID Administrator to convene a meeting of the key deputies from the interagency to discuss the major accomplishments and challenges of the response. Participants included senior representatives from USAID, the Department of State, the Department of Defense, and the National Security Council (NSC). The Executive Dinner provided an informal venue where senior policymakers and leaders of the response could talk openly to raise important issues for the forthcoming report. The Haiti After Action team was invited to participate in the Executive Dinner and give a brief

[14] Please see Annex 10.2 for a complete list of key informants.

[15] Please see Annex 10.3 for a list of documents reviewed.

presentation of the major findings and recommendations to date. The discussion allowed for the team to gain clearer insight into the high-level policy issues and political decisions that were made during the response. The team was impressed with the frankness of the discussion and the transparency with which the deputies spoke of the challenges faced by their respective agencies.

In order to prepare for the interagency Haiti After Action review, USAID organized a technical support group (TSG) comprised of representatives from multiple USAID bureaus, DOD, and the Department of State. The TSG was instrumental in elaborating the Scope of Work for the After Action Review as well as providing clear guidance to the research team throughout the process of the review.

The subject of the study was to review coordination within the U.S. Government, as well as examine coordination between the U.S. and international community, in its response to the earthquake near Léogâne, Haiti. There were three principal objectives to this effort, each with corresponding key questions:

1. *Internal U.S. Government coordination*: How well did U.S. Government agencies coordinate with each other in providing policy guidance and in implementing the relief response?

2. *Partner coordination:* How well did U.S. Government elements coordinate with the GOH, the UN family of agencies, the NGO community, and other donors?

3. *Response effectiveness:* How well did the response meet the needs of the Haitian people? Was it conducted in accordance with international standards?

The report is organized by thematic areas, each consisting of a description of an action followed by analysis (findings) and recommendations specific to that theme. The report concludes with a chapter on the overarching recommendations, which are the key conclusions of the report.

Innovations in the Haiti Response

The response to the earthquake in Haiti introduced several innovations with implications for future humanitarian responses. These include new management paradigms, new strategic planning processes, new operational mechanisms to coordinate civilian-military activities, and new and emerging information and communication technologies. As with most innovations, these had both positive and negative effects on the response.
The "whole of government" response marked the first time when many federal agencies were mobilized to assist in an international humanitarian emergency. This led to a complex new managerial environment for the lead federal agency and brought new resources to the humanitarian response that had not been used previously, creating opportunities for both increased assistance and decreased efficiency.

Both military and civilians introduced new operational mechanisms to improve coordination. The early decision by the U.S. military to use unclassified communications systems for all humanitarian action allowed a more unified response among the UN, NGOs, and military units working in the field. Military-civilian coordinating bodies such as the Joint Operations Tasking Center (JOTC) and Humanitarian Assistance Coordinating Cell (HACC) were used by NGOs, UN agencies, GOH, and U.S. agencies to coordinate with the military in the delivery of assistance so that services were matched with needs in a timely manner. Management structures such as the Office of the Response Coordinator (ORC) and Haiti Task Team (HTT) served an important role in the coordination of the Haiti response.
New information technologies were tried in Haiti, with varying degrees of success. The Department of State created the site Wehaveweneed.org in order to coordinate donations and identify specific needs. According to the DOS, the response in Haiti witnessed "the emergence of a new humanitarian information environment: one with unprecedented availability of raw data in all forms, the growing usage of new information communication technology (ICT), and the emergence of … a new group (ICT Volunteers) comprised of virtually-connected academics, humanitarians, corporate foundations and ICT professionals… enormous amounts of digital information [were] made available on a variety of web portals, platforms, and new social networking media, such as Short Message Service (SMS) feeds, Twitter, [and] Facebook."[16]

U.S. SOUTHCOM quickly mobilized and developed a Haiti page on the All Partners Access Network (APAN), a platform developed originally by U.S. Pacific Command (PACOM) to share

[16] US Department of State Humanitarian Information Unit. 2010. "Haiti Earthquake: Breaking New Ground in the Humanitarian Information Landscape" *White Paper*. July.

unclassified information and enhance the common operational picture. The UN set up a similar site, "OneResponse," and several UN clusters set up Google Groups to facilitate information sharing, collaboration, and coordination. The American Red Cross created the Haiti Text Campaign that allowed people to contribute small donations through their cell phone providers. Ushahidi provided crisis mapping to relief efforts, which allowed people on the ground to report emergencies and missing persons after the disaster.[17] Columbia University and the Karolinska Institute of Sweden analyzed the locations of all mobile phones in Haiti before and after the earthquake to track migration patterns of displaced persons, introducing a new technique in population and migration research.[18]

The role of these new information communication technologies in improving the effectiveness of humanitarian assistance is yet to be determined. There are still many needs to strengthen existing data management systems so that the results of humanitarian assistance programming can be better measured and responses better managed.

[17] http://haiti.ushahidi.com/

[18] Bengtsson, Linus, et al. 2010. *Internal Population Displacement in Haiti: Preliminary analyses of movement patterns of Digicel mobile phones: 1 January to 11 March 2010.* 14 May. http://wwww.reliefweb.int/rw/RWFiles2010.nsf/FilesByRWDocUnidFilename/EGUA-85TS4Z-full_report.pdf/$File/full_report.pdf. Accessed on 9 September 2010.

3. Quality of Response

3.1 USAR Results

As with any disaster, search and rescue efforts by the local population—who usually make more than 95% of live rescues—began the moment of the earthquake. International urban search and rescue (USAR) teams rapidly deployed to Haiti to assist in these efforts.

The U.S. Government deployed a total of six USAR teams to Haiti.[19] On 13 January, the first team arrived in country, and by 16 January, all teams had arrived, bringing the total number of USAR members to 511 individuals. USAID/OFDA contributed more than $35 million towards USAR efforts in Haiti.[20] Two international teams were deployed by USAID (Fairfax County and Los Angeles County) and four domestic teams were deployed by FEMA.[21] [22] There were 47 live rescues by American USAR teams.

International USAR teams also deployed from Iceland, Chile, Spain, France, the Netherlands, Great Britain, and China.[23] In total, 43 international USAR teams deployed to Haiti and rescued 136 individuals. [24] [25] On 26 January, the GOH called off search and rescue efforts and all major USAR teams departed Haiti.[26]

On 30 January, a rapid response USAR team, deployed by USAID, was on standby in Haiti to provide further assistance if needed.[27]

In addition to search and rescue efforts, the USAR teams conducted building assessments to evaluate structural integrity and donated materials to two orphanages in Port-au-Prince.[28]

3.2 Potable Water

Prior to the earthquake, Haitians had very limited access to safe drinking water, with less than half of Port-au-Prince's population having access to tap water.[29] Many people sought water from springs, rivers, and wells which were contaminated with microorganisms, leading to diarrhea, dysentery, and hepatitis. The Pan American Health Organizations (PAHO) listed water-borne diseases as one of the leading causes of death in Haiti.[30]

Following the earthquake, access to potable water was one of the top priorities of the international community's response efforts. The Water and Sanitation (WASH) cluster worked quickly to coordinate water trucks, provide water bladders, and restore Port-au-Prince's water system. Over the objections of some experts, the DOD transported more than 1,000 pallets of bottled water to Haiti.[31] By the beginning of February, Port-au-Prince's municipal water authority was producing more water than before the earthquake due to improved fuel access. Pre-earthquake water production averaged 80 to 90 million liters per day; a month into the response, water production had increased to between 120 and 150 million liters per day.[32] By the end of April, 1.3 million people were receiving treated water.[33] Also, water delivery extended to locations out in Léogâne, Petit Goâve, Grand Goâve, and Jacmel. Overall, providing access to clean water went well and prevented countless deaths.

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[19] Ibid.

[20] USAID. 2010. *Draft USG Earthquake Response Report*. May.

[21] Ibid.

[22] Ibid.

[23] USAID/OFDA. 2010. "USAID Haiti Earthquake Taskforce (SBU) Situations Report #2." *US Government Internal Situation Report.* 14 January, 1800 Hours EST.

[24] USAID/OFDA. 2010. *Haiti-Earthquake.* Fact Sheet: 5; 17 January.

[25] USAID/Haiti. 2010. *Success Story: USAID Supports Urban Search and Rescue Operations in Haiti.* http://www.usaid.gov/our_work/humanitarian_assistance/disaster_assistance/countries/haiti/template/files/usar_success_story.pdf. Accessed on 15 September 2010.

[26] USAID/OFDA. 2010. *Haiti-Earthquake*. Fact Sheet: 14; 26 January.

[27] USAID/OFDA. 2010. "USAID Haiti Earthquake Taskforce (SBU) Situations Report #36." *US Government Internal Situation Report.* 31 January. 0400 EST.

[28] USAID/OFDA. 2010. *Haiti-Earthquake*. Fact Sheet: 26; 7 February.

[29] Desvarieux, Jessica. 2010. "Drinking Water Flows More Freely for Haitians." *Time*. 12 July. http://www.time.com/time/world/article/0,8599,2003216,00.html. Accessed on 16 September 2010.

[30] PAHO. "Haiti: Health Situation Analysis and Trends Summary." *PAHO Website*. http://www.paho.org/english/dd/ais/cp_332.htm. Accessed on 16 September 2010.

[31] U.S. Southcom. *Southcom Haiti Reflections.* 31 March 2010.

[32] USAID/OFDA. 2010. *Haiti Earthquake:* Fact Sheet: 39; 23 February.

[33] USAID. 2010. *Haiti Relief and Recovery: Office of the Response Coordinator Weekly Slide Update.* 4 May.

3.3 Nutrition

Many humanitarian organizations were involved in providing nutrition services to Haitians affected by the earthquake. These activities have aimed at both preventing and treating malnutrition. The World Food Programme (WFP), a U.S. Government partner, immediately began food distribution around Port-au-Prince, although it took a while for a fixed-point food-distribution system to be implemented. Blanket supplementary feedings were provided to children under five and to pregnant or lactating women. [34] According to the Inter-Agency Standing Committee, over 500,000 children aged 6-59 months and pregnant and lactating women received supplementary feedings, 3,000 babies received ready-to-use infant formula, and about 2,000 severely malnourished children were treated.[35] Different data sources show that estimates of supplementary feeding coverage vary from 52%[36] to 87%[37] of the targeted population. USAID and other American NGOs, including Save the Children U.S., were part of the Nutrition Cluster and were therefore intimately involved in policy and program development and implementation of feeding programs.

By May, a total of five nutrition assessments had been conducted to identify and better respond to needs. [38 39] These surveys, which have been focused on children living in spontaneous settlements around Port-au-Prince and in the Artibonite Valley, have shown that the nutrition status of children remains under emergency thresholds and close to pre-earthquake levels, as seen in Figure 4 below.	2005-2006 DHS		2008-2009 ACF-IN		2010 Nutrition Cluster Survey	
	SAM	GAM	SAM	GAM	SAM	GAM
DEPARTMENT						
Aire Métropolitaine (Port-au-Prince)	1.8	4.9	0.20	3.90	0.56* 0.54**	5.00* 3.22**
Ouest (sans aire metro.)	2.3	6.9	0.30	4.00	0.75* 0.47**	3.01* 2.64**
Sud-Est	1.5	5.1	1.10	5.00	--	--
Nord	1.1	7.8	0.30	4.00	--	--
Nord-Est	1.4	7.0	0.30	2.80	--	--
Artibonite	3.1	18.0	0.40	4.30	0.86**	5.04**
Centre	2.0	7.6	2.20	4.70	--	--
Sud	4.4	12.1	0.00	4.30	--	--
Grande-Anse	1.0	7.5	1.90	5.70	--	--
Nord-Ouest	2.0	6.7	2.20	6.20	--	--
Nippes	0.8	8.5	0.40	3.10	--	--

Figure 4: Pre- and post-earthquake nutritional status of children in Haiti (based on NCHS 1977 standard)

**indicates measure for displaced population*
***indicates measure for resident population*
The grey shaded box represents measures for Léogâne, Petit and Grand Goâve, Cressier (which are all located in the West Department) and Jacmel (which is in the South Department)
Source: Guha-Sapir and DerSarkissian, Working Paper, 2010.

[34] Inter-Agency Standing Committee. 2010. Response to the Humanitarian Crisis in Haiti: Following the 12 January 2010 Earthquake.

[35] Ibid.

[36] We have calculated a denominator using estimates from OCHA (12 April 2010 Sit Rep). We arrive at a total of 692,440 at-risk individuals, which includes children under five and pregnant and lactating women. Calculation: 360,000/692440=.5199

[37] WFP estimates of the situation 6 months after the earthquake were used. Calculation: 563,000/650.000=.8662

[38] Inter-Agency Standing Committee. 2010. *Response to the Humanitarian Crisis in Haiti: Following the 12 January 2010 Earthquake.*

[39] Sheltering Cluster. 2010. Sheltering Cluster Achievements. Port-au-Prince, June.

USAID has been extensively involved in developing infant and young child feeding programs, especially for infants who lost their mothers as a result of the earthquake. Such programs aim to encourage changes in child feeding practices, as these changes are necessary to address underlying causes of malnutrition in Haiti. Activities have included promotion of breastfeeding as the safest option for infants during an emergency and avoidance of breast milk substitutes. However, U.S. Government-supported, ready-to-use infant formula (RUIF) programs were also in place for infants who could not be breastfed. In addition, the Centers for Disease Control and Prevention (CDC) and the United Nations Children's Fund (UNICEF) collaborated with the national government on a study regarding the use of RUIF in emergencies; the results will be extremely useful for Haiti and other disaster settings. [40]

3.4 Health

Haiti's health care system was in a fragile state long before the earthquake struck, and health care facilities were ill equipped to respond to a large-scale disaster. The health care sector was completely devastated as a result of the earthquake. Not only did the Ministère de la Santé Publique et de la Population (MSPP) building collapse, but 60% of hospitals in the Ouest, Sud-Est and Nippes Departments were severely damaged and incapable of providing needed services. Facilities that remained in operation and, later, health clinics and hospitals set up by international aid, became overwhelmed very quickly due to a lack of preparedness. Figure 5 shows how post-disaster morbidity and mortality are expected to evolve based on previous research.

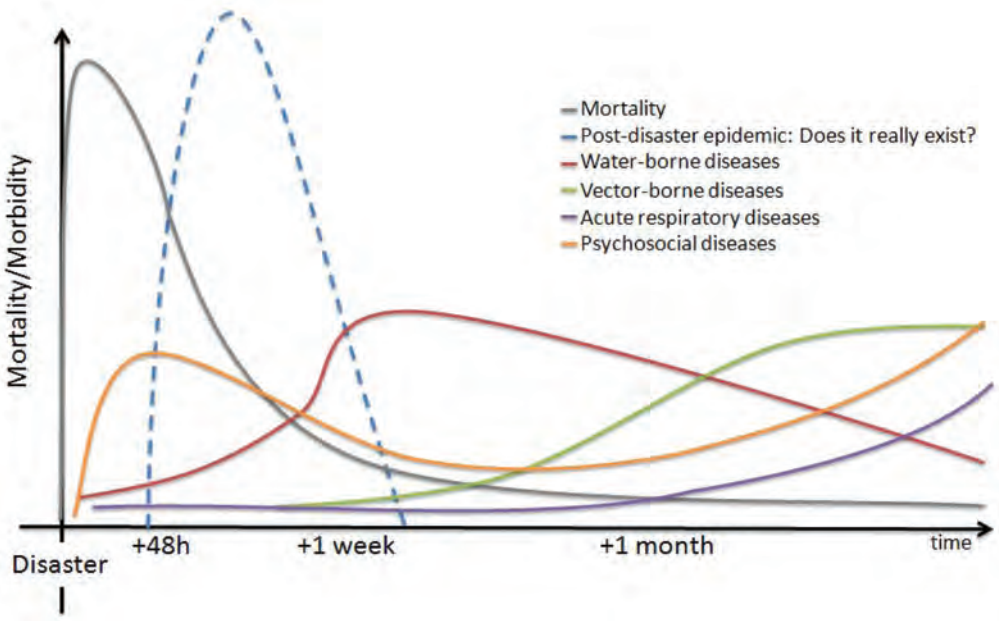

Figure 5: Predicted patterns of post-disaster mortality and morbidity (Source: Adapted from Grunewald and Renaudin 2010)

[40] United Nations Children's Fund. 2010. UNICEF Haiti Situation Report: 23 July 2010. Washington, July.

Medical care

In the critical first days following a disaster, local and national resources respond to the need for emergency medical care within the affected country. Haiti was unique because of its already weak health infrastructure, the presence of so many health care NGOs, and its proximity to the U.S. These factors allowed for the rapid deployment of medical assets from the United States.

The U.S. Government's and the entire world's responses to providing medical care were extraordinary. Prior to the earthquake, Haiti's health care system barely reached 50% of the population and the health indicators of the country were the worst in the Western hemisphere. Much of the health care was provided by NGOs who had been working in the country for years.

With the earthquake, most of the already limited health infrastructure of the country also collapsed. The Ministry of Health (MOH) and many of the hospitals in Port-au-Prince were destroyed. Hundreds of health care workers lost their lives, including the entire nursing class at the University Hospital when it collapsed during their exams. The limited remaining staff struggled with the avalanche of an estimated 300,000 injured people in a relatively small geographic area.

U.S. Government civilian agencies and military personnel immediately provided emergency medical and health-related assistance to Haiti. Local providers, international NGOs, and U.S. and other government military assets initially provided medical care, but were quickly overwhelmed. Additional medical assets were moved into the area, including Disaster Medical Assistance Teams (DMAT) from Health and Human Services (HHS) and military medical assets, including the USNS Comfort, the USS Bataan, and USS Carl Vinson. The international community also deployed field hospitals and medical specialty volunteers from many nations, especially general and orthopedic surgeons who responded in large numbers. With leadership from the U.S. Government and the University of Miami, the MediShare hospital was established at the Logistics Base. The USNS Comfort treated over 800 patients during its seven-week stay off the Haitian coast.[41] This increased capacity helped to ease the burden on overwhelmed medical systems. While this initial response was important to save lives, the Haitian Government's decision to only allow the provision of free health care severely undermined the ability of local providers to make a living and many left Port-au-Prince and Haiti.

The deployment of many specialized and surgical assets led to a number of amputations and complex operative procedures. This created the problem of long-term care for post-operative Haitians. Guidance as to the applicable standards of care and processes for making decisions about standards of care was not provided consistently to U.S. responders. Medical personnel on the ground were not adequately prepared to practice in accordance with local and catastrophic standards of care, and the response lacked a unified approach with regard to the standard of care provided. Prior to the earthquake, many of these specialty services were not available to most Haitians, and the current Haitian health system could not provide long-term wound and fracture care. Also, many of the providers rapidly rotated out of the country, so there was limited continuity of care. The GOH Ministry of Social Affairs estimates that there are between 4,000-5,000 newly disabled people due to the earthquake. The U.S. Government strategy specifically includes monitoring and supporting rehabilitation and disability care for earthquake trauma patients. Upon its arrival off the coast of Haiti on 20 January, the USNS Comfort quickly filled up with post-operative patients and found that it was very difficult to repatriate them back to the city, where the hospitals were still overwhelmed and housing was not available. Within the first week or two after the event, it became urgent to make resources available for complex injuries because there was an implicit decision made about the standard of care provided. Various solutions were tried within Haiti, but because of a pre-existing lack of healthcare capacity, there was limited success. Patients were transported to hospitals in the U.S., plans were made for additional U.S. Government field hospitals, and NGOs began providing these services.

A special representative for health care was sent to Haiti by USAID. A committee was formed, led by Haitian personnel, who included the special representative from USAID and additional U.S. Government personnel, who spent a great deal of time trying to arrange transport and long-term care for these

[41] Huffington Post. 2010. "US Military Hospital Ship USNS Comfort Leaving Haiti." 9 March. http://www.huffingtonpost.com/2010/03/10/us-military-hospital-ship_n_492809.html. Accessed on 12 September 2010.

patients. Haitian hospitals, NGOs, the USNS Comfort, or other facilities referred Haitian patients when they met criteria for evacuation to the U.S. These evacuations were reserved for the rare patients with life-threatening conditions that could not be handled within Haiti or by evacuation to a nearby country. These patients had to demonstrate a reasonable chance of survival for the flight to the U.S. and for subsequent treatment in the United States. The plans for a large Navy hospital were hotly debated within the U.S. Government and were ultimately rejected. The Governor of Florida made public statements about his concern that hospitals in the state were filling with injured Haitians and that the state could lose millions of dollars on uncompensated care. As in a domestic disaster, HHS/National Disaster Medical System (NDMS) was called on to establish a patient distribution system and provide reimbursement to hospitals.

A major weakness in emergency health services provided to the victims was the absence of data on acute surgical interventions, which resulted in poor planning, especially of post-operative care. Although some patient logs were maintained, no systematic monitoring on a daily or weekly basis was undertaken to allow for adequate follow-up. Many lessons on post-operative care had been learned in previous earthquake catastrophes, but Haiti experience shows that they are not always applied.

Public Health Activities

After the initial emergency health response, the humanitarian community's attention turned to addressing fundamental health needs and conducting epidemiologic surveillance. Since the majority of the population in Port-au-Prince was displaced to overcrowded settlements, lived in extreme poverty, and often lacked basic sanitation services, it faced the increased risk of diseases affecting high-density populations, as well as water-related vector-borne diseases such as acute respiratory infections and dengue fever. The U.S. Government and its partners provided technical support in planning and managing an aggressive immunization program to control disease in temporary settlement areas. In addition to the successfully completed immunization program in these temporary settlements, the CDC is now working closely with PAHO and the Ministry of Health on a two-year strategy to improve national coverage (both inside and outside temporary settlements) to at least 80% for all six Expanded Program of Immunization (EPI) antigens, as well as to introduce new EPI antigens. This supported child survival program will also provide resources for improved vaccine coverage.

Before the earthquake, Haiti did not have a surveillance system that was capable of providing timely information on a wide range of health conditions. In an effort to monitor disease trends and detect outbreaks, Haiti's Ministère de la Santé Publique et de la Population, the Pan-American Health Organization, the CDC, and other agencies launched two reportable surveillance systems. These systems include an Internally Displaced Persons Disease Surveillance System (IDPSS) and a National Sentinel Site Surveillance (NSSS) System. The IDPSS works closely with NGOs providing primary health care in camps, and the NSSS is integrated into the health information system developed across MOH care and treatment sites supported by the (U.S.) President's Emergency Plan for AIDS Relief (PEPFAR). [42] [43] Data collected between 25 January and 24 April 2010 demonstrated that no major epidemics were detected during that time. Both systems continue to collect information, and plans are underway to transition both systems into the national Health Management Information System.[44] Mobile clinics are working to provide care to persons in hard-to-reach areas and to collect information for surveillance purposes.

Since the earthquake, the U.S. Government has collaborated with the GOH and the MSPP in reconstructing the Haitian health care system, particularly emphasizing the importance of disaster preparedness, given the impact of hurricanes. Activities to strengthen the health care system that began in collaboration with the GOH prior to the earthquake will continue to emphasize primary and secondary care. The country's major needs, however, are at the primary level of care.

A plan for setting up a Centralized Patient Record Centre for hospitals and medical teams for high-trauma disasters should be developed. This center should be capable of managing patient data from all participating medical units and monitoring availability of beds or facilities for post-operative care. The system should incorporate all U.S. Government facilities and its partner NGOs and open its facility to visiting medical teams. A proposal for a joint effort with other donors through the Interagency Standing Committee may be an effective strategy for this collaboration.

[42] CDC. 2010. "Rapid Establishment of an Internally Displaced Persons Disease Surveillance System After an Earthquake -- Haiti, 2010." *MMWR*. August 2010. 59 (30); 939-940.

[43] CDC. 2010. "Launching a National Surveillance System After An Earthquake - - - Haiti, 2010". *MMWR*. 6 August. 59(30); 933-938.

[44] CDC. 2010. "Launching a National Surveillance System After An Earthquake - - - Haiti, 2010". MMWR. 6 August. 59(30); 933-938.

3.5 Migration and Settlement

Approximately 1.6 million Haitians were displaced as a result of the earthquake, triggering the creation of over 1,000 spontaneous settlement sites. Initially, there was a large-scale migration of 661,000 individuals from Port-au-Prince and the West Department when the government advised people to seek refuge outside the city. The mass migration out of the city relieved some over-crowding but put great pressure on rural communities. The 1 February 2010 Settlement Strategy addressed the need to develop alternative sites for growth outside Port-au-Prince and relieve the burden placed on rural communities. An estimated 30% of displaced people are living with a host family. Figure 6 summarizes information on sheltering.

Emergency shelters consist of tents, tarpaulins, and salvaged materials that provide little protection against heavy rains and hurricanes. In the first two months of the response, there were 277,000 tarps and more than 37,000 tents distributed.[45] By 7 May, USAID/OFDA provided more than 22,400 rolls of plastic sheeting to meet shelter needs, and by the beginning of June, more than 1.3 million individuals had received two plastic sheets. [46] [47]

As the response shifted from the emergency phase to the relief and reconstruction phase, the types of shelters distributed shifted from tents and tarpaulins to long-term transitional shelters. Transitional shelters are more durable, as they have a concrete foundation and a timber or steel frame, but take longer to build. These shelters offer more privacy, space, and protection than emergency shelters. The Shelter Cluster estimates that on average, it reached 100,000 people per week during the first four months of the response. As of 2 June, 96,504 transitional shelters were funded, including 47,500 shelters funded by USAID/OFDA.[48] However, by the end of June, only 5,000, or 10.5%, of the USAID/OFDA funded shelters were actually constructed. Much of the delay stems from the problem with rubble removal and land rights issues, which serve as key barriers to NGO-implemented shelter programs. By the end of June, USAID/OFDA provided nearly $80 million to partners providing transitional shelters and emergency shelter materials.[49] Among other non-food items being distributed are blankets, buckets/jerry cans, hygiene kits, kitchen sets, mats, mosquito nets, and rope.[50]

INFORMATION	FIGURES	SOURCE
EQ affected population	Over 2 Million people affected	GOH
Destroyed or partially damaged houses	188,383 houses	GOH
Assessed Buildings	212,482 buildings, including 186,766 residences have been assessed by the Ministry of Public Works. 49% (104,681) Green 27% (58,418) Yellow 23% (49,383) Red	Ministry of Public Works (UNOPS) 26 July
Displaced people in settlement sites	1.5 Million people	GOH
People migrating from West Department	661,000 people (majority living with host families)	GOH
Spontaneous settlement sites	1,368 sites	DTM Analysis, 28 July
Camp management	Sites registered: 373 across affected area; Number of households:190,518	IOM 12 July
Camp assessment and mitigation	146 sites have now been assessed for vulnerability to storms and flooding. The target is now 250. 71 have committed agencies to carry out mitigation.	IOM 28 July
Transitional shelter construction	6,868 transitional shelters constructed, housing more than 34,000 people. An additional 16,100 transitional shelters are already in country.	Shelter Cluster 26 July
Flash Appeal Funding	67% funded	Financial Tracking Service (FTS)

Figure 6: Aftermath of the earthquake as of 30 July 2010 (Source: Haiti Humanitarian Bulletin No. 8)

[45] USAID/OFDA. "USAID Haiti Earthquake Taskforce (SBU) Situations Report #72." *US Government Internal Situation Report.* 17 March. 1730 Hours EST.

[46] USAID/OFDA. 2010. *Haiti-Earthquake* Fact Sheet: 53; 7 May.

[47] Office of the Response Coordinator. 2010. "Weekly Slide Update: Phase II/III Analysis and Planning." Haiti Relief and Recovery. 2 June.

[48] Ibid.

[49] USAID/OFDA. 2010. *USAID/OFDA Fiscal Year 2010 Shelter and Settlements Sector Activities in Haiti.* http://www.usaid.gov/our_work/humanitarian_assistance/disaster_assistance/countries/haiti/template/files/haiti_shelter_programs_070110.pdf. Accessed on 10 September 2010.

[50] Sheltering Cluster. 2010. *Sheltering Cluster Achievements.* Port-au-Prince. June.

3.6 Food Security and Distribution

The initial response to the earthquake in Haiti involved the distribution of ready-to-eat-meals, food rations, and rice to affected communities to prevent the development of a hunger crisis. Within a week, WFP had provided over 200,000 people with over 1,000,000 food rations.[51] A rapid food security assessment in February showed that 52% of households in Haiti were food insecure, while 69% of Haitians in camps were food insecure (including both chronic and transitory food insecurity).[52] Targeted food aid programs were designed to assist displaced people and host families in and outside of Port-au-Prince. By the end of March, when the Government of Haiti decided to end general food distribution, about 4 million Haitians had received food assistance.[53] Within the first six months of the response, USAID/FFP provided $125 million in Title II funds and delivered 106,110 metric tons of Title II food aid to Haiti.[54]

By June, over 618,000 children had received school meals.[55] Food-for-work and cash-for-work projects were established as a transition from food distribution programs to promote long-term food security and stability. In addition, a number of market analyses were conducted to monitor the impact of food aid on local markets, food production, and accessibility.[56] These results are not yet available.

One important issue was ensuring that the mass distribution of rice and other food stocks would not negatively impact the rural economy and weaken ties between consumers and producers. While the price of most staple foods did rise after the earthquake, it seems that most prices have returned to pre-earthquake price levels, likely due to large-scale food aid distributions (see Figure 7 and Figure 8). A major concern was the sale of food aid on local markets. Food aid distributions have not had a major impact on the price of rice, the most important

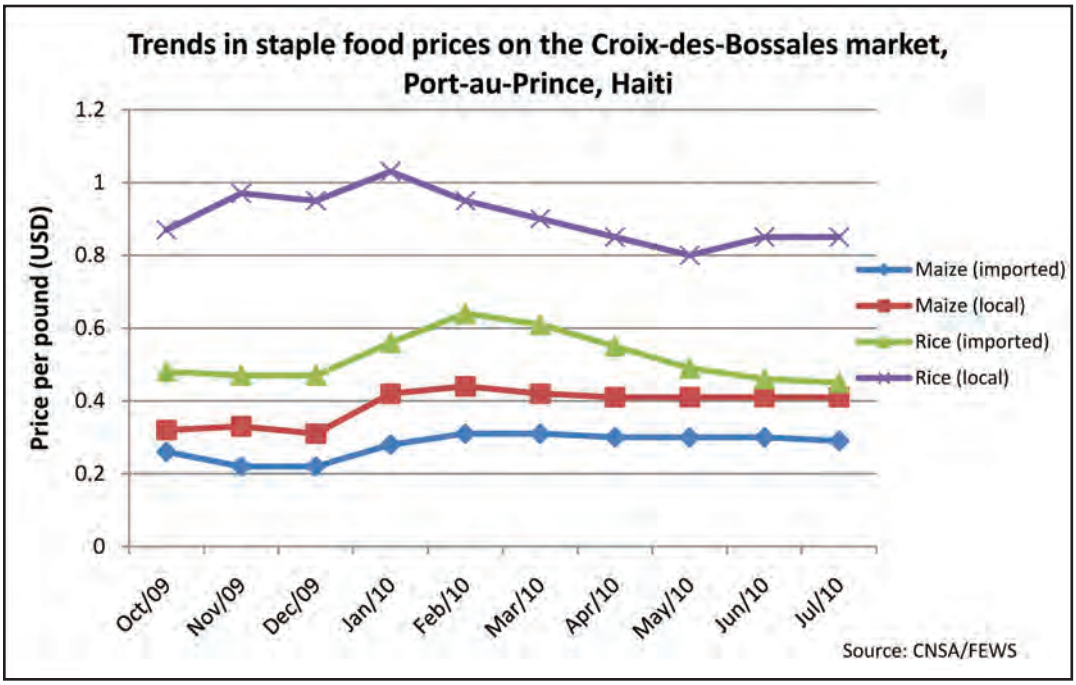

Figure 7: Trends in staple food prices in Port-au-Prince, Haiti

[51] WFP. July 2010. "Haiti: Six months on from the 12 January earthquake." *WFP Website*. http://documents.wfp.org/stellent/groups/public/documents/communications/wfp222277.pdf. Accessed on 14 August 2010.

[52] Coordination Nationale de la Sécurité Alimentaire. March 2010. Haiti: *Rapid post-earthquake emergency food security assessment.* http://documents.wfp.org/stellent/groups/public/documents/ena/wfp221395.pdf. Accessed on 7 August 2010.

[53] WFP. July 2010. "Haiti: Six months on from the 12 January earthquake." *WFP Website*. http://documents.wfp.org/stellent/groups/public/documents/communications/wfp222277.pdf. Accessed on 14 August 2010.

[54] USAID/OFDA. 2010. *Haiti Earthquake.* Fact Sheet: 57; 4 June.

[55] Agriculture Cluster. 2010. *Food and Agriculture Sector Update.* Port-au-Prince, June.

[56] FEWS NET, USAID. 2010. *HAITI Food Security Outlook* No. 24. Washington, May.

staple food in Haiti. In general, it is difficult to determine the extent to which food aid affected prices, since other factors, such as decreased purchasing power and increased transactions costs, were also present.[57]

The 2010 growing season is reported to be better than 2009. Food security conditions have stabilized and are expected to improve.[58] As shown in Figure 9, the most likely scenario for July-September is a considerable improvement on May-June 2010. The UN Agriculture cluster has worked closely with the GOH Ministry of Agriculture on seed procurement and distribution. By the end of March, the UN Food and Agriculture Organization (FAO) had distributed over 28 tons of bean seed in mountainous areas of Léogâne and Petit Goâve and distributed 49 tons of maize to beneficiaries in earthquake-affected areas.[59]

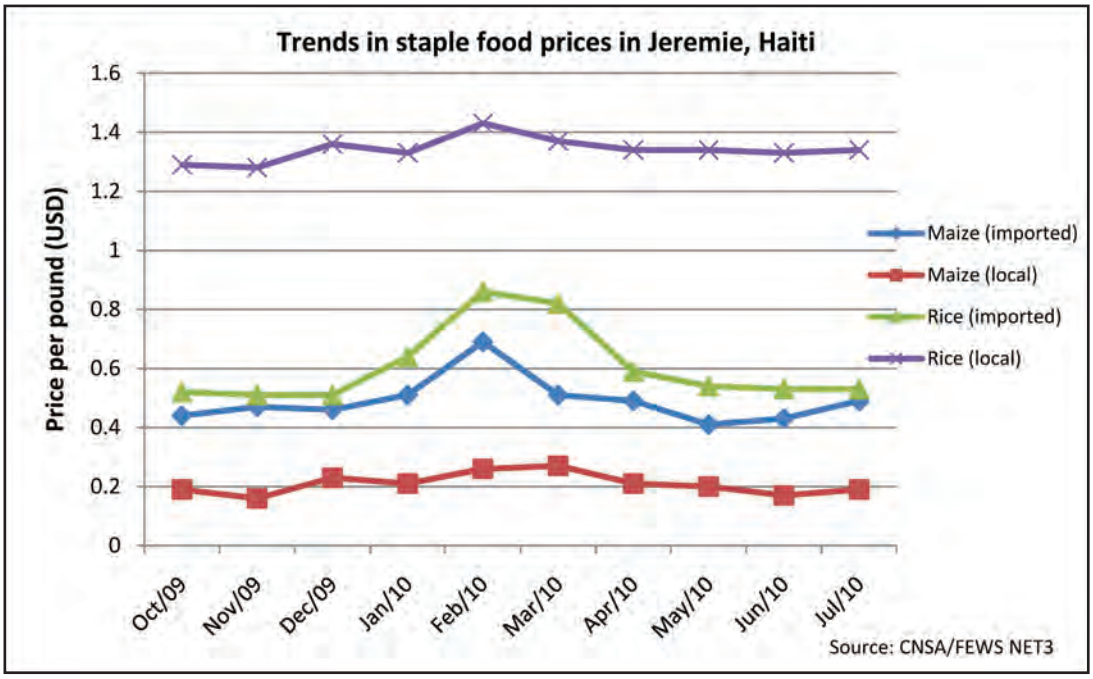

Figure 8: Trends in food prices in Jeremie, Haiti

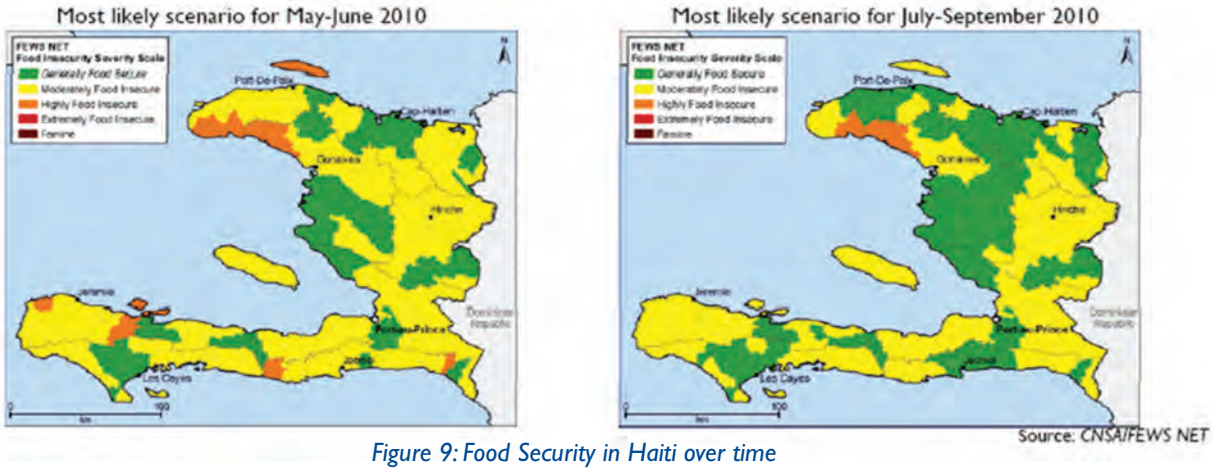

Figure 9: Food Security in Haiti over time

[57] FEWS NET, CNSA. 2010. *Haiti Food Security Update: June 2010*. Washington, Port-au-Prince. June.

[58] USAID & FEWS NET. 2010. *Executive Brief: Impacts of food aid rice distribution in Haiti on the rice market and production*. Washington. April.

[59] USAID/OFDA. 2010. *Haiti Earthquake*. Fact Sheet: 46; 18 March.

3.7 Rubble Removal

The removal of rubble remains a pervasive problem in relief efforts. Rubble blocks roads and impedes reconstruction and shelter efforts. Almost every UN cluster spoke about rubble removal in meetings, having had to actively work around the rubble problem during response efforts. Estimates of the amount of rubble produced by the earthquake range from 20-25 million tons.

The international community, with the assistance of the DOD and U.S. Army Corps of Engineers, created the Project Management Coordination Cell (PMCC). This cell was responsible for addressing the rubble problem in Port-au-Prince. Although rubble removal beyond that of clearing throughways to deliver humanitarian assistance does not typically fall under DOD's HADR authority, both conditions on the ground and interagency requests dictated this mission. The U.S. military continued to be involved in rubble removal after the initial phase of the response, specifically clearing culverts to improve drainage, due to a legal determination that improving drainage in light of the impending rainy/hurricane seasons was critical disaster mitigation. The U.S. Army Corps of Engineers provided equipment and technical expertise to the PMCC to assist in rubble removal.

The PMCC worked well during the first three months of the response in coordinating rubble removal and identifying/creating debris sites. However, as the response transitioned from relief to recovery and responsibility for the PMCC shifted from MINUSTAH and DOD to the GOH, the PMCC grew less coordinated and effective. Issues of eminent domain and private land-ownership slowly impeded the work of the PMCC and slowed the progress in removing rubble. Additionally, some NGOs involved in rubble removal did not make efforts to coordinate with local leaders. This led to mayors informing NGOs they could not work to clear rubble in their areas of control. All of these issues have compounded the problem of rubble removal and severely slowed efforts by the international community.

It is estimated by multiple sources, including the Ministry of Public Works, Solid Waste Management Unit, OXFAM's Disaster Waste Recovery, and experts from the PMCC, that less than 1% of the total rubble has been cleared from the city at the time of this report.

3.8 Cash-for-work

Many organizations and donors were involved in cash-for-work (CFW) programs. The purpose of these programs was to promote economic and political stability by stimulating the economy through job creation. Cash-for-work was a versatile program that was implemented in all phases of the disaster response. In initial relief efforts, CFW rapidly restored purchasing power and stimulated markets to re-open. In the transition to long-term development, CFW programs were implemented in specific areas, such as infrastructure development, in order to improve roads and reconstruct dwellings.

Following the earthquake, USAID provided funding for many cash-for-work programs in a variety of sectors, including rubble removal, transitional shelters, agricultural development, and WASH interventions. By mid-June, USAID had provided over $19 million to partners implementing cash-for-work programs and $53 million to partners implementing programs with a cash-for-work component.[60] As of 15 April, there were 25,691 individuals employed through cash-for-work programs.[61] These programs successfully cleared drainage canals to mitigate flooding and removed rubble.

Problems arose with the implementation of cash-for-work programs. This was due to certain donors not establishing specific requirements needed by the NGO partners who managed the CFW programs. It was important to establish guidelines, such as equal payment across programs and the distribution of meals, in order to ensure these CFW programs were not competing against each other or interfering with the local market. The two offices within USAID responsible for funding CFW programs were the Office of U.S. Foreign Disaster Assistance (OFDA) and the Office of Transition Initiatives (OTI). Disagreements arose amongst OFDA, OTI, the USAID Mission, and the U.S. Ambassador on the principle of establishing and adhering to an equitable payment structure for local recipients. Subsequently, this created tensions among Haitians and job competition between CFW programs.

[60] USAID/OFDA. 2010. *USAID/OFDA Fiscal Year 2010 Cash-for-work (CFW) Activities in Haiti*. Available from: http://www.usaid.gov/our_work/humanitarian_assistance/disaster_assistance/countries/haiti/template/files/cfw_programs_062410.pdf. Accessed on 10 September 2010.

[61] Office of the Response Coordinator. 2010. "Weekly Slide Update: Phase II/III Analysis and Planning." Haiti Relief and Recovery. 21 April.

3.9 SPHERE Standards

The SPHERE Project is an initiative to define and uphold the standards by which the global community responds to the plight of people affected by disasters, principally through a set of guidelines that are set out in the Humanitarian Charter and Minimum Standards in Disaster Response, also known as the SPHERE Handbook. These guidelines describe what should be done when responding to a specific need (e.g. shelter, nutrition, etc.) and the minimum standard and level of response that is required to meet that defined need. The SPHERE project began in 1997 and was launched by a group of humanitarian NGOs and the Red Cross and Red Crescent movement.[62]

The response in Haiti was examined against the international SPHERE standards. The table below presents the results. However, the use of these minimum standards must be tempered by an examination of the operational context pertaining to Haiti.

Although SPHERE standards are essential to providing quality humanitarian assistance, they may not be realistic given conditions on the ground. The guidelines should be adapted to specific emergencies and should not encourage unrealistic expectations. The below calculations have been made without taking into account existing resources and infrastructure, which should then be subtracted from the total need.

[62] SPHERE Project. 2010. *About Us*. Available from: http://www.sphereproject.org/content/view/91/58/lang,english/. Accessed on 30 December 2010.

Sphere Standard	Max. Need	Mid-Need	Low-Need	Available Data	Usg Contribution
15L of water/person/day	4050 million L[1]	2025 million L[2]	1012.5 million L[3]	OCHA indicates that water provision haas recently been increased to 10L/person/day	USG provided funding to partners who worked in WASH to achieve this goal (e.g. UNICEF, IRD)
Maximum 20 people/toilet	100,000[4]	65,000[5]	50,000[6]	The little information available indicates that this standard is far from met	USG provided funding to partners who worked in WASH cluster to achieve this goal (IRC, GOAL)
Measles vaccination coverage of 90%				WHO Anthropometric Survey (Apr-Jun) • Artibonite residents: 56.67% • Gressier, Lógane, Petit-Goâve, Grand Goâve residents: 55.69% • Gressier, Lógane, Petit-Goâve, Grand Goâve displaced: 57.58% • P-a-P residents: 66.70% • P-a-P displaced: 64.43%	USG provided funding to partners who worked in the health cluster to schieve this goal (e.g. Medishare, PIH, WHO, IMC)
Levels of moderate and severe malnutrition are stable at, or declining to, acceptable levels				WHO Anthropometric Survey (Apr-Jun): Post-earthquake GAM and SAM levels are very close to pre-earthquake levels	USG provided funding to partners who worked in the nutrition cluster to achieve this goal (e.g. UNICEF, FFP)
Each person has access to 250g of bathing soap per month	2.25 million kg[1]	1.13 million kg[2]	0.56 million kg[3]	Information unavailable	USG provided funding to partners who worked in the NFI cluster to achieve this goal (e.g. World Vision)
Early warning system ensures timely detection of and response to disease outbreaks				Developed and supported by WHO, CDC, MSPP, CIDA, MSF	USG provided funding to partners who worked in health cluster to achieve this goal (e.g. WHO CDC)
Pregnant and breastfeeding women have access to additional nutrients and support				Different sources indicate different coverage levels. • Food and agriculture sector June update: 52% • WFP estimate: 87%	USG provided funding to partners who worked in the nutrition cluster to achieve this goal (e.g. UNICEF, WFT)
Increased information and local awareness of market prices and availability, market functioning and governing policy				While the price of most staple foods did rise after the earthquake, it seems that most prices have returned to pre-earthquake price levels	USG provided funding to partners who worked in the nutrition cluster to achieve this goal (e.g. CHF, IOM)
Temporary planned or self-settled capms are base on a minimum $45m^2$ person	90 million m[24]	67.5 million m[25]	58.5 million m[26]	While there is little information about the amount of space available for each person, generally the camps are overcrowded	USG provided funding to partners who worked in the shelteringcluster to achieve this goal (e.g. ARD, IOM)

1 Maximum need calculations are based on the assumption that 1.5 million displaced persons will require aid for 180 days.

2 Mid-level need calculations are based on the assumption that 1.5 million displaced persons will require aid for 90 days.

3 Low-level need calculations are based on the assumption that 1.5 million displaced persons will require aid for 45 days.

4 Maximum need calculations are based on the assumption that 2.0 million displaced persons will require aid.

5 Mid-level need calculations are based on the assumption that 1.3 million displaced persons will require aid.

6 Low-level need calculations are based on the assumption that 1.0 million displaced persons will require aid.

3.10 Further Examinations

The following are important areas of consideration regarding the quality and impact of relief aid in Haiti. However, due to time and resource constraints, we were unable to explore these topics in great detail.

Gender Issues

Even before the earthquake, women comprised a vulnerable population in Haiti for a variety of reasons, including under-education and violence. In this context, emergency-related cash-for-work or other livelihood programs should specifically target women and be established in ways that ensures their future sustainability. The main focus should be to increase the number of opportunities available to women to improve their quality of life and support themselves and their families through safe activities. Considering the fact that fertility rates among younger women are very high in Haiti, reproductive health education and outreach is another area that will need to be explored and addressed. This is an important lesson that has emerged from Haiti and that is applicable to future emergencies elsewhere. Furthermore, while the media reports on sexual violence and humanitarian organizations focus on protection of women, our first impressions seem to indicate that these issues are not related specifically to the earthquake. Rather, they are pre-earthquake problems that continue to persist. Post-earthquake reconstruction and rehabilitation programs should take the vulnerability of women into consideration and work toward sustainable solutions for sexual violence against women in Haiti instead of approaching it as a problem directly related to the emergency situation.

Psychosocial Health

Psychological trauma experienced by Haitians during and after the earthquake is an important and indisputable cause of concern that has not been well addressed. While further research in this area is needed, a few points should be brought to attention. Approaches endorsed by Western cultures are neither always appropriate nor necessary. Haitians could draw upon their own resilience and coping strategies, and the international community should respect, support, and be sensitive to these alternative approaches. Here, it is important to invoke the principle of "do no harm."

Beneficiary Involvement

Lack of beneficiary involvement was a major problem with the response in Haiti. Indeed, beneficiaries were not involved as they should have been: "the international humanitarian community did not adequately engage with national organizations, civil society, and local authorities. These critically important partners were therefore not included in strategizing the response operation and international actors could not benefit from their extensive capacities, local knowledge, and cultural understanding."[63] This was problematic, as many of the NGOs that arrived in Haiti had no local experience there. There was little dialogue with the affected population, who was generally excluded from planning and carrying out response activities even though few barriers prevented access.

The working middle class was identified as a main segment of the population that is largely ignored. The humanitarian community must better engage beneficiaries and civil society in Haiti and include local initiatives in their programs and agendas. This is the only way in which capacity building can be achieved in Haiti.

[63] Inter-Agency Standing Committee. 2010. *Response to the Humanitarian Crisis in Haiti: Following the 12 January 2010 Earthquake.*

4. Response in the United States

4.1 Organization of the U.S. Government Response

The primary responsibility for disaster response rests with the government of the affected country. However, due to the overwhelming severity of the earthquake and its effect on UN and Haitian Government capacity, the U.S. President gave clear direction for a "whole of government" response. Additionally, a disaster of this magnitude requires a broader response, including not only humanitarian resources, but also political and diplomatic resources. Therefore, it was imperative that high-level officials manage U.S. Government involvement. Pre-existing personal relationships were recognized as key to the success of the response and were further strengthened by the widespread use of liaisons.

In response to the Haiti earthquake, President Obama named the newly appointed USAID Administrator, Rajiv Shah, as the Unified Disaster Coordinator and identified USAID as the lead federal agency to coordinate the response for the U.S. Government. Administrator Shah was sworn into office on 7 January; only five days before the earthquake.

The White House and the Department of State took special interest from the beginning in the response, playing large roles in coordination, planning, and execution. The Secretary of State appointed the Counselor and Chief of Staff to be the lead for the response from the Department of State due to the Counselor's work in Haiti over the previous year. This position took an active role in the response management that lent a more pro-active dimension of foreign policy to humanitarian assistance, especially during the immediate disaster response phase.

The organization of the Haiti disaster response in Washington, DC was consistent with current government policy, drawn from the concept presented in the Project on National Security Reform's report, ***Forging a New Shield***, known as "whole of government."[64] The "whole of government" approach was actually developed to strengthen integration among federal agencies to promote security of the American homeland. However, it was used as a new paradigm for international disaster response to meet the massive needs in Haiti. The early response in Washington evolved rapidly, as various agencies tried to address the "whole of government" response mandate individually and then combine their responses into one unified response. International responses are fundamentally different than domestic responses; while there are important analogies and lessons for international response, these must be carefully applied to the unique complexities of such an event. The "whole of government" response, combined with the magnitude of the event, required changes in the way the U.S. Government approached disaster management.

Figure 10 presents the "whole of government" disaster management paradigm. USAID, DOD, and HHS have specialized staff, management procedures, and standing interagency agreements to facilitate their cooperation for international disaster response. In Haiti, they led the response at the operational and tactical levels, receiving policy direction from senior political officials at the White House, National Security Council, and Department of State. The white boxes are the additional federal agencies that were called into the response under the "whole of government" approach. All of the agencies that took part in the Haiti disaster response are listed in Figure 10.

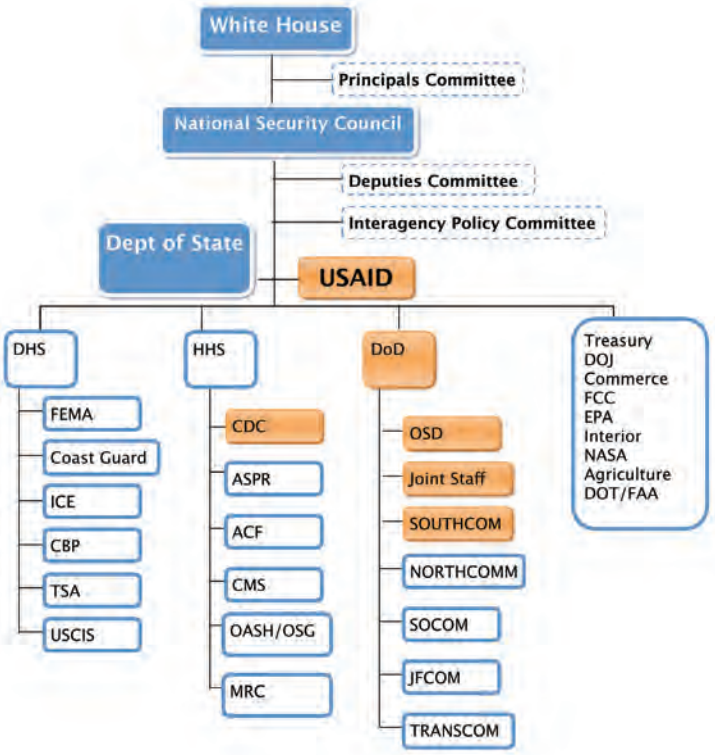

Figure 10: "Whole of government" structure. Boxes in blue represent the key offices within the US Government that set the policy guidance and strategic direction of the response: the White House, National Security Council, and Department of State. Boxes in orange represent the federal agencies that normally lead the USG international disaster response.

[64] Locher, James R. 2008. "Forging a New Shield". *Center for the Study of the President and the Project in National Security Reform.* November.

Leadership from Washington was critical, but both helped and hindered the response. The clear direction from the President to commit the resources of the U.S. Government was important to create a unity of mission and purpose. However, the strategic leadership from Washington was slow to develop due to implementation of the new "whole of government" response and limited availability of accurate information from Haiti. In the first weeks of the response, policy leaders became deeply involved in tactical and operational decisions in Haiti that made daily operations in the field somewhat difficult. OFDA and embassy staffs both describe frequent daily calls from different policy officials in Washington and literally "thousands" of emails asking for information or giving direction. In the early phase of the response (through mid-February), there were numerous meetings and teleconferences daily, seven days a week. Most of these calls and meetings had a regular schedule; however, the schedules of different agencies did not match, so that meetings or teleconferences were scheduled from 0400 to as late as 2100. Most persons interviewed considered the meetings to be useful, but found it difficult to get work done due to numerous meetings or phone calls. This was true in both Washington and Haiti.

Physical space became an issue during the response. The main Emergency Operations Center (EOC) was the USAID Operations Center, located on the ninth floor of the Ronald Reagan Building. Its physical structure was not large enough to manage a response of this size and meetings were crowded, often with overflow into adjacent areas. The USAID EOC lacks the modern facilities that can be found at other EOCs, such as the Federal Emergency Management Agency (FEMA) or the American Red Cross. There were technological constraints, especially with video and audio conferencing, which limited the participation of some interagency staff. In addition to USAID, EOCs were also at FEMA *(National Response Coordination Center* (NRCC)), HHS *(Secretary's Operation Center (SOC)*), and the Department of State *(State Department Operations Center)*, with attempts to coordinate between each.

Chain of Command

The management response to foreign disasters is typically led by USAID/OFDA, with the Disaster Assistance Response Team (DART) in the field and the Response Management Team in Washington (RMT). Due to the complexities of the disaster in Haiti and the large number of American citizens that needed to be evacuated, there was a need to expand the management team to include the Department of State and other key U.S. Government agencies as decision makers in the response. This led to a "whole of government" response, which ultimately modified the normal U.S. Government chain of command, introducing new roles for many agencies that do not usually participate in international disaster response.

The DART was deployed to the disaster scene to conduct on-the-ground assessments, make recommendations, and oversee the provision of assistance. The RMT's stated role was to "coordinate U.S. government strategy and activities in Washington." Historically, the RMT provides operational support to the DART and serves as the focal point for OFDA/Washington-based coordination among USAID leadership, the interagency community, Congress, and other key stakeholders. For larger responses, a Response Director (RD) leads the RMT and DART, as was done for the Haiti response.

With the involvement of so many U.S. agencies in the response, as well as the involvement of high-level policy staff, the Interagency (IA) Task Force was created to coordinate activities across all U.S. agencies. The establishment of the Interagency Task Force in the space designated for the RMT and the involvement of additional U.S. agencies in the response created friction between the IA Task Force and the RMT. As a result, the coordination of activities was conducted in parallel through the Interagency Haiti Task Force and the RMT, creating a stressful environment for command and control. Concerns about the USAID RMT/DART structure managing a massive response effort led to the establishment of the USAID Office of the Response Coordinator (ORC) in Haiti on 15 January to coordinate the response on the ground. The ORC worked from the USAID offices located at the U.S. Embassy and was expected to act as a bridge to support OFDA and USAID management efforts and to coordinate with the U.S. military. It was also charged with coordinating the multiple federal agencies on the ground. The head of the ORC was the Coordinator for Disaster Response and Reconstruction, and he arrived in Haiti within the first week of the response. This newly created position reported directly to the U.S. Ambassador in Haiti and the USAID Administrator in Washington, DC. The introduction of the ORC and its response coordinator at this early stage of the disaster added to the complexity of decision making on the ground which already consisted of the U.S. Ambassador, USAID Mission Director, and DART team leader, all of whom had clearly defined decision making roles as per standard operating procedures. The primary source of reporting dysfunctions was the role of the ORC, which

was not well described or communicated to the U.S. Embassy, USAID/Haiti Mission, or the DART. During the initial weeks of the response, the ORC lacked consistent organization, clear staffing structure, and clear scopes of work. In addition, it had no separate budget to manage its own logistics or implement any activities, thereby requiring vehicles and logistic support from USAID and the DART team. OTI, which had an important role in the response, was a major player in the ORC. Better coordination and accountability of OTI and the ORC to the USAID Mission would have increased the efficiency of their actions.

As the management structure evolved in Washington and Haiti, the DART no longer coordinated the overall in-country response but continued to fulfill its usual capacity working within the cluster system, with the UN, GOH, international donors, and NGOs to provide immediate relief assistance. The RMT continued in its role of managing the activities of the DART in Haiti, but had little authority over other federal agencies or the military. Within USAID/Haiti, there was the Mission Director, the ORC Response Coordinator, and the OFDA DART team leader. All three reported in various ways to the U.S. Ambassador in Haiti and the RMT in Washington, DC (which later evolved into the Haiti Task Team), as well as the interagency. All three also responded to direct requests for information and action requests from senior officials at the Department of State, the NSC, and the White House.

Figures 11 and 12 display two different organizational diagrams, detailing the reporting structure of the ORC and its relationship with the USAID mission and the U.S. Ambassador. A comparison of the diagrams reveals reporting conflicts, as one diagram lists the ORC reporting directly to the Chief of Mission, but the second diagram shows the ORC reporting directly to the USAID Administrator. A second comparison displays reporting conflicts for the USAID Mission Director. The first diagram displays the USAID Mission Director reporting only to the ORC, but the second diagram shows the USAID Mission director reporting to both the U.S. Ambassador and USAID/ORC. Lack of clarity in the chain of command created inefficient communication structures and internal stresses that hampered coordination through duplication of effort.

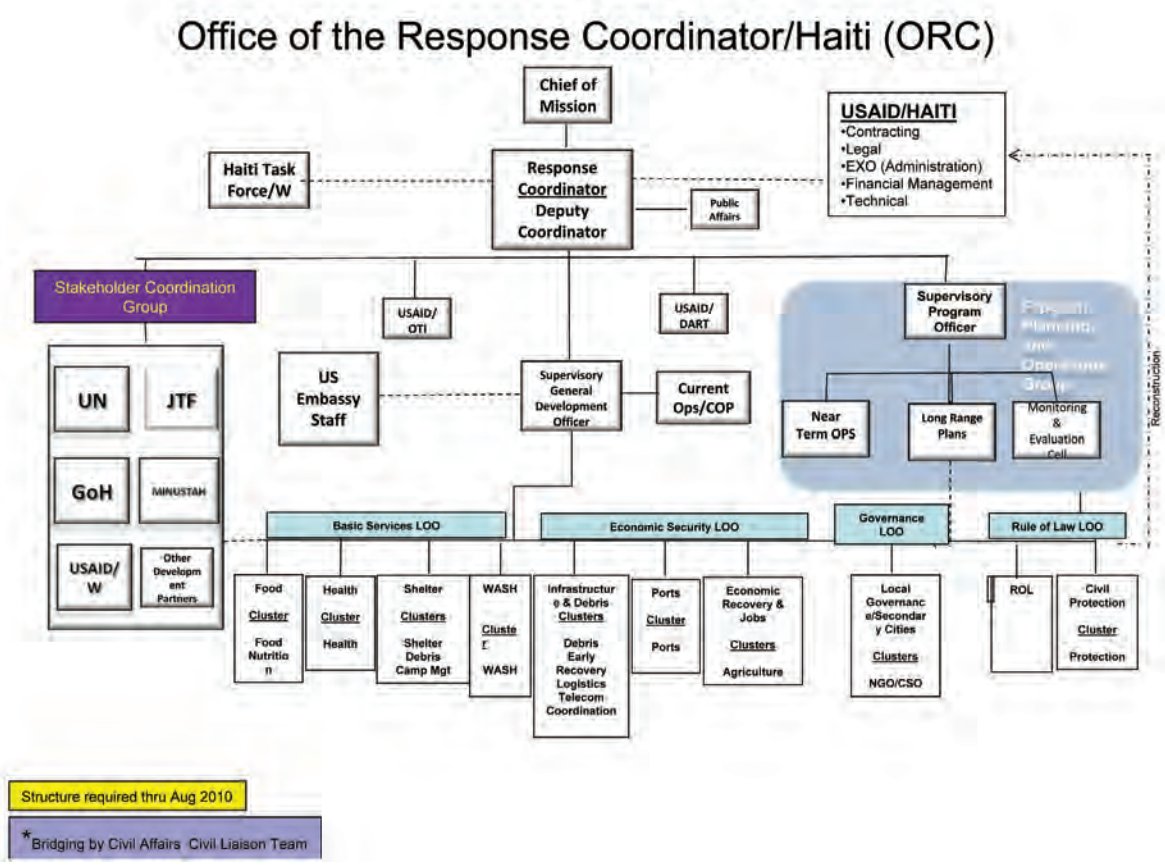

Figure 11: ORC organizational and reporting diagram (Source: USAID Haiti Task Team)

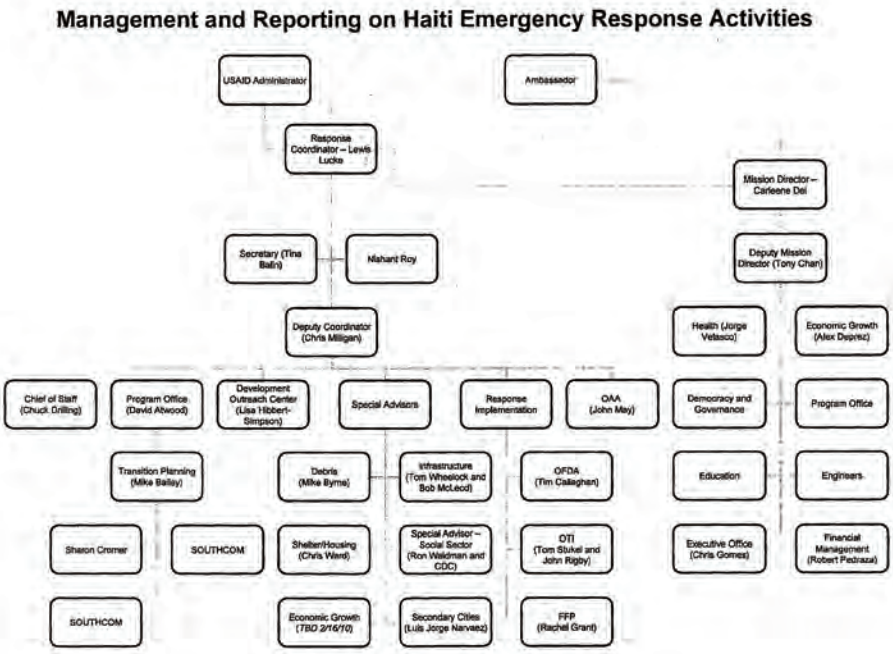

Figure 12: ORC organizational and reporting diagrams(Source: USAID Office of Military Affairs)

Another factor that affected the USAID chain of command was the role of senior government officials in the tactical operations of the DART team. In addition to contacting USAID in Washington, senior policy officials contacted the DART team directly, making inquiries about the response and, at times, providing direction in the relief effort.

The White House and National Security Council, via a Principals Committee, ultimately led the organization of the response in Washington. The Deputies Committee and an Interagency Planning Committee (IPC) conducted strategic planning and policy articulation. The National Security Staff (NSS) convened the Principals and Deputies committees for the Haiti disaster. These committees included senior officials from NSS, the Department of State, USAID's Office of the Administrator, the Department of Defense, and the Department of Health and Human Services. Daily meetings among the Principals and Deputies were important during the beginning of the response. By day three, however, it was necessary to establish video teleconference calls (VTCs) to complement the daily meetings and interagency telephone calls to assist in overall coordination of the response. Joint Staff hosted VTCs that were conducted twice daily. Starting on the night of the earthquake, the DOS convened twice-daily teleconferences, hosted by senior officials.

Because the "whole of government" response was an unprecedented departure from the normal response and involved many federal and executive agencies, the Interagency Planning Committee was formed within two to three weeks into the response to assist in the coordination of these key agencies. Responding agencies included the Departments of Homeland Security, Defense, State, Health and Human Services, Agriculture, Treasury, Transportation (DOT), and Commerce (DOC); and USAID, the Federal Communications Commission (FCC), the Department of Interior's U.S. Geological Survey (USGS), and the National Aeronautics and Space Administration (NASA).

Analysis and Recommendations

4.1.1 **The use of the "whole of government" approach led many federal agencies to send staff and resources to Haiti within the initial weeks of the response without an assessment of needs.** Policymakers did not wait for the U.S. Embassy and USAID to request specific types of U.S. Government support. Many of the federal and executive agencies that responded had no experience in international disaster situations and had limited or no independent legal authority and funding to carry out activities overseas. This led to inefficiencies in the response and further burdened the overstretched

capacities of the U.S. Embassy in Port-au-Prince to provide support.

R4.1.1: All international disaster responses must truly be led by a single federal agency appointed by the President. Only resources and assistance requested by the lead agency should be sent to the theater of operations under a system led by experts in foreign disaster assistance who will identify appropriate resources for deployment. Deployment of resources without requests from the field should be considered only in exceptional circumstances.

A "whole of government" approach should be used only in exceptional circumstances in future international disaster response and within a framework that enables USAID to manage Federal interagency participation in overseas disaster relief efforts or specify the lead agency which will coordinate all government actors. The roles and responsibilities of all agencies must be understood by all personnel prior to engaging in disaster response.

4.1.2 **Initiating deployment of relief resources without a field-based needs assessment or allowing the ground staff to formulate specific requests based on actual needs are decisions that need to be taken within the context of the specific disaster.** While some cost inefficiencies are inherent in emergency situations, these should be minimized as far as possible by prior arrangements, preparation, and forward thinking. In the most immediate phase (less than 72 hours), it is sometimes necessary to move supplies and personnel into a disaster area prior to an assessment. But this initiative should be based on pre-existing knowledge of the impact of specific disaster types and the known needs of the affected country or region.

R4.1.2: A small unit (such as an interagency task group) should be established when disaster strikes, with clearly defined responsibilities. The structure of this task group should include representatives from USAID, DOS, and DOD, as these are the agencies whose resources are most engaged in any response scenario.

This task group should be informed, inter alia, by a pre-existing, updated list of appropriate relief resources available for different disasters (e.g. natural, complex humanitarian, and socio-economic emergencies). This should include details of what is immediately accessible (stockpiled) and what can be obtained using an established, efficientprocurement procedure (both interagency and commercial). This task group should be able to provide information and guidance on the location and availability of experts and other human resources.

A decision to send resources based on well-prepared scenarios will minimize wasted resources and reduce the inevitable risk of creating bottlenecks on the ground, where logistical infrastructure is likely to be compromised.

4.1.3 **Senior decision makers in government need to recognize the well-established processes that exist for USAID to lead and coordinate international humanitarian assistance operations. Regardless of the scale of the disaster, USAID has standard policies in place, as well as interagency agreements with HHS. These agencies are experts in international emergencies and have the existing capacity to respond in a timely and appropriate manner.**

R4.1.3: A brief training program should be designed for all senior government officials at each department and executive agency to provide them with background and knowledge on USAID's and USAID/OFDA's disaster response mechanisms. This training should also be provided to newly appointed Ambassadors before they post. USAID already participates in Ambassadorial seminars and should include whatever it deems important during their designated time period.

4.1.4 **Although USAID was appointed the lead agency, specific reporting structures in the U.S. Government response remained unclear.** More importantly, most of those interviewed noted that USAID, and particularly OFDA, lacked sufficient human resources to manage a response of this scale. There were also concerns that USAID did not have the necessary management staff or the political standing to lead a "whole of government" response.

R4.1.4: USAID should continue to take the lead in international disaster response but needs the capacity and support to respond, including, but not limited to, the ability to determine the need for and deploy additional Federal resources during an international disaster response.

4.1.5 **U.S. Government agencies did not always communicate and report to the lead agency.** Rather than working through USAID structures, senior government officials at the Departments of State, Defense, Health and Human Services, Homeland Security, and other departments directly contacted their agency staff as well as USAID staff in Haiti for information and, at times, to give direction. This disturbed the command structure and weakened the ability of USAID to function as the lead agency.

R4.1.5: USAID must be empowered to effectively lead international disaster response, and all federal agencies and departments must adhere to the command and control structures as set forth by the President.

4.1.6 **Involvement in the tactical operations and decision-making process on the ground in Haiti by Washington, DC came at a cost to strategic policy guidance from there during the initial response phase.** USAID and U.S.military leaders in Haiti were constrained by the need to respond to multiple requests for information from Washington policymakers on an hourly basis during the initial weeks of the response. The attention of policy leaders on tactical management issues decreased their capacity to provide long-term policy guidance and detracted from the ability of the U.S. Government to engage in effective planning for transition from military to civilian authorities and from relief to recovery and development.

R4.1.6: To encourage the most innovative and agile response during disaster situations, authority must lie with the field office. Policy leaders in Washington should establish the overall strategic direction to allow the experts in international disaster response to run the operational and tactical actions. This is particularly true during the initial response period, when lifesaving activities and critical disaster response actions are needed. Decentralized command and decision-making capacity must be strengthened when "whole of government" approaches are applied.

4.1.7 **Redeployment of U.S. military from Haiti required clearer policy guidance and conditions-based milestones.** Because of concerns about security issues, the U.S. military remained in Haiti until June. This was several months after the JTF and others advised the stand down of U.S. military forces to allow MINUSTAH and the Government of Haiti to resume full responsibility for security.

R4.1.7: Policy decisions on force use should be based on on-the-ground recommendations from military intelligence services, as well as the situation reports provided by USAID, in conjunction with other data and cross-checked resources by policy experts and political decision makers. Unless clear evidence exists to counter field recommendations, on-the-ground intelligence and situation reports should be the primary driver in policy decision making. When possible, redeployment decisions should be conditions-based.

4.1.8 **Teleconferences were critical to ensure a common operational picture among the interagency, providing all key stakeholders access to unified information.** They also served as an important management tool for translating policy issues to operations. After the initial few days of the response, the DOS successfully organized and led the daily teleconferences.

R4.1.8: Teleconferences could be improved in several ways. First, technologically, systems need to be installed that can service large numbers of participants. Second, the establishment of an agenda during the first conference will assist in addressing all topics during the meeting.

4.2 The U.S. Agency for International Development (USAID)

Over the past ten to fifteen years, USAID has faced staffing and resource constraints. When the earthquake struck Haiti, key leadership positions at USAID and its Office of U.S. Foreign Disaster Assistance were either vacant or newly appointed. The key positions of Deputy Administrator for USAID, Assistant Administrator for the Bureau of Democracy, Conflict and Humanitarian Assistance (DCHA), and Director for OFDA were all vacant. The USAID Administrator was sworn into office on 7 January 2010, five days before the earthquake struck. In Haiti, the new USAID Mission Director arrived on 11 January at 1700, just 24 hours before the earthquake hit.

The USAID Administrator responded to the earthquake by mobilizing the DCHA's Office of U.S. Foreign Disaster Assistance, which deployed a DART to Haiti within hours. In USAID, the DCHA Bureau is responsible for providing technical leadership and expertise in coordinating USAID's international disaster assistance, democracy programs, emergency and developmental food aid, aid to manage and mitigate conflict, volunteer programs, and civilian-military relations. The Deputy Assistant Administrators (DAAs) within DCHA managed the Haiti response in Washington and reported directly to the Administrator. A pivotal role of the DCHA Bureau was to organize the Interagency Task Force at USAID. DCHA is comprised of nine offices: Office of U.S. Foreign Disaster Assistance (OFDA); Transition Initiatives (OTI); Military Affairs (OMA); Civilian Response (OCR); Democracy and Governance (DG); Conflict Management and Mitigation (CMM); American School and Hospitals Abroad (ASHA); Program, Policy and Management (PPM); and Food for Peace (FFP). Each office manages a specific set of tasks, and most of them took part in assisting the Interagency Task Force and OFDA to coordinate the response in Haiti.[65] The role of each office is described below.

OFDA

On the evening of 12 January, USAID/OFDA Washington set up the Haiti Response Management Team and deployed a 17-member DART that arrived in Haiti within 24 hours of the earthquake. The interagency created an ad hoc task force in response to the U.S. President's speech calling for an integrated approach to relief efforts. The Interagency Task Force was established on 13 January and co-led by the USAID Administrator and DCHA's Deputy Assistant Administrator. The Task Force augmented the standard RMT with representatives from the NSS; Departments of Agriculture, Energy, Interior (U.S. Geological Survey), Transport (FAA), Treasury, Health and Human Services, Homeland Security, Defense (Joint Staff, Special Operations Command, Transportation Command, Southern Command), and State (Office of Global Women's Issues); the Environmental Protection Agency; and NASA. The RMT and Interagency Task Force operated out of the emergency operations center (EOC) in USAID. The EOC was divided into two sections, the OFDA-staffed RMT and the Interagency Task Force. The RMT and Interagency Task Force each had a section of the EOC, with communications and computer equipment. These two sections held daily meetings as well as many ad hoc discussions to coordinate the response in the field and with their own agencies. There was, however, a perceived separation between the two groups, primarily due to differences in work cultures among emergency responders and development managers. The EOC ran on a 24/7 basis but worked with only two daily rotations of staff from USAID bureaus as well as from the Interagency Task Force.

Other USAID Office Involvement

To support the massive response, USAID staff from various offices provided skills and expertise.

In order to mobilize enough professional staff to respond to personnel needs in Haiti and Washington, USAID used the Office of Civilian Response, established in response to National Security Presidential Directive 44 (NSPD-44).[66] USAID's OCR served as the agency's coordinating body that oversaw the deployment of mission-ready civilian experts. It had some successes in identifying and placing appropriate, experienced staff but struggled to do so rapidly. Additionally, it was difficult to have other agencies release staff, as they were already assigned to important functions.

Food for Peace provides food assistance to vulnerable groups through implementation partners. In the Haiti response, FFP deployed a total of three people on the DART and partnered

[65] USAID. "Congressional Budget Justification FY2005: Democracy, Conflict and Humanitarian Assistance." *USAID Website*. Modified 24 May 2004. Available from: http://www.usaid.gov/policy/budget/cbj2005/cent_prog/central_dcha.html. Accessed on 29 August 2010.

[66] The White House. 2005. *NSPD-44*. 7 December.

with the WFP, Catholic Relief Services (CRS), ACDI/VOCA, and World Vision to deliver emergency food assistance.

The Office of Transition Initiatives worked with implementation partners via "Indefinite Quantity Contracts" (IQCs) to set up short-term innovative programming targeted in three key sectors: community stabilization; media and public outreach; and Government of Haiti stabilization. OTI supplied multiple staff to support the ORC in Haiti. Community stabilization was by far its largest sector and was focused on cash-for-work programs to support employment and economic stabilization to improve livelihoods and reduce the risk of civic unrest in Haiti. Programming targeted rubble removal and flood mitigation activities such as canal clearance, riverbed maintenance, and riverbank strengthening, which promoted safe resettlement to original communities.

The Office of Military Affairs was established in 2005 to support national security through establishment of a strong relationship between development, diplomacy, and defense. OMA serves as the principal point of contact and liaison between USAID and DOD on civilian-military engagement. During the Haiti response, OMA facilitated civilian-military communication and operations by sending staff to augment the work of the USAID Senior Development Advisor in SOUTHCOM: an additional advisor to work directly with the Senior Command Group; a civilian-military planner to help with transition planning; and a health officer to help with planning for DOD medical support. The Office also sent officers to Haiti to facilitate civilian-military operations in the areas of health, transition planning, communications, and the movement of internally displaced persons (IDPs) to safe camps. OMA convinced the Joint Staff to establish a cell within the Ronald Reagan Building to help coordinate DOD operations with the rest of the U.S. Government agencies and to set up VTC links that allowed senior USAID staff to participate in daily Joint Chiefs' synchronization briefs with all DOD elements involved in the response. An OMA-hosted VTC held three times per week allowed civilian planners to synchronize efforts with Joint Staff, OSD, SOUTHCOM, JTF-Haiti, and USAID/ORC planners, facilitating U.S. military-to-civilian transition planning. Existing liaisons and previous activities between USAID and the DOD, managed by OMA, were important in coordinating the response.

The Program, Policy and Management Office provided technical assistance and management strategies to various bureaus within USAID to support the overall response in Haiti.
USAID's Office of the General Counsel (GC) provided legal guidance to USAID's programs in Haiti, including legal advice on cooperation with foreign governments and implementation partners. The GC ensured that USAID programs were administered in accordance with legislative authorities. For Haiti, the GC composed all legal documents and Memorandums of Agreements (MOAs) between USAID and U.S. Government agencies. Additionally, through the writing of the MOAs, the General Counsel was tasked with coordinating the roles and responsibilities for all U.S. Government agencies involved in the relief efforts.

The Legislative and Public Affairs Bureau (LPA) was responsible for coordinating all legislative affairs and communication strategies for USAID. It provided counsel on the status and history of pending legislation and the concerns and views of Congress in regards to Haiti.

The Bureau for Global Health (GH) supported field health programs through the USAID mission. GH provided technical expertise in the areas of child and maternal health and nutrition, HIV/AIDS, infectious disease, populations, family planning and related reproductive health, and health system strengthening.
The Economic Growth and Trade Bureau (EGAT) helped facilitate sustainable economic growth planning and program development in Haiti. EGAT supplied staff to USAID's ORC in Haiti and focused on planning transitional shelters, developing efficient markets, enabling vulnerable populations' access to markets, and strengthening economic policies.

USAID Transition from Relief to Development

At the height of the emergency response phase, the DART team consisted of 34 core staff, augmented by 511 USAR team members.[67] Based on proposals received from the DART team, USAID/OFDA Washington approved over 20 large-scale grants to NGOs, UN agencies, and international organizations within the first three weeks of the response.[68] On 28 February 2010, the RMT stepped down in Washington, and the USAID Haiti Task Team (HTT) took over as the lead group to coordinate the transition from relief programming to medium- and long-term development. On 28 April 2010, the DART transitioned to a USAID/OFDA program office in Haiti.[69]

The HTT was housed within the Latin American and Caribbean (LAC) Bureau, which oversees all USAID missions and programs in the LAC region. Due to the scale of the disaster, the HTT was established to handle all USAID/Haiti programs in Washington and continue to lead and coordinate the interagency response. It was to serve as the bridge to support the USAID/Haiti mission and the OFDA DART on the ground, to plan and coordinate the transition from emergency programs to longer-term reconstruction and development projects. The HTT also handled inquiries and correspondence from the public and Congress. It worked with its counterparts in the field (USAID/Haiti and its newly merged OFDA and ORC) to design and fund multiple grants and contract awards to implementation partners either through competitive requests for applications or Indefinite Quantity Contracts (IQCs).

The HTT faced many obstacles as it struggled to fulfill its tasks. Firstly, the HTT was established without a budget. This limited its capacity to hire staff and purchase resources, resulting in a reliance on other bureaus within USAID, and the greater interagency, to second personnel to staff the Task Team. Secondly, the HTT received strategic direction from different sources, including the Department of State, leading to a lack of internal focus.

Analysis and Recommendations

4.2.1 **USAID is under-resourced.** Years of budget cuts have led to an agency with minimal staffing, especially of full-time staff.

R4.2.1: Full-time staff must be increased in USAID and OFDA, while reliance on contractors be decreased. Country-specific relief funds must also ensure that there is adequate response staff in the country and in Washington to manage the response. USAID funding should be increased on an annual basis to expand its operations and capabilities to deliver critical development resources to countries or regions in need of assistance. By strengthening USAID, offices within the agency will ultimately be supported, including OFDA. USAID, DOD HADR, and the DOS Office of the Coordinator for Reconstruction and Stabilization (S/CRS) resources should be better aligned so that their capacities can be employed synergistically.

4.2.2 **USAID did not possess sufficiently extensive operational agreements or MOAs with U.S. agencies that participated in the response.** Current USAID agreements with other U.S. Government departments need to be expanded to additional departments and agencies, be more detailed, and specify reimbursement.

R4.2.2: MOAs related to international disaster response need to be elaborated through the interagency and signed at senior policy levels. This process could be included in the development of the IRF.

4.2.3 **Instruments for rapid staff mobilization within USAID Bureaus and the interagency for bodies such as the RMT or DART were inadequate to meet needs for augmentation.** There is a need for stronger interagency staff deployment to serve as technical advisors on the RMT. There is also a need to improve the sharing of staff within USAID Bureaus during disaster responses to staff entities such as the RMT, HTT, or DART.

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[67] USAID/OFDA. 2010. "Success Story: USAID Disaster Assistance Response Team: Haiti Earthquake." USAID Website. Modified on 7 September 2010. Available from: http://www.usaid.gov/our_work/humanitarian_assistance/disaster_assistance/countries/haiti/template/files/DART_success_story.pdf. Accessed on 8 September 2010.
[68] USAID/OFDA. 2010. Haiti Earthquake. Fact Sheet: 25; 6 February.

[69] USAID/OFDA. 2010. USAID's Office of US Foreign Disaster Assistance (OFDA): Chronology of Response to the Haiti Earthquake. May.

R4.2.3: USAID should review its current staffing structure and develop mechanisms for staff sharing between Bureaus in critical disaster response situations. More flexible hiring processes could identify qualified employees or Personal Services Contractors (PSCs) to fill gaps. Alternative sources of staff from outside USAID—including other federal agencies, retired U.S. Government civilians and military and outside contractors—should be explored for short-term large-scale disaster response as a means to augment USAID personnel.

4.2.4 **Liaison officers within the interagency and with the UN were critical to coordinate the response effectively.** Liaison officers were important at the strategic level, such as UN liaisons, and at the operational level, such as OFDA liaisons at SOUTHCOM, for coordinating U.S. military shipping assets and donated relief supplies.

R4.2.4: The use of liaison officers needs to be expanded and formalized. Ongoing liaisons that exist between the Combatant Commands (COCOMS) and USAID should continue.

4.2.5 **USAID/OFDA does not have the most appropriate technology and equipment to assist in its response mission.** The RMT EOC located at the Ronald Reagan Building was not adequately equipped for the size of the response in Haiti. It lacked physical space, communications equipment, video conferencing capabilities, and technical capacity to properly oversee the coordination of the response.

R4.2.5: USAID/OFDA should be provided with resources to set up a RMT EOC in Washington, equipped with the latest technology and based on best practices established by FEMA EOCs as well as OFDA's unique experience. The EOC should have the capacity to coordinate one large-scale response as well as two medium-size (regular) responses simultaneously.

4.3 The Department of State

When the earthquake struck, Secretary Clinton appointed the Counselor and Chief of Staff to lead the response for the Department of State, rather than the Western Hemisphere Affairs Bureau. The Counselor was an obvious choice, as she had been working to develop a long-term development strategy for Haiti during the prior nine months and was very familiar with the Haitian Government and key institutions of the country. This long-term strategy was to be released in mid-January, but when the earthquake struck, release was postponed. Due to the appointment of the Counselor, rather than someone within the Western Hemisphere Bureau, there was a lack of clarity with regard to the roles and responsibilities shared between USAID and DOS during the initial phase of the disaster response. The first action to be taken by the Department of State was to set up a Haiti cell at the DOS Operations Center and establish the Haiti Task Forces (HTF) to coordinate different aspects of the response. Of the eight task forces that were stood up by DOS, five key units are described below.

Task Force I — Established within the State Department Operations Center, this TF was dedicated to the Haiti response on a 24/7 basis to: provide situation reports to the Secretary and other Principals; coordinate the evacuation of 16,800 American citizens (AMCITs); liaise with the interagency through liaison officers from DOD, HHS, DHS, FEMA, USAID, and CBP; answer foreign government queries; coordinate assistance for official casualties and embassy, Port-au-Prince; and support U.S. diplomatic efforts.

Task Force II — Consular affairs responded to inquiries from private American citizens and handled queries regarding Haitian orphans already in process for adoption by American citizens.

Task Force III — Principals' information task force, which supplied analysis for the Counselor and other Principals. Task Force III morphed into the Public Diplomacy Task Force, which was responsible for responding to international media and providing strategic messaging to diplomatic posts worldwide.

Task Force IV Forward planning for recovery, reconstruction, and stabilization. This TF was set up three days after the earthquake and staffed primarily by the Office of the Coordinator for Reconstruction and Stabilization. The TF brought together expertise from 42 offices and agencies from throughout the Federal Government, including the Western Hemisphere Affairs Bureau and members of the interagency professional Civilian Response Corps.

Task Force V Orphans and Vulnerable Children Group. This group worked closely with DHS, USAID, HHS, and appropriate international organizations to focus on the health and welfare of orphans and vulnerable children (OVC) in Haiti during the crisis period and to respond to public inquiries regarding the status of children without families immediately following the earthquake. USAID eventually assumed leadership of this Task Force and was successful in providing assistance to OVCs.

Foreign Assistance Office and the Under Secretary for Management

Two other offices within the Department of State played key roles in the response in Haiti: the Director of U.S. Foreign Assistance and the Under Secretary for Management. The Foreign Assistance Office was created in 2006 to coordinate assistance activities between the Department of State and USAID. Authorization and approval of funding for DOS foreign assistance falls under the control of State/F, except for the President's Emergency Plan for AIDS Relief (PEPFAR) and Food for Peace. It is the responsibility of State/F to align policies, locate funding, and coordinate resources to implement any new policies. State/F tracks all DOS spending for foreign assistance and works closely with the Office of Management and Budget (OMB). State/F does not track funding for the DOD directly, but monitors spending through the OFDA fact sheets. State/F provided one staff member to help set up the Haiti Task Force. It also shepherded the supplemental budget request to Congress on behalf of the Department of State and USAID.

The Under Secretary for Management had a lead role in the response and managed several key Bureaus. He organized the agenda and led the daily telephone conference calls with the interagency, which were critical for coordinating the response. The Under Secretary for Management's Bureau of Resource Management (RM) coordinated resource requirements to enable the Secretary of State to present integrated international affairs resource submissions for Haiti to the Office of Management and Budget and to Congress. The Office of the Under Secretary provided operational and logistical support to personnel that deployed to Haiti. This was achieved by modifying the country clearance approval process to ease pressure on the U.S. Embassy as well as tracking and consolidating information regarding interagency personnel who deployed. Other key management bureaus directly involved in the Haiti response included Administration, Consular Affairs, Diplomatic Security, Information Resource Management, Overseas Building Operations, Medical Services, and Human Resources.

DOS Transition, Reconstruction, and Long-Term Development Planning

Task Force IV was set up to lead recovery and reconstruction planning and brought together a working group of 152 people from the interagency. A core staff and the capabilities of the interagency Civilian Response Corps were provided by S/CRS and the TF and Forward Planning Team (FPT), including staff and subject matter experts from USAID; the Departments of State, Commerce, Agriculture, Energy, Health and Human Services; and other agencies to: (1) conduct situational analysis; (2) identify key challenges at three, six, and twelve months; (3) identify key objectives; and (4) ask important policy questions for future planning. The aim of Task Force IV was to draft strategy and identify potential resources available for the reconstruction and stabilization of Haiti depending on different scenarios and levels of funding. Through the Civilian Response Corps, S/CRS also sent one staff member to Haiti embedded in JTF-H to support longer-term planning in TF IV and to assist with civilian-military coordination. Task Force IV was functional for five weeks. It had little interaction with the RMT at USAID during its operation and, although there was liaison between the RMT and Task Force IV, coordination was minimal, as the RMT focused on immediate response and TF IV was looking at everything but humanitarian assistance (HA) and disaster response (DR). At week five, Task Force IV was transformed into the Haiti 2020 group. Haiti 2020 consisted of a group of six to seven people and was tasked to assist the GOH in developing the national action plan for reconstruction and development in Haiti as preparation for the International Donor's Conference to be held on 31 March 2010. A ten-person team from TF IV remained operational and supported the 2020 group with information, research, and

strategy assistance. Task Force IV represented one of the first times that such comprehensive strategic development planning was begun so soon after a disaster. However, despite all the work achieved by TF IV over its five week span, little was used to assist in the response.

The Office of the Coordinator for Reconstruction and Stabilization (S/CRS) was brought in to support Task Force IV because of its mandate to serve as a focal point to coordinate and strengthen efforts of the U.S. Government to prepare, plan for, and conduct reconstruction and stabilization assistance and related activities in a range of situations that require the response of multiple U.S. Government entities and to harmonize such efforts with U.S. military plans and operations. S/CRS was established under National Security Presidential Directive #44 in 2005 and made permanent by PL 110-417 section 1605 in 2008. However, these directives are related to improving political stability and capacity, particularly in areas affected by conflict or civil strife.

S/CRS conducted one of its first "whole of government" planning processes on Haiti in 2005 and launched its first pilot program there in 2007, known as "the Haiti Stabilization Initiative" (HSI), which focused on stabilizing Cite Soleil, a shantytown located in Port-au-Prince, through tightly coordinated and targeted security and development assistance. Therefore, its staff had good ground knowledge of the situation in Haiti and could lend their experience and expertise to the task force and later to Haiti 2020.

The correct policy guidance from the Department of State during the initial weeks of the response was to "build back better." An initial operational strategy and budget estimates for the reconstruction produced by Task Force IV were largely based on this policy. But financial implications of "building back better" generated debate early in the process within the DOS and other key policy-making agencies as the definition of better and the expected quality in building back better were not specified.

Analysis and Recommendations

4.3.1 **The Haiti response was unique because the local government capacity was very limited.** The need for political stabilization and reconstruction following a natural disaster, and not a civil conflict, is rare.

R4.3.1: The application of NSPD-44 to disaster response should be used only in situations where the affected country's government does not have the functional capacity to manage the response and provide resources to its citizens or there is an existing political conflict.

4.3.2 **Task Force IV combined staff from USAID (LAC & DCHA), DOE, USDA, DOJ, DHS, SOUTHCOM, and DOS (Bureau of Population, Refugees and Migration (PRM), Bureau of Western Hemisphere Affairs, Policy Planning Staff, Foreign Assistance Office, and S/CRS) to provide planning, information, and technical support to the Counselor's mission to craft the longer-term U.S. Government response to reconstruction and to raise the key policy issues for discussion and decision internally and with the GOH.** TF IV provided critical technical assistance to help the GOH design the National Action Plan for Reconstruction and Development. It also provided support to the GOH to prepare for the international donor conference and assisted in the establishment of the Interim Haiti Recovery Commission. USAID staff from the ORC and Mission also provided extensive technical support to the GOH for the National Action Plan, international donor conference and establishment of the Interim Haiti Recovery Commission. Task Force IV represents the first time that DOS took an active role in planning the long-term recovery and re-development of a country so soon after a disaster. While this support was useful, coordination between DOS and USAID in the development of a transition plan from the relief phase to long-term aid investments could have been stronger. There are organizational and philosophical barriers that exist between DOS and USAID with regard to development aid, which could be addressed through increased dialogue and exchanges of staff to strengthen the interagency approach between the two.

R4.3.2: The DOS and USAID should establish interagency meetings on humanitarian assistance and long-term development to produce unified policy guidance on collaboratively integrating strategic development aims. At a minimum, these meetings should involve USAID, USAID Bureaus, DOS regional offices, and S/CRS.

4.4 The Department of Defense

The Department of Defense regularly works in concert with USAID to respond to international disasters. DOD possesses unique capabilities in logistics, transportation, assessment, and security that USAID coordinates to support humanitarian response. Because Haiti had no military, except for a small Coast Guard, and the UN and MINUSTAH were initially incapacitated, the U.S. military played a much larger role than usual in the initial response, as well as in the medium term. The role of the U.S. military was widely praised—by the Haitian Government, the UN, and NGOs—especially for re-opening the airport and seaport, fully using its logistical capacities, and taking a low-key approach in providing security. There were, however, concerns about the size of the military response and its technical knowledge in specific humanitarian operations.

The normal process for disaster response supported by DOD follows a predetermined set of steps that include: (1) Ambassador makes a disaster declaration; (2) USAID/OFDA determines whether response requires unique military capabilities; (3) DOD transmits a formal Executive Secretary request; (4) Secretary of Defense approves the mission and delegates authority to the appropriate Geographic Combatant Commander to conduct humanitarian assistance (HA) operations and expend Overseas Humanitarian, Disaster, and Civic Aid (OHDACA) up to a pre-set limit; and (5) Execute Orders are issued by the Joint Staff. DOD and OFDA then work with the host country government to coordinate a Mission Tasking Matrix (MITAM), providing clear direction to the military for their specific humanitarian missions. Daily situation reports covering all daily operations are provided to the Combatant Command (COCOM) so that costs and resources can be calculated.

Because of the overwhelming nature of the earthquake in Haiti and the early direction of the President to "respond with a swift, coordinated, and aggressive effort to save lives," the way the response was organized in SOUTHCOM was unprecedented and did not completely follow these standard operating procedures. When the earthquake struck Haiti, the SOUTHCOM deputy military commander was in Port-au-Prince with the U.S. Ambassador. Having received clearance from the USAID Administrator to take action as required, DOD did not wait for specific direction to begin its operations, and a Humanitarian Assistance Survey Team (HAST) assessment was not done prior to planning. The SOUTHCOM commander's review was not performed. Verbal Commands (VOCOs) were used in place of written Operational Orders (OPORDs). This, combined with the need to rapidly deploy resources in-theater due to security concerns, led to a large military footprint that required substantial resources as well as significant time to put into place.

National policies and legislation are in place to provide guidance to the DOD when it conducts humanitarian assistance or foreign disaster relief operations in support of USAID/OFDA. The Defense Security Cooperation Agency (DSCA) is the program manager for the OHDACA appropriation, which funds DOD's HA programs and DR operations.[70] OHDACA appropriation funds have built-in flexibility and may be used to support a wide range of humanitarian relief, benefiting issues such as: economic or infrastructure deficiencies; endemic conditions including disease, hunger, or pain that threaten human life; damage to or loss of property; and social or political stability in developing nations. They are designed to support efforts of host nation civil authorities or agencies that have primary responsibility for providing humanitarian assistance. The Title 10 of the U.S. Code contains two key sections that were used extensively by the J directorates in SOUTHCOM to justify the planning and implementation of HADR missions in Haiti. These include section 2561 on humanitarian assistance[71] and section 404 on foreign disaster assistance.[72] Due to the enormous scope of mission and vast humanitarian requirements, the OHDACA appropriation was broadly interpreted at the direction of NSS and other DOD leadership to give maximum flexibility to operations on the ground.

Office of the Under Secretary of Defense for Policy

The Secretary of Defense, Office of the Under Secretary of Defense for Policy, and Joint Chiefs of Staff played important roles in coordinating the policy-level response, in cooperation with the White House, Principals Committee, and Deputies

[70] DSCA Website. C12. CHAPTER 12 HUMANITARIAN ASSISTANCE AND MINE ACTION PROGRAMS. DOD 5105.38-M, October 3, 2003. http://www.dsca.mil/samm/Chapter%2012%20-%20HA%20and%20MA%20Programs.pdf. Accessed on 10 September 2010.

[71] **10 USC 2561 - Sec. 2561. Humanitarian assistance**

(a) Authorized Assistance. - (1) To the extent provided in defense authorization Acts, funds authorized to be appropriated to the Department of Defense for a fiscal year for humanitarian assistance shall be used for the purpose of providing transportation of humanitarian relief and for other humanitarian purposes worldwide. Ref- vLex website. http://vlex.com/vid/sec-humanitarian-assistance-19221827. Accessed on 10 September 2010.

Committee. The mission of the Office of the Under Secretary of Defense for Policy is to consistently provide responsive, forward-thinking, and insightful policy advice and support to the Secretary of Defense, in alignment with national security objectives.[73] As such, it played the key role in coordinating the policy and operational response for DOD in partnership with the Department of State. Within the Office of the Under Secretary of Defense for Policy, the Office of Partnership Strategy and Stability Operations and the Office of the Assistant Secretary of Defense (Homeland Defense and Americas' Security Affairs) were involved in the Haiti response.

The Deputy Assistant Secretary of Defense for Partnership Strategy and Stability Operations (PSO) was appointed the Office of the Secretary of Defense (OSD) lead, due in large part to the consolidation of HADR, Global Health, Peacekeeping, and Stability Operations portfolios under this office. PSO collaborated with the office of Western Hemisphere Affairs, Defense Support to Civil Authorities, and the OSD Crisis Management team to provide policy recommendations to the Secretary of Defense.

The Office of the Assistant Secretary of Defense (Homeland Defense and Americas' Security Affairs) (OASD (HD&ASA)) worked in three key areas, unprecedented until recently, since the Office focused upon domestic homeland defense and homeland security matters within the U.S. This was the first time that the Office was involved in a humanitarian disaster response mission within the Western Hemisphere. The first area of involvement, by the direction of the White House, was the OASD (HD&ASA) coordinating with the Department of Health and Human Services in the recovery of American citizen remains in Haiti, repatriation to the U.S., DNA identification, autopsy (when applicable), and mortuary processing. DOD paid for the recovery, identification, repatriation, autopsy and DNA identification, and processing of non-military human remains. The U.S. Government had high expectations of DOD for the recovery of American remains and repatriation, and this consumed the attention of key policymakers at DOS, DOD, HHS, the NSC, and the White House for several weeks.

The second area of OASD (HD&ASA's) involvement was for the transportation of American and Haitian patients to the U.S. for more definitive care in U.S. hospitals, using U.S. Transportation Command (TRANSCOM).

Third, because of airport congestion and the desire not to inject U.S. Government-chartered aircraft and thereby reduce the number of available landing slots for aircraft carrying relief supplies, TRANSCOM assisted the evacuation of American citizens from Haiti to the U.S. using military aircraft that were otherwise returning to the United States empty. The DOD had to coordinate this process with the Departments of Homeland Security and Health and Human Services, since Americans were arriving at designated airports, sometimes without documentation or proper clothing. On 19 February, commercial air flights resumed and the DOD no longer needed to assist with AMCITs evacuations.

Defense Security Cooperation Agency

The PSO crisis management group also worked closely with the Defense Security Cooperation Agency (DSCA) at DOD to determine financing of the humanitarian assistance and disaster relief efforts conducted by the U.S. military. The Defense Security Cooperation Agency manages the Overseas Humanitarian, Disaster, and Civic Aid appropriation and its sub-activities of humanitarian assistance, foreign disaster relief, and emergency response. Additionally, DSCA provides oversight for the Commanders' humanitarian and civic assistance (HCA) projects, as well as managing the Denton Program, a space-available transportation program for donor humanitarian relief supplies and material. DSCA activities in Haiti were accomplished pursuant to the following legislative authorities: Title 10, U.S. Code, sections 404 and 2561.[74]

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[72] 10 USC 404 - Sec. 404. Foreign disaster assistance
(a) In General. - The President may direct the Secretary of Defense to provide disaster assistance outside the United States to respond to manmade or natural disasters when necessary to prevent loss of lives or serious harm to the environment. (b) Forms of Assistance. - Assistance provided under this section may include transportation, supplies, services and equipment. (c) Notification Required. - Not later than 48 hours after the commencement of disaster assistance activities to provide assistance under this section, the President shall transmit to Congress a report containing notification of the assistance provided and proposed to be provided, under this section and a description of so much of the following as is then available: (1) The manmade or natural disaster for which disaster assistance is necessary. (2) The threat to human lives or the environment presented by the disaster. (3) The United States military personnel and material resources that are involved or expected to be involved. (4) The disaster assistance that is being provided or is expected to be provided by other nations or public or private relief organizations. (5) The anticipated duration of the disaster assistance activities. (d) Organizing Policies and Programs. - Amounts appropriated to the Department of Defense for any fiscal year for Overseas Humanitarian, Disaster and Civic Aid (OHDACA) programs of the Department shall be available for organizing general policies and programs for disaster relief programs for disasters occurring outside the United States.
Ref- vLex website. http://vlex.com/vid/sec-foreign-disaster-assistance-19221773. Accessed on 10 September 2010.
[73] Office of the Under Secretary of Defense. Office of the Under Secretary of Defense for Policy. http://policy.defense.gov/index.aspx. Accessed on 9 September 2010.

Interagency Coordination with DOD

The DOD made an early decision to use unclassified communications for the JTF and its HADR operations. This made for much faster sharing of information among the interagency, as well as with international and NGO partners at all levels, both in the U.S. and in Haiti. The DOD also set up an internal portal using the non-classified Internet protocol router (NIPR) system for cooperation and understanding of the activities of other agencies.

Due to staffing constraints, OSD was not able to send staff to the State TFs or the USAID RMT. At times, the reliance of the TFs on liaisons made interagency coordination difficult, particularly with the RMT. Though the crisis management group communicated regularly with the Department of State Executive Secretariat military advisor, Department of State Task Forces and Principals, including the Bureau of Consular Affairs, it did not have adequate communications with USAID or the RMT. It also lacked adequate communications with HHS to coordinate the NDMS, especially during the first five weeks of the response.

U.S. Southern Command - SOUTHCOM

SOUTHCOM is one of ten Unified Combatant Commands in the Department of Defense. It is responsible for providing contingency planning, operations, and security cooperation for Central and South America and the Caribbean. SOUTHCOM is comprised of more than 1,200 military and civilian personnel representing the Army, Navy, Air Force, Marine Corps, Coast Guard, and several federal agencies.[75] For "Operation Unified Response," the U.S. military set up a Joint Task Force within 24 hours of the earthquake. The JTF-Haiti was established with support from the Joint Forces Command and Joint Enabling Capabilities Command (JECC), and augmentation from other COCOMs such as Northern Command (NORTHCOM), TRANSCOM, and SOCOM as well as about 50 staff from the interagency. Within a few weeks, the JTF had established a strong presence, which included over 22,000 personnel. Initial priorities for the U.S. Military were logistics, relief supplies, medical response, and support to MINUSTAH for maintaining law and order.

SOUTHCOM responds to more humanitarian disasters than any other Combatant Command in the U.S. military. Because of this, SOUTHCOM has developed a very close working relationship with USAID, as well as with other members of the interagency community. It has also established units tailored for emergency response that have specialized capabilities for international disaster response, such as Joint Task Force Bravo, which has a rotary wing element stationed in Central America that provides helicopter airlift capacity, and other logistical and operational capabilities for HADR.

A four-star general combatant commander leads SOUTHCOM along with two deputy commanders, one military and one civilian. The military deputy commander is responsible for the military operations and day-to-day administration of the joint directorates. The civilian deputy commander serves as the foreign policy advisor and also works closely with the joint directorates. There are nine joint directorates within the combatant command. These include manpower and personnel (J1); intelligence (J2); operations (J3); logistics (J4); plans, policy, and strategy (J5); communications (J6); training exercise and engagement (J7); resources and assessments (J8); and partnering (J9). Due to SOUTHCOM's unique geographical position, it had adapted its standardized structure to better liaise with local leaders and accommodate special local needs.[76] However, due to the massive nature of the Haiti earthquake and the mandate that military involvement beyond SOUTHCOM's remit be included, the relief efforts highlighted the incompatibilities between the standard structures of the other COCOMs and SOUTHCOM's modified structure. This led to SOUTHCOM reverting back to SOP and the established nine joint directorates.

SOUTHCOM's J7 directorate houses the Command's HA program and manages OHDACA-related expenses. The J9 Partnering Directorate is also a player in HADR since it is responsible for interagency coordination, private sector partnerships with NGOs and businesses, and coordination with multilateral development partners such as the United Nations and regional bodies such as the Organization of American States. Within the J9 in Miami is a USAID Senior Development Advisor who works across the Command. An USAID/OFDA Advisor sits in the J7 who works closely with the J3 and J4. These positions

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[74] Smith, Tom. "Roles and Responsibilities: Office of Humanitarian Assistance, Disaster Relief and Mine Action (HDM)." *DSCA Website.* Modified on 3 October 2005. http://www.dsca.mil/programs/HA/HDM%20Roles%20and%20Responsibilities.pdf. Accessed on 13 September 2010.
[75] US Southern Command. "About Us". *US Southern Command Website.* Modified on 6 January 2009. http://www.southcom.mil/AppsSC/pages/about.php. Accessed on 30 August 2010.
[76] These needs included response to disaster and humanitarian crises.ccessed on 9 September 2010.

played pivotal roles in the disaster response by coordinating with the military and developing the response plan between SOUTHCOM and its civilian-military counterparts in Washington and in the field. NORTHCOM also managed domestic aspects of the response, including reception at domestic bases and domestic intake of medical evacuation patients.

Other Commands responding to the Haiti Disaster

NORTHCOM provided key support to SOUTHCOM, especially in the areas of planning (J3 and J5) and technical capacity via the 601 Regional Air Movement Control Center that re-opened the airport and managed the incoming and outgoing fixed-wing flight volumes until SOUTHCOM air units could take over.
JFCOM serves to coordinate and manage the U.S. Armed Forces. Within JFCOM is the Joint Enabling Capabilities Command (JECC), which provides immediate, short-term support to establish a Joint Task Force headquarters based on requests from any Combatant Command. The JECC provides support to COCOMs by sending joint deployable teams and support elements to their headquarters. For the Haiti response, SOUTHCOM received support from the JECC for operations, planning, logistics, knowledge management, and information as well as joint communications public affairs support to set up the JTF-Haiti.

The Special Operations Command (SOCOM) supported the earthquake response, first by deploying a Combat Controller team to open and manage the Port-au-Prince airfield, enabling the arrival of disaster assistance from around the world. Subsequently, SOCOM provided communications and information support to Haitians seeking relief, through radio programming from command air assets delivered via solar-powered radios procured by the command. SOCOM also supported the JTF through the provision of a 22-person element from the Civil Affairs unit, with assistance from logistics and security units. The Civil Affairs element established the Humanitarian Assistance Coordination Cell (HACC) to coordinate civilian-military operations with the OFDA DART through the use of MITAMs. SOCOM Special Operations Support Teams (SOSTs) assisted in coordinating the "whole of government" response in Washington, DC with USAID's Response Management Team, and in Port-au-Prince with the ORC.

The U.S. Transportation Command provided critical support for moving humanitarian supplies from the United States as well as from other donor countries. Working on a reimbursable basis, TRANSCOM moved large quantities of relief goods and equipment, as well as people, by contracting commercial transportation companies for both air and sea transport or through the use of military aircraft or sea-going vessels. In this case, TRANSCOM was reimbursed via the OHDACA account and by USAID. In addition to logistical support, TRANSCOM also sent a special Port Opening Unit to Port-au-Prince. This unit assessed the damage and conducted operations to re-open the port, which proved a critical component in the logistics bridge to send humanitarian supplies to Haiti.

Transition from Military to Civilian Authorities

Transition planning for the eventual withdrawal of the JTF was a critical planning challenge. There was a clear need for "conditions-based" plans rather than simple timetables, to ensure that U.S. capacities would only be withdrawn when there were sufficient Haitian and MINUSTAH capacities and when their specialized services were no longer required. The JTF worked closely with USAID, DOS, the Haitian Government, MINUSTAH, and UN humanitarian agencies to develop a transition plan for the JTF to hand off its responsibilities to the U.S. and other partners. The conditions-based approach facilitated an orderly withdrawal, ensuring that critical capacities were not prematurely withdrawn. SOUTHCOM planners initially looked to Task Force IV for guidance on future requirements for DOD and transition criteria, but received little information.

The DSCA made multiple requests to USAID and the DOS for the six-month and twelve-month plan for Haiti so that they could develop budgets for different scenarios. However, USAID and the DOS did not provide clear guidance for the DSCA to plan for the funding or military support that would be required by the military.

Analysis and Recommendations

4.4.1 **The DOD's decision to use unclassified communications for the JTF and its HADR operations greatly facilitated its response and improved its effectiveness.** Otherwise, the information collected by the military would not have been available to USAID and other U.S. Government agencies, the UN, and NGOs, thus hampering the response.

R4.4.1: Future large-scale disaster responses should consider the use of unclassified communications by the military, security conditions permitting. Unclassified communications should be a best practice, conditions permitting, and be applied as standard operating procedure for international disaster response.

4.4.2 **As a quick response was imperative to save lives, the JTF was set up without strictly following the SOP.** This led to the deployment of military forces to Haiti that were larger than required. If circumstances had allowed the standard operating procedure to be employed, the force would have been leaner and better prepared to meet the demands of the situation at a much smaller cost.

R4.4.2: The military and USAID should adhere to standard operating procedure for all disaster events, regardless of the size and scale of the event. The U.S. military should work closely with the USAID/OFDA DART team on the ground to obtain appropriate forces as required.

4.4.3 **Policymakers' lack of articulated requirements and goals for disbanding the JTF, and the devastating conditions on the ground, prolonged its mission in Haiti.** The majority of military and government officials stated the JTF could have stood down much earlier without causing any change in the situation in Haiti. The military was ready to leave by mid-April. The Canadian military left on 18 February. Military planners at the J3 and J5 in SOUTHCOM and in Washington repeatedly requested guidance from policymakers in order to plan for the return of JTF forces to the U.S. Key policymakers felt that the military should remain as a "safety blanket" to provide ambient security or to assist in the case of hurricanes, but without a clear articulation of its mission.

R4.4.3: The U.S. military should only be deployed in HADR operations with a clear mission and defined end states and approved interagency process for redeployment. Conditions-based timetables should be used from the beginning with conditions-based planning.

4.4.4 **Lifesaving activities under the OHDACA account were more broadly interpreted for the Haiti response than ever before due to a lack of clear policy guidance on strategic end states.** The ODHACA legislation sections 404 and 2561 include language that pertains to the military's role in humanitarian and foreign disaster response. In Haiti, the military performed activities that were not strictly "lifesaving." This involved establishing IDP camps outside of Port-au-Prince, relocating IDPs to the camps, and removing rubble through the use of local contractors.

R4.4.4: Standard operating procedures are in place for the military to conduct HADR activities through the MITAM system. If employed properly, the MITAM system ensures that military HADR operations are led by civilian authorities and match the relief and recovery needs of the population. However, due to the high demand for assistance and the lack of personnel to process the MITAM requests, this system was not always employed to handle HADR operations. It is important that the MITAM system be adaptable to the changing environments of disasters and response demands.

R4.4.5: Policymakers must provide clear and direct policy guidance to the military regarding their proper responsibilities for humanitarian operations and ensure that they follow standard operating procedures.

4.5 The Department of Homeland Security

The Department of Homeland Security usually works domestically, but played an important role in the response in Haiti.

Federal Emergency Management Agency

The Federal Emergency Management Agency (FEMA) was officially established in 1979 by Executive Order 12127. It was absorbed into the U.S. Department of Homeland Security in 2003.[77] FEMA is designated as the lead federal agency for response to domestic disasters.

[77] FEMA. "FEMA History." *FEMA Website*. Last modified on 11 August 2010. http://www.fema.gov/about/history.shtm. Accessed on 1 September 2010.

Early in the response, the FEMA Administrator provided guidance and support to the Interagency Task Force in Washington, and FEMA placed a staff member on the RMT. FEMA activated the National Response Coordination Center (NRCC) to Level II operations and deployed an Incident Management Assistance Team (IMAT) to Haiti to provide on-the-ground management assistance. For the first time, FEMA also deployed four domestic USAR teams to assist the rescue efforts of trapped victims, and Mobile Emergency Response Support (MERS) personnel to provide tactical communication equipment to the embassy, USAID, and USAR teams in Haiti. The agency established and provided the initial leadership for the Joint Interagency and Information Center (JIIC). In Florida, FEMA's Logistics Management Directorate established an Incident Support Base to facilitate the transport of emergency supplies to Port-au-Prince.[78] It is important to note that some services provided by FEMA, such as IMAT, were not requested by USAID nor included in USAID's interagency agreement. This led to tensions and miscommunication in the field.

The FEMA IMAT found that it was difficult to integrate management activities into the DART operations and there was friction between the two groups. The IMAT then focused on providing support for the other FEMA components, especially the USAR teams; providing situational awareness to their leadership in Washington; and establishing the JIIC. The IMAT rapidly reduced its numbers until the first week of February, when a single member with debris management experience remained to serve on the "Debris Committee" that became the Project Management Coordination Cell (PMCC).

United States Coast Guard

The United States Coast Guard (USCG) operates as part of the Department of Homeland Security. The USCG is responsible for enforcing maritime laws, protecting the U.S. coastline and ports, and saving lives.[79] The USCG was the first American agency to arrive in Haiti following the earthquake. The Coast Guard conducted initial rapid assessments, provided support to military air traffic control, facilitated the delivery of supplies, and helped to open Haiti's ports.[80] The USCG played an important role in the evacuation of earthquake victims and the repatriation of American citizens following the disaster. The Coast Guard deployed three Cutters to Haiti: Forward; Mohawak; and Valiant. These Cutters transported relief supplies, including water and medical supplies, as well as disaster response personnel and heavy equipment to help repair damages caused by the earthquake. The Coast Guard Cutter Oak, which is a buoy tender with a crane, arrived in Haiti to aid debris removal in the commercial harbor at Port-au-Prince to provide access to additional relief vessels.

U.S. Customs and Border Protection

The U.S. Customs and Border Protection (CBP) deployed 122 Customs and Border Protection Officers and 25 Agricultural Specialists to Miami, Florida. The Customs officials conducted pre-departure activities for people traveling to the U.S., as well as assisting with the movement of foreign government assets through the U.S. to Haiti.[81]

U.S. Immigration and Customs Enforcement

The Department of Homeland Security personnel assisted DOS' Bureau of Diplomatic Security in providing security for fuel trucks, convoys of relief supplies, and convoys of evacuees between Santo Domingo, Dominican Republic and Port-au-Prince. Immigration and Customs Enforcement (ICE) agents assisted Diplomatic Security in moving adoptees from the U.S. Embassy to the Port-au-Prince airport. The ICE Office of Intelligence assisted in identifying escaped criminals in Haiti following the collapse of the jail.[82]

Transportation Security Administration

In Haiti, the Transportation Security Administration (TSA) assisted DOS' Bureau of Diplomatic Security in providing aviation security for U.S. citizen evacuees, as well as disaster and humanitarian aid. TSA provided technical assistance to airport personnel and aided in the rapid resumption of commercial air carrier flights to Port-au-Prince.[83]

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[78] USAID. 2010. Draft USG Earthquake Response Report. May.
[79] US Coast Guard. "US Coast Guard History." US Coast Guard Website. Modified on 23 August 2010. http://www.uscg.mil/history/. Accessed on 30 August 2010.
[80] USAID. 2010. Draft USG Earthquake Response Report. May.
[81] Ibid.
[82] USAID. 2010. Draft USG Earthquake Response Report. May.
[83] Ibid.

U.S. Citizen and Immigration Service

The U.S. Citizen and Immigration Service (USCIS) assisted in the establishment of procedures that allowed children approved for humanitarian parole to depart Haiti. USCIS authorized 1,100 children to leave Haiti and travel to the U.S. The office also handled the applications for Temporary Protected Status of Haitian nationals in the U.S.; nearly 43,000 applications were accepted for processing by the end of April.[84]

Analysis and Recommendations

4.5.1 **FEMA's deployment of additional urban search and rescue teams had little impact and was expensive.** The FEMA USAR teams are not International Search and Rescue Advisory Group (INSARAG)-qualified and had little experience working in international disaster environments. The additional teams arrived without the ability to use their equipment and did not have enough supplies to support themselves without assistance from the U.S. Embassy. Their deployment cost $26 million.

R4.5.1: Additional USAR teams for international disasters should only be sent under the direct request of USAID/OFDA. If FEMA teams are to be deployed outside of the U.S., they should be trained to be INSARAG-qualified for international deployment. The decision to use FEMA teams internationally should be weighed carefully to evaluate costs and benefits within the broader framework of the global INSARAG system.

4.6 The Department of Health and Human Services

The Department of Health and Human Services played six major roles in the response: (1) public health; (2) medical response in Haiti; (3) state reimbursement for medical assistance to Haitians who were evacuated to the U.S. for earthquake-related care; (4) services for repatriated Americans; (5) services for humanitarian parolees and orphans or unaccompanied minors; and (6) fatality management.

To meet public health needs, HHS used the resources of the National Disaster Medical System (NDMS) and the CDC. The NDMS is a partnership between the HHS, DOD, DHS, and Veterans Affairs (VA), originally designed as a mechanism for DOD to bring back mass casualties from a large-scale conflict or to respond to a large domestic disaster. HHS activated the NDMS on 13 January and was asked by USAID to deploy field medical components, including Disaster Medical Assistance Teams (DMATs), a Disaster Mortuary Operational Response (DMORT) Assessment Team, and International Medical Surgical Response Team (IMSuRT) units. Members of these teams are civilian, non-federal professionals who are activated as intermittent federal employees when needed for a domestic disaster.

These teams encountered significant difficulties early on. Unlike international teams, HHS teams are not equipped to be entirely self-sufficient for two weeks and had to rely on the DOD for transport, as well as the embassy for support and overall response coordination. HHS was assured that DOD would be responsible for transportation and security of the NDMS teams. Delays in obtaining this support from DOD led directly to delays in deployment and engagement in the field. The teams were also not necessarily properly immunized or trained for foreign work. This led to days of delay for these teams in the U.S. and at the embassy before being able to deploy to provide care, and ultimately led to the medical evacuation of a few team members. Despite the difficulties, they provided important services, and by 2 February, these teams had seen more than 24,500 patients, performed over 100 surgeries, and delivered 28 babies since they began providing care in Haiti on 17 January.[85]

The Centers for Disease Control worked closely with the Ministry of Health to augment the existing surveillance system's HIV/AIDS sentinel points so they could track other infectious diseases. To support this project, the CDC also developed the capacity of the national laboratory, rebuilding and equipping some sections of the lab and providing critical technical assistance to its staff. Furthermore, the CDC worked with the Ministry of Health and USAID on an immunization program that reached over two million people.

HHS coordinated with DHS and DOS to provide services for orphans and refugees coming to the United States. Specifically, it's Administration for Children and Families' Office of Refugee

[84] USAID. 2010. Draft USG Earthquake Response Report. May.

[85] HHS. "National Disaster Medical System Helping US Hospitals Treat Survivors of Earthquake in Haiti." *HHS Website.* http://www.hhs.gov/haiti/ndms_ushospitals.html. Accessed on 30 August 2010.

Resettlement (ACF/ORR) provided care to Haitian orphans who arrived in the U.S. after the earthquake. As of 30 September 2010, 697 Haitians had passed through ORR's care since 12 January 2010. Of these 697 Haitians, 682 were orphans released to sponsors. During the Haiti Emergency Repatriation, ACF/ORR worked in collaboration with New Jersey, South Carolina, Florida, and Maryland to lead the reception and provision of temporary services to eligible citizens returning to the U.S. During the 38-day operation, over 28,000 individuals were evacuated from Haiti. Of these, approximately 7,800 American citizens received HHS temporary assistance, such as payments for travel to final destinations, cash loans, clothing, lodging, children's services, and medical care. These individuals arrived on 835 flights into seven authorized Emergency Repatriation Centers at military and international airports.

Medical evacuations became a difficult issue early in the response. Because of the limited resources on the ground and the devastating injuries caused by the earthquake, there was pressure to provide a higher level of care for the injured using the USNS Comfort and hospitals in the United States. HHS announced on 1 February that it would utilize additional components of the NDMS to help fund U.S. hospitals providing care to Haitians. Using these additional components, NDMS reimbursed participating U.S. hospitals that treated Haitian patients who had been evacuated with life-threatening injuries. To support this effort, HHS activated two Federal Coordinating Centers (FCCs), in Atlanta and in Tampa. These two centers were staffed by teams from the Department of Veterans Affairs who met the flights and arranged ground transport of patients from Haiti to appropriate U.S. hospitals.

Several local Medical Reserve Corps (MRC) units assisted in receiving medical evacuations. The Hillsborough and Polk County MRC units (near Tampa) responded to Haitian evacuations, receiving 72 patients via airlift. MRC volunteers provided emergency trauma care, management of patient flow, logistics support, and general assistance to the county health department, helping the community integrate the patients into the medical system. The Lowcountry MRC (North Charleston, SC) worked alongside local health department staff to conduct health screenings and operate a medical station at the Haiti Repatriation Center, sponsored by the county emergency management division. More than 700 returning U.S. citizens were screened and referred as needed for on-site medical and behavioral health care.

HHS was asked to help coordinate U.S. citizens who were interested in spontaneously volunteering. This proved to be a difficult task because there were no pre-existing mechanisms to screen, credential, manage, or deploy these volunteers. Volunteer recruitment and management lacked clarity and was not consistent. Multiple messages were distributed by a variety of U.S. Government agencies. Volunteer information and registration were not centralized; instead, potential volunteers were directed to numerous individual agency websites and information varied from agency to agency. Many people looked to their local government with questions about volunteer opportunities, but local and state governments were unsure of how to direct individuals seeking information.

Analysis and Recommendations

4.6.1 **The National Disaster Medical System was not activated quickly enough for patient movement and definitive care components to assist Haitian patients and mobilize hospitals to participate in the emergency relief program.** While the NDMS was activated on 13 January to provide DMATS, DMORTS, and IMSuRTs to Haiti, the patient movement and definitive care components were not activated until three weeks after the earthquake, in response to the State's request assistance, as is the established policy. Initially, Florida hospitals provided uncompensated care to seriously injured Haitian and American patients until the Governor of Florida refused to accept more patients for uncompensated care. HHS then initiated NDMS components two and three and established centers of care in Florida and Georgia, where hospitals agreed to accept Haitian patients and be reimbursed by Medicaid. The refusal to accept patients and confusion between NORTHCOM and SOUTHCOM as to who was the main liaison in the U.S. caused some delays in care. This could have been avoided if HHS was able to activate the patient movement and definitive care components of NDMS sooner and better communication existed within the interagency to identify responsibilities.

R4.6.1: NDMS components two and three should be activated as soon as possible in large-scale disaster responses to avoid delays in patient movement and the receipt of definitive medical care for seriously injured patients. However, this activation should be coordinated with the lead agency, and the state receiving the patients, for the response to ensure it is appropriate and timely for the host

country's medical system as well as the state medical system that will receive patients.

4.6.2 **HHS was asked to register health care workers interested in volunteering to respond to Haiti. This did not work for several reasons:** (1) there were no prior protocols for this; and (2) the NGOs and American Medical Association already have mechanisms to identify and screen volunteers.

R4.6.2: In the immediate aftermath of a disaster, the U.S. Government should not organize spontaneous unaffiliated volunteers for deployment, except for those working directly for the government. If a need for volunteer health professionals exists, the U.S. Government should use existing HHS programs and protocols specifically designed for this purpose. The U.S. Government can also help NGOs and other organizations manage volunteers by creating the right legal and regulatory framework.

4.7 The Management of Donations

Private donations became a politicized issue as the American public looked for ways to help the Haitian people. In the disaster response community, it has been widely recognized for more than 20 years that donations of goods often cause more problems than benefits. Therefore, the State Department, UN, UNICEF, American Red Cross, OFDA, FEMA, and most NGOs recommend that only cash be donated to aid disaster victims. Unfortunately, that message was often ignored and requests for the U.S. Government to assist with the collection, transport, and distribution of goods took up scarce time, effort, and resources. Given that more than half of all American families donated to the Haiti relief effort, elected officials became involved with coordinating their constituents' goods to Haiti through USAID and military personnel. Websites normally employed to handle donations proved inadequate due to the influx of private contributors.

There were many types of donations that were filtered through the U.S. Government, from money to volunteers to goods. In the immediate aftermath of the earthquake, President Obama requested the assistance of former Presidents Bill Clinton and George Bush to lead a fundraising effort to assist the Haitian people.[86] The Clinton Bush Haiti Fund (CBHF) collected monetary donations and directed them towards immediate relief and emergency assistance programs. The Fund worked primarily through partnerships and collaborations with non-profit and for-profit organizations, including Haitian organizations.[87]

In response to the vast number of inquiries about private donations received by the U.S. Government, working groups on private and international donations were initially set up as part of DOS Task Force IV. Also, the State Department created "Help Haiti," which collected information on private donations for the response. The management of private donations eventually shifted to USAID, and a new interagency team was created to coordinate contributions. The team included representatives from the Departments of State and Commerce and from FEMA. All inquiries on monetary donations were referred to the Clinton Bush Haiti Fund and the interagency team managed in-kind donations. The group coordinated with the U.S. Mission and USAID to assess supply needs of NGOs and private organizations in the field so that the team could coordinate in-kind donations accordingly. Additionally, USAID established a daily conference call with NGOs to discuss where in-kind donations should be directed.

HHS was asked to manage the registration of medical volunteers. Those wanting to donate their time to the response efforts were encouraged not to self-deploy, but to register as a volunteer with HHS. A database was created to handle the registration of medical volunteers, which included biographical details and credentials. However, HHS and USAID had never formally deployed registered medical volunteers and existing deployment mechanisms for medical volunteers were not implemented.

Foreign nations were also interested in contributing in-kind donations. In the initial response phase, this was handled by the Department of State, since the GOH and UN had little capacity to manage these contributions. The interagency team acted as a liaison between the foreign government and the GOH to channel donations to those most in need, depending heavily on the USAID teams on the ground to inform those decisions. DOD

[86] Clinton Bush Haiti Fund. "About the Clinton Bush Haiti Fund." *Clinton Bush Haiti Fund Website*. Available from: http://www.clintonbushhaitifund.org/pages/about/. Accessed on 15 September 2010.
[87] Ibid.

TRANSCOM provided transportation for donor nations' in-kind contributions. TRANSCOM retrieved donations from different countries and worked closely with the interagency donation team to deliver these supplies to Haiti. This became political and controversial, as countries had competing priorities and there was limited transportation capacity for these goods.

Two websites were used to register private in-kind donations in the U.S. The first was a USAID-funded information center, the Center for International Disaster Information. This was established before the earthquake and is the usual apparatus employed by USAID to register in-kind donations. Due to the influx of private contributions, this site was unable to handle the rapid registration and crashed. A second site was developed to assist with donation tracking and registration. This site, known as the AID Matrix, was developed based on the FEMA matrix used for domestic emergencies. The AID Matrix also experienced technical difficulties handling the large number of registrations. In response to the failure of these websites, the DOS launched wehaveweneed.org to handle the contributions and requests of donations.

Donation transportation efforts were handled through SOUTHCOM's Partnering Directorate, Private-Public Cooperation Division. In 2007, SOUTHCOM had established the Partnering Directorate (currently the J9) to provide outreach, coordination, and support to interagency partners, international partners, non-governmental organizations, and private organizations.[88] "It serves as a coordinating unit between nongovernmental and private organizations, with the Division providing information to organizations on activities and conferences and connecting the organizations with SOUTHCOM's components for activities."[89] This directorate worked with the Washington interagency donation team to transport in-kind donations to Haiti. Private donations processed by the interagency group required validation of need from USAID/OFDA before items could be shipped. Once USAID/OFDA approved, the Partnering directorate facilitated transportation of the in-kind donations to Haiti and confirmed that all items shipped had a consignee in Haiti to pick up supplies. SOUTHCOM worked with USAID/Dominican Republic (USAID/DR) to facilitate the transportation of significant volumes of private sector donations across the border to Port-au-Prince.[90] The DOD was also responsible for sending excess military equipment to Haiti as part of the Excess Property Program. The materials donated by the DOD included medical relief supplies and equipment.

Congressmen and senior officials in state governments directly contacted SOUTHCOM and the interagency team to transport specific donations to Haiti. Due to these political interventions, some items were shipped without validation from USAID and without a consignee in Haiti. Without these requirements, donations sat in shipping containers, clogging the ports until someone could catalogue the donated items and decide who would handle distribution.

Many in-kind donations arrived in Haiti without the assistance of the U.S. Government. Private contributors contracted carriers to transport supplies to Haiti. Cruise ships and private vehicles were hired to transport items to Haiti through the Dominican Republic or Northern Haiti.

Analysis and Recommendations

4.7.1 **For more than 20 years, the disaster response community has widely recognized that donations of goods often cause more problems than benefits,** and therefore, the State Department, UN, UNICEF, American Red Cross, OFDA, FEMA, and most NGOs recommend that only cash be donated to aid disaster victims. Unfortunately, that message was often ignored, and requests for the U.S. Government to assist with the collection, transport, and distribution of goods took up scarce time, effort, and resources. Elected officials pressured the U.S. Government and military personnel to have their constituents' goods included in the limited transportation space.

R4.7.1: The public and elected officials should be educated regarding donations after a disaster so that they understand the importance of cash donations. Efforts to educate the public have been explored by USAID/OFDA, but LPA's strict rules for public information on their website limit these efforts. If

[88] US Government Accountability Office. 2010. "Defense Management: US Southern Command Demonstrates Interagency Collaboration, but Its Haiti Disaster Response Revealed Challenges Conducting a Large Military Operation." *GAO Report*. July.

[89] Ibid.

[90] USAID/DR. 2010. *USAID/Dominican Republic Response to Haiti Earthquake.*

better communication were established between USAID and the public, it may be possible to inform people on preferred donations and proper relief supplies.

4.7.2 **Although in-kind donations have been discouraged by the U.S. Government, they continue to be donated.** For this reason, the U.S. military and USAID/OFDA, through the J9 partnering directorate as well as the USAID Office of Development Partners, have strengthened relationships with the private sector and NGO community to develop mechanisms for the organization and delivery of appropriate in-kind donations.

R4.7.2: Existing public-private partnerships should be developed and expanded by USAID to ensure that only appropriate donations are provided by the private sector. Programs to raise the awareness of American citizens should be designed by USAID and promoted through mass media to educate the population on the importance of cash donations as well as appropriate types of in-kind donations. This should include information on the proper procedures to donate cash or in-kind materials.

R4.7.3: In-kind goods should not be shipped with U.S. Government resources without prior validation from USAID/OFDA.

4.7.4 **Although USAID has established agreements with major businesses to provide relief commodities and has designed websites to coordinate donations for international emergencies, these mechanisms proved incapable of managing the scale of donations provided by the American public.** Websites crashed due to the volume of donation requests. In some instances, high-level government officials used their influence to have their constituents' shipments sent to Haiti without proper validation, despite rigorous control procedures.

R4.7.4: Clear guidelines are required to provide the public with procedures for emergency response. A new process for managing donations should be established that includes the design of websites that are capable of receiving large numbers of requests to donate as well as ensuring that timely responses are provided to donors concerning the approval or refusal of their donation. This process must take into account financial and in-kind donations.

4.8 Management of the Press

The organizational structure established in Haiti to create a unified interagency message and disseminate information was the Joint Interagency and Information Center (JIIC). The JIIC was located in the U.S. Embassy and staffed by personnel from the interagency, including DOD, USAID, DOS, DHS, and HHS. The JIIC collected information about the U.S. Government's response in Haiti and coordinated all U.S. Government media operations. It ensured that all U.S. Government officials in Haiti were speaking with one voice about the unified effort.

FEMA and the DOD Joint Public Affairs Coordination Element (JPACE) were instrumental in initially setting up the center. FEMA provided the initial leadership and JPACE provided equipment, such as portable satellite systems and cameras. The interagency was able to deliver a formal message to the Haitian public 96 hours after the earthquake. Once the JIIC was operational, coordination meetings were held twice daily to synchronize messages across the interagency. JPACE created a daily one-page document of talking points for the U.S. Military Commander in Haiti, which reinforced and unified the U.S. message across the interagency.

The establishment of the JIIC was instrumental in coordinating a unified U.S. Government message. Media briefings were held three times a day, both in-person and by telephone. However, the location of the JIIC at the U.S. Embassy made it difficult to engage the press, as this was not a central location for the press to access information.

There were other public outreach activities. Additional social media sources were used to disseminate information, including Facebook, Ushahidi crisis mapping and Twitter. E-mail was also used to share information, although only one person was assigned to respond to e-mail inquiries and there was no tracking mechanism established to ensure that media inquiries were answered. The DOD launched "Commando Solo" to transmit radio Voice of America 12 hours daily, in Creole. During this transmission, public service announcements (PSAs) were broadcast, detailing locations of food distribution sites and other earthquake-related information. "Commando Solo" was successful in sharing important information with the Haitian public, but its necessity is unclear, as one local radio station was

operational a day after the earthquake and at least two more were operational within two weeks of the earthquake.[91]

The management of the message and media were less successful in Washington. Many in Haiti felt, and leaders in Washington acknowledged, that policy decisions were sometimes driven by a news story, which resulted in specific requests for action by the U.S. Government to address these stories (widely described as the "CNN-effect"). As one official said, "It was like we were in campaign mode and trying to 'stamp out' stories rather than managing the message and facts on the ground." Intelligence reports from the military and from USAID/OFDA were provided daily to policymakers in Washington. These reports briefly described the situation on the ground and detailed relief programs. Negative media coverage on minor situations resulted in directing resources to those areas listed in the news. An example of the media driving operational decisions was the shipment of large quantities of bottled water, despite reports from USAID/OFDA that the water situation was stable.

Analysis and Recommendations

4.8.1 **The U.S. Government did not respond effectively enough to the mass media coverage of the disaster relief and recovery efforts in Haiti.** Despite the delivery of huge amounts of humanitarian assistance through the interagency, journalists found stories that could exploit individual deficiencies. While these stories were compelling and revealed unmet needs among isolated pockets of the population, the larger picture of the positive impact of the U.S. Government's response in Haiti was obscured. The U.S. Government failed to respond appropriately to the media coverage, allowing assertions to go unchecked and leaving the American public as well as politicians concerned that the U.S. Government was not doing all that it could to help the people of Haiti. Therefore, the media had undue influence on strategic policy and operational activities, as senior government officials came to rely on the networks' news rather than reports from military intelligence and USAID field staff.

R4.8.1: Develop interagency legislation and government capability to ensure outreach and responsiveness to all stakeholders. Pre-existing relationships with the media should be fostered, as they are important for reporting the message and can influence perceptions to accurately reflect the realities on the ground.

4.8.2 **A Joint Interagency and Information Center will be necessary in any disaster response with multiple U.S. Government agencies responding.**

R4.8.2: Create an interagency communication concept of operations to improve and institutionalize the JIIC model used in Haiti.

4.8.3 **USAID had little capacity to coordinate and respond to all the communication needs after the earthquake.**

R4.8.3: USAID should be resourced to improve the capacity of the agency for long-term communication and media management needs. This could also be beneficial for USAID to improve Congressional and media relations in general.

4.8.4 **There was often a lack of spokesperson availability and expertise relating to catastrophic disaster.**

R4.8.4: Plan and fund exercises and training as the key to relationship building for successful communication in future crises. JIIC spokespersons need to be included in any disaster exercise, with specific training aimed at media and press management.

[91] Reuters. 2010. "Quake-hit Haiti radio stations broadcast from Street." *AlertNet Website.* 25 January. http://www.alertnet.org/thenews/newsdesk/N25237556.htm. Accessed on 16 September 2010.

5. Response in Haiti

5.1 Organization of U.S. Government Response

The U.S. Government response in Haiti was unprecedented in its size, approach, and scope because of the acute and unique needs in the country. To meet these urgent needs, there were important deviations from the standard U.S. Government response to a foreign disaster. The most important of these included the use of USAID's Office of Response Coordinator, the mobilization of many U.S. Government agencies that are not traditionally involved in foreign disasters, and the rapid deployment of people, equipment, and supplies into the field before specific needs had been determined by USAID. Historically, when the U.S. Government responds to a foreign disaster, specific needs are identified and then resources are requested to meet those needs. In domestic responses, to protect American lives and property, resources are often pre-positioned or rapidly deployed into the response. The resources are not based on needs assessments, but rather on a general understanding of the impact of specific disasters after years of experience in known environments. The rapid deployment of resources may be more effective for saving lives, but also very expensive because of the duplication and inefficiencies inherent to the process.

In Haiti, the greatest initial difficulty with delivering assets was that the logistics and infrastructure capacity on the ground were not sufficient to absorb the massive volume of equipment, personnel, and supplies being sent to the country. The embassy was utilized as the base of operations for the interagency, hindering its ability to maneuver and make substance-based decisions about who should come down, when, and for what purpose, and how they should organize. There were times when supplies arrived without any proper consignee or distribution mechanism, which occurred with private donations. The limited infrastructure support and storage space available prevented many of these resources from being used in a timely manner. In regards to transporting resources to Haiti, one respondent stated, "It was like pushing a bowling ball through a hose." Also, transportation was limited within Port-au-Prince. The first few days of the response, hundreds of people, including DMAT and FEMA teams, were unable to move about because of a lack of available cars and Haitian drivers to transport them.

The vast majority of relief commodities arrived at the airport and seaport in Port-au-Prince and remained concentrated in the capital. Few relief supplies made it to surrounding and outlying departments, where there was increased need of public services-because of those displaced from Port-au-Prince such as education, health care, water, and electricity, as well as those areas where departments were already stretched to the limits. Overall, the response was very successful at rapidly mitigating the impact of the earthquake. However, it came at some cost, which testifies to the generosity and concern of the U.S. Government and its people towards a massive catastrophe that occurred in its neighborhood. The effectiveness of the rapid aid is indisputable but it brought with it some inevitable process inefficiencies.

The response in Haiti combined resources from the Haitian Government, the U.S. Government, the United Nations and other multilateral donors; many donor nations; and both the domestic and international private sector. It was truly a global response. This section of the report will detail the role of each major stakeholder in the Haitian relief effort, followed by an analysis of how the U.S. Government coordinated its response with these stakeholders.

The United States "Whole of Government" Approach and its Application in Haiti

Figure 13 (page 60) provides the organizational framework for the U.S. Government response in Haiti and its interaction with the Government of Haiti, the United Nations, and donor nations. USAID, as the lead federal agency, coordinated the response of the interagency (FEMA, HHS, military JTF, etc.). The Department of State, USAID, and JTF-Haiti all worked with the Government of Haiti and the UN to conduct joint implementation of the relief effort and then longer-term strategic planning for the reconstruction and recovery phase. There were difficulties early in the response regarding the relationships and reporting structures, especially between the USAID Mission, ORC, and DART.

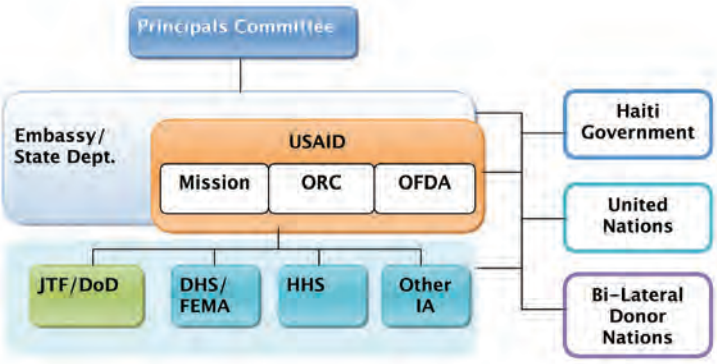

Figure 13: Organizational framework of the U.S. Government and its interaction with international partners

The U.S. Embassy in Haiti

Within hours of the earthquake, the U.S. Ambassador declared a disaster and requested assistance from the U.S. Government. Both the Ambassador and the Deputy Chief of Mission immediately began to reach out to the President and Prime Minister of Haiti. The embassy's initial focus was coordination with and support for the Haitian Government, the health of its own staff, and the safe evacuation of over 16,800 American citizens to the United States. It also supported U.S. Government responders deploying to the country. One-third of the embassy staff decided to leave Haiti due to the impact of the earthquake. The U.S. Embassy in the Dominican Republic sent replacement staff within two days to help support embassy operations. These included consular officers, physicians, psychiatrists, and public affairs officers.

The Ambassador and embassy staff maintained close working relations with the USAID/OFDA DART team and USAID Mission throughout the response period. The Ambassador played a critical supporting role in the response, due to his years of experience in Haiti and prior work with USAID and DOD in the 2008 hurricane season. On the day of the earthquake, the Ambassador was able to speak with the Justice Minister, Minister of the Interior, and the head of the Police. The following day, contact was made with President Preval, who requested immediate assistance from the U.S. Government to reopen the sea and airports. The open lines of communication between the Ambassador and the Haitian President and Prime Minister were critical to enabling the response efforts and creating an environment where the U.S. Government and military could respond effectively.

The U.S. Embassy served as the physical focal point for the coordination of the relief effort by the U.S. Government. A year before the earthquake, the U.S. Embassy moved to its new compound, located outside of the center of Port-au-Prince and with facilities constructed to withstand major geological and meteorological events. Although the embassy stood up to the earthquake, over 50% of the staff housing was completely destroyed. Embassy staff, both American and Haitian, lost everything they owned and many also lost friends and relatives; they were victims as well as first responders. However, the staff had no time to grieve or rest: within 48 hours, hundreds of U.S. Government personnel from myriad agencies arrived at the embassy seeking support from its staff, and using the embassy compound as both their base of operations and living quarters. The commitment and compassion of embassy personnel was exceptional and deserves recognition and praise.

The day after the earthquake, the OFDA DART team and the first international USAR team arrived in Haiti. The U.S. Embassy served as the headquarters for these teams as well as for all of the federal agency teams that arrived. However, the number of responders that arrived soon overwhelmed the embassy; most were not requested by the Ambassador. Within the first week of the event, hundreds of staff arrived from the Departments of Defense, Homeland Security, State, Agriculture, Transportation, and Treasury; HHS; the Federal Communications Commission; and the United States Geological Survey. The U.S. military also moved many personnel into the embassy grounds, and took office space for their work and used embassy vehicles for transportation. A small tent city developed within the embassy walls, complete with living quarters and sanitation facilities. These interagency staff, that had not been officially requested and arrived with no advanced notification, placed a tremendous burden on the logistical infrastructure of the embassy. This led to limitations of many resources, such as food, water, shelter, transportation, and interpreters. Even the embassy sanitation facilities were almost overwhelmed, but according to the Ambassador, "Waterless urinals saved us." Because most federal agencies do not specialize in international disaster response, their personnel arrived without clear mandates, scopes of work, or assigned roles and were not self-sufficient. They often lacked adequate resources to carry out their mission without support and relied on the embassy to provide vehicles, drivers, translators, guides, and security coordination.

The embassy was involved in the daily 0700 and 1900 calls with interagency and senior government officials, led by the Under

Secretary of State for Management. The calls were managed with the first 10 minutes providing an update from the field and the next 40 minutes addressing specific items based on an agenda and the last 10 minutes or more devoted to American Citizen Services. To prepare for these calls, the embassy held at-post meetings at 0600 and in the early afternoon in order to compile information from USAID, DOD, and other agencies. With close cooperation from the DOS and the DOD, embassy staff evacuated more than 16,000 American citizens within several weeks of the event. Moreover, thousands of visas were processed for Haitians seeking assistance from friends and family in the United States, and hundreds of Haitian patients with life-threatening injuries were transported to hospitals in Florida and Georgia.

For the embassy, the crisis phase resolved after about two weeks. By the last week of January, the majority of AMCITS were already evacuated. Finally, many federal agencies returned to the U.S. as they realized they lacked the capacity to respond to the immediate needs in Haiti. This allowed the embassy and USAID staff to focus attention on the response coordination and implementation with the UN and the GOH, which began to function more effectively after the first week of the response.

Transition from Relief to Long-term Reconstruction and Development

In Haiti, the embassy and Department of State had a limited role in planning the transition from relief to reconstruction and development, as that occurred mostly in Washington. Through the Civilian Response Corps, S/CRS sent one staff member to Haiti embedded in JTF-H to support longer-term planning at Task Force IV in Washington and civilian-military coordination. A team of advisors and long-term strategists was offered by S/CRS but did not receive permission to deploy to Haiti due to the limited capacity of the U.S. Embassy to support additional personnel and uncertainty of the team's added value to operations in Haiti. However, the S/CRS team from the Haiti Stabilization Initiative, which was already working in Haiti, did provide long-term planning assistance to Task Force IV and cooperated with the UN in its reconstruction and development strategy. Although Task Force IV was stood down after five weeks, members of the task force assisted in preparing the Government of Haiti for the International Donor's Conference at the end of March by providing ground-checked information to the Haiti 2020 group in Washington.

Analysis and Recommendations

5.1.1 **The initial response to all disasters is local, and the embassy and USAID Mission were critical to the response in the first days. Local Missions, particularly in disaster-prone areas, are essential for identifying needs, working with the local government, and coordinating the response.**

R5.1.1: Embassies and USAID missions need to have specific disaster-response expertise and training to ensure a rapid and efficient relief effort. Training programs and SOPs for positions should be created to reach this goal.

5.1.2 **The Department of State in Washington and the embassy in the Dominican Republic acted swiftly to provide relief and support to the embassy in Port-au-Prince.** Based on lessons learned from previous events that affected U.S. embassies, such as the Nairobi bombing, the Department of State applied best practices to immediately relieve staff and rapidly repatriate them to the U.S., as well as to send additional staff to support on-going embassy operations and to offer breaks to those who had been present on the day the quake struck. These actions were key for the successful repatriation of 16,800 U.S. citizens within two weeks.

R5.1.2: The U.S. Department of State should strengthen its capacity to rapidly reinforce or replace staff at an embassy that has been directly impacted by an event. This could include the creation of a "DART-like" team that can be deployed within 24 hours to ensure the continuity of key roles. The DOS should also develop policies and guidelines to ensure that embassy staff is assisted as needed and that additional support is provided for the safety of staff and continuity of embassy operations.

5.1.3 **Many federal agencies (USAID and CDC being notable exceptions) may not have possessed adequate experience to prepare them for work in international disaster settings.** Though these agencies had good disaster response skills, they possessed little international training or experience. On occasion, their presence needed extensive support from the Embassy and USAID, who were themselves stretched to conduct their roles effectively. Some domestic agencies possess small international sections, but they are not prepared to provide essential humanitarian services in a rapid manner.

R5.1.3: If domestic disaster response assets are to be deployed, they must be properly trained and equipped and have the necessary international experience to function unsupported in a foreign setting.

5.2 USAID in Haiti

USAID has maintained an extensive program portfolio in Haiti over the last 30 years, with significant funding to support its development strategy. In 2008, USAID provided over $246 million for various development programs in the areas of conflict mitigation, security, democracy and governance, humanitarian assistance, health service delivery, education, food security, and economic growth.[92] Typically, USAID has engaged civil society and the NGO sector to implement development programs in Haiti. However, since the release of the Poverty Reduction Strategy Paper (PRSP) by the World Bank in 2009, USAID, with the support of the Obama administration, has adopted more partnership programs with the Government of Haiti.[93]

USAID had three main management structures for its relief effort in Haiti. These included the USAID Mission, USAID/OFDA DART team, and the Office of the Response Coordinator.

USAID Mission

Despite personal losses, the USAID Mission was up and running again within a short period of time. The primary task of the Mission was to re-orient its current programs to quickly respond to the new needs of the population. The Mission attempted to coordinate with OFDA to integrate their emergency programs with its on-going programs in country, but there was insufficient time or staff to effectively achieve this aim.

The USAID Mission in the Dominican Republic provided important staff and financial support to USAID/Haiti to assist with its response. USAID/DR re-channeled its funding to support four Ministry of Health hospitals by providing them with pharmaceuticals, supplies, and equipment. It also awarded small grants to international and local NGOs to address acute medical needs, especially infectious diseases, along the Haiti/DR border. In addition to monetary support, USAID/DR supported a daily shuttle bus for embassy personnel traveling to Port-au-Prince.[94]

OFDA DART

USAID/OFDA Washington mobilized the DART, which arrived in Haiti within 24 hours of the earthquake, initially with 17 members. At the height of the emergency response phase, the DART team consisted of 34 core staff augmented by 511 USAR team members. The DART team was comprised of a cross-section of technical specialists with expertise in disaster response operations. Similar to the Domestic Incident Command System (ICS) on which it is based, the DART is organized into six major functional areas: Management, Operations, Planning, Logistics, Administration, and Communications. All members perform a functional task in support of this organization, with defined scopes of work. For the response in Haiti, the DART included safety and security officers, food and nutrition experts, shelter and settlements advisors, search and rescue officers, logisticians, communications experts, technical experts, WASH specialists, civilian-military liaisons, information coordinators, and operations specialists.

USAID/OFDA DART is responsible for providing technical expertise in disaster response and management, helping the U.S. Embassy and USAID Mission to: (1) coordinate the response, particularly with the international humanitarian assistance community and the host country response institutions; and (2) oversee the USAID-appropriated U.S. disaster assistance resources used in the response. DART activities on the ground can be divided into five core functions: assessment; coordination and technical support for the response; delivery of relief commodities; grant making; and monitoring and evaluation. The DART conducted assessments of the disaster impacts and humanitarian needs as soon as it arrived. It analyzed the existing capacity of Haiti's infrastructure and of the participating relief agencies to target U.S. Government assistance and suggest funding for the response. Based on these assessments, the DART helped develop and implement a U.S. Government response strategy for USAID/OFDA and provided an operational presence for OFDA capable of carrying out key response activities.

The DART's role in coordination and technical support was key to the proper integration of relief capabilities among the various stakeholders involved in the response. The DART provided technical assistance to the cluster system, working closely with each cluster's lead agency, as well as the Presidential

[93] Schaaf, Bryan. 2008. "USAID Programs and Priorities in Haiti." Haiti Innovation: *Choice, Partnership, Community Website*. Modified 13 July. http://www.haitiinnovation.org/en/2008/07/13/usaid-programs-and-priorities-haiti. Accessed on 15 September 2010.

[94] USAID/DR. 2010. *USAID/Dominican Republic Response to Haiti Earthquake.*

Commissions and Ministries, to coordinate response activities and priorities. It organized the food distribution, nutrition, and breast-feeding programs and the emergency medical and primary health care services, and coordinated the urban search and rescue operations. The OFDA DART Shelter and Settlements advisor organized a joint conference, in cooperation with the U.N. Human Settlements Program (UN-HABITAT) staff and the GOH Shelter Commission urban planning officials, to design policies for the GOH emergency master plan for Port-au-Prince. The meeting was held on 19 February, with representation from the GOH, the DART team, and Haitian and international agency planners, architects, and engineers and was critical to developing a consolidated shelter master plan for Haiti. The meeting also produced important results, emphasizing debris management as a key element of recovery and redevelopment. In addition to coordinating the U.S. Government's relief efforts with the Haitian Government and the United Nations, the OFDA DART team also cooperated with other donors, such as the UK Department for International Development (DFID), the European Commission Humanitarian Aid Department (ECHO), and the World Bank, to coordinate the response in the field strategically and operationally. The DART team worked closely with the JTF to coordinate MITAMs through the HACC that was set up within days of the earthquake.

Finally, the OFDA DART was tasked to assist with the coordination of the interagency response that included over 25 federal and executive agencies with hundreds of staff.

The DART coordinated the delivery of more than 40 planeloads of relief commodities, including more than 111,000 water containers, nearly 75,000 hygiene kits, more than 10,000 rolls of plastic sheeting, and 5,000 kitchen sets. In addition, the six USAID-funded USAR teams saved the lives of 47 people trapped in collapsed structures. The role of the USAID/OFDA Liaison in SOUTHCOM was vital to coordinate the validation of relief commodities for Haiti and organize their shipment using U.S. Government resources.

Based on proposals received from the DART team, USAID/OFDA Washington approved over 20 large-scale grants to NGOs, UN agencies, and international organizations within the first three weeks of the response.[95] By the sixth week of the response, USAID programmed more than $400 million to address immediate food, water, health, and shelter needs. The DART team conducted on-going monitoring and evaluation of all its grant activities by partnering to ensure proper execution of their objectives. Monitoring and evaluation included reporting on the evolving disaster situation, transition, and recommended follow-up actions.

On 28 April, the DART team in Haiti stood down and transferred all programming to the USAID program office at the Mission in Port-au-Prince. USAID program staff continues to assess and identify humanitarian needs and coordinate delivery of emergency relief supplies to Port-au-Prince and surrounding areas affected by the earthquake.

The DART encountered many difficulties and some criticism. A number of U.S. Government responders in Haiti perceived a lack of cooperation in its operation immediately after the disaster. At the same time, DART members were struggling to focus on their routine response functions and felt overwhelmed by all of the agencies and individuals trying to add their resources, through the DART, to the response. The unclear role of the DART within the greater U.S. response in Haiti added to the confusion and led the DART to further focus on its own activities to the exclusion of others. Another problem was the relatively small size of the DART and the rapid turnover of its members, making continuity and consistency difficult. Nonetheless, the DART, particularly the DART leaders who worked tirelessly, was widely appreciated and recognized by UN partner agencies and NGOs for its competence during the response.

Office of the Response Coordinator

Due to the scale of the response, USAID deployed additional support to the USAID Mission through the Office of the Response Coordinator. On 16 January, the special Coordinator arrived to direct the ORC. The purpose of the ORC was to provide support such as staffing, transitional program planning, information management, and program administration to assist the Mission and the USAID/OFDA in relief programming and the transition to longer-term reconstruction and development. However, the ORC remained critically under-staffed and under-resourced until 19 February, when additional staff arrived through the Civilian Response Corps.

[95] USAID/OFDA. 2010. *Haiti-Earthquake.* Fact Sheet 25; 6 February

The ORC's role and the scope of work for the special Coordinator were not well communicated to the leadership in the embassy or the in-country staff of USAID. The lack of clear role definition led to friction with the USAID Mission, U.S. Embassy, and DART. The ORC was under-resourced, with no logistical capacity, few staff members, and no independent budget for organizing or implementing plans and projects until late February. The office was reliant (as were almost all U.S. Government personnel going to Haiti) on the embassy for the basics of food, water, transportation, and interpreters.
By the end of February, the ORC was fully operational and provided support to the USAID Mission and DART Team. This allowed the Mission to manage its on-going programs and then plan their reintegration.

Transition from Relief to Reconstruction and Development

As of March, the ORC began to fund transitional development programs such as cash-for-work and government support programs. It also designed programming to link ORC-and OFDA-funded grants and to integrate them into the longer-term programming of the Mission. Additionally, the ORC provided support to coordinate the extensive civilian-military operations. The passage of the supplemental bill by Congress had significant impact on the ability of the ORC to fund transitional programming. As the USAID Mission ramped up its capacity over time, the ORC's plan was to hand over tasks on information management, program administration, and civilian-military and donor coordination. When the ORC stands down its operations, the Mission will assume responsibility for all programming and coordination.

Staff at USAID and the ORC provided technical assistance to the Government of Haiti in cooperation with other multilateral donors such as the World Bank, DFID, CIDA, the UN, and the European Union to develop the National Action Plan for Reconstruction and Development in Haiti. The ORC worked closely with the Government of Haiti to establish the Interim Haiti Reconstruction Commission, which was ratified by the parliament in April. USAID also assisted the government in creating the Bureau for IDP Resettlement, which was launched in May at the request of the Haitian President, to focus more attention on removing rubble and returning people to their communities, as well as relocating some internally displaced persons to newly re-developed areas.

Personnel and Staff Augmentation for USAID in Haiti

In total, 36 Civilian Response Corps personnel deployed to Haiti through the Office of Civilian Response between 12 January and 1 June 2010. The agencies that supplied civilians for deployment included the Environmental Protection Agency and USAID in Washington. The ORC's staffing was almost entirely comprised of CRC personnel mobilized by USAID in Washington through the ORC at USAID to augment the capacity of the Mission. The CRC was useful for deploying professional staff to complement the staffing roster at USAID in Haiti, but there were difficulties in identifying and freeing up appropriate staff and deploying them in a timely manner.

USAID/OFDA staff resources were stretched to the limit. While widely recognized as highly competent technically, the staffing depth of the OFDA DART team could not cope with the demands for assessment, civilian-military coordination, donor coordination, reporting, information management, and transitional planning. DART staff rotated out of the field every two to three weeks, having worked 20-hour days on a non-stop basis. This caused coordination failures, inconsistency in planning and cooperation with Haitian Government counterparts, and challenges in working with the UN.

It is the pre-existing relationships among staff that are greatly responsible for the success of the mission, as was widely recognized in this event and reported in after action reports (AARs) from many agencies. No amount of planning can account for all variables in a disaster, so it is up to individuals to identify problems and find solutions.

Command and Control in Haiti

Given the magnitude of the disaster, the lack of normal local and international response leadership and the enormous number of responders, coordination in Haiti was a critical challenge. The unprecedented number of U.S. Government resources and personnel allowed a more robust response, but increased the demands on USAID for coordination. Although USAID was the lead agency in charge of the response coordination, there were different command structures within USAID. The initial lack of a clearly delineated management hierarchy created friction, complicated the response, and weakened the coordination. Within USAID, there were three different potential chains of command that worked, sometimes in parallel, with varying

degrees of cooperation and collaboration as the response evolved. These include the DART/RMT, the Office of the Response Coordinator, and the USAID Mission.

Few federal agencies that arrived in Haiti followed the chain of command and reported to USAID, instead maintaining some autonomy in their efforts and internal lines of command. There was also a lack of information sharing among the various federal agencies, which led to confusion when USAID/OFDA reported on the response to Washington. This issue was compounded by the fact that the USAID/OFDA DART team simply could not manage the large number of federal agencies that all arrived at once. Though some agencies did attempt to coordinate with OFDA, there were problems caused by a lack of timely response, mainly due to the extreme demands that were placed on the USAID/OFDA DART team during the initial response phase. The organization of the response in Haiti was also affected by the degree of involvement of senior officials of the U.S. Government in Washington. Many policymakers became enmeshed in the day-to-day running of the disaster response, detracting from the responders' ability to perform their jobs while tracking down minute details to provide data and information to high-level policymakers in Washington to prepare for daily Deputies and Principles meeting.

Analysis and Recommendations

5.2.1 **USAID had parallel chains of command, which emanated from Haiti and ran along separate lines of reporting to USAID in Washington.** These included the OFDA DART team, the ORC, and the USAID Mission in Haiti. In Washington, USAID was divided by OFDA within the DCHA Bureau and the Latin America and Caribbean Bureau. After February, the Haiti Task Team was introduced in an effort to promote and continue interagency coordination for transition and long-term development and bridge the divide between OFDA and LAC Bureau staff. The lack of clear guidance from Washington as to the role of the ORC and the responsibilities of its director vis-à-vis the DART team, USAID Mission director, and U.S. Embassy made management more difficult.

R5.2.1: Clear lines of authority and reporting need to be established in disaster management, both within USAID and across the government. An IRF management framework will correct this, but roles and reporting should always be clearly defined for all positions. HHS has drafted an International Emergency Response Framework (IERF), written in conjunction with an interagency working group, that can inform the creation of an "IRF" and be considered as a "public health and medical response" annex or appendix.

5.2.2 **The USAID Mission successfully implemented rapid changes to its existing program portfolio in Haiti to allow its implementation partners to modify their programs and to meet the needs of the population in Haiti after the earthquake.** Implementation partners acknowledged the professionalism and teamwork that was demonstrated by the USAID Mission staff in working together to modify existing contracts and grants so that their resources could be re-targeted to the direct needs of the people in Haiti. However, there was not sufficient time or staffing at the Mission or on the DART to ensure that the USAID/OFDA emergency programming was designed to match up effectively with the revised USAID Mission development programs.

R5.2.2: Ramping up staff at the USAID Mission, through special instruments such as the OCR, should be available to assist Missions and USAID/OFDA DART teams in designing integrated programs that blend emergency response activities with transitional activities and link them with development programs following the immediate response period of approximately six to nine months.

5.2.3 **OFDA DART and other U.S. Government staff rotated rapidly and undermined the continuity of the response and coordination with key national and international partners.** The turnover of staff impacted coordination between the U.S. Government, the UN, NGOs, other donors, and the GOH. The limited OFDA DART staff for a response of this magnitude meant that they worked 16-20 hours per day, leading to exhaustion and rapid rotation. All personnel in the Interagency, in both Haiti and Washington, experienced this. The number of staff that USAID/OFDA could mobilize was too small and the demands they faced were too large; there were few mechanisms to incorporate additional U.S. Government personnel to augment the OFDA DART team. The small number of staff made it hard for other agencies to effectively interface with them. It also reduced the ability of the DART to coordinate their emergency programs with existing USAID Mission programs to ensure smooth transitions between the two.

R5.2.3: Mechanisms to augment the capacity of the OFDA DART teams should be established for large-scale disasters. It is critical that the augmentation includes only staff with OFDA qualifications.

R5.2.4: Adequate staff should be deployed to allow for more routine work and break hours. As per accepted guidelines, staff should work 12-hour shifts and be guaranteed time off regularly (1/2-1 day per 7 days). This will allow for longer deployments and more continuity in staffing.

5.2.5 **The USAID/OFDA DART team did not have access to the latest technology and equipment to assist in its response mission.** The DART continues to use simple low-tech equipment and supplies to conduct its emergency response assessments, data collection, management, and communications. The use of more appropriate technology will improve the efficiency of the DART's response and perhaps serve as a mechanism to "augment" its limited staffing.

R5.2.5: USAID should identify appropriate, innovative technology to upgrade the technological capacity of OFDA. Technology must be tough and capable of withstanding austere conditions. New technology could be linked to well-designed databases that would allow for rapid use of information for decision making, reporting, and monitoring.

5.2.6 **The immediate emergency response should have targeted more resources for humanitarian assistance programs outside of the Port-au-Prince metropolitan area.** The response did not focus enough resources on areas outside of Port-au-Prince, drawing thousands of people back to the capital looking for assistance.

R5.2.6: USAID should develop policy on the wider implications of massive relief operations in poor settings.

5.2.7 **The ORC's role, responsibilities, and reporting structure were not well defined in Haiti in the first weeks.** Ambiguities in the role of the ORC and its added values on the ground to the DART team, USAID Mission director, and U.S. Embassy made management more difficult. This was not resolved until late February with the arrival of additional staffing through the Office of Civilian Response to strengthen the ORC.

R5.2.7: If an "ORC-level" position is to be used in catastrophic response, the role of the ORC should be better defined before deployment and be coordinated with the USAID Mission and USAID/OFDA. Reporting lines for the director of the ORC must be clear, including the relationship to the OFDA DART team leader and the USAID Mission Director. The organization of the ORC in terms of its staffing and technical competencies must be framed prior to deployment, with clear scopes of work for its members.

5.3 Civilian-Military Coordination

The military played a pivotal role in the humanitarian response in Haiti. Its full capacity was channeled through the Southern Command's Joint Task Force-Haiti to rapidly deploy logistical, assessment, and security capabilities, certainly saving many lives. In a situation where time was critical and the national capacity to respond was incapacitated at the governmental and commercial levels, as well as at the UN, the use of the U.S. military was necessary and appropriate to fill the vacuum, especially during the initial response phase. Vital services such as airport management; seaport repair; road clearance to deliver essential humanitarian material; airlift and sealift capabilities to bring in critically needed relief supplies; organizational capacity to manage the supply chain; aerial reconnaissance; and manpower and equipment to support HADR operations, logistics, and security, could not have been accomplished by any other international or host country agency.

Coordination between the U.S. Military and the Government of Haiti and the UN

The JTF command in Haiti stressed cooperation with the Government of Haiti, USAID, UN OCHA clusters, and its UN counterparts at MINUSTAH to plan and conduct its humanitarian assistance actions. U.S. military advisors and technical experts, such as engineers from the Army Corps of Engineers, were important in the international coordination architecture set up by the UN and Government of Haiti. This included sending officers to the Coordination Support Committee, the Project Management Coordination Cell, and the UN/NGO clusters to assist in the planning of humanitarian and development operations. In many cases, these meetings had more U.S. military officers than civilian personnel.

From the beginning of the response, the U.S. military and MINUSTAH agreed that American forces were there to support and coordinate with MINUSTAH's mission. This meant that MINUSTAH would take the lead on general security operations and that the U.S. military would maintain a low profile, providing tactical security for humanitarian assistance activities. The close relationship between the U.S. deputy commander and General Peixoto, the head of MINUSTAH, was an important source of JTF-MINUSTAH cooperation. The JTF command also appointed a liaison to the Haitian President's office.

The U.S. military's humanitarian operations in Haiti included two types of missions. The first was to provide tactical security for NGOs to accomplish their humanitarian missions, particularly food distributions. The second mission included the military's own humanitarian assistance/disaster response operations, such as air and seaport operations, logistical support, debris clearance projects, technical support for engineering projects to prevent flooding, and the relocation of IDPs to the resettlement camp at Corail. These HADR operations were planned and performed by JTF forces in concert with the UN and GOH. However, many of the HADR operations were not conducted with USAID/OFDA involvement, especially during the first phase (initial three weeks) of the emergency.

The JTF civil affairs team set up the Humanitarian Assistance Coordination Cell (HACC) within days of the earthquake. The purpose of the HACC was to: (1) coordinate, synchronize, track, and assess humanitarian assistance operations; (2) create and maintain a humanitarian common operational picture; (3) integrate with all stakeholders and develop a prioritized list of support requirements; (4) serve as the primary JTF interface with OFDA; and (5) coordinate all HADR missions conducted by the military.

The U.S. military set up its HACC at the U.S. Embassy and established a forward operating unit based at the UN's newly formed Joint Operating Tasking Center (JOTC) for the purposes of coordinating HACC/JOTC humanitarian support missions. The HACC was to coordinate U.S. military HADR support operations and coordinate with NGOs to provide tactical security for food distributions. MINUSTAH and UN OCHA set up their Joint Operating Tasking Center (JOTC) at the UN log base. While the HACC focused on coordinating U.S. military HADR missions, the JOTC concentrated on provision of tactical security to NGOs through the cluster system so that they could perform their wide-ranging humanitarian assistance activities.

Although some NGOs did attempt to work directly with the HACC to support their humanitarian activities, meetings and coordination were difficult due to security clearances at the HACC because of its co-location at the U.S. Embassy. However, given that NGOs had full access to the UN compound at the log base, they could more easily work with the JOTC to coordinate their humanitarian support needs.

The HACC's 17-person forward element at the JOTC was established to promote communication and coordination between the two mechanisms (HACC and JOTC); however, this was limited for the first few weeks while U.S. military personnel became familiar with the UN and its operations. After a short period of time, a de facto understanding emerged between the HACC and JOTC. The HACC would support primarily U.S. military-led HADR operations and the JOTC would support NGO-led humanitarian assistance missions via the cluster system. However, there was a great example of coordination between the HACC and JOTC, which was the successful planning, coordination, and implementation of security support for the largest food distribution ever conducted in an urban setting. The careful coordination between the U.S. military planners, UN/WFP staff, GOH officials, and NGO community represented the pinnacle of civil-military coordination and proved to be an outstanding accomplishment, feeding more than one million people over a period of two months.

Figure 14 outlines the international coordination architecture (provided by the JTF command in their presentation at the NDU Peacekeeping Conference), specifically highlighting the relationships between the JOTC and the HACC. It is clear that the HACC worked directly with the JTF command and US Military units, while the JOTC worked directly with the UN Cluster system and NGO community.

Ordinarily, when the U.S. military is needed to support international disaster response, they conduct all HADR operations under the Mission Tasking Matrix system. The MITAM system was established by the military and USAID to facilitate coordination for humanitarian assistance operations and ensure they are conducted appropriately. MITAMs are orders based on requests for assistance. Normally, the requests for assistance (RFAs) are issued by civilians working at OFDA, the UN, and NGOs or by military officers in the field. In the case of Haiti, the RFAs were collected by the JOTC and then distributed to the various agencies, to be implemented based on the ability of the agency to respond to the type of assistance requested. As shown

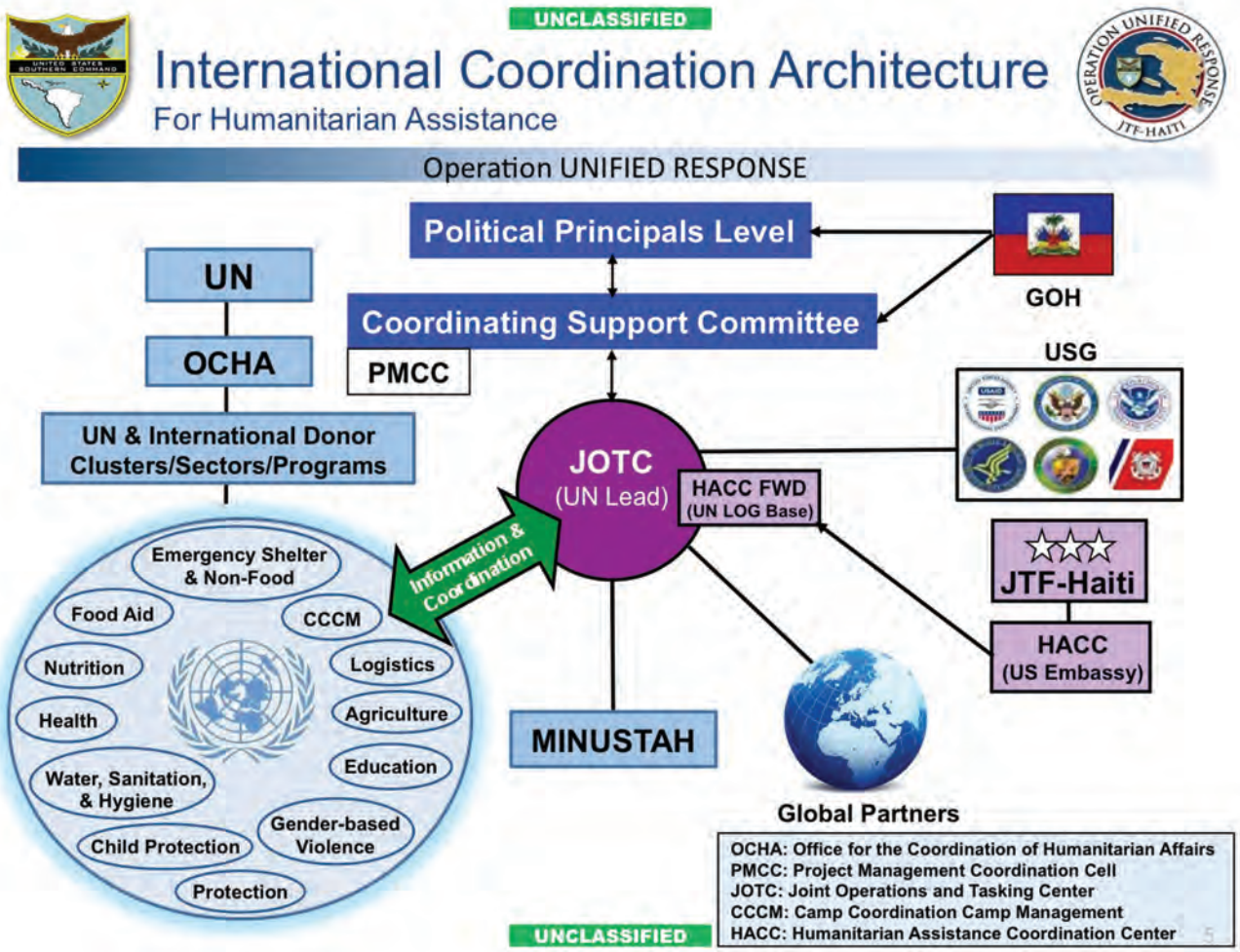

Figure 14: International Coordination Architecture
(Source: USSOUTHCOM – NDU Peacekeeping Conference: U.S. Perspective JTF Haiti, 2010)

in the diagram, USAID was one of the agencies to which RFAs were provided. It was then the responsibility of USAID to issue MITAMs to the JTF-H HACC for the HACC to then coordinate HADR support provided by the U.S. military. Normally, no military HADR missions are conducted without the issuance of a MITAM.

However, the situation in Haiti was far from normal. Due to the intense demands for assistance and the huge number of RFAs that were generated, there was a need for the U.S. military to respond more rapidly than usual. This was especially true during the initial emergency phase of the response, when the UN, NGOs, and OFDA resources were stretched to the limit and could not effectively coordinate the MITAM system. Because the MITAM system could not keep pace with the demands for assistance, the U.S. military performed many HADR missions without MITAM instruction. This meant that field officers directly ordered HADR missions without any civilian authorization. According to USAID and military logistics officers, during the period 12 January 2010 until 1 June 2010, approximately 7% of all HADR missions conducted by the U.S. military were under MITAMs. In order to facilitate the high level of HADR operations by the military, the 410th Contracting Brigade was deployed to assist in making contracts with local commercial entities to conduct operations such as rubble removal, drainage canal clearance, and campsite construction for relocation of IDPs.

While there can be no argument that many of the field-ordered HADR missions were necessary and led to many lifesaving actions by the U.S. military, these types of non-MITAM missions were primarily needed during the initial response phase of three to four weeks. By 23 January, the JOTC was established, and by early February, MITAMs could have and should have been used to coordinate and provide proper command and control of U.S.

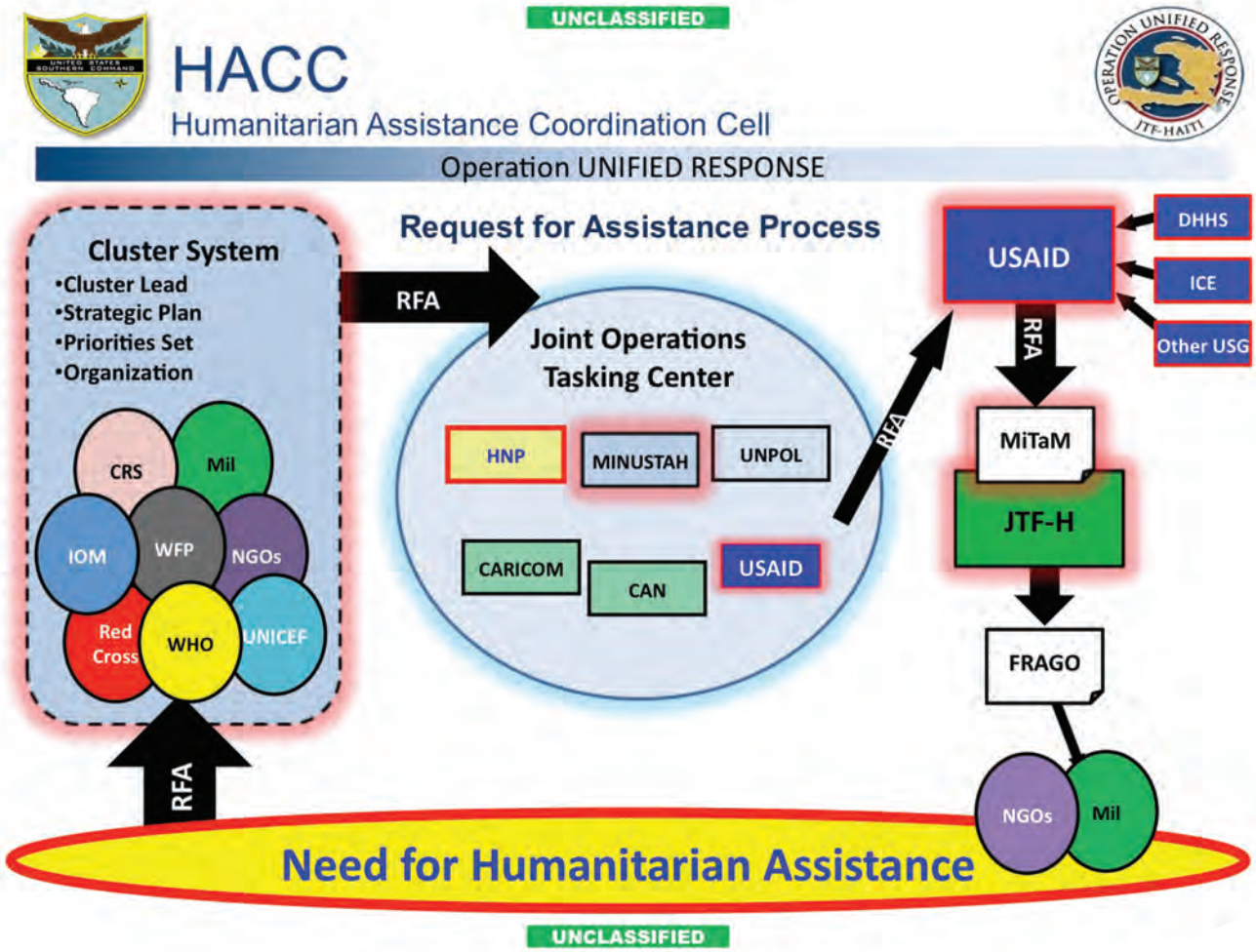

Figure 15: Humanitarian Assistance Coordination Cell
(Source: USSOUTHCOM – NDU Peacekeeping Conference: U.S. Perspective JTF Haiti, 2010)

military HADR missions to be sure they complied with best practices in disaster relief situations. This would have also had the effect of reducing the number of HADR missions by the military and led to cost savings in the response, as some of the military's HADR missions were not deemed necessary by the UN and NGO community.

Transition from Relief to Recovery and from U.S. Military to MINUSTAH and Civilian Authorities

On 22 January, the seaport was reopened, and by 23 January, the Government of Haiti declared an end to search and rescue operations. On 19 February, commercial air service to Port-au-Prince resumed, reestablishing a link with the international community and allowing private sector transport to begin assisting in the relief effort. By 20 February, the Canadian military stood down in Haiti and handed over its mission to civilian authorities from the UN, NGOs, and the Government of Haiti. On 19 January, the UN passed Resolution 1908 to send an additional 2,000 troops and nearly 1,000 police officers to augment MINUSTAH in Haiti.[96] By the end of February, all additional personnel had arrived. By 16 March, 68% of the targeted 1.3 million IDPs had received emergency shelter materials[97], and by mid-March, the food security situation had been stabilized and access to potable water had been significantly improved.

[96] America. 2010. "U.N. Security Council Resolution 1908 on Haiti" *American.gov Website*. Modified 19 January 2010. http://www.america.gov/st/texttrans-english/2010/January/20100119153403eaifas0.1554028.html. Accessed on 11 September 2010.
[97] Office of the Response Coordinator. 2010. "Weekly Slide Update: Phase II/III Analysis and Planning." Haiti Relief and Recovery. 16 March.

Beginning soon after the earthquake, the J5 directorate (future planning) started to draft plans for withdrawal of the JTF, with projected end states and target dates by which this could be accomplished.

It was agreed that these target dates for JTF stand down would be conditions-based. During the course of the response, the JTF commander remained in close contact with the Government of Haiti and MINUSTAH to coordinate its withdrawal. JTF command also stayed in daily contact with Washington policymakers to provide information on the security situation and receive direction on the end states for withdrawal. Clear conditions for the stand down of the JTF were not established. Although MINUSTAH was ready to resume full responsibility for the security situation and humanitarian support in Haiti by early March, the U.S. military did not withdraw its operations until 1 June because it was determined by the interagency leadership that conditions were not met.

Analysis and Recommendations

5.3.1 **The U.S. military's rapid deployment of key expertise to restore critical airport functions and air traffic control was critical for allowing the rapid build-up of humanitarian aid.** This was equally true for the seaports, where the USCG and TRANSCOM deployed and/or contracted highly specialized capacities—both human (e.g. divers) and equipment/machinery (e.g. floating docks)—to restore port operations. The importance of such deployment of specialized capacities to rehabilitate and temporarily replace critical transport infrastructure cannot be overstated.

R5.3.1: The U.S. military should develop best practices from its air traffic control and seaport control operations, in cooperation with the UN and Department of Transportation, for use in future disaster response scenarios.

5.3.2 **Transition planning for the eventual withdrawal of the JTF was among the most critical planning challenges.** There was a clear need for condition-based plans and targeted timetables to ensure that U.S. capacities would only be withdrawn when there were sufficient Haitian and MINUSTAH capacities and when their specialized services were no longer required. However, policymakers did not define tactical and strategic end states at the start of Operation Unified Response, nor were they defined during the six-month period following the earthquake.

R5.3.2: Policymakers should provide clear direction to the military for end states and processes that allow for the transition of U.S. military responsibilities to civilian authorities. This should be done as early as possible to avoid potential over use of U.S. military assets and dominance over humanitarian operations in the field.

5.3.3 **The Humanitarian Assistance Coordination Cell established by the JTF provides an important lesson learned and potential for best practices that should be applied for future large-scale disaster responses.** While the MITAM system has been shown to work well without the need for a HACC under normal disaster response situations, the formation of a HACC could prove useful for large-scale catastrophic events where there is need for wide-ranging military HADR support.

R5.3.3: The HACC has potential for coordinating civilian-military relief operations and can be viewed as a lesson learned for possible application in future large-scale disaster responses. Specific scopes of responsibility and organizational mechanisms should be designed for future HACC deployments. These mechanisms should be flexible and scalable to meet the specific needs of the disaster context. The aim of the HACC should be to conduct all HADR operations through the MITAM system. The HACC should review the JOTC mechanism to determine if any lessons can be applied for direct coordination with NGOs and the UN. The location of the HACC should be reviewed so that it is accessible to the widest possible range of humanitarian agencies possible while maintaining its own security. The forward coordinating unit of the HACC is a valuable mechanism, but it should be strengthened and encouraged to conduct effective coordination with civilian counterparts.

R5.3.4: The MITAM system is critical to coordinate, monitor and evaluate assistance provided by the U.S. military in disaster response situations. The MITAM system should be revised for large-scale catastrophic events so that it can be employed even under extreme circumstances with limited USAID/OFDA, UN, or NGO capacity. It must be an easily managed

mechanism that is adaptable for command and control of all HADR operations.

5.3.5 **During the initial days of the response, the U.S. military provided humanitarian aid directly to communities in the absence of NGOs and the UN because of the overwhelming needs.** The military initially operated based on broad direction from the USAID/OFDA. While this flexibility was important at that time, direction and required action need to be more specific as a response evolves. This type of humanitarian assistance is not a usual role for the military and requires specific humanitarian expertise such as registration systems, needs-based allocation of aid to avoid social and economic disruptions, and proper targeting of relief to at-risk populations. This led to missions such as food airdrops in urban settings, which can cause rioting, and the establishment of IDP camps without clear support of the local authorities and other partners.

R5.3.5: The military should coordinate all direct humanitarian relief activities through USAID/OFDA and delivery-based NGOs. U.S. military commanders should be educated to not engage in HADR operations without the direction of USAID or the UN.

5.4 Multilateral Donor Coordination

The U.S. Government worked closely with donor partners, foreign governments, and NGOs to support relief efforts. Multilateral collaboration reinforces response efforts, minimizes duplication of efforts, and presents a unified response from the international community. The roles of the United Nations, DFID, World Bank, and ECHO are discussed in this section.

Within the first week of the response, the international donor community established daily donor meetings to coordinate efforts. These meetings included representatives from all major donors, including the UK, the European Union, Canada, Spain, Norway, Ireland, and the World Bank, as well as a USAID/DART member who worked directly with the donor community. Donors coordinated budget decisions based on priorities established by the UN Flash Appeal released three days after the earthquake. Further tuning of the funding coordination was done through participation in UN cluster meetings and integrated donor planning sessions. These meetings helped to produce the revised UN Flash Appeal issued on 18 February. The USAID/DART representatives were liaisons between major donors and USAID to coordinate budgets and minimize duplication of efforts. Major contributors, such as DFID and ECHO, provided emergency response funding to key NGOs in the cluster system.

As fiscal agent for the Haiti Reconstruction Fund (HRF) that was established following the UN Donor Conference in March, the World Bank supported reconstruction and long-term development programs in Haiti. In addition to managing the HRF, the World Bank collaborated with the U.S. Government to provide funding to the Government of Haiti for emergency response projects, which included rebuilding the state's capacity to operate, clearing drainage canals, rebuilding roads, and assessing housing damage.

Within days of the earthquake, the World Bank took over the payroll functions of government employees and encouraged their return to government offices. They also conducted detailed damage estimates of government buildings with the Army Corps of Engineers and successfully and rapidly issued contracts to private building firms for reconstruction efforts. They retrieved databases from the destroyed buildings and, working with USAID, partially reconstructed government financial data. The World Bank's collaboration with the U.S. Government was handicapped by the number of U.S. agencies and individuals temporarily working for the U.S. Government. Discussions on major rebuilding, housing, or transport projects were held with persons whose status and decision-making authority was unclear; some time was lost in this process. World Bank coordination with the U.S. Government in Washington, in contrast, was efficient; the single point of contact was an interagency committee through which all joint planning for relief and recovery were channeled.

United Nations

The coordination between United Nations' and United States' efforts in Haiti presented challenges, but worked well. Initially the UN struggled to provide leadership after the devastating losses of their leaders on the ground. MINUSTAH has had a UN mandate for long-term peacekeeping operations in Haiti since 2004, while the U.S. and other international military forces were deployed at the invitation of the Government of Haiti. Special Representative of the Secretary-General (SRSG) Mulet and Ambassador Merten signed a Statement of Principles between the U.S. Government and the United Nations on 22 January that recognized the primary responsibility of the Government of Haiti for the response and the supporting role of the UN

and U.S. Government, with the UN coordinating international assistance.

UN-U.S. coordination also occurred in Washington and New York City. Early on, bilateral liaisons were appointed by the U.S. and UN to work at the respective organizations to assist in coordinating activities. However, because of the number of agencies involved, there was often confusion due to the multiple lines of communication. These included the UN Department of Peacekeeping Operations (DPKO) to USUN in New York, SOUTHCOM to the UN Office of Military Affairs, SOUTHCOM to MINUSTAH, and Department of State Task Force to the United Nations Peacekeeping Situation Centre.

The UN and Government of Haiti launched the overall coordination mechanisms on 23 January, ten days after the earthquake. Figure 16 portrays the international coordination architecture designed by UN and the Government of Haiti.

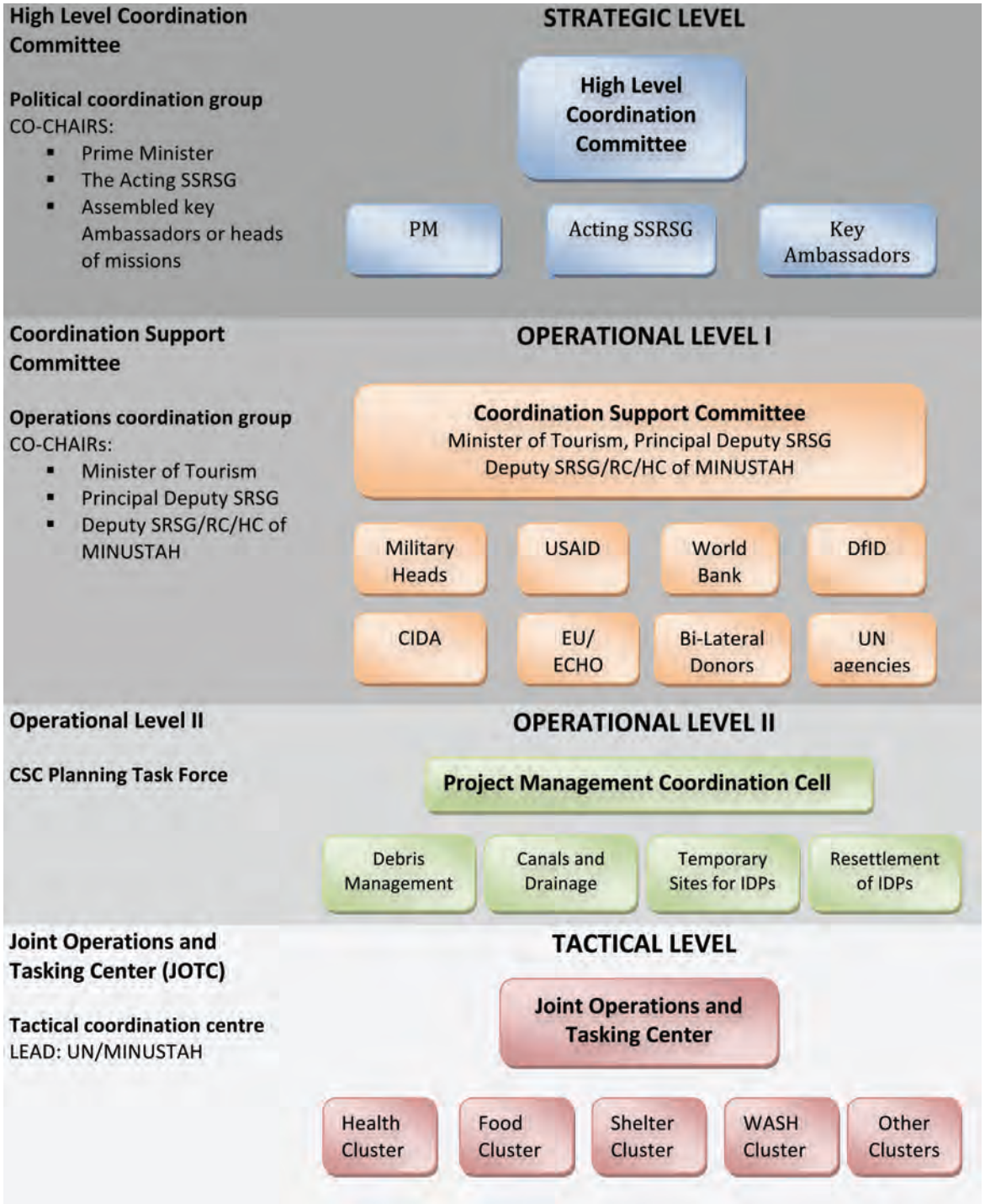

Figure 16: International Coordination Architecture

In-Theater Strategic Coordination[98]

The lead coordinating body for relief and humanitarian aid was the High Level Coordination Committee (HLCC). The HLCC was co-chaired by the Haitian Prime Minister and the Acting UN Special Representative for the Secretary General (SRSG) and included key Ambassadors and mission heads. The HLCC, which met five times between February and March, provided the overall political umbrella for in-country coordination of the relief effort and played a critical role in validating decisions reached at the operational level in the context of the Coordination Support Committee (CSC), described below.

In-Theater Operational Coordination[99]

At the operational level, the HLCC was supplemented with a Coordination Support Committee chaired by the Haitian Minister of Tourism (as the initial coordinator of the government's response), the UN Principal Deputy SRSG, and the Deputy SRSG/RC/HC of MINUSTAH. The CSC was comprised of the in-country heads of the military and political responding organizations and of the major bilateral and multilateral donor aid programs in Haiti. The CSC considered priority thematic (e.g. sanitation, shelter, debris management) or geographic (e.g. assessments of regional situations beyond Port-au-Prince) issues to help inform a more coherent view on those response priorities and to help focus donor and military operational support around those priorities. The selection of issues was based on: (i) priority; (ii) complexity; and (iii) the involvement of multiple actors.

The CSC also established subsidiary planning and working groups, such as debris management and camp planning, to produce concrete recommendations. A key component of the CSC was the Project Management Coordination Cell (PMCC) to facilitate a coordinated approach to the development and implementation of project plans between the government, donors, NGOs, UN agencies, MINUSTAH, and the U.S. military. The PMCC's main areas of focus included: debris management; canals and drainage; temporary sites for displaced persons; registration; and movement of IDPs to safe sites. The U.S. military, especially staff from the Army Corps of Engineers and MINUSTAH, provided critical technical assistance to the PMCC.

In-Theater Tactical Coordination[100]

MINUSTAH and OCHA created and jointly staffed the Joint Operations Tasking Center on 23 January, based on terms of reference jointly developed with the Government of Haiti. The JOTC was built upon the peacekeeping mission's pre-earthquake Joint Operations Centre (JOC) and was rapidly expanded by temporary peacekeeping staff from other field missions to better address the unprecedented and complex need for coordination. Initially driven by the urgent need to improve coordination of the wider UN system's assistance to the humanitarian relief operation, JOTC was soon adapted to provide coordination support to international military partners. The JOTC was comprised of representatives from UN Mission components (military, police, and relevant civilian sections), OCHA, and WFP, as well as liaison officers from the U.S. JTF and Canadian TF, the European Union Situation Centre cell, and the UN's Caribbean Community Secretariat military contingent.

OCHA also supported the establishment of the Humanitarian Country Team (HCT), established during the first week of February, that met twice weekly throughout the initial emergency phase to address key strategic issues.[101] The UN Humanitarian Coordinator (HC), who also served as Resident Coordinator (RC) and Deputy Special Representative of the Secretary-General (DSRSG), led the HCT. Strategic coordination was strengthened with the establishment of the positions of Deputy Humanitarian Coordinator (DHC) and Senior Humanitarian Advisor to the HC.

For more details on the role of the MINUSTAH, OCHA, PAHO, and other UN agencies in the response in Haiti, please refer to Annex 10.6.

Analysis and Recommendations

5.4.1 **The JOTC and MINUSTAH were critical to coordinate the provision of humanitarian assistance**

[98] NDU. 2010. *Lessons Learned during the Crisis Response to the 12 January 2010 Earthquake in Haiti.*
[99] Ibid
[100] NDU. 2010. *Lessons Learned during the Crisis Response to the 12 January 2010 earthquake in Haiti.*
[101] Inter-Agency Standing Committee. 2010. *Response to the Humanitarian Crisis in Haiti: Following the 12 January 2010 Earthquake.*

with the GOH, NGOs, and international community in Haiti. Notwithstanding the multiple bilateral arrangements that occurred, the JOTC demonstrated the value of co-location, coordination, and joint planning between government, humanitarian organizations, MINUSTAH, and international military partners in a large-scale humanitarian emergency. It also served as a confidence-building tool between the international community and the Government of Haiti.

R5.4.1: The JOTC offers a potential best practice for peacekeeping missions and the humanitarian cluster system in the context of complex emergencies. It also offers a useful facility for international partners to voluntarily coordinate their efforts, although the concept is yet to be tested within a non-permissive environment. The U.S. Government should explore opportunities to learn from the JOTC for applications in disaster response or potential use in the IRF.

5.4.2 **Multilateral donor coordination was successful for the Haiti response and represented unprecedented cooperation in the development of consolidated funding plans and the strategic alignment of resources. T**here was widespread praise for the strategic coordination of the response with the U.S. Government representatives on the ground in Haiti as well as in Washington by major international donors. This was the first time that multiple donor agencies formed an in-country committee to coordinate funding activities.

R5.4.2: Multi-donor collaboration mechanisms/committees should be formed at the beginning of the disaster response to coordinate donor activities.

5.5 U.S./GOH Coordination

The Response of the GOH

The Government of Haiti was severely impacted by the earthquake: 28 of 29 Ministry buildings collapsed; many government workers died or lost family; and almost everyone was personally affected by the tragedy. Despite the devastation, the government acted quickly to coordinate relief efforts. The Haitian President and Prime Minister led the government's response at both the policy and operational level. While this was helpful for achieving a committed level of involvement at the highest levels of government, it also created delays in decisions concentrated at the top.

The DOS played a critical role immediately following the earthquake by signing a Memorandum of Understanding (MOU) with President Preval's government concerning the U.S. management of the airport and seaports and the presence of the U.S. military in Haiti to provide assistance to the country. Within 36 hours, the President and Prime Minister developed an initial government framework to manage the response and coordinate with the international community. By 15 January, the GOH established the Presidential Commission on Recovery and Reconstruction, which was comprised of four sub-commissions. These commissions included health, food and water, energy and fuel, and shelter/reconstruction. Government officials and Haitian civilians, working as volunteers, led these commissions. The Presidential Commissions were to lead the OCHA cluster groups and coordinate needs and priorities for the relief phase of the response. Over time, the commissions and clusters began to work on transitional issues, moving from immediate relief and humanitarian assistance to medium- and longer-term IDP resettlement and community re-establishment. By 23 January, the government and UN created the international coordination architecture (see Figure 16), which created the framework for the government to interface with multilateral development agencies, international militaries, and bilateral donors to design relief and recovery strategic priorities as well as operational plans to address them. Figure 17 depicts the Presidential Commissions and UN cluster system.

Ministry staff worked closely with the President and Prime Minister to aid the response efforts, including staff from the Ministries of Interior, Agriculture, Health, Environment and Planning, and External Cooperation. The tragedy of the earthquake and the loss of so many lives meant that government services and employees needed time to recover and grieve before being capable of returning to work. That said, many civil servants, civilian volunteers, police, and senior ministerial staff began working on the response within days of the earthquake.

For details on each of the GOH agencies role's in the response, please refer to Annex 10.5.

U.S./GOH Coordination

The Government of Haiti widely praised the U.S. Government's role in the response. With the assistance of the DOS, embassy and the DOD, the GOH established daily morning meetings at Haitian Police headquarters for the first two months of the response. The American Ambassador, the Response Coordinator,

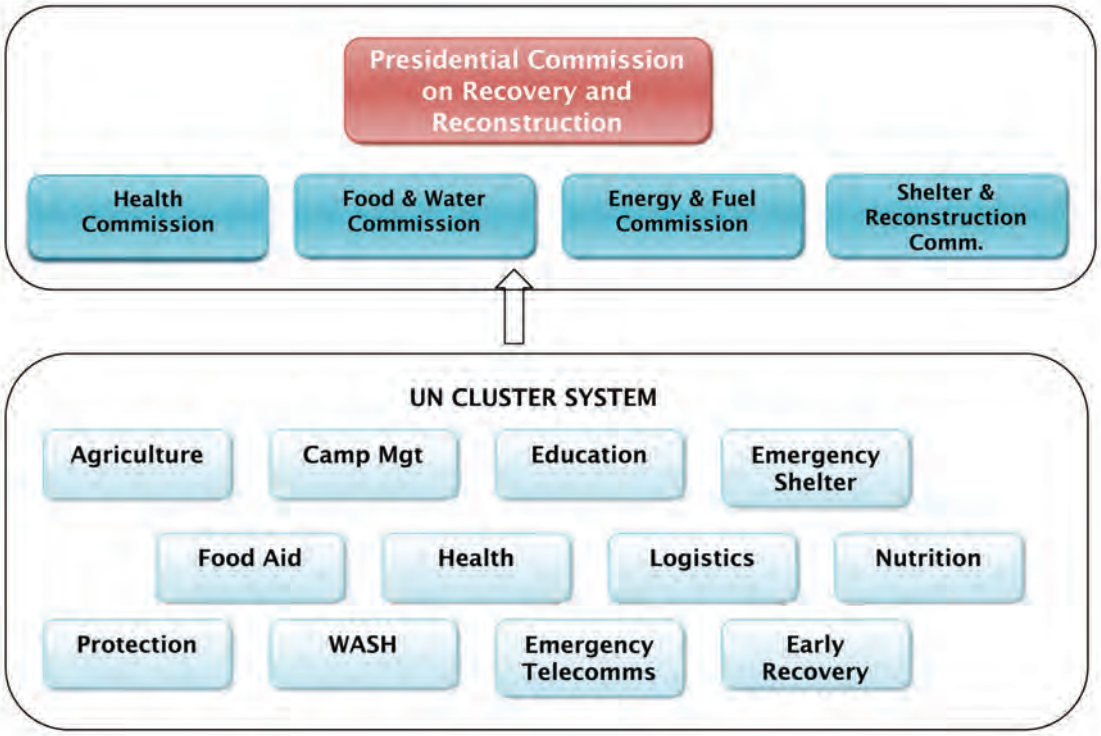

Figure 17: Haitian Presidential Commission and the UN Cluster System

and senior U.S. military personnel attended these meetings to discuss priorities for emergency relief and to review U.S. Government efforts. These meetings were instrumental in developing Memorandums of Understanding regarding U.S. Government management of the airport and seaport.

The U.S. Government worked closely with the Presidential Commissions through the UN cluster system. The earthquake marked a new approach for USAID in coordinating with the GOH. Over the last thirty years, USAID has had limited contact and consultation with the GOH on development issues, but supported development efforts by funding NGO partners. Since the release of the Poverty Reduction Strategy Papers (PRSP) by the World Bank and the new U.S. Presidential Administration, direct coordination between USAID and the Government of Haiti has increased significantly. The OFDA DART worked closely with the Presidential Commission on Recovery and Reconstruction, focusing on the health, food, and shelter commissions. USAID representatives provided insightful recommendations to the Commissions, especially regarding the construction of transitional shelters. However, the high turnover of USAID representatives strained coordination efforts.

Transition from Relief to Reconstruction and Development

The U.S. Government focused attention on the issue of IDPs, property rights, eminent domain, land use, and debris clearance, while the GOH was more challenged to focus on recovery and reconstruction issues. Rubble removal was a critical step in the resettlement process. However, serious challenges around locations for debris placement emerged early. The Government and international development agencies could not agree on where to place the debris and rubble. Initially, the municipal and solid waste site at Tretiers was used. However, this site was not suitable for rubble removal, as it mixed household waste with rubble, making it difficult to reclaim the rubble for use in future reconstruction efforts. Other problems with land ownership and private property arose. Since the Government of Haiti does not own land in the area of Port-au-Prince, it negotiated with private landowners to rent land for use as rubble removal locations. However, because this would increase the value of the land, which was usually in marshy areas, by allowing it to be used for future construction, the issue became highly contentious

(because the owner would not only benefit from rental fees but would also gain from the increased value of the land). As of June, the debris and rubble removal issue was still unresolved. Best estimates by the Disaster Waste Recovery Project put the total rubble removed by June 2010 at less than 1%. Additionally, USAID and the UN have funded large cash-for-work projects to pay communities to remove rubble.

To assist in the transition from relief to reconstruction and development, the U.S. Government worked closely with the GOH to establish the Interim Haiti Recovery Commission. On 15 April, the Lower House and Senate of the Parliament approved the Interim Haiti Reconstruction Commission (IHRC) as part of an amendment to the Law on the State of Emergency. [102]

On 5 May, President Preval and the Council of Ministers of the Government of Haiti signed a Presidential Decree officially establishing the IHRC. The IHRC is co-chaired by the Prime Minister and former (U.S.) President Bill Clinton and will be guided by a Board that includes Haitian and non-Haitian stakeholders for a period of 18 months. The IHRC is charged with continuously developing and refining Haiti's development plans, assessing needs and gaps for investments, and ensuring that the implementation of these plans is well coordinated, effective, and adhering to the highest standards of transparency and accountability.[103] The IHRC is modeled on successful reconstruction agencies elsewhere in the world, including the Badan Rehabilitasidan Rekonstruksi (BRR), which operated in Indonesia after the 2004 tsunami. The first meeting of the IHRC was held on 2 June in the Dominican Republic.

In addition to the development of the IHRC, the U.S. Government worked closely with the GOH to establish the Bureau for the Resettlement of IDPs. The resettlement issue has been one of the top priorities of the international community and the GOH. On 9 May, the government formed a high-level working group on IDP resettlement. The group included the GOH, community leaders, UN, USAID, DOS, and other international community participants. On 20 May, President Preval requested that the Presidential Task Force develop a larger and more permanent Bureau for Resettlement of IDPs to plan for wide-scale IDP relocation. Since that time and until the end of May 2010, USAID was supporting the Task Force to design an effective structure, organization, and staffing plan for the new Bureau. As of late May, USAID was working with the GOH IDP Task Force to develop scopes of work for Short-Term Technical Assistance and to establish bureau positions, including two program assistants, one program manager, and an advisor on secondary cities.

5.6 NGO/PVO Coordination

For decades, Haiti has depended on NGOs and private enterprises to deliver social services throughout the country. Before the earthquake, it was estimated that up to 3,000 NGOs were working in the country. In the wake of the disaster, it is believed that the number of NGOs rose substantially, with most organizations concentrated in the Port-au-Prince area. The UN cluster system organized NGOs based on sector-specific areas, such as health, nutrition, and security, and held daily meetings at the Logistics Base. The UN was thinly staffed for running a cluster system and NGO coordination proved difficult due to the sheer number of organizations that arrived to assist the response. In the health cluster, more than 300 NGOs participated in the meetings, when normally this number would be 15-20. A result was the formation of sub-clusters, which met after the main health cluster session, ultimately leading to a more manageable, decentralized cluster structure. However, this also made coordination efforts between NGOs and donor partners difficult.

In the initial response, coordination between NGOs and the U.S. Government was facilitated through the UN cluster system. The OFDA DART team worked closely with the clusters to support relief efforts and provide grants to implementation partners. USAID/OFDA rapidly responded to funding requests and awarded grants to projects within two weeks of proposal submissions. The USAID mission also allowed NGOs with existing grants or contracts in Haiti to re-direct funds to respond to emergency relief efforts. Difficulties arose between USAID and NGOs in the development of transition strategies and long-term development programs. No clear baseline or reporting mechanism was established to assess the progress of programs implemented in emergency relief efforts. Numerous NGOs, the UN, and the military all commented that the rapid

[102] Office of the Response Coordinator. 2010. "Weekly Slide Update: Phase II/III Analysis and Planning." Haiti Relief and Recovery. 21 April.

[103] Haiti Interim Recovery Commission. 2010. "Frequently Asked Questions." HIRC Website. http://www.cirh.ht/index.jsp?sid=1&id=8&pid=2. Accessed on 16 September 2010.

rotation of OFDA personnel in the field and lack of USAID staffing at the ORC and the USAID Mission until late February hindered the initial planning for transition from relief projects to longer-term development programming.

InterAction, an umbrella organization of U.S.-based international NGOs, was funded immediately after the earthquake to work in Haiti to assist in coordination efforts. This represented the first time that InterAction was deployed internationally as part of a humanitarian response. The USAID Administrator directed InterAction to work with USAID/OFDA and coordinate efforts among the NGOs through the cluster system, as well as to build local capacity.

As of 23 January, NGOs began submitting requests for support to the JOTC for security and logistical assistance from MINUSTAH to carry out their humanitarian objectives. Prior to this, NGOs were coordinating humanitarian assistance activities with the JTF-Haiti on an ad hoc basis, usually through contacts at cluster or other meetings.

Analysis and Recommendations

5.6.1 **Implementation partners universally acknowledged that the USAID Mission and OFDA DART team cooperated closely to ensure that humanitarian assistance could be delivered as quickly as possible.** This involved the revision of existing grants and contracts for implementation partners that were already on the ground in Haiti so that they could re-align their budgets and work to meet the needs of beneficiaries. New grants were also awarded quickly so that NGOs could launch operations in a timely manner given the urgent need.

R5.6.1: USAID should continue to use its authority to revise grants and contracts in response to disaster situations. It should also continue to authorize use of non-competitive contracting to augment awards to implementation partners already in the country to more rapidly meet response needs.

5.6.2 **NGOs expressed concern that USAID focused on input-based results rather than outcomes.** The focus of USAID monitoring and evaluation was on numbers as opposed to the quality of the response. Given the constraints of the environment and the dire conditions on the ground, it was difficult to collect data on outcomes. However, NGOs felt that too much emphasis was placed by USAID on quantitative results, such as the number of temporary shelters constructed, rather than the sustainability of these shelters.

R5.6.2: Implementation partners should emphasize outcome-based results that are quantitatively valid and reliable in order to better monitor the quality of programs. In order to do this, they should work with USAID to develop more robust reporting for data collection and interpretation. A single, coordinated monitoring and evaluation strategy could help to ensure the quality of U.S. Government programs.

6. Data/Information Management

Data that can be translated into usable information is critical to managing a disaster response and to informing policymakers of important issues. Quantifiable data are also essential for measuring the quality of the response. During the Haiti response, there were frequent comments about information management limitations that followed two major themes. First, there were limited data available for tactical and operational decisions; and second, there were overwhelming requests for data and information from policy leaders in Washington that made systematic data collection more difficult. These demands were often driven by reports in the media. Some recognized that the former (limited availability of operational data) led to the latter because policy leaders, the Congress, and the White House all had important information needs. The latter (frequent requests for information) detracted from the on-ground response because of the need to constantly answer questions and "chase down" facts.

The collection of management data (assessments) following a disaster is extremely difficult because of environmental and time constraints. It is also a process that is fragmented by data type (different clusters), collection methods, and information needs. Data needs and quality also change rapidly as the response progresses and more resources are available. Within the U.S. Government, data were collected by the DART, the military, and other agencies, and additional data were collected directly by the UN and NGOs. This led to different data sets, qualities of data, and difficulties with sharing and standardizing information. The varying data and information needs of different agencies, as well as their different analysis and reporting structures, further complicated this system. The information needs of different leadership groups in Washington were also not consistent and led to frequent and sometimes conflicting requests for information.

Most groups noted that these complex relationships of data needs and collection difficulties made response management more difficult at all levels. There was general agreement that a new information management system be created, perhaps even a separate unit devoted only to data management and sharing.

Data Collection in Haiti

Data collection, through surveys and assessments, is an essential component for managing a disaster response. Surveys and assessments are used to identify the needs of the affected population to direct the response. Ideally, these types of data can be used to measure the overall impact of the humanitarian response. The normal data collection/assessment system uses the very limited DART staff, who is more often managing the response than collecting and analyzing data. The UN OCHA is the focal point of information collection and assessment, but their staff and budget are also very limited. The system relies on NGOs to collect and report through the UN clusters and then to OCHA. However, NGO staff often has had little or no assessment training or skills, and the data that are collected are not consistent in content or collection methods.

The U.S. Government was one of the first responders to conduct a rapid needs assessment when the U.S. Coast Guard conducted aerial surveys of Port-au-Prince to evaluate structural damage to the airports and seaports. The results from this assessment were released less than 48 hours after the earthquake. [104]

For the first week of the response, systematic assessments were extremely difficult due to the extensive infrastructure damage in Port-au-Prince. Roads were blocked by debris, communication systems were non-operational, and access to transportation was limited. In a time when the demand for information was greatest, these constraints delayed data collection and slowed assessment. As access and logistics improved, needs assessments were conducted regularly by multiple agencies within the U.S. Government and by the UN and NGOs. The U.S. military and the OFDA DART worked, sometimes in parallel, to conduct these appraisals. The U.S. military regularly assessed the needs on the ground and reported to SOUTHCOM, while the OFDA DART reported their findings to USAID/Washington. The OFDA DART worked with the UN cluster system to coordinate partners and continuously re-assess needs throughout the response in an effort to identify gaps in the provision of relief supplies. By identifying gaps, the OFDA DART could draw specific resources into the country to address the apparent deficiencies. The U.S. military contracted with the MIT Lab to conduct on-going

[104] USAID/OFDA. 2010. *Haiti-Earthquake*. Fact Sheet: 2; 14 January

surveys of need and to monitor the effects of relief over time; unfortunately, the lack of expertise with disaster-related surveys severely limited the utility of the information.

The UN OCHA generally coordinates assessment activities and leads the initial rapid needs assessment for the international community with the UN Disaster Assessment and Coordination (UNDAC) team. A very preliminary assessment based on expert assumptions was completed in three days to allow the UN make its "flash appeal" to donors for the relief efforts in Haiti.[105] A more formal, survey-based rapid needs assessment was conducted by the inter-cluster RINAH (Rapid Interagency Needs Assessment in Haiti). The assessment cost $3 million and was conducted from 23 January to 6 February, but the results were not released until March 2010.[106] This assessment provided information on each major sector, including shelter, water and sanitation, food distribution, and health, but was far too delayed to be of use to direct the response.[107] However, like other aspects of foreign disaster response, assessments are decentralized, with multiple organizations, agencies, and even governments conducting them. This makes the standardization, sharing, and overall interpretation of information difficult.

The UN, the Inter-American Development Bank (IDB), the Economic Commission for Latin America and the Caribbean (ECLAC), the World Bank, and the European Commission conducted a large-scale Post Disaster Needs Assessment (PDNA) in Haiti. The assessment was conducted between 18 February and 24 March; the results were published at the end of March 2010. The PDNA was intended to help direct reconstruction and document the damage and loss incurred in each sector from the earthquake. An action plan was created for recovery and reconstruction in Haiti over the short term (eighteen months), intermediate term (three years), and long term (ten years).[108]

Information Management and Sharing

In an effort to promote information sharing and coordinate response efforts, the UN and the U.S. military established Internet portals for data sharing. The United Nations used the "OneResponse" website to coordinate information sharing and data management within the cluster system and among NGOs.[109] It was designed to enhance humanitarian cooperation within the clusters and support the exchange of information in emergencies. The U.S. military established the All Partners Access Network (APAN), which was created to facilitate unclassified information sharing among NGOs, multinational partners, and various U.S. Federal and Department of State agencies.[110] This website allowed stakeholders to upload assessment results, locate relief supplies, and communicate different activities undertaken by various partners. Though APAN was not very effective for evidence-based data sharing/report sharing and was not used for decision making at the tactical or strategic levels, it was one of the better tools for communication, and it did prove to be a good source for networking and basic information sharing among personnel working on the response.

Although these sites allowed access to a wide variety of information, they were criticized as "dumping grounds" for data. The sites were not actively managed, nor were the data aggregated or analyzed in any way, so the sites essentially became just a large collection of files. This limited usefulness and kept the data fragmented. Some of the files were open source and could be edited by anyone, so multiple, non-validated versions of a single file could exist.

In addition to creating the APAN portal, the U.S. military operated on an unclassified system. The military has never conducted all operations on an unclassified network. This new open approach allowed the U.S. military to share information with all partners on the ground, including NGOs, the GOH, and the UN, thus enabling greater communication and coordination efforts.

The management and sharing of information internal to the U.S. Government is vital to developing a coherent operating picture and coordinating efforts. The website developed by DOS, known as Intellipedia, garnered 50,000 hits within the interagency community and hosted internal situation reports from DOS,

[105] United Nations. 2010. *Haiti Earthquake: 2010 Flash Appeal.*

[106] Rencoret, N., Stoddard, A., Haver, K., Taylor, G. and P. Harvey. 2010. **Haiti Earthquake Response: Context Analysis.** ALNAP. July.

[107] OCHA. 2010. *Key Findings from the Multi-Cluster Rapid Initial Situational Assessment for Haiti.* United Nations.

[108] GOH. 2010. *Haiti Earthquake PDNA: Assessment of damage, losses, general and sectoral needs.* http://siteresources.worldbank.org/INTLAC/Resources/PDNA_Haiti-2010_Working_Document_EN.pdf. Accessed on 12 September 2010.

[109] OneResponse. 2010. "Ongoing Emergencies." *OneResponse Website.* http://oneresponse.info/Pages/default.aspx. Accessed on 1 September 2010.

[110] All Partners Access Network. 2010. https://community.apan.org/. Accessed on 30 June 2010.

USAID, HHS, DOD, Coast Guard, and others. It was accessible to all U.S. Government personnel. Although this website was not utilized to its full potential, it is a good example of internal communication and successfully kept U.S. Government personnel within the Interagency apprised of the situation and news on the response.

The Quality of the Response

It is difficult to evaluate the quality of the Haiti response using hard data. There is a great deal of information available on output indicators, such as liters of water or tons of food delivered, but limited information on the actual impact or outcomes of these interventions. The UN and the CDC recently conducted a survey to assess the nutritional status of the Haitian population, but its results are not yet available. USAID/FFP collected data on food aid, as their grantees are required to report on number of beneficiaries and percentage of planned versus reached. The reports containing this information for Haiti are due in November. One positive sign was that there were no major outbreaks of communicable disease immediately after the earthquake. However, this group was unable to find useful data to understand the outcomes of the response:

- What percentage of people received the food and shelter that they needed?
- And at what point?
- Were deaths prevented?
- How many?
- Has the affected population been restored to the same standard of living as before the event?
- Or is their standard of living worse?
- Better?

The lack of standard outcome measures limits our ability to measure the success of any disaster response, to compare the quality of different responses, to measure the quality of the work of different contracted NGOs, and, ultimately, to continue to improve our disaster response systems. Steps have been taken by USAID and the international community to rectify this issue through the development of Standardized Monitoring and Assessment of Relief and Transitions (SMART). This initiative has established standardized measures and methodology for data collection and analysis of complex nutrition and mortality data.[111]

Analysis and Recommendations

6.1 **Data collection and data management were not coordinated across the interagency, thus limiting the creation of a common operating picture for the overall response coordination.** Multiple U.S. agencies worked in parallel to conduct needs assessments and report results to their respective headquarters. This led to different data sets, varying data quality, and difficulties in sharing and standardizing the information. This limited coordination efforts and reinforced "stovepipes" within the chain of command. Additionally, since there was no single reliable data source, U.S. Government agencies "pushed" resources into Haiti in order to meet the unidentified needs in the field.

R6.1: Standardized reports, schedules, and methods are required across agencies. A new information management system should be created, devoted only to data management and sharing. This will make reporting easier, more accurate, and more consistent across the interagency and will promote coordination efforts. Extending such a solution to include international partners and governments would also benefit the overall response and limit duplicative results.

6.2 **An effective central data management system was lacking in the response.** Data portals, such as OneResponse and the APAN website, were not effective. The magnitude of information collected on the sites made them difficult to navigate. Additionally, the quality of the data posted was not reliable and there was no clear structure that directed access to specific information.

R6.2: An effective common shared information portal is needed to establish situational awareness among all responding organizations and governments. Information managers and specialists should be assigned to manage these websites. Their responsibilities should include verifying the validity and reliability of the data before uploading onto the site and formatting the webpage so that is it easy to navigate and access information.

[111] USAID. "Standardized Monitoring and Assessment of Relief and Transitions (SMART)." *USAID Website.* Available from: http://www.usaid.gov/our_work/global_partnerships/smart/. Accessed on 18 October 2010

6.3 **Post-disaster surveys produced unusable results due to quickly planned surveys and the absence of standardized data collection methods.** Survey planning is often done precipitously, with little attention to details that are critical to overall data quality. When survey planning is poorly done, it requires more time to clean the data, which can impact the quality of the results and cause delays in releasing the findings. Delays in releasing reports reduce the value of the survey as data become dated. One clear example of this from the earthquake response is RINAH. While its assessment was conducted from 23 January to 6 February, logistical, security, and methodological concerns delayed the publication of the report for more than one month.

R6.3: A handbook on disaster survey methodologies should be developed to help field agencies or others undertake robust post-disaster surveys. Standardized questionnaire instruments should be developed to assess the survival needs of the population. Standard rapid surveys can be used to assess essential post-disaster survival factors across emergencies. The application of proper sampling methodologies will allow analysts to quickly examine the data and share results. The release of survey results in a timely manner ensures that the information is relevant and may be used by the humanitarian community to plan appropriate programs for the affected population.

6.4 **There are limited usable data available to assess the quality of the response.** The measures that are available are process indicators such as money spent, or food and tents delivered, but there are few outcome indicators. These would include measures such as "deaths averted" or "percent of population in need receiving food," for example. This is a recurrent problem with disaster response. The lack of consistent, measurable, and comparable information makes it difficult—if not impossible—to accurately assess the quality of a disaster response, or to compare the activities of different agencies and NGOs. The result is that most responses are assessed by the semi-formal structure of an "after action report" (AAR) that does not allow ongoing assessments of the impact of implementing the recommended changes.

R6.4: A quality of response survey should be conducted to assess whether the needs of the Haitian people were met.

R6.5: Quality assessment measures should be routine tools used in all responses to better understand the impact of aid and to improve services during the response and for future responses. Such surveys or measures can be conducted periodically through the entire response-to-recovery period (e.g. one month, three months, or six months) to track improvements and redirect efforts. Such surveys or measures should use consistent methods and content to be comparable across many responses and between agencies and NGOs.

7. Finance and Budget

The financial support provided by the United States from January until June 2010 represented one of the largest investments in foreign disaster assistance in U.S. history. During the first six months of the response, the total U.S. financial contribution was $2.3 billion. This figure roughly translates to every Haitian affected by the earthquake receiving $1,150.[112] Of the total amount contributed, the U.S. Government provided $1.1 billion, and American families and businesses, through cash and in-kind donations, contributed $1.2 billion. Figure 18 presents the monthly cumulative and relative totals of U.S. Government spending by each agency for the first six months of the response; USAID provided $621 million, DOD provided $461 million, and DOS/PRM provided $11 million.

For the past three decades, the U.S. Government has played a significant role in financing Haiti's development. The total USAID budget for Haiti in 2007 was $246 million.[113] According to an internal assessment conducted by the Obama administration, the U.S. Government has provided $4 billion in aid to Haiti since 1990, but "struggled to demonstrate lasting impact."[114]

Total U.S. Government spending peaked at nearly $400 million in January 2010 and decreased each month as the relief mission transitioned to recovery and long-term development. Spending significantly decreased from over $100 million in April to $19 million in May. Figure 19 presents total monthly expenditures by USAID, DOD, and DOS/PRM.

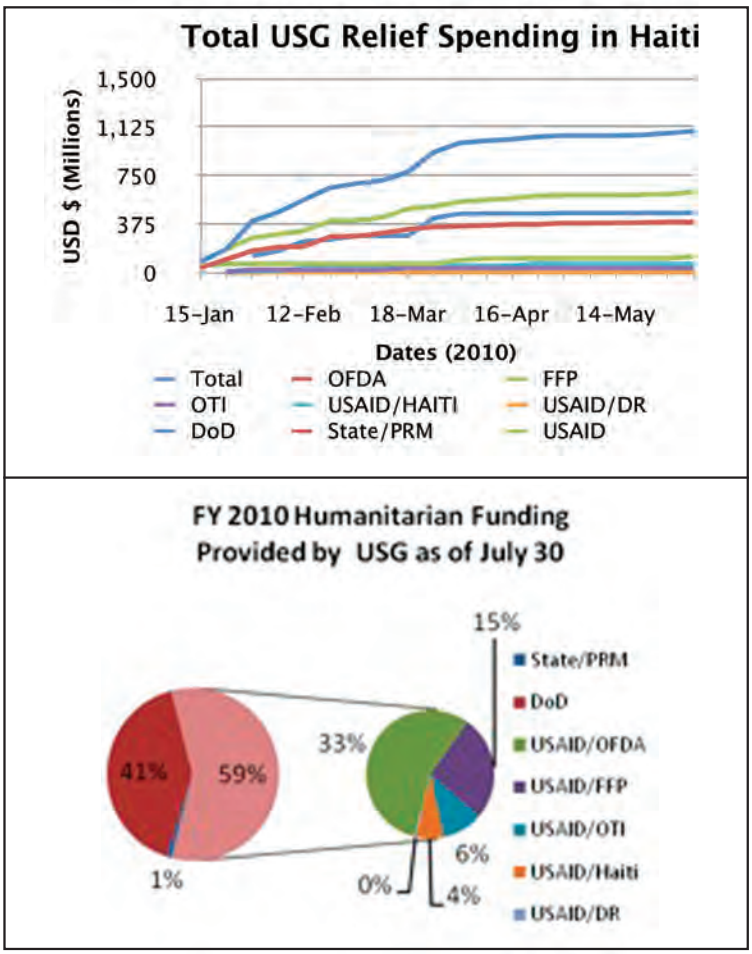

Figure 18: USG Funding Assistance in Haiti

[112] This figure was calculated by dividing the total sum contributed to the Haiti response ($2.3 billion) by the number of Haitians affected (~2,000,000). Calculation: 2,300,000,000/2,000,000 = 1,150.

[113] USAID/Haiti. 2008. *Operational Plan: FY 2007 Performance Results.* Available from: http://www.usaid.gov/ht/achievement.html. Accessed on 15 September 2010.

[114] Sheridan, Mary. 2010. "In US plan for Haiti, rebuilding government is key." *The Washington Post Online.* 31 March 2010. http://www.washingtonpost.com/wp-dyn/content/article/2010/03/30/AR2010033003586.html. Accessed on 15 September 2010.

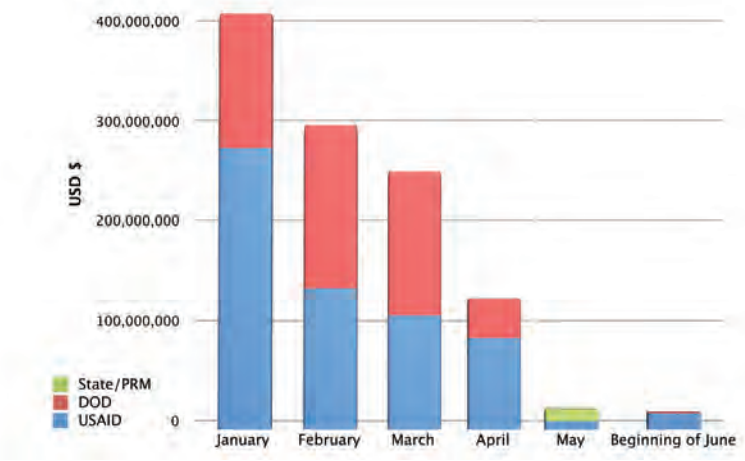

Figure 19: USG Humanitarian Funding Month 12 January - 1 June

On average, the U.S. Government responds to 20-30 international disasters per year. A recent disaster that was similar in terms of destruction and loss of life was the Indian Ocean earthquake and tsunami in 2004 that led to 226,000 deaths in twelve countries.[115] The total aid package provided by USAID was $120 million over seven months in eight countries.[115] In Haiti, the U.S. Government spent almost ten times as much over roughly the same period of time. The political, diplomatic, and disaster context in Haiti was fundamentally different from that of the tsunami and, therefore, the two events are not comparable.

On 29 July 2010, a supplemental bill to amend the budget for the fiscal year was approved so that emergency aid could be provided to Haiti. The supplemental bill "would provide for costs associated with relief and reconstruction support for Haiti following the devastating earthquake of 12 January 2010, including reimbursement of obligations that were already incurred by these agencies."[117] Table 20 provides a breakdown of appropriations for the Haiti supplemental request.

The supplemental spending bill was important to assist in interagency burden sharing to pay for the response. Prior to the supplemental bill, the federal agencies and military were sharing costs as a way to distribute the expenses to their budgets. The arrival of the supplemental funds meant that agencies, including the military, would be reimbursed for their expenditures. This led to greater cooperation among the interagency.

Appropriation	FY 2010 Haiti Supplemental Request
Department of Agriculture	150,000
Department of Defense	655,000
Department of Health and Human Services	220,000
Department of Homeland Security	60,000
U.S. Agency for International Development	1,491,000
Department of Treasury	219,800
Broadcasting Board of Governors	5,200
Total Supplemental Budget	**2,801,000**

Source: White House. FY 2010 Supplemental Proposal in the FY 2011 Budget. 2010.

Figure 20: Supplemental Budget Request ($ in thousands)

[115] Cavallo, E., Powell, A. and Becerra, O. 2010. "Estimated the Direct Economic Damage of the Earthquake in Haiti." *Inter-American Development Bank Working Paper Series* No.163. February.

[116] USAID/DCHA. 2005. *Indian Ocean – Earthquakes and Tsunamis.* Fact Sheet: 39; 7 July.

[117] Obama, Barack. 2010. "Letter from the President Regarding Budget Supplemental on Haiti." *Office of the Press Secretary.* 24 March. http://www.whitehouse.gov/the-press-office/letter-president-regarding-budget-supplemental-haiti. Accessed on 15 September 2010.

According to the Post-Disaster Needs Assessment led by the World Bank, the earthquake caused a total of $7.8 billion in damages and losses, amounting to 120% of Haiti's 2009 GDP. To "build back better," the World Bank estimates that Haiti requires at least $11.5 billion from all sources (public, NGO, and private).[118] On 31 March, an international donor conference was held in New York to coordinate funding for the reconstruction of Haiti, where nations pledged a total of $9.9 billion of assistance to rebuild Haiti over the next three years.[119] Figure 21 provides a breakdown of total funding support and obligations committed by the international community as of 16 September 2010, according to OCHA and the Financial Tracking Service.

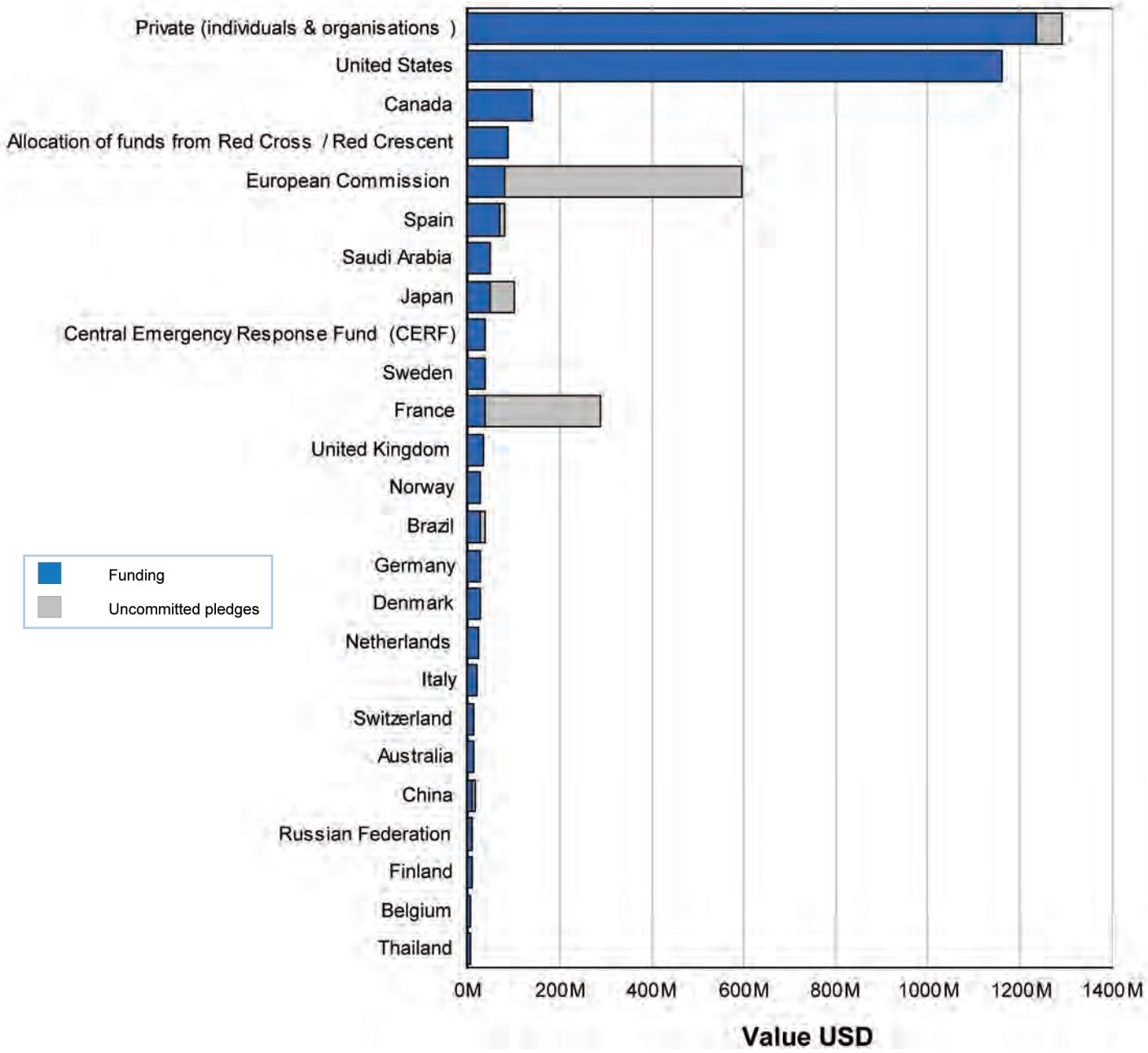

Figure 21: Total Humanitarian Assistance per Donor (as of 16 September 2010)

[118] United States Department of State & US Agency for International Development. 2010. *FY 2010 Haiti Supplemental Budget Justification.* http://www.state.gov/documents/organization/141243.pdf. Accessed on 1 September 2010.

[119] Clinton, Hilary. 2010. *Remarks After the Haiti Donor Conference.* http://www.state.gov/secretary/rm/2010/03/139336.htm. Downloaded on September 20. Accessed on 15 September 2010.

8. Overarching Recommendations

We present seven key recommendations, the first four for immediate consideration. These recommendations draw on the overall analyses undertaken for the whole report. R8.1 – R8.4 are presented according to their increasing depth of institutional change and, therefore, time required. The recommendations are also in line with the clear and important orientation of U.S. aid policy, presented by President Obama to the UN General Assembly this past November.

We believe that repeated disasters and other types of humanitarian crises not only undermine development, but also directly compromise national and international security issues in many different ways. A prime example is the massive rural-urban migration in many countries due to catastrophic floods and droughts (both climate-related phenomena), increasing social and political tensions.

Humanitarian policy reform and close monitoring of program efficiency is an important and central component of overall U.S. development aid—and not just because of the Haiti experience.

The extraordinary efforts made by so many response personnel in Washington, DC and in Haiti were applauded across the board by all interviewees, both in the U.S. and abroad. In June 2010, these efforts were widely recognized at the Interagency Lessons Learned Workshop held at the National Defense University in Washington. The many successes of the Haiti response, which faced unprecedented situations both in Haiti and DC, were entirely due to the devoted and relentless energy of many officers involved in its management. Sheer hard work, personal relationships, and an admirable sense of responsibility down the ranks helped overcome many barriers.

R8.1 Structural Strengthening of USAID/OFDA as Lead Federal Agency for International Disaster Response

USAID should be empowered to lead international disaster response effectively. There is a need to strengthen USAID's institutional structures, increase its staff size and capacity, broaden its interagency agreements at higher levels, and upgrade its technological systems. All federal agencies and departments should adhere to the USAID command and control structures, if the President appoints USAID as the lead agency. These measures will enable improvement of USAID/OFDA's capability to perform in catastrophes and build its capacity to coordinate partners in an interagency response. A "whole of government" approach should not be used in future international disaster response until a framework is created to manage the full engagement of the U.S. Government. USAID, as an agency, is best placed to lead development and humanitarian crisis response, both of which should be expertise-led initiatives. Indeed, USAID should continue to take the lead in international disaster response, but its capacity to respond should be strengthened and enhanced, and the agency should be given additional political support to respond. This includes, but is not limited to, the ability to determine the need for and the deployment of additional federal resources during an international disaster response.

Strengthening the disaster response expertise and capacity of the local Mission is essential, especially in disaster-prone countries. The USAID Mission in the country, under Chief of Mission Authority and guidance, should head coordination among U.S. agencies and the host country and with other non-U.S. donors and players in the response. USAID should expand its official staff to levels that are appropriate to its mandate of operations. Reinforcing the USAID Mission staff directly, rather than setting up new structures such as the Office of the Response Coordinator, may prove to be a better solution. USAID should be able to support the extraordinary needs of OFDA when necessary, by providing short-term staff who are trained for action in humanitarian crises. In the same vein, USAID should reduce its reliance on outside contractors and expand its staff levels to improve its effectiveness. In addition, USAID's budget autonomy will enable rapid action and organization of its resources for more efficient relief/development. All of this points to the creation of a special entity within the USAID Mission to help coordinate and manage the response, rather than establishing parallel structures with repetitive roles, responsibilities, and reporting structures.

Agency-wide strengthening of USAID is a short-term goal that is more tangible than other recommendations, such as the development of an international response framework. As such, this recommendation should not be overlooked.

R8.2 Bridging the Divide Between Diplomatic Response and Humanitarian Relief

Most international disasters involve elements of diplomacy, emergency relief, and development; Haiti was no exception. DOS primarily covers the diplomatic and foreign relations side of disaster response, as well as American Citizen repatriation, while USAID is responsible for the immediate relief, rehabilitation, and long-term development actions needed in-country. Both agencies have established protocols and procedures for disaster response and in some areas, these procedures overlap. Given the scope and scale of the response in Haiti, there was confusion between DOS and USAID at times about which agency was in charge of which components of the response. While USAID was appointed as lead federal agency in the response, many decisions were in fact made by senior DOS officials.

Therefore, there is a need to clearly separate and delineate the functions of DOS and USAID for future large-scale disaster responses. Mechanisms to strengthen the coordination and collaboration between the political/diplomatic service and those of the humanitarian and development agencies need to be fostered. This will improve the understanding and coherence to meet both the short-term emergency response and the longer-term development aims in the affected country. These mechanisms should be made permanent so that diplomatic and development services can be mutually beneficial for all future disaster responses. S/CRS is a relatively new entity that has potential to bridge the span between DOS and USAID. S/CRS should be reviewed by both DOS and USAID to determine whether it can serve as a platform to begin working towards improving coordination among the political/diplomatic and humanitarian/development arms of the U.S. Government in the area of large-scale international disaster response. Should it be determined that S/CRS is not the appropriate vehicle to achieve increased interagency coordination between DOS and USAID, then the two agencies need to work together to establish a mechanism or set of procedures to accomplish this necessary measure.

R8.3 Convene an Interagency Committee on Global Humanitarian Crises Coordinated by the NSC for "Whole of Government" Response Situations

When responding to catastrophes, high-level leadership is needed to coordinate response across the U.S. Government. We recommend the creation of an interagency committee on global humanitarian crises, led by the National Security Council Staff, to coordinate response to catastrophes, such as the Haiti earthquake. Transparent criteria that define "extraordinary circumstances" or "catastrophes" should be prescribed. The committee would set priorities and call upon specialists from U.S. Government agencies and other institutions (universities and technical institutes) in order to coordinate humanitarian policy across the executive branch. This will ensure a unified approach amongst the diverse agencies. The USAID Administrator should be a member of this NSC-led committee. This committee should focus on making policy- and strategy-related decisions, rather than providing operational and technical guidance, in order to ensure it does not interfere with daily field operations.

R8.4 Strengthening of an International Response Framework

In the case of Haiti, the existing inter-service agreements and protocols between different departments and specialized technical agencies were not sufficiently clear and comprehensive to manage a "whole of government" response. The weaknesses of the protocols and agreements, whether related to staff exchanges, budgetary responsibilities, or operating procedures, significantly compromised the efficiency of the whole operation and created tensions between groups who were all prepared to do their best within their own frame of reference.

The chaos in the management of the response in Haiti revealed the need for a detailed management framework which defines responsibility, the command and control hierarchy, and reporting relationships, especially addressing the rapid mobilization of U.S. Government staff, specialized capabilities, and assets that can be utilized to their maximum effectiveness in the most efficient manner.

Existing framework agreements, liaison structures, budgetary provisions, staff deployments, and other key components should be reviewed in depth and a reformed management structure should be established for future "whole of government" responses. A well thought out, detailed management framework for international disasters which draws upon wide-ranging experience and expertise will not only help USAID to coordinate federal interagency participation in overseas disaster relief response, it will set out the structures, guidelines, and roles

for all other actors for a "whole of government" response, where coordination and policy guidance will need to ramp up to larger scales and more wide-ranging areas compared to a standard large-scale disaster. The Framework should develop a unified command structure, designate roles, and be scalable, flexible, and adaptable. It should reinforce the existing U.S. Embassy, USAID Mission, and USAID/OFDA structures in addition to strengthening and modernizing pre-existing agreements between agencies. Most importantly, the framework should address issues related to the mobilization of resources, the upgrading of information systems and communications, and the establishment of common terminology throughout agencies, reporting, and management. The National Response Framework (NRF) used for domestic disaster response could be a fruitful starting point for the development of an international framework. It is a framework that has been developed over years and tested on the ground and provides effective functional guidance. The NRF also has a permanent team which re-evaluates its relevance and keeps it updated continuously. This constant update and review function is key for effective action frameworks of this type and, thus, our recommendation would also include dedicated staff to ensure such a framework represents the latest available information and incorporates all recent institutional changes. In Annex 10.4, we suggest possible components of an International Response Framework (IRF) that could be used to manage all U.S. Government foreign disaster response.

Finally, we would like to underline that while the IRF may solve some of the problems of interagency management and coordination, it should not be seen as a solution for USAID's capacity to respond when staffing in the field and in Washington, DC is insufficient to meet the ever increasing demands.

R8.5 Civilian-Military Collaboration in Humanitarian Crises

Humanitarian Assistance/Disaster Relief has evolved as an important mission of the DOD. "The Department of Defense should be prepared to lead stability operations activities to establish civil security and civil control, restore essential services, repair and protect critical infrastructure, and deliver humanitarian assistance until such time as it is feasible to transition lead responsibility to other U.S. Government agencies."[120] This requires improving the DOD's capacity and expertise to meet this mission. Integrating the U.S. military into humanitarian response activities is both important and complex. Military activities can best focus on HADR such as logistics, assessment, security, and, in limited areas, the direct provision of humanitarian assistance when no other option is available, such as local government agencies, NGOs, or private sector providers. However, this scenario is extremely rare and, hence, the use of DOD capabilities for direct humanitarian assistance needs to be better controlled and monitored by civilian authorities.

While the military has task-specific resources for disaster response that are unmatched, its role in humanitarian response is controversial. In contrast to its logistical expertise, the military has limited experience in delivering humanitarian aid, and it is a costly alternative to other response organizations. Military leaders expressed concern with the lack of policy guidance from Washington, which resulted in a much broader response for the military than anticipated. We recommend that a careful review of the role of the military in disaster response be conducted. This will enable more specific policies and guidance to be created that will prescribe specific activities for the U.S. military.

In order to maximize the benefit of military involvement in HADR operations, the mandate and role of the military should be clearly defined by policymakers before deployment, to delineate an exit strategy with condition-based end points. As disaster response is an internationally managed event, such policies must take into account these pre-existing structures. Military activities should focus on HADR such as on logistics, assessment, and security, but not the direct provision of humanitarian assistance. There also needs to be closer collaboration with the NGO and international communities. All of this should be done as early as possible to avoid potential for over-utilization of U.S. military assets and dominance over humanitarian operations in the field.

To meet its important HADR mission in supporting civilian-led humanitarian responses, the military should retain institutional knowledge and expertise. The DOD should continue to support their "HADR Center of Excellence" and create HADR career paths that allow for personnel to develop and maintain appropriate knowledge and skills. There is also a need to create HADR-related training programs for staff and leadership for both long-term development and "just-in-time" deployments.

[120] Department of Defense. 2009. *DODI 3000.05.* 16 September.

R8.6 Monitoring the Quality of Aid and its Impact

Data collection and information management in Haiti was complicated, difficult, and limited. This led to policy-level decisions that were often driven by media reports rather than tactical and strategic information from the field. Also, it prevented the assessment of the overall quality and efficiency of the U.S. response.

From within the DART, dedicated staff should be deployed exclusively to collect, centralize, validate, and report findings to partners and authorities as appropriate. Specific methods and standard reports should be developed to meet the operational needs of the on-ground response, as well as the strategic needs of Washington and the media. This information should be systematically shared between U.S. Government agencies in the field and in Washington. In addition, NGOs receiving U.S. Government funds through OFDA's granting process should be required to conduct assessments using standard reporting methods and forms. Finally, internationally agreed upon guidelines (e.g. sample questionnaires, indicators, methodology, and reporting templates) for rapid needs assessments should be developed. All donors should agree on this approach and avoid funding fragmented initiatives that compromise the overall process, raise expectations, and frustrate beneficiaries. Tools for rapid evaluation of impact of relief aid on the victims should be developed to ensure effectiveness of aid and correct targeting. Ultimately, such tools will enhance the quality and effectiveness of U.S. Government aid, as well as produce robust and relevant data for planning and management. The Interagency Needs Assessment Task Force is a good start to this endeavor and should include technical institutions, as well as the UN and NGOs.

An effective common shared information portal is needed to establish situational awareness among all responding organizations and governments. Information managers and specialists should be assigned to manage these websites. Their responsibilities should include verifying the validity and reliability of the data before uploading it onto the site. It is better to have several high quality reports and datasets than to have vast amounts of questionable information. It is important that this website be easy to navigate, with clear access to the information.

R8.7 Deployment of U.S. Government Assets to International Disasters

Deployment of relief resources to an international disaster location without requests from the host government, the UN system, and/or the U.S. Embassy is generally unadvisable. However, there are catastrophic events that can incapacitate one or more of these structures, making it necessary to deploy relief supplies to the country without the benefit of rapid assessments or specified needs. The earthquake in Haiti demonstrated the need for immediate response without adequate ground-sourced information on which to base the amount and type of resources required to meet the immense demand for assistance.
In these rare cases, the U.S. Government must respond as quickly and effectively as possible. However, efficiency is also a key element in disaster response, especially so as to avoid logistical bottlenecks and ensure that the maximum utility of relief supplies and manpower are able to be used immediately in country. "More" does not necessarily mean "better" in disaster response. Sequencing of the shipment, delivery, and utilization of relief supplies and personnel must be done in a rational manner. The chaotic nature of the response in Haiti exemplifies the need to include efficiency in the planning and execution of large-scale disaster responses by the U.S. Government.

In order to achieve increased effectiveness and maximize efficiency in future large-scale disaster responses, USAID and the DOS need to develop a menu of packages available from the DOD, since it is primarily the DOD which has the unique capabilities of lift, logistics, manpower, technical assets, and equipment needed to respond to catastrophic emergency situations within 24 hours. This menu would include engineering packages, medical packages, security packages, assessment packages, logistics packages, and intelligence packages, among others. Each package would be scalable with built-in flexibility, depending on the magnitude and complexities of the disaster. Depending on current needs of the U.S. military to conduct its on-going war operations, the use of military resources for HADR operations would have to take into account force readiness and military demands in its conflict theaters.

Similarly, other federal agencies that have special capacities for response in international disasters could design packages to be used in response. These measures could be directed by USAID and DOS in concert with each federal agency and the

DOD. It would serve as a precursor to the IRF and help in its development, since it is a necessary step regardless of whether the IRF moves forward or not.

All packages would be designed by experts in international disaster response together with key staff from each agency so as to avoid any unnecessary components and ensure each package contains the adequate types of resources.

Based on the vast experience of the combined staff at USAID, DOS, and the DOD, an essential set of packages could be identified for immediate response needs in catastrophic situations. There is sufficient evidence from past emergencies to identify a minimum package of services, assets, and supplies that should be mobilized in response to large-scale disasters. These could be tailored for different types of natural disasters and mobilized rapidly without the need for assessments so that the initial response is conducted within hours of the emergency and supplies can reach the disaster site as quickly as possible.

Knowledge of the assistance packages in advance will assist the U.S. Embassy and USAID Mission in the field to plan for the arrival and distribution of relief supplies and personnel. Once the initial packages are in place, additional resources can be requested as required, following rapid assessments.

9. Limitations

This study, like most, has several limitations. The first is its methodology. Basing a lessons learned report on personal interviews has pitfalls that are inherent to its approach. Distilling facts from opinions are difficult and requires several iterations of interviews, which we were unable to do. A mixed method approach that complements objective, data-based evidence to personal reports would have made for sounder analyses. Given the circumstances, the time available did not allow for the collection and analyses of field data. Indeed, much of the data that would have been useful for this study was not available during the time of our work.

Another limitation of this study relates to its focus, which leaned increasingly towards institutional issues and less on beneficiary impact. This weakness is also related to the availability of data, even six months after the catastrophe. The report, had its scope been narrower, would have been more data or objective evidence-based, but then it would have lost its relevance for many of the institutional issues that came to surface in this exercise.

The timeframe was relatively short for a study of this size and scope. The need to conduct meetings in a sequential order to build up relevant core knowledge in preparation to interview senior officials compounded the problem. The team was able to accomplish all objectives as defined in the scope of work, and meetings were held or written feedback was received from 98% of the targeted senior government officials, both in Haiti and the United States.

Finally, the findings and conclusions of this report must be considered with judgment and contextual knowledge, as not all information, understandably, was shared completely with the team. The recommendations have selectively addressed issues that are institutional, technical in nature, and generally actionable.

10. Annexes

10.1 Abbreviations

ACF/ORR	Administration for Children and Families Office of Refugee Resettlement
AMCITS	American Citizens
APAN	All Partners Access Network
ASHA	American School and Hospitals Abroad
CBHF	Clinton Bush Haiti Fund
CBP	Customs and Border Protection
CDC	Center for Disease Control
CFW	Cash-for-work
CMM	Conflict Management and Mitigation
COCOM	Combatant Command
COIN	Counter Insurgency
CRC	Civilian Response Corps
CRS	Catholic Relief Services
CSC	Coordination Support Committee
DAA	Deputy Assistant Administrator
DART	Disaster Assistance Response Team
DCHA	Democracy, Conflict, and Humanitarian Assistance
DFID	UK Department for International Development
DG	Democracy and Governance
DHC	Deputy Humanitarian Coordinator
DHS	Department of Homeland Security
DMAT	Disaster Medical Assistance Teams
DMORT	Disaster Mortuary Operational Response Teams
DOC	Department of Commerce
DOD	Department of Defense
DOE	Department of Energy
DOJ	Department of Justice
DOS	Department of State
DOT	Department of Transportation
DPKO	UN Department of Peacekeeping Operations
DSCA	Defense Security Cooperation Agency
DSRSG	Deputy Special Representative of the Secretary-General
ECHO	European Commission Humanitarian Aid Department
ECLAC	Economic Commission for Latin America and the Caribbean
EGAT	Economic Growth and Trade
EOC	Emergency Operations Center
EPI	Expanded Programs of Immunization
ESF	Emergency Support Function
FAO	Food and Agriculture Organization
FAST	Marine Fleet Antiterrorism Security Team
FCC	Federal Coordinating Center
FEMA	Federal Emergency Management Agency
FEWS NET	Famine Early Warning Systems Network
FFP	Food for Peace
FFW	Food for Work
GAM	Global Acute Malnutrition
GC	General Counsel
GDP	Gross Domestic Product
GH	Global Health
GOH	Government of Haiti
HACC	Humanitarian Assistance Coordination Cell
HADR	Humanitarian Assistance and Disaster Relief
HAST	Humanitarian Assistance Surveillance Team
HC	Humanitarian Coordinator
HCA	Humanitarian and Civic Assistance
HD	Homeland Defense
HD&ASA	Homeland Defense & Americas' Security Affairs
HHS	Health and Human Services
HIS	Haiti Stabilization Initiative
HLCC	High Level Coordination Committee
HRF	Haiti Reconstruction Fund
HTT	Haiti Task Team
IASC	Inter-Agency Standing Committee
ICE	Immigration and Customs Enforcement
ICS	Incident Command System
ICT	Information Communication Technology
IDP	Internally Displaced Person
IDPSS	Internally Displaced Persons Disease Surveillance System
IHCR	Interim Haiti Reconstruction Commission
IMAT	Incident Management Assistance Team
IMSuRT	International Medical Surgical Response Team
IQC	Indefinite Quantity Contracts
IRC	International Rescue Committee
IRT	Incident Response Team
JCOA	Joint Center for Operational Analysis
JECC	Joint Enabling Capabilities Command
JFCOM	Joint Force Command
JIIC	Joint Interagency and Information Center
JOC	Joint Operations Cell

JOTC	Joint Operations Tasking Center
JPACE	Joint Public Affairs Coordination Effort
JTF	Joint Task Force
LAC	Latin American and Caribbean Bureau
LPA	Legislative and Public Affairs
MERS	Mobile Emergency Response Support
MINUSTAH	United Nations Stabilization Mission in Haiti
MITAM	Mission Tasking Matrix
MOA	Memorandums of Agreements
MOH	Ministry of Health
MOU	Memorandums of Understanding
MRC	Medical Reserve Corps
MSF	Medecins sans Frontieres
MSPP	Ministère de la Santé Publique et de la Population
NDMS	National Disaster Medical System
NGO	Non-Governmental Organization
NIPR	Non-classified Internet Protocol Router
NORTHCOM	Northern Command
NRCC	National Response Coordination Center
NSC	National Security Council
NSPD	National Security Presidential Directive
NSS	National Security Staff
NSSS	National Sentinel Site Survey
OASD	Office of the Assistant Secretary of Defense
OCHA	Office for the Coordination of Humanitarian Affairs
OCR	Office of Civilian Response
ODP	Office of Development Partners
OFDA	Office of U.S. Foreign Disaster Assistance
OHD	Office of Homeland Defense
OHDACA	Overseas Humanitarian Disaster and Civic Aid
OMA	Office of Military Assistance
OMB	Office of Management and Budget
OPORD	Operational Orders
ORC	Office of the Response Coordinator
OSD	Office of the Secretary of Defense
OTI	Office of Transition Initiatives
OUR	Operation Unified Response
PACOM	Pacific Command
PAHO	Pan American Health Organization
PDNA	Post Disaster Needs Assessment
PEPFAR	President's Emergency Plan for AIDS Relief
PMCC	Project Management Coordination Cell
PPM	Program, Policy and Management
POTUS	President of the United State
PPL	Policy, Planning and Learning
PRM	Bureau of Population, Refugees, and Migration
PRSP	Poverty Reduction Strategy Papers
PSA	Public Service Announcement
PSO	Partnership Strategy and Stability Operations
PVC	Private and Voluntary Cooperation
RC	Resident Coordinator
RD	Response Director
RINAH	Rapid Interagency Needs Assessment in Haiti
RM	Resource Management
RMT	Response Management Team
RUIF	Ready-to-use Infant formula
S/CRS	Office of the Coordinator for Reconstruction and Stabilization
SAM	Severe Acute Malnutrition
SIPR	Secret Internet Protocol Router
SMS	Short Messaging Service
SO/LIC	Special Operations and Low Intensity Conflict
SOCOM	Special Operations Command
SOUTHCOM	Southern Command
SRSG	Special Representative for the Secretary General
State/F	Foreign Assistance Office
TF	Task Force
TRANSCOM	Transportation Command
TSA	Transportation Security Administration
UN	United Nations
UNDACUN	Disaster Assessment and Coordination Team
UNICEF	United Nations Children Fund
USAID	United States Agency for International Development
USAID/DR	USAID/Dominican Republic
USAR	Urban Search and Rescue
USCG	United States Coast Guard
USCIS	U.S. Citizen and Immigration Service
USDA	Department of Agriculture
USG	United States Government
USGS	U.S. Geological Survey
USUN	United States Mission to the United Nations
VA	Veterans Affairs
VfP	Volunteers for Prosperity
VOCO	Verbal Commands
VTC	Video Teleconference Calls
WASH	Water and Sanitation
WFP	World Food Programme
WHA	Western Hemisphere Bureau
WHO	World Health Organization

10.2 Key Informants

Prefix	Last Name	First Name	Organization
USAID			
	Beers	Mia	OFDA/DART
	Brause	Jon	DCHA
	Brineman	Elena	OMA
	Callaghan	Tim	OFDA/DART
	Chan	Anthony	USAID/Haiti
	Chan	Carol	OFDA
	Cohen	Harold	GC
	Dei	Carleene	USAID/Haiti
	Drummond	Corrie	USAID/Haiti
	Dworken	Jonathan	FFP
	Fleming	James	OFDA
	Fox	Elizabeth	GH
	Jenkins	Rob	OTI
Amb.	Lucke	Lew	USAID/Haiti/ORC
	Miles	Aaron	HTT
	Milligan	Chris	USAID/Haiti/ORC
	O'Neill	Maura	AID
	Osterman	Allison	OFDA/DART
	Porter	Russell	HTT
	Reichle	Susan	DCHA
	Rosser	Melissa	HTT
Dr.	Shah	Rajiv	AID
	Sink	Amy	OFDA/DART
	Turner	Karen	ODP
	Waldman	Ron	USAID/Haiti/ORC
	Ward	Chris	USAID/Haiti/ORC
	Ward	Mark	OFDA
	Waskin	Leon	USAID/Haiti/ORC
DOS			
	Angelic	Young	Office of the Director of U.S. Foreign Assistance
	Archer	Merrie	S/CRS
	Barks-Ruggles	Erica	USUN
	Brigety	Ruben	PRM
	Kennedy	Patrick	DOS
	Kranstover	Peter	S/CRS
	Lindwall	David	U.S. Embassy Haiti
	Lynch	Paula	Office of the Director of U.S. Foreign Assistance
Amb.	Merten	Kenneth	U.S. Embassy, Haiti
	Mills	Cheryl	DOS
	Mengetti	Anita	Office of the Director of U.S. Foreign Assistance
	Reynoso	Julissa	DOS
	Rowland	George	Office of the Director of U.S. Foreign Assistance
Amb.	Smith	Dan	DOS
	Tuma	Carol	S/CRS
	Zareski	Karen	S/ES-O

Prefix	Last Name	First Name	Organization
DOD			
CAPT	Abbott	Spencer	USAID
Ms.	Alvirez	Shelly	SOUTHCOM, J5
Mr.	Bryars	Joseph	SOUTHCOM
CDR	Campbell	Jim	JECC
Mr.	Cheadle	Bruce	SOUTHCOM, J9
COL	Cintron	Norberto	SOUTHCOM
Mr.	Clark	W.I.	SOUTHCOM, J7
Mr.	Dahlgren	Kirk	SOUTHCOM, J9
COL	Dewhurst	Mark	JECC
COL	Drew	Rodger	SOUTHCOM, Office of the Staff Judge Advocate
HON	Flournoy	Michele	OSD
GEN	Fraser	Douglas	SOUTHCOM
COL	Gehler	Christopher	SOUTHCOM, J3
Ms.	Gurwith	Niki	OSD, DSCA
Ms.	Halvorsen	Diane	DSCA
Ms.	Hancock	Michelle	SOUTHCOM,Surgeon's Office
Ms.	Hanlon	Melissa	OSD SO/LIC&IC
Dr.	Hannan	Robert	SOUTHCOM
Mr.	Harvey	Todd	SOUTHCOM, J9
Mr.	Hulslander	Robert	JCOA
COL	Hurley		SOUTHCOM
BG	Jamieson	Dash	SOUTHCOM, J2
MAJ	Johnson	Dani	JPACE
Mr.	Jones	Gregg	OSD HD&ASA
LTG	Keen	Kenneth H.	SOUTHCOM
Mr.	Kirpes	Mike	OSD HD&ASA
CDR	Klein	Bob	OSD, SO/LIC
Ms.	Legates	Kate	OFDA
CDR	Loundermon	Christoper	JPACE
Mr.	Marvill		SOUTHCOM
MAJ	Milstrey		SOUTHCOM, Surgeon's Office
Ms.	Music	Francesca	OASD HA&ASA
CDR	Nobrega	Norman	SOUTHCOM, J9
MAJ	Pascall	Patrick	DoD - Civil Affairs
COL	Perez	Angel	SOUTHCOM, J5
CDR	Pollitt	Ian	JECC
Mr.	Puls	Keith	SOUTHCOM, Office of the Staff Judge Advocate
Dr.	Reeves	James	OSD SO/LIC&IC
Ms.	Richardson	Ashley	OSD HD&ASA
COL	Riedler	Kevin	SOUTHCOM, J5
MAJ	Ross	Betsy	SOUTHCOM
Ms.	Rutledge	Lynda	SOUTHCOM, J8
COL	Ryan	Tim	JCOA
COL.	Salmon		SOUTHCOM, J3
Ms.	Samson	Lisa	SOUTHCOM, J9
Mr.	Saumur	Dan	SOUTHCOM, Office of the Staff Judge Advocate

Prefix	Last Name	First Name	Organization
Mr.	Schafer	Todd	SOUTHCOM, Senior Executive Service
Dr.	Schear	James	OSD
CPT	Senft	Michael	JCSE
COL	Shun	Ronald	JFCOM
LTC	Smith	Russel	JCSE
Mr.	Staley	Kevin	SOUTHCOM, J7
LTC	Stevens	Josh	JTF
COL	Toney	Kimberely	SOUTHCOM, J1
CPT	Townsend	John	SOUTHCOM, J5
Mr.	Trigilio	John	OSD SO/LIC&IC
CPT	Trinidad	Frank	JCSE
Amb.	Trivelli	Paul	SOUTHCOM
COL	Uyehate		SOUTHCOM, J8
MAJ	Vitor	Bruce	SOUTHCOM, J5
COL	Vohr	J. Alex	SOUTHCOM, J4
	Wilson	Thomas	JCSE
ADM	Winnefeld	James	NORTHCOM
COL	Wolff	James	DOD - Civil Affairs
DHS			
	Byrne	Michael	FEMA
	Fugate	Craig	FEMA
	Hall	Mike	FEMA
	Melsek	Rodney	FEMA
	Slaten	Andrew	FEMA
HHS			
	Cosgrove	Sandra	HHS
	Gerber	Michael	CDC
	Koch	Michala	Office of the Assistant Secretary for Preparedness and Response
	Minson	Matthew	HHS
Dr.	Yeskey	Kevin	Office of the Assistant Secretary for Preparedness and Response
NSC			
	Restrepo	Daniel	Deputies Committee
	Smith	Gayle	Deputies Committee
UN			
	Bevan	John	MINUSTAH
	Buescher	Gabrielle	UNICEF
	Dahrendorf	Nicola	MINUSTAH
	Gilbert	Shayne	MINUSTAH
	Griekspoor	Andre	WHO
	Huck	Catherine	OCHA
	Mercado	Doug	USAID-UN mission
	Naidoo	Jordan	UNICEF
	Nandy	Robin	UNICEF
	Pires	Clara	MINUSTAH
	Rosendahl	Heiner	MINUSTAH
	Segaar	Derk	OCHA
	Suzuki	Ayaka	MINUSTAH

Prefix	Last Name	First Name	Organization
	Thiry	Benoit	WFP
	Van Alphen	Dana	PAHO
GOH			
	Bien-Aime	Paul Antoine	Ministry of Interior
	Boutroue	Joel	Office of the Prime Minister
	Brun	Gerald	Presidential Commission on Recovery and Reconstruction
	Chancy	Michel	Ministry of Agriculture
	Clermont	Charles	Presidential Commission on Recovery and Reconstruction
	Etienne	Wilston	Golder Construction Services
Dr.	Henry	Ariel	Ministry of Health
	Jean	Yves-Robert	Ministry of Planning and External Cooperation
Ms.	Jean-Baptist	Alta	Ministry of Interior, Department of Civil Protection
Dr.	Lassegue	Alix	Ministry of Health
	Muscadin	Jessie	State Secretary for Integration of Handicapped
	Pean	Michel	State Secretary for Integration of Handicapped
	Petit	Edwige	Ministry of Public Works - Municipal Solid Waste
	Remarais	Ludner	Ministry of Environment
	Surena	Claude	Ministry of Health
NGOs			
	Campbell	Scott	CRS
	D'Harnocourt	Emmanual	IRC
	DiFrancesca	Jim	Project Concern
	Donahue	Joseph	iMMAP
	Finney	Elizabeth	MSF International
	Garfield	Richard	Columbia University
	Lyon	Evan	Partners in Health
	Montpetit	Audree	CARE
	Poteat	Linda	InterAction
	Purdin	Susan	IRC
	Scott	Ivan	OXFAM GB and ALNAP Chair
	Wilde	Alberto	CHF Int'l
	Zissman	Marc	MIT Lincoln Laboratory
Donors			
	Abrantes	Alexander	World Bank
	Berrendorf	Damien	ECHO
	Brouant	Olivier	ECHO
	Conlay	Tony	DFID
	Ghesquire	Francis	World Bank

10.3 Documents Reviewed

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10.4 International Response Framework (IRF) Concept

The need for a new response framework for international disasters ("IRF") to coordinate multiple U.S. Government agencies responding to a global catastrophe was widely discussed at the Haiti Lessons Learned workshop and during interviews. There is general agreement that the domestic National Response Framework (NRF) (http://www.fema.gov/emergency/nrf/) method and structure could be used to create an IRF, but there are differing opinions as to the final structure, scope, and roles. Areas of general agreement include:

- The NRF is simply a model, not a template. There will be many differences in the final structure of an IRF;
- An IRF needs to be "all-hazards"-based and scalable to differently sized events;
- The full-scale IRF will rarely be used, only for a "whole of government" response, but the structure should be scalable across all levels and types of events;
- An IRF must take into account the capacities of the host government to manage the response (i.e. the U.S. is not in charge);
- An IRF must take into account the role and capacities of the UN agencies and should attempt to mirror the UN cluster system to ensure integration during international responses; and
- The process to create an IRF must incorporate all potential agencies and be driven by experienced disaster responders (USAID/OFDA).

The key questions regarding the IRF that need to be resolved are:

- What will be the structure of this organization?
- How will the IRF be developed?
- When and how will the IRF be implemented?
- Who will lead the management of the response? The reconstruction?

The structure of an IRF

The National Response framework (NRF) that evolved from the National Response Plan after 9/11 and Katrina is a useful model for a possible IRF. However, it should not be considered a template, for there are a great many differences between global and domestic responses. As stated by FEMA: "The National Response Framework is a guide that details how the Nation conducts all-hazards response–from the smallest incident to the largest catastrophe. The Framework identifies the key response principles, as well as the roles and structures that organize national response. It describes how communities, States, the Federal Government and private sector and nongovernmental partners apply these principles for a coordinated, effective national response. In addition, it describes special circumstances where the Federal Government exercises a larger role, including incidents where Federal interests are involved and catastrophic incidents where a State would require significant support. It lays the groundwork for first responders, decision-makers and supporting entities to provide a unified national response." Applied globally, this general concept can be used to create an IRF.

In the NRF, there are five key principles of operation that constitute national response doctrine:

- Engaged partnerships;
- Tiered response;
- Scalable, flexible, and adaptable operational capabilities;
- Unity of effort through unified command; and
- Readiness to act.

The key points of the NRF are "scalability" and a hierarchical leadership framework ("unified command,") with a single agency in charge of the overall management. The NRF is scalable and can expand rapidly from a small team organizing search and rescue to a widespread, "whole of government" response, based on the needs identified by the state governor and FEMA leadership. A unified command requires that reporting structures are pre-established and formal, with ultimate operational authority resting with the Incident Commander. In the NRF, the specific tasks necessary for a complete response are described in the "Emergency Support Functions" (ESFs). Each ESF is led by a single government agency that reports up through the Incident Command structure. There are 15 ESFs, including "Health," led by HHS, and "Transportation," led by the DOT. When using so many agencies, there is a need to have common terminology, stages, and language for the response.

In an IRF, these support functions could be developed from the UN "clusters" to better integrate operations into the overall response structure. The current global response to disasters is framed around the UN "cluster" system. Each cluster is task-specific (water-sanitation or shelter, etc.) and led by a pre-

designated UN agency (e.g. the WHO leads the health cluster). The cluster system has been less than successful due to the mostly volunteer nature of participation and no direct reporting responsibilities. OCHA is designated as the lead of the cluster system, although it acts at the behest of the host government. Any U.S. Government disaster response must function under the UN system, with ultimate responsibility and control left to the host government. The Haiti earthquake response, with the loss of both Haitian and UN leadership, may never again be replicated, and our management structure must integrate with the global response structure. This will require interface between the U.S. management structure, or IRF, and the UN cluster system. The effectiveness of the cluster system may vary in responses, but the application of the IRF will remain supportive of the clusters and consistent throughout the relief efforts. Again, it is USAID/OFDA that has the greatest experience and expertise in this area.

The Development of the IRF

The development of an IRF should be a collaborative process, with input from all the agencies included in the structure. The most basic requirements are a well-designed management hierarchy; an understanding of the resources and roles of different federal agencies; and memoranda of agreement to specify the resources, roles, and reporting. The writing of the framework should be led by a single agency – USAID – with technical assistance on the process from FEMA staff that helped write the NRF.

It will be necessary to have a high level of involvement from many agencies to work out the roles and relationships within the framework. In order to give sufficient political weight to encourage intra-agency collaboration, a National Security Presidential Directive regarding the development of the Framework, with USAID as the lead, should be written. Similar directives were used for domestic preparedness initiatives with great success.

The Implementation of the IRF

The need for an IRF-based response will be determined by the planned role and scope of the U.S. Government response to a specific event. If the Framework is created to be scalable and flexible, then it can be used as the management structure for all international responses. The OFDA DART system alone, or with one or two additional partners, is sufficient for most foreign responses and already works well in collaboration with the UN-based response that relies heavily on NGOs and contractors to provide services. It is the catastrophic events that occur every two to five years where a more robust U.S. Government response is required. This may also be true for significant events that occur in politically sensitive areas, or in the Western Hemisphere, particularly in countries with weak central governments. The use of the full-scale IRF structure will clearly be necessary for any "whole of government" response in the future.

When a larger response is needed, additional partners can be called in to fill the specific additional tasks, for which they have received training and have existing MOAs. The repetitive use of the framework allows for a continuous, low-grade testing and improvement. The decision to expand to a large-scale IRF is political and will be based on many factors. These decisions should simply be a matter of adding further functions and agencies to the response as needs are determined.
Leading the management of the response

Almost all parties interviewed during the study agreed that USAID should remain the operational lead in the U.S. Government response to international disasters. Other agencies were felt to be too political, or too sensitive, or lacking of a global presence or experience. The strategic lead will remain with the local U.S. Embassy, or higher Washington levels for catastrophes and sensitive events. The most compelling reason for this is that USAID/OFDA will continue to respond to almost all foreign disasters and, therefore, will maintain the greatest expertise. Also, USAID has the broadest global experience and systems within many countries to support their response, as well as long experience working with NGOs and the UN. Finally, there is the "humanitarian imperative" that drives global disaster response that demands neutrality, impartiality, and no politicization from the responding organizations. OFDA is recognized by international agencies and the UN as meeting these requirements. As the response moves from relief to long-term programs, USAID should continue to lead, but with strong support from the DOS and S/CRS, particularly with regards to political stability initiatives.

USAID faces many constraints in being the lead agency for catastrophes and a "whole of government" response: (1) the lack of political standing to manage Department-level response; (2) relative lack of management experience for a "whole of government" response; and (3) staff size limitations.

Political Constraints

Having OFDA staff, or even the USAID Administrator, manage a "whole of government" response is made more difficult by their relatively low political level. This problem could be solved by a number of solutions. The simplest is that for operational management of most responses, high political standing is not necessary, as the level of political involvement is minimal. The use of an IRF also helps reduce conflicts if it is written so that when additional agencies are involved in the response, they have specific roles, responsibilities, and reporting that are clearly delineated in the structure and spelled out in advance by MOAs and MOUs, with clear lines of reporting up through the Incident Commander. Finally, for "whole of government" responses, the Incident Commander could report to the President through a committee headed by the NSC. This committee would set policy to direct response, all of which should pass through the Incident Commander and not to individual departments or agencies.

Management Constraints

The DART/RMT structure generally coordinates a limited U.S. Government response within the greater UN response for foreign disasters. They do not lead large, multi-agency activities. The problem with the higher level of management requirements will be partially solved by the creation of a more formal management structure (the IRF), but further resources, personnel, training, exercising, and experience will be needed for such a complex organization.

Size Constraints

OFDA, and even USAID, are acknowledged internally and externally to be relatively small organizations, with OFDA having fewer than 300 staff worldwide. There are existing pools of contractors that the agency can pull from to augment their response staff, but this is a small group of approximately 60 individuals whose availability is limited. The limited available staff led to extremely difficult working conditions and a rapid turnover of staff that received negative comments, especially from the UN and NGOs. It is difficult to pull staff from other U.S. Government agencies because of work commitments. The CRC had very limited success in rapidly providing additional staff for the response.

In order to meet the needs of a scalable IRF, the USAID/OFDA DART needs to staff the expanded organizational framework for catastrophic disaster response. The expansion should come from increasing the pool of experts available to directly assist with the RMT/DART and also from structuring the IRF in a modular manner to allow specific functions to be delivered by other U.S. Government agencies.

The personnel to augment the RMT/DART can be produced by expanding the pool of available contractors and/or by working with other organizations with disaster expertise, such as NGOs, academic institutions, and possibly even state disaster agencies. Another pool to augment these resources would be retired government and military personnel.

Ideally, the IRF structure will be "plug-and-play;" that is, specific tasks that can be met by specific agencies will be identified. Interagency agreements (IAAs) will then be created to describe the tasks, the requirements to meet them, and the responsibilities of both the requesting (USAID) and fulfilling agencies. These task-specific roles can be as small as for additional communications personnel or as large as requesting another agency to lead an entire branch, or "cluster," of the IRF. The key is to have the relationship defined in advance.

Recommendations

An IRF should be developed and must use a unified command; designate roles; be scalable, flexible, and adaptable; and use pre-existing agreements between agencies regarding resources, communications, reporting, and management.

1. USAID should continue to lead foreign disaster response.
2. A National Security Presidential Directive should be issued that makes USAID the lead on a collaborative process for the development of an IRF.
3. The USAID/OFDA DART should create an expanded organizational framework for catastrophic disaster response to increase the number of people available for existing positions and increase the RMT/DART positions to staff critical positions and share the workload. This expanded team framework should be flexible, scalable, and adaptable, like the NRF.
4. Political structures need to be created that compliment the Unified Command and give the response leadership the necessary support to manage across agencies.

10.5 Description of the Roles of the GOH

The Executive Branch: President Preval and Prime Minister Bellerive

The President of Haiti is the head of state elected directly by popular election. The Prime Minister acts as head of Government and is appointed by the President, chosen from the majority party in the National Assembly.[121] Executive power is exercised by the President and Prime Minister, who together constitute the Government.

Together, the President and Prime Minister led the Haitian Government's response at both the policy and operational level. They were responsible for making all major decisions related to the rescue and relief phase, as well as the transition to recovery and reconstruction. They played a key role in establishing the initial response architecture that was formed to manage the response for the Government in coordination with the international community. By 15 January, they established six presidential commissions which comprised key areas of the response; health, food, water, reconstruction, fuel and energy, and temporary shelter. These commissions were led by government officials or Haitian civilians working as volunteers. As the humanitarian needs evolved and grew more complex, the President and Prime Minister worked directly with the OCHA to establish a structure to coordinate political, operational, and tactical actions necessary to implement an effective response and plan strategically for transition from relief to recovery. This structure is described in detail under Section 10.6, OCHA.

Ministry of Interior

The Ministry of Interior is responsible for managing Haiti's domestic relief, national security, and immigration issues. In past disasters, the Ministry assisted in directing the response and aided relief efforts by collecting data and building infrastructure.[122] Due to the magnitude of the 12 January 2010 earthquake, the Ministry of Interior was not held responsible for controlling the relief efforts. Rather, the President and Prime Minister led the Government of Haiti response effort. The role of the Ministry of Interior was to assist in the coordination effort between the Government of Haiti, foreign governments, the UN, and NGOs.

Critical elements of the Ministry of Interior were destroyed or sustained heavy losses in terms of material and human resources. The National Disaster Risk Management System (NDRMS) and the Port-au-Prince fire station were seriously damaged. The buildings of the Ministry of the Interior, which housed the Emergency Operations Centre and the Direction de la Protection Civile (DPC), were destroyed, and many Government vehicles were rendered unusable.[123]

Ministry of Agriculture

The primary role of the Ministry of Agriculture during the six-month period following the earthquake was to coordinate and plan the food aid distribution with the WFP and USAID's Office of Food for Peace. The Ministry also cooperated with the U.S. military, MINUSTAH, and NGOs to ensure proper coordination. The Ministry established local coordination committees at the municipal level with mayors from each of the areas where food distribution sites would be located. This coordination was accomplished for the Government under the auspices of the Presidential Commission on Food, which was chaired by the Secretary of State at the Ministry of Agriculture. Staff from this apparatus attended the cluster meetings on food and water.

Ministry of Health

The Ministry of Health's response to the earthquake was led by the Presidential Commission on Health, which was established on 15 January. Through the cluster on health, the commission coordinated with the HHS, USAID, PAHO, and NGOs in the following areas: immunization; coordination of the pharmaceutical supply chain through the PROMESS system; and establishment of epidemiological surveillance through a sentinel system. In April 2010, the Commission released an interim transition plan for health. It established a registration system for NGOs so they could be accounted for and encouraged to work under the cluster system. It also established medical networks to coordinate service coverage, including a minimum package of services for the new IDP camps through mobile and fixed points of care.

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[121] CIA Factbook; Haiti. https://www.cia.gov/library/publications/the-world-factbook/geos/ha.html. Accessed 3 September 2010.

[122] Schaaf, Brian. "Taking Stock of the Damage After Ike." Haiti Innovation. September 11, 2008. Available at: http://www.haitiinnovation.org/en/2008/09/12/taking-stock-damage-after-ike. Accessed on 3 September 2010.

[123] Inter-Agency Standing Committee. 2010. Response to the Humanitarian Crisis in Haiti: Following the 12 January 2010 Earthquake.

Ministry of Environment

As a cross-cutting agency, The Ministry of Environment works closely with other GOH Ministries, such as Health and Public Works. The Ministry of Environment's immediate focus of attention following the earthquake was on the disposal of human remains and the mitigation of dust produced by the massive destruction that occurred when buildings collapsed. After the immediate response efforts to remove bodies, the Ministry began to coordinate with agencies implementing cash-for-work programs, particularly in the areas of flood mitigation, waterway management, and road improvement. These activities included strengthening riverbanks, dredging river beds to remove sediments, removing debris from drainage canals, and improving roads to be more resistant to landslides. A key priority for the Ministry of Environment during the later period of the response has been to locate suitable sites for rubble, which can be crushed and re-used for the reconstruction process.

Ministry of Planning and External Cooperation

The Ministry of Planning and External Cooperation's mandate is two-fold: national development planning and managing international cooperation. The Ministry coordinated with USAID, the UN, and other multilateral donors to develop the Plan of Action for the Reconstruction and Development of Haiti in March in preparation for the international donor's conference on 31 March 2010. As a result of the conference, the Interim Haiti Reconstruction Commission (IHRC) was established in April and located on the grounds of the Ministry of Planning and External Cooperation. The aim is for the two institutions to coordinate plans for the re-development of Haiti.

10.6 Description of the Roles of the UN Agencies

MINUSTAH

MINUSTAH has been present in Haiti since 2004, and prior to the earthquake, included a military component of up to 7,803 troops, 2,136 UN police, 464 international civilian staff, 1,239 local civilian staff, and 207 UN Volunteers.[124] The capacity of MINUSTAH to respond to the earthquake was severely affected by the large-scale loss of life within its own institution, with over 100 staff killed and many more injured. MINUSTAH's original mandate was to restore a secure and stable environment, promote the political process, to strengthen Haiti's Government institutions and rule of law structures, as well as to promote and protect human rights. This mission was extended by the UN Security Council on 19 January to "increase the overall force levels…to support the immediate recovery, reconstruction and stability efforts."[125] At this point, MINUSTAH made its logistics and security resources available to the humanitarian community, which assisted humanitarian activities. The human rights component of MINUSTAH also engaged in the earthquake response operation, specifically focusing on protection concerns and using established contacts with local authorities and civil society networks to help identify beneficiaries and engage with local actors. A pivotal accomplishment of MINUSTAH was the creation of the Joint Operating Tasking Center (JOTC) in cooperation with OCHA and the Government of Haiti. The JOTC was key to ensuring the proper distribution of humanitarian assistance material through a coordination mechanism that worked directly with the cluster system.

OCHA

OCHA's chief role in the response was coordination of humanitarian action between the Government of Haiti and international community. The cluster system was re-activated on 15 January, with the response operation organized through 12 clusters and two sub-clusters.[126] To the extent possible, the Government appointed Ministry counterparts to co-lead each cluster and, by May, had intensified its involvement with clusters in response planning and implementation at all levels. Within the first weeks following the earthquake, the OCHA office was strengthened to provide dedicated support to the humanitarian community on inter-cluster coordination, information management and analysis, mapping, civil-military liaison, donor coordination, advocacy, and media outreach.

OCHA also mobilized a United Nations Disaster Assessment and Coordination team immediately following the earthquake, with initial members arriving 36 hours later. UNDAC staff conducted rapid needs assessments to assemble the flash appeal, which was accomplished in three days for a total request of $700 million. UNDAC team members also worked with the U.S. military to establish rules for landing slot allocation at the Port-au-Prince airport, apportioning a minimum of one-third of all incoming flights for humanitarian assistance during the first days of the response. Finally, the UNDAC team also coordinated the search and rescue teams that arrived from 67 countries.

PAHO/WHO

PAHO acted as the health cluster lead in Haiti. As such, it coordinated the health response among 396 NGOs, the UN, USAID/OFDA, CDC, various militaries, and the Government of Haiti's Presidential Commission on Health. The health cluster was too large, so it was divided into sub-clusters on hospital needs, medical team and service coordination, medical supply chain, medical logistics, health surveys and surveillance, and tasking of health activities to NGOs for specific geographic regions.

UNDP

The director of UNDP served as the Resident Coordinator (RC) for all UN operations in Haiti prior to the earthquake. Following the earthquake, the RC was appointed as the Humanitarian Coordinator for the UN and led the HCT.

WFP

The WFP led the food cluster and was responsible for organizing the food distribution program in Haiti. WFP worked closely with the Presidential Commission on Food, MINUSTAH, and the U.S. military to plan the food distribution process and determine distribution sites in Port-au-Prince and other affected areas. WFP conducted interviews with rice importers and market surveys to determine their strategy on food aid to avoid any disruption of the local economy.

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[124] Inter-Agency Standing Committee. 2010. *Response to the Humanitarian Crisis in Haiti: Following the 12 January 2010 Earthquake.*

[125] America. 2010. "U.N. Security Council Resolution 1908 on Haiti" *American.gov Website.* Modified January 19, 2010. http://www.america.gov/st/texttrans-english/2010/January/20100119153403eaifas0.1554028.html. Accessed on 11 September 2010.

[126] OneResponse. 2010. http://oneresponse.info/Disasters/Haiti/Pages/Clusters.aspx. Accessed on 27 August 2010.

10.7 Scope of Work

Scope of Work

Haiti Earthquake Response Interagency Coordination
After Action and Lessons Learned
April 1, 2010

In the days immediately following the Haiti Earthquake of January 12, 2010, the President tasked the USAID Administrator with leading the overall USG Haiti Earthquake response efforts. Under the overall effort several task forces, sub-task forces and working groups were established. A Haiti Earthquake Response Taskforce was established under USAID leadership. It was coordinated by the DCHA Acting Assistant Administrator and the Deputy Assistant Administrator from USAID's Bureau for Latin America and the Caribbean.

This response was unprecedented in several respects. The geographic proximity of Haiti to the United States, the special historical relationship between Haiti and the U.S., the degree of devastation and loss of life, the institutional impact on the GOH, UN agencies and NGOs on the ground, the number of interagency partners, the broad use of the Standby Civilian Response Corp (CRC) to respond to the crisis and the close coordination between USAID and the military all define this as a unique event from which valuable lessons may nevertheless be drawn.

Because of USAID's leadership role for coordination of the USG-wide effort, it was deemed appropriate that USAID also lead a USG-wide effort to capture lessons learned from the experience. DCHA/AA tasked the Office of Military Affairs (OMA) to work with others to develop an initial concept for organizing the effort to compile lessons learned from the earthquake response stretching from the actual event on January 12th, 2010 through June 1st, 2010. The results of this activity will serve to inform future disaster responses, interagency planning processes and dialogue and future deployments of the CRC and will be of particular use in informing the Quadrennial Development and Diplomacy Review (QDDR) currently underway.

USAID proposes to engage the services of a team of experts or firm specializing in after action and lessons learned activities.

Activity to be examined

The subject of the present study is the U.S. Government and international community's response to the deadly January 12, 2010 earthquake near Léogâne, Haiti from the event through June 1st, 2010. There are three principal focuses to this effort, each with corresponding key questions:

1. *Internal U.S. Government coordination:* How well did USG agencies (including the Department of Defense) coordinate with each other in providing policy guidance and in implementing the relief response?

2. *Partner coordination:* How well did the USG elements coordinate with the GOH, UN family of agencies, the NGO community and other donors?

3. *Response effectiveness:* How well did the response meet the needs of the Haitian people? Was it conducted in accordance with international standards?

Disasters of the magnitude of the Haiti Earthquake normally require two parallel lines of work. The first is the actual response to the disaster and its immediate effect on both the people and institutions of a country, which includes the immediate response, relief and recovery phases. The second line of work, which must start within days of the first, entails the planning for the post-disaster stabilization, reconstruction and development of the country. The second generally includes the development of a request for supplemental assistance funds to help replace the emergency assistance resources used in the disaster and to provide the resources for moving from relief to recovery and reconstruction of the country.

The After Action Review effort should yield two reports: (1) an interim report approximately one month after the study begins that identifies major findings on the response and relief phases and the parallel planning process for supplemental resources and for stabilization, reconstruction and eventual development of Haiti; and (2) a final report by August 1, 2010 that looks at the continuum of the disaster response, relief and recovery phases and the parallel planning for supplemental resources and stabilization and reconstruction during this period. In both cases the reports will include a separate USAID annex that captures the findings on internal USAID processes, particularly at the tactical level. These USAID annexes will not be part of the final interagency reports, but their content will be drawn on in preparing the interagency report. The purpose is to produce a timely analysis at critical phases of the response — during the initial response, relief and recovery efforts, during the

transitions between those phases and during the transition from the recovery to the stabilization, reconstruction/development phase when the effects of the response, relief and recovery and parallel planning for supplemental resources and stabilization and reconstruction on later reconstruction activities can be more adequately understood. With submission of the final report, the contractor will include major findings and a final set of workable recommendations for consideration by USAID and its USG and other partners.

Background

The interagency response to the January 12, 2010 earthquake in Haiti has required an unprecedented degree of collaboration and integration between disparate branches of the U.S. Government. In particular, the coordination of USAID and the U.S. military was better organized at the policy and operational levels than with other recent responses. In addition this crisis represents one of the first occasions when the Civilian Response Corps, particularly the Standby element of the Civilian Response Corps was broadly used to respond to a crisis. To capture the lessons from this exceptional whole-of-government endeavor, a uniquely whole-of-government approach to collecting, analyzing and incorporating lessons learned is called for.

Purpose

The purpose of this after action and lessons learned activity is to inform USG decision making about how best to organize in response to major humanitarian crises. It may also serve as a timely tool to incorporate lessons and best practices in the continued interagency response and longer term strategy in Haiti.

AAR and LL Organizational Team Structure

The contractor shall work with two small Technical Support Groups: 1) an internal USAID support group made up of representatives from the principal units involved in the response; and 2) a broader interagency support group made up of a representative from each of the other agencies involved in the effort.

These two groups will assist the contractor in accessing the results of agency or unit specific AARs, identifying appropriate people to be interviewed and other internal coordination needed.

Questions to be Addressed

The questions to be addressed are listed below, organized around the key themes of organizational structure and effectiveness, response effectiveness and integration with partner activities, programs and plans. Each question is divided into two parts: a descriptive part, where the objective findings or facts of the effort are to be laid out and an analytic part, where the evaluators are asked to analyze the appropriateness and effectiveness of the effort, draw conclusions or make recommendations about the findings.

Theme 1: Who was involved?

Description

What were the official and de facto roles of the key actors?

- USAID:
  - Administrator
  - DCHA (AA/DAA, AA/DAA staff, OFDA, FFP, OTI, OMA, PPM, OCR, GC)
  - LAC, LPA, GH, EGAT
- National Security Council: Principals' Committee, Deputies Committee and IPC
- Department of State: (Counselor Mills, Deputy Secretary Lew, WHA, State/ S/CRS, Undersecretary for Management)
- NSC
- DOD: (SOUTHCOM, NORTHCOM, JFCOM, SOCOM, OSD, Joint Staff, TRANSCOM)
- HHS
- DHS: (FEMA, Coast Guard)
- U.S. Embassy Haiti
- U.S. Embassy Haiti/Office of the Response Coordinator
- USAID/Haiti
- USAID/DR
- Others (see list provided separately)

Analysis

Were the roles played by each actor appropriate? Did the official and de facto roles coincide?

Theme 2: How was the response organized in Washington?

Description

- How was the response organized in Washington? How was the parallel planning for supplemental resources and longer-term stabilization and reconstruction organized? Who was in charge of the response? Who was in charge of supplemental and stabilization and reconstruction planning? What was the role of the CRC in the Washington based response?

Analysis

Consider the effectiveness of each of the following organizational structures in the response and relief effort or the parallel supplemental and stabilization and reconstruction planning in terms of appropriate integration of efforts and in terms of achieving appropriate results.

- Inter-agency Haiti Task Force
- Response Management Team
- State Department Operations Center
- State IA: Task Forces 1-8
- Haiti Task Team
- Haiti 2020 Strategy Effort
- Joint Staff Crisis Management Element (JS CME)
- OSD Crisis Management

How well did the Washington-based Inter-agency Haiti Task Force/RMT structure work? How well did the Washington-based planning structures for supplemental resources and for longer-term stabilization and reconstruction work? Were the major players adequately represented in decision making in both lines of effort? What worked well and what could be improved? How effective was the CRC in the Washington based response?

Theme 3: How was the response organized in the field?

Description

How was the response organized in the field? Who was in charge? How was the parallel planning for supplemental resources and longer-term stabilization and reconstruction organized? What was the role of the CRC in the field based response?

Analysis

Consider the effectiveness of the U.S. Mission Haiti (U.S. Embassy/ORC USAID/Haiti, DART) and the Joint Task Force-Haiti/HACC in the response and relief effort or the parallel supplemental and stabilization and reconstruction planning efforts in terms of appropriate integration of efforts and in terms of achieving appropriate results. What worked well and what could be improved? Were the major players adequately represented in decision making? How effective was the CRC in the field based response?

Theme 4: Chain of Command, Coordination and Management

Description

What was the overall USG chain of command during the response, relief and recovery phases? What were the USG operational chains of command? How was information communicated between the policy and operational levels? What lines of operation were put forth by the overall response team and by each of the sector response teams? What mechanisms were used to integrate USG efforts?

What was the overall chain of command for planning for supplemental resources and longer –term stabilization and reconstruction? How was information communicated between the policy and operational levels? What mechanisms were used to integrate USG planning efforts for supplemental resources and stabilization and reconstruction?

What was the overall chain of command for the Haitian and international response, relief and recovery efforts? How did the USG chain of command relate to the Haitian and international chains of command in the case of both the response, relief and recovery and in the case of planning for stabilization, reconstruction and longer-term development? How did communications work between USG and partners? With what frequency did principal representatives from the international response and relief community meet?

Analysis

How effective were the USG chains of command during the response, relief and recovery? How well integrated were the

civilian and military chains of command at the operational level (i.e. Haiti Taskforce/RMT and below and COCOM and below)?

How effective was the link and communication between policy decision makers and operational levels? How well did policy decisions guide operational levels? How effective were operational levels at teeing up policy issues for decisions at the policy level? What were some early policy decisions that affected response implementation?

How well did communications work between actors at the operational level, between civilian and military and between Washington and the field? Did the field representatives have access to key information as needed? What factors or processes facilitated or hindered communications at the operational levels? What was effective and what could be improved regarding the 'battle rhythm' of calls and reporting established among the various actors?

How well did policy decisions guide operational planning during the response, relief and recovery? How well was planning integrated across agencies or departments? How well integrated was civilian-military planning? What are the factors that hindered or assisted the effective integration of planning across agencies or implementing units? What factors or processes hindered/assisted effective integration of activities across units or agencies? How did the organizational structures or substructures (i.e. sector working groups) facilitate or complicate coordination, integration and management of the response effort? How effectively did the USG manage and coordinate private donations?

How well did policy decisions guide planning for the supplemental and for longer-term stabilization, reconstruction and development? How well was planning integrated across agencies and departments? What are the factors that hindered or assisted the effective integration of planning efforts across agencies?

How effective was USG coordination with partners? What factors facilitated or hindered effective coordination with partners? How effective were USG and UN international management structures in integrating USG efforts with the contributions of each of the following during the response, relief and recovery:

- Government of Haiti
- UN and UN Cluster System
- Other international or Intergovernmental Organizations
- NGOs and private donors and private sector
- Other bilateral donors

What factors hindered or assisted effective integration? Could greater integration have enhanced the humanitarian impacts and improved the foundation for recovery and reintegration of the affected population?

Did the Haitian Government and Haitian community have the opportunity to participate in the design and implementation of the response, relief or recovery? Did they receive information and have an opportunity to comment back to the implementing agencies? Were there clear linkages and coordination with public and private health and social services in the community?

How well was USG planning synched with Haitian plans for post-disaster reconstruction, stabilization and development? How well was USG planning synched with other donors (intergovernmental, bilateral or private)?

Theme 5: What was quality of the response?

Description

What efforts were taken to provide relief in the principal categories typical of disaster response: food; shelter; health and medical; water and sanitation; and physical security? What steps were taken to ensure this disaster response conformed to international disaster response standards as set forth in the Good Humanitarian Donor Principles, SPHERE, Paris Declaration and similar documents? What steps were taken to ensure the response design and assumptions match the local conditions? To what degree was the response shaped by assessment?

Analysis

Did the response conform to international disaster response standards? If not why not? Were disaster response activities appropriate for the problems identified in the selected target areas? Did appropriate assistance reach affected individuals and communities? To what degree did assessments enhance effectiveness of the response? What changes can be made to improve results, either for this response or subsequent responses?

Theme 6: How well were transitions and handoffs planned for and implemented?

Description

What mechanisms were put in place to ensure smooth transitions between each phase?

Analysis

How effective was planning for each follow-on phase while response, relief and recovery operations were going on? How smoothly were transitions and handoffs implemented between the various phases of the response? How effective was civilian-military planning for transitions? How smoothly and effectively were the handoffs from military to civilian entities implemented? How effective was planning for the transition from response, relief and recovery to stabilization, reconstruction and longer term development? How well did the disaster response, relief and recovery phases set conditions for the follow-on reconstruction program? How effective was planning for a supplemental while response and relief operations were on-going? What were the factors that hindered/assisted effective supplemental request development? How well has USAID at Washington and Mission levels adapted its existing development programs to support the relief, recovery and post-disaster reconstruction effort?

Theme 7: What was routine and what was different?

Description

What were the similarities and differences between the Haiti Earthquake disaster and other major disasters? How did this response differ from the USG response to other major disasters?

Analysis

How did these differences affect the response? How did these differences assist or hinder the effectiveness of the response? How did these differences enhance or detract from the cost effectiveness of the response? Are there any unexpected but important benefits or impacts of the response, relief and recovery effort that should be documented? Are there any negative impacts or unintended consequences of the program that need to be addressed and how?

Theme 8: How well did the Response manage the message, press and legislative relations?

Description

How did the response manage the message, what processes, mechanisms and means were used? How did the response manage the press? How did the response manage legislative relations? In each case what were the mechanisms for managing the message, press and legislative relations across agencies?

Analysis

What factors assisted/hindered effective management of the message? What factors assisted/hindered effective management of the press? What factors assisted/hindered effective management of legislative inquiries and relations? How well was the message coordinated across agencies and implementing units at the policy level and at the operational level? How well did the Response manage legislative relations, interest and inquiries? How well did the Response manage the message and press relations? How effective was planning and implementation of strategic communications?

Theme 9: How well prepared was USAID to lead a USG response to a disaster of the magnitude of the Haiti Earthquake?

Description

In what ways were USAID and other USG organizations prepared to respond to this disaster? How did USAID prepare to lead the USG response in this case? What were the constraints? How have OFDA and/or SOUTHCOM helped prepare the Haitians to respond to disasters?

Analysis

Looking across the USG what were the most helpful standing capabilities applied in the response and why? What impact did these capabilities have on the response? What capabilities were used that were less helpful or effective? What impact did these capabilities have on the response? How effective were prior disaster preparedness efforts in helping the Haitians deal with this disaster? Why were they effective? Why weren't they effective?

Theme 10: How well are we laying the basis for relief, recovery, reconstruction and development continuum?

Description

What did the USG do (is doing) to link recovery/development with disaster response? Was anything done differently this time to strengthen this approach? Since economic and social impacts of natural disasters are greater in developing countries, such as Haiti, what strategic approaches are being used to systematically integrate vulnerability reduction in recovery and development plans? What did we do (are doing) to build local and national capacity and to ensure meaningful participation of affected communities? What did we do (are doing) to ensure flexible, adequate funding for recovery and the long term, including all potential sources such as private-public partnerships? What did we do (are doing) to ensure multilateral collaboration that supports host nation development plans?

Analysis

How well does the current arrangement link relief, recovery and development? How effective is it at prioritizing the reduction of long-term vulnerability? Does it balance local, national and international capacities? Does it establish effective mechanisms for coordinating and set realistic timeframes?

Methods

Because of the breadth and importance of this study, it is designed to be conducted in two phases and to generate two written products—the interim and final reports, as described above.

Substantial after Action Review and Lessons Learned (LL) efforts are already ongoing within various agencies involved with the Haiti response and any umbrella effort should avoid duplicating those processes. The Department of Defense has an extensive LL infrastructure and currently has assigned 23 individuals from across DOD to work exclusively on collecting and compiling LL for the Haiti response. This effort includes a 14-person team from the Joint Center for Operational Analysis (JCOA) which has been deployed to Haiti along with a military historian. DOD is planning a conference at Joint Forces Command in Suffolk, VA on 23-24 March to compile DOD-specific LL. The Office of the Secretary of Defense has offered to co-sponsor a late April LL conference with USAID. OSD defers to USAID as to whether it desires to host the conference; if not, the conference can be hosted at National Defense University.

Elements of USAID, to include OFDA, have already held events to begin to capture after action reviews and LL. Other agencies, such as FEMA and HHS, have also begun to capture LL. USAID, as the lead federal agency for the Haiti earthquake response, can serve as the focal point for compilation of interagency LL. Further, as lead federal agency, USAID has a unique perspective for comment on strategic-level issues regarding the response effort.

The after action and lessons learned activity will draw on the results of completed AARs and a review of the activities of the agencies involved and will rely heavily on qualitative methods including, but not limited to, semi-structured interviews, direct observation, focus groups and secondary data reviews. Additional information for the project will include monitoring on-going relief and recovery activities. Therefore the contractor should seek out the results of these other agency AAR efforts and incorporate them into the results products. Confidential information in the reports will not be attributed to specific individuals. Interview notes will remain the property of the contract team, not USAID.

Only the specific individuals approved in the task order will have input into and will be able to review the technical deliverables under this task order. Macfadden will require the individual working under this task order to agree that they will not share information or work products from the task order with other Macfadden personnel. Involvement of any other Macfadden staff will be limited to management of the task order budget, schedule and administrative support.

In addition, Macfadden acknowledges the statement of work condition that if any of its employees that worked on the Haiti response effort are interviewed as part of the AAR/LL process, a member of the Government interagency technical support group will be part of the interview team.

Deliverables Schedule and Logistics

Deliverables	Description	Delivery Date
1. Submit Interim Findings	Initial report submitted approximately 30 days after the study begins. Participate in interagency lessons learned workshop. Upon completion of field data collection, the Team Leader will draft the interim report listing findings in the form of major themes and preliminary recommendations.	June 15, 2010, unless revised by the COTR through written technical direction.
2. Submit Final Report	Approximately four months after study initiation the Team Leader will meet (in person or virtually) with USAID and IA staff and advisory groups to present findings, lessons learned and recommendations.	September 1, 2010, unless revised by the COTR through written technical direction.

This deliverable schedule may be revised per written technical direction from the COTR.

The activity will be conducted in eight stages:

1. Review Existing Documentation: The review team will conduct a thorough review of existing data and information and the preliminary results of other agency lessons learned efforts. The team leader may decide to consult additional documentation from DOS, DOD, or other sources. The team leader will outline preliminary field visit plans.

2. Refinement of Review Methods: Team leader will work closely with the DCHA staff and key IA partners to hone the review methods and plan the field visits.

3. Field Data Collection: Data collection proceeds. If it is deemed useful to visit the field, this will occur during this period.

4. Submit Interim Report: Initial report submitted approximately one month after the study begins. Participate in interagency lessons learned workshop. The team leader will draft the interim report listing findings in the form of major themes and preliminary recommendations. The interim report will include information gathered from a review of existing data and select interviews of key participants in the Haiti response effort.

5. Refinement of findings: Further discussions with participants, lessons learned interviews. Completion of field data collection.

6. Drafting and review of final report.

7. Submit Final Report: Approximately four months after study initiation. The team leader will meet (in person or virtually) with USAID and IA staff and advisory groups to present findings, lessons learned and recommendations.

8. Final Report Outbriefings: To be scheduled by USAID POC. Provision will be made for outbriefs to interagency partners.

Deliverables and Dissemination Requirements

The **interim report** should contain initial findings, in the form of major themes and preliminary recommendations, to inform the proceedings of the interagency workshop scheduled for the end of April. The report will also lay out the plans for completing the final report. An internal USAID specific annex that examines internal USAID processes, particularly at the tactical level will be submitted with the interim report. This will not be part of the IA report but findings from this examination will be drawn on in compiling the IA report.

The **final report** must be submitted to USAID four months after signing the contract. The final report must contain at least the sections outlined below. Additional sections may be recommended by the review team. The report will include an annex with recommendations for future disaster response structures. A final USAID specific annex that examines specific internal USAID processes, particularly at the tactical level, will

also be included in the deliverables at the time of the final report. This will not be part of the published IA report but findings from this examination will be drawn on in compiling the overall IA report.

1. Executive Summary
2. Introduction
   a. Objectives of AAR and LL effort
   b. Overview of earthquake response from initial response through recovery phase
   c. Overview of parallel planning for supplemental resources and reconstruction
3. Description of the Response
   a. Brief description of interventions in each phase of the response
   b. Brief description of response results
   c. Brief description of parallel planning for supplemental resources and reconstruction
4. Findings
   a. Thematic questions examined
   b. Findings for each of the thematic questions examined
   c. Cross-Cutting Issues
5. Analysis
   a. Analysis of each thematic question
6. Recommendations
   a. Recommendations for each of the thematic questions examined
   b. Recommendations for further institutional strengthening actions
7. Annexes
   a. Activity SOW
   b. Composition of the team
   c. Methods
   d. List of sites visited
   e. List of key informants
   f. References
   g. Indicator Performance Tracking Tables (IPTT)
   h. Survey tools
   i. List of abbreviations

Qualifications

Team Leader: Advanced degree in a social science or equivalent academic preparation; several years' experience in managing and in evaluating donor-funded development and humanitarian response programs in the field (the person should have experience with development assistance and stabilization programs in addition to having experience with disaster relief and humanitarian assistance activities); Haiti or Africa experience helpful; experience with evaluation of large or complex interagency efforts desirable.

Team members: undergraduate degree related to development, political science, economics or a related discipline; familiarity with USAID or other donor processes both in Washington and in the field; strong office and organizational skills.

10.8 Technical Support Group Comments

**The page numbers referenced in the following comments correspond to a draft of this report and therefore may not align with the published text.*

Comments on the "Independent Review of the USG Response to the Haiti Earthquake" by the U.S. Agency for International Development

As the Agency leading the U.S. Government response to the Haiti earthquake, USAID commissioned this independent review of the lessons learned from the Haiti relief effort. The intent was to obtain an independent, fact-based perspective on the U.S. government's performance in a major humanitarian disaster to which many federal agencies contributed.

While USAID commissioned this work and coordinated the process of obtaining input from sister agencies and other stakeholders, this was an independent report and is not formally cleared by USAID or any other agency. We appreciate the opportunity to comment on the findings and recommendations.

(1) Most of the Report's recommendations are reasonable and actionable. Implementing them will substantially improve the U.S. Government's response to similar disasters in the future.

(2) USAID disagrees with the need to create "an interagency committee on global humanitarian crises coordinated by the NSC for "whole of government response situations" (recommendation 3). In USAID's view, the NSC already runs a fully adequate interagency process when a humanitarian crisis occurs. The creation of a new interagency committee would be duplicative of the existing structure and place unnecessary additional demands on the small group of responsible officials. Deputies, for example, already met on a daily basis for the first several weeks of the crisis and regularly for several months after that, while the operational-level Agency representatives on the IPC continued to meet daily throughout the crisis. It is unclear why a separate and additional interagency structure would be more successful or productive. The existing interagency structure did not itself cause any delays. Dealing with the Haiti earthquake was all consuming in the deputies committee from the start and day-to-day policy support was quickly delegated to the level of the IPC.

(3) USAID strongly agrees about the need for "structural strengthening of USAID/OFDA as lead federal agency for international disaster response" (recommendation 1). This is also a key recommendation of the recently completed Quadrennial Review of Diplomacy and Development (QDDR) and USAID is already vigorously pursuing this end.

(4) USAID also very much agrees with the general need for "bridging the divide between diplomatic response and humanitarian relief" (recommendation 2). However, USAID disagrees with the proposal that S/CRS serve as the "bridge between USAID and DOS." As a result of the QDDR,

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USAID is clearly designated as the lead agency for humanitarian crisis and S/CRS is being restructured. This is also consistent with the 1993 Presidential Policy Directive appointing the USAID Administrator as Special Coordinator for International Disaster Assistance.

(5) USAID believes that effectively "strengthening of an international response framework" (recommendation 4) would, in and of itself, accomplish many of the aims of recommendations 2 and 3.

(6) USAID believes that many of the innovative and creative practices for planning and collaboration developed as part of the Haiti relief effort (referenced on page 26) could be pursued and turned into policy, perhaps as part of the proposed "strengthening of an international response framework" (recommendation 4).

(7) USAID also sees a need (as highlighted on page 85) to develop a clearer system for mobilizing and using volunteers and donations as part of an international disaster response.

(8) While "monitoring quality of aid and its impact" can certainly be strengthened (recommendation 6), it is important to note that analysis and assessment of progress and problems, while sometimes difficult, was recognized as a critically important function throughout the relief effort. For example, despite substantial pressure by some participants to distribute more "meals ready to eat," or MREs, in Haiti, USAID continually assessed and reassessed food prices, distribution mechanisms, and the best alternatives for meeting the nutritional needs of Haitians.

(9) There is no doubt that the relief effort was expensive. While we will certainly try to reduce costs in the future, there is little doubt that "the response was successful at rapidly mitigating the impact of the earthquake," saving thousands of lives and alleviating enormous human suffering. Disaster relief is always a difficult undertaking and we do not think that the response in Haiti can be characterized as "inefficient."

(10) At various points in the report, the US Embassy and the USAID Mission are referred to as distinct entities. It is important to note, therefore, that that the USAID Mission is in fact part of the Embassy.

(11) The report could have provided a fuller discussion of why the ORC was set up and the origin of the interagency taskforce. The ORC was originally designed to co-locate with

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the USAID Mission in the US Embassy to lead on the emergency response in Haiti and manage the civilian-military relationship. The DART and OTI were folded under the ORC, while the broader USAID Mission stayed focused on reprogramming the Mission portfolio and on longer-term planning for recovery and reconstruction. In Washington, the Haiti Interagency Taskforce (HIT), located on the 9th floor of the RRB, provided the operational leadership for the interagency. The RMT fell under and was a part of the HIT and its members participated around the clock. Neither the ORC nor the HIT were designed to operate in parallel or to duplicate existing structures. They were not "separate chains of command" (as suggested on page 49 and 104), but were created because the existing structures (USAID Mission and OFDA) were too understaffed and weak to adequately lead and manage the massive interagency response while simultaneously carrying out their more traditional roles of managing and reprogramming the on-going USAID Mission portfolio or, in the case of OFDA, programming, managing and overseeing the use of International Disaster Assistance funds.

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United States Department of
Health & Human Services
Office of the Assistant Secretary for Preparedness and Response (ASPR)

Homeland Security Exercise and Evaluation Program (HSEEP)
Draft After-Action Report (AAR) 2010 Haiti Earthquake Response

Date: 2 February 2011

To: United States Agency for International Development

From: Dr. Nicole Lurie, Assistant Secretary for Preparedness and Response, United States Department of Health and Human Services

Subject: Independent Review of the United States Government Response to the Haiti Earthquake: Findings and Recommendations [1 January 2011 Revision]

We appreciate the efforts of the U.S. Agency for International Development (USAID) in developing this After-Action Review (AAR) of the United States Government (USG) response to the Haiti earthquake that struck near the capital city of Port-au-Prince on 12 January 2010. This After-Action Review provides an overview and analysis of the United States Government (USG) response to the Haiti earthquake. The AAR also proposes a number of recommendations for future USG-wide international disaster response operations.

The HHS comments of the revised USAID AAR dated 1 January 2011 concentrate on two issues: 1) United States Department of Health and Humans Services' (HHS) public health and medical operations during the Haiti earthquake response; and 2) the sustained need for the development and Federal interagency approval of an International Response Framework (IRF).

For the record, on the day the earthquake struck, the HHS Emergency Management Group (EMG) and the National Disaster Medical System (NDMS) were activated to coordinate and provide medical supplies and treatment to survivors in Haiti as part of a larger USG-coordinated response led by the Department of State (DOS). In response to a request from USAID on January 14, 2010, HHS deployed seven teams to provide medical humanitarian assistance, including an Incident Response Coordination Team (IRCT), five Disaster Medical Assistance Teams (DMATs), an International Medical Surgical Response Team (IMSuRT), and a mortuary affairs assessment team. The U.S. Public Health Service also sent officers to support NDMS and Department of Defense (DOD) missions. Four medical equipment caches were also deployed. HHS responders arrived by January 15, 2010, and began caring for earthquake survivors on January 17, 2010. HHS medical personnel in Haiti cared for 31,265 patients through February 25, 2010.

HHS worked in an environment where command and control was complex and in which various elements of response were coordinated by different commands. In particular, HHS worked with DOS and with DOD in fatality management, USAID on patient care, and DHS, DOD, and DOS for repatriation and resettlement.

The AAR's analysis and conclusions would have benefited from a comprehensive description of the entire HHS roles in the public health and medical response. Specifically, in addition to the health response in Haiti, there was a domestic response that included assisting American citizens, orphans, and adoptees evacuated from Haiti, providing definitive care for Haitians evacuated by NDMS, and setting up a Family Assistance Center to assist in the identification of human remains for American citizens. These efforts were an integral part of the response.

HHS established two active Federal Coordinating Centers (FCCs) in Georgia and Florida, to assist with patients evacuated to the U.S. This required close coordination with interagency partners: the Department of Veterans Affairs, DHS, and DOD, as well as with the State and local health departments. The same complexity of interaction was required by the HHS repatriation efforts.

Specific additional comments about the revised AAR include:

- The Overarching Recommendations section includes the "Strengthening of an International Response Framework" as one of seven key recommendations stemming from the after-action analysis. We wholeheartedly agree with this recommendation. We note that in, this section and a subsequent section entitled "IRF Concept" (Section 10.4) the need for an International Response Framework, much like the domestic National Response Framework used to guide domestic response is proposed. HHS, since 2008, has been working with the interagency partners on a Public Health and Medical International Response Framework which can serve as the basis for the proposed IRF recommendation, particularly since Federal interagency efforts have contributed to development of the Framework since its inception.
- In Section 4.1, Figure 10 entitled "Whole of Government" Structure shows the Centers for Disease Control and Prevention (CDC) as the only HHS component included in the cadre of Federal agencies that normally lead USG international disaster response. Three additional HHS offices

have major international responsibilities. The Office of Global Health Affairs (OGHA), the Administration for Children and Families (ACF) and the Office of the Assistant Secretary for Preparedness and Response (ASPR) are integral to the leadership of the HHS role in international disaster response. These offices regularly support global health initiatives, International Health Regulations (IHRs), and play a role in international assistance. Additionally, Figure 10 should reference the Office of the Surgeon General (OSG) and the Medical Reserve Corps (MRC) as offices under the Office of the Assistant Secretary for Health (OASH).

- In Section 4.6, the HHS public health and medical roles and resources relied upon during the Haiti earthquake response were not clearly illustrated (paragraph 2, page 81). The medical and public health components should be introduced separately so as to avoid confusion with respect to the specific roles played by the CDC, NDMS, the U.S. Public Health Service (USPHS), Administration for Children and Families (ACF), and other HHS assets. Without clear description of the respective roles played by HHS assets, the report naturally does not discuss the extensive coordination that occurred between the USPHS, CDC, NDMS and ACF, and assets external to HHS, including DOD. Furthermore, the report neglects to mention the operations conducted by the Haiti Health Facilities Working Group, which was co-led by the HHS Center for Faith-Based and Neighborhood Partnerships and OGHA.
- Section 4.6 requires a detailed description of the command and control elements associated with HHS during the Haiti earthquake response. Specifically, there is a need to describe how DOS initiated and oversaw the American citizens (AMCITS) fatality management mission, with HHS and DOD tasked with joint execution of this mission.
- Additionally, section 4.6 only superficially addresses the challenges associated with the movement and evacuation of patients, repatriated citizens, and orphans. The statement below does not account for the complexities of the system and the inference is likely incorrect:

  "This [delays in providing medical care in the U.S.]could have been avoided if HHS was able to activate the patient movement and definitive care components of NDMS sooner and better communication existed within the interagency to identify responsibilities"

  - The NDMS patient movement plan and Definitive Care component are activated in response to a State request for assistance. During the Haiti earthquake response, when State-level requests were

made, the patient movement plan and Definitive Care components were activated. The USAID AAR discussion of the patient movement plan and the NDMS Definitive Care component is inaccurate.

- Early in the response and prior to the activation of NDMS, U.S. Transportation Command (TRANSCOM) conducted patient evacuation missions on its own, without coordinating with HHS. Patient tracking mechanisms between TRANSCOM operations and HHS operations were reasonably visible once the Patient Movement and Definitive Care Components of NDMS were activated. DOD tracked patient evacuations through the TRANSCOM Regulating and Command and Control Evacuation System (TRAC2ES). Once patient evacuees reached the U.S., HHS continued to track their movements through the Joint Patient Assessment and Tracking System (JPATS). TRAC2ES and JPATS are not interoperable. Patients arriving by other means, such as through various university hospitals or through International Non-Governmental Organization (INGO) mechanisms were not visible to either TRAC2ES or JPATS. Non-patient attendants accompanying each of the patients transported by TRANSCOM were not tracked. We agree with the conclusions that interagency communications need to be better.

- The Medical Volunteer Coordination description under Section 4.6 misrepresents HHS's coordination of volunteer health professionals, asserting that there were no pre-existing mechanisms for screening, managing, or deploying medical volunteers. HHS does have mechanisms to source appropriate volunteer health professionals based on specific response needs. However, during the Haiti earthquake response, the decision to select U.S. volunteers outside of the established volunteer management systems was made outside of HHS.
- On page 96 (Section 5) the following statement is made:
  "Finally, many Federal agencies returned to the U.S. as they realized they lacked the capacity to respond to the immediate needs in Haiti."

HHS worked with USAID to determine when the Haiti patient care mission was complete, not because they lacked the capacity to respond. Using real-time epidemiologic data and patient census counts, as well as working with the local partners to determine when the health care infrastructure was able to provide care, HHS reduced its medical footprint

in a systematic and transparent way, as requested by USAID. The HHS capacity for immediate response is well rehearsed in the domestic setting, and our high domestic operational tempo serves as the basis for our ability to respond quickly and effectively in any setting.

HHS, like USAID, recognizes the imperative to improve USG-wide international disaster response operation. In this vein, HHS proposes three strategic recommendations:

- The USG interagency must familiarize themselves with each other's plans and programs.
- A Whole of Government (WOG) Framework must be developed to illustrate how the USG works together internationally.
- The Federal interagency must establish a formal, integrated AAR process that looks at the strategic and operational goals of the USG in a WOG response.

HHS continues to review its role during the Haiti earthquake response to glean insights into lessons learned and the practical applications of those lessons. Specifically, HHS is examining and working to address the following issues:

- International authorities established between the U.S. and Haitian governments.
- Information flow between USG partners during international disaster response. During the Haiti earthquake response, HHS and other USG assets on the ground were to be coordinated through DOS via the U.S. Embassy and the USAID Office of Foreign Disaster Assistance (OFDA), Disaster Assistance Response Team (DART). The connection between USAID, the U.S. Embassy, and HHS was not clear to many responders on the ground; HHS seeks to collaborate with USAID to address these issues.
- Significant obstacles due to lack of dedicated HHS patient transport and movement resources existed. HHS is working to update its plans, collaborating with relevant Federal departments and agencies to ensure that a clear way forward is incorporated into the existing plans.

The Haiti Response was a challenging response for all involved. However, HHS reflects upon this experience with pride in its ability to provide significant humanitarian assistance, and as an unfortunate opportunity that nonetheless has provided information necessary to further refine HHS plans and procedures for international disaster response. HHS greatly looks forward to working together on such efforts in the future.

THE UNDER SECRETARY OF DEFENSE
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POLICY

FEB 08 2011

The Honorable Rajiv Shah
Administrator, U.S. Agency for International Development
Washington, DC 20523-1000

Dear Dr. Shah:

Thank you for the opportunity to comment on the Independent Review of the USG Response to the Haiti Earthquake, commissioned by USAID. Producing a major review of the largest foreign disaster relief operation in U.S. Government history is a truly significant undertaking, and we appreciate the many useful insights that Dr. Debarati Guha-Sapir and her team of investigators have captured in this assessment. This Review represents a valuable accomplishment that will help the U.S. Government improve future disaster response operations.

In particular, the Review's recommendation to create an International Response Framework (IRF) to define disaster relief roles and responsibilities more clearly is one that we should all carefully consider. An IRF has potential to be an invaluable tool to help steer us and our successors through complex disaster scenarios, such as the Haiti earthquake. I also wish to state my strong support for steps to strengthen USAID's capacity and resource base as the U.S. Government's lead responder in the area of foreign disaster relief. These recommendations, in my view, will go a long way toward improving the U.S. Government's capacity and performance in the provision of life-saving assistance.

As the Review points out, U.S. military personnel played an absolutely pivotal role in supporting the U.S. Government's overall response to Haiti's devastating earthquake. We salute their vital efforts, and we remain very attentive to ways in which our Department's overall effectiveness could be improved. In this regard, the Review contains a number of valuable recommendations. I also, however, wish to identify several areas where I believe the Review's assessments do not provide proper context or are inaccurate.

First, the Review asserts that the role of military forces in humanitarian response is controversial. Yes, I'd acknowledge there are sensitivities, especially in conflict zones where our service personnel are also combatants; but it's also true that in high-end natural disasters we have a decades' long track record in supporting relief operations. In fact, in the aftermath of Haiti's horrific earthquake, the absence of a substantial DoD response would have been far more controversial than its presence. The Review also asserts that U.S. force deployments did not follow standard procedures, which led to an inappropriately large military footprint. Though not a standard practice, voice orders by the Secretary of Defense are commonly used in time-

sensitive crises to expedite response times. Decisions regarding the size of our military "footprint" were driven by many factors – including concerns about deteriorating security in Port au Prince and elsewhere because of the severe losses suffered by MINUSTAH and the Haiti Police, and the huge logistics challenges of providing aid through Haiti's devastated air and seaports – and reflected the best judgments of decision-makers operating without the benefit of hindsight. Standard procedures also need to emphasize the value of flexibility, agility, and expediency in the military's response to a cataclysmic disaster. For that reason, DoD's force posture in Haiti changed as requirements became clearer and the situation in Haiti stabilized.

One area of concern the Review did not address was the challenge DoD faced ensuring that the limited number of air-slots were allocated most effectively across a diverse community of aid providers. A lack of subject matter expertise to prioritize the landing slots for the best equipped, most experienced relief organizations added to the challenge. For future relief operations where military forces need to provide this type of logistical support, I recommend having a senior USAID presence in the control room to prioritize the daily allocation of slots.

As for actions on the ground, I agree that a more rigorous validation process for military support requirements would be helpful. However, it is incorrect to infer that missions performed by military forces were not performed in close coordination with USAID simply because they were not reflected in the Mission-Tasking Matrix (MITAM) system. Joint Task Force-Haiti (JTF-H) coordinated all military missions on a daily basis with the USAID Response Coordinator. Likewise, JTF-H did not establish IDP camps, as the report states, but rather provided emergency engineering support to MINUSTAH to mitigate against flooding – activities requested by the USAID Office of the Reconstruction Coordinator.

The Review also inaccurately states that the military's inexperience in humanitarian operations led to errors in mission performance, such as the airdropping of relief commodities. The reality is that the use of military airdrops was a calculated element of the relief operation, approved by senior military and civilian leaders, including USAID, when other means were unavailable to transport critical relief commodities to desperate populations. The on-the-ground risks to civilians of air-drops are very well known to U.S. military forces.

In addition, the report mischaracterizes the use of the Overseas Humanitarian Assistance, Disaster, and Civic Aid (OHDACA) appropriation and related legislation by stating that OHDACA funds have built-in flexibility and may be used to address issues such as economic or infrastructure deficiencies or for social or political stability in developing nations. That's an overbroad formulation. OHDACA is not a form of development assistance. OHDACA provides low cost, unobtrusive but highly effective humanitarian assistance—in either disaster relief or non-crisis situations—that can help build collaborative relationships with host nation governments and civil society. In disaster scenarios, OHDACA provides the Combatant Commanders the funding and authorities necessary to provide DoD unique capabilities to support USAID/OFDA.

Finally, with respect to the Review's recommendation on developing "menus" that the Department of State and USAID can draw upon in responding to future disasters, I agree that civilian relief providers should have a detailed knowledge of what capabilities our military forces can provide when major disasters arise. I also concur with the assessment that military liaisons were a key component in the overall success of the Haiti mission, and a model that should be utilized in future responses. But we must also ensure that our disaster relief responses reflect a judicious balance between demand-driven needs and supply-side alternatives. Above all, we need a clear and mutually understood articulation of relief requirements, so that DoD can assess which of its capabilities are best suited to meet the needs.

Given SOUTHCOM's lead role in the response and the importance of the Command leadership's perspectives on the report, I am attaching their specific comments and suggested changes for your inclusion in the annex.

Thank you again for the work done on this Review and the opportunity to provide additional comments on this important topic.

Sincerely,

Michèle A. Flournoy

Attachment:
As stated

3

U.S. Southern Command

Comments To Haiti Lessons Learned Report

January 2011

Below are SOUTHCOM's comments to the Haiti Lessons Learned Report:

Comment on 4.4.2: Set up of the JTF did not follow strict SOP due to the direction by the U.S. President, Department of State and Department of Defense that a quick and robust response was imperative to save lives. It should also be noted that in the first days and weeks following the earthquake, there were serious concerns within the USG and international community that the security situation could sharply deteriorate, and that the U.S. military might have to provide security broadly in the affected areas and beyond. These concerns were compounded by the uncertain prognosis of recovery of the Government of Haiti and MINUSTAH, both of which had suffered severe losses in the disaster. The "robust" U.S. military response was in keeping with the President's instructions, and was scaled in anticipation of a possible broad security role, and an anticipated but yet-undefined (by USAID) requirement to support humanitarian assistance operations. SOUTHCOM maintains that the size of the U.S. military response was appropriate based on this contingency.

Because the DOD response had to be launched in the first hours following the disaster, no significant USG assessment of requirements was available, nor was any such USG-defined set of requirements made available during the first weeks of the response, given the magnitude and complexity of the disaster. Waiting for such a set of requirements would have unacceptably delayed the military response, and put thousands of lives at risk.

Adhering to an SOP is a good recommendation if the SOP has the flexibility and agility to meet the demands of all disaster events – including cataclysmic disasters. As currently constructed, the current disaster response SOP does not enable the USG to respond adequately to the magnitude and uncertainty of a "Haiti earthquake" scenario. As a result, the recommendation should first address the agility, flexibility and expediency of the disaster response SOP to meet all disaster events, before any recommendation for adherence in all disaster situations.

Comment on 4.4.5: SOUTHCOM agrees that policymakers must provide clear and direct policy guidance to the military regarding their proper responsibilities for humanitarian operations and ensure that they follow standard operating procedures. However, for cataclysmic disasters, such as Haiti, those policies should also

emphasize the value of flexibility, agility and expediency in the U.S. military response. The critical factor for all USG agencies in responding to a crisis of the magnitude of the Haiti earthquake is to leverage the capabilities of each agency and get them into action rather than limit them to "...their proper responsibilities for humanitarian operations and ensure that they follow standard operating procedures." Flexibility, agility and expediency are critical attributes -- policy makers should enable these attributes, as appropriate to the level of response, rather than restrict them.

Comment on 5.3.5: The JTF-H in fact coordinated missions directly with the USAID Response Coordinator and his staff once they were on the ground, and they attended all the JTF-H's daily updates and briefs. Specifically, the missions cited (trial airdrop of supplies, support for establishment of IDP camps) were in fact approved by USAID and were coordinated with the UN. The airdrop of supplies, while suggested as a possible method to distribute food, was in fact rejected by the JTF after discussion with the Response Coordinator as not an effective or safe way to accomplish the mission. However, it was determined that the capability to be able to airdrop supplies could be necessary if the airfield were to become inoperable, or if certain zones could not be reached due to rubble-blocked roads; therefore, JTF-H coordinated two airdrop missions outside of Port au Prince in coordination with USAID, the GOH, and UN/MINUSTAH to evaluate the concept.

The report finding that the JTF-H had established camps not supported by the GOH or UN is not accurate. The only IDP camp JTF-H helped UN/MINUSTAH establish, with the approval of the CSC, was the camp for those IDPs being moved from flood zones in existing camps with the pending arrival of the rainy/hurricane season. The JTF-H provided complementary engineering services to mitigate against flooding in existing camps, to sharply reduce the number of IDPs that would have to be moved. The establishment of IDP camps was not a JTF-H mission but rather a UN/MINUSTAH mission that JTF-H supported with limited engineer support that was requested by the ORC, and which was coordinated with the GOH. The engineering activity was a major USG success story, enabling the moving of the entire population of those 7,000 IDPs that were living in vulnerable areas to safer locations."

A PDF version of this report can be downloaded from
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or http://pdf.usaid.gov/pdf_docs/pdacr222.pdf