

Good intentions bring mixed results for Haiti's disabled people

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A new evaluation by London School of Hygiene & Tropical Medicine of the physical rehabilitation response after the 2010 Haiti earthquake, finds that many hands didn't always make light work.

Thousands of people became disabled during and after the 2010 earthquake, and physical rehabilitation interventions were crucial to the emergency response. The rehabilitation sector alone involved 125 organisations including UN agencies, government, international and Haitian NGOs.

With a strong focus on relationships between the 125 rehabilitation organisations involved, the study finds that effective coordination was challenged by top-down implementation with little respect for existing national structures or consideration of local practitioners, failure to observe international standards, and the sheer diversity of the collaboration.

The report is critical of the failure to hold coordination meetings in accessible locations or in local languages, which effectively prevented participation by local government and NGOs. Due to such weak connections, Haitian authorities and civil society felt excluded. The short-term contract bases of international rehabilitation teams and a lack of standardised record keeping compromised the transfer of useable knowledge to Haitian health services, while instability resulted in out-migration of Haitian professionals, as free provision by international volunteer teams usurped demand for local services.

Long-term impact was sometimes sacrificed in favour of short-term headlines and funding concerns, as the cluster mechanism focused on day-to-day activities, neglecting the building of a common vision for the sector. The report suggests that actors should start building the future rehabilitation system as soon as the acute emergency response ends.

The study also recognises positive outcomes. Prior to 2010, prosthetic and orthotic (P&O) and in-patient rehabilitation services were very weak in Haiti, while treatment for spinal cord injured patients was virtually non-existent. Subsequent to the disaster response, the range of rehabilitation services is significantly expanded in [Haiti](#), including the introduction of Haiti's first spinal cord injury services. Despite slow initial progress, the rehabilitation sector moved much more quickly than the health sector in terms of bringing Haitian actors on board, and handing over lead roles to national authorities, which bodes well for the sustainability of the service going forward.

Provided by London School of Hygiene & Tropical Medicine

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