



A Report on CARE's Central America Response Fund



These young Guatemalan girls and their families were displaced by Hurricane Stan. In total, the disaster forced more than 200,000 people in Guatemala and El Salvador from their homes.

Introduction

On October 4, 2005, Hurricane Stan hit Central America, triggering massive flooding and landslides around the region. Guatemala and El Salvador received the brunt of the storm's impact, and in El Salvador, the situation was made worse by the eruption of the Illamatepec volcano in early October, which forced the evacuation of all residents living within a three-mile radius.

In total, more than 700 people died in Guatemala and El Salvador as a result of the disasters. Additionally, more than 400,000 people were affected in the two countries, of which upwards of 200,000 were displaced from their homes and communities. These problems were compounded by the high levels of poverty prevalent in both countries. Weak infrastructure and a lack of access to resources heightened the vulnerability of many of the affected communities and made recovery a more difficult process.

CARE's response in El Salvador and Guatemala has focused not only on addressing the immediate needs of survivors, but also on empowering them to be better able to respond to future disasters. This work has been made possible by the generous support of donors like you who contributed to CARE's **Central America Response Fund**.

Guatemala

Overview

Hurricane Stan marked one of the worst disasters in Guatemala's history, surpassing even the damage and loss caused by Hurricane Mitch in 1998. More than 650 Guatemalans were confirmed dead and an additional 43,000 were made homeless. The effects of Hurricane Stan were further exacerbated by the country's difficult terrain and its high rates of poverty. The United Nations Human Development Index reported that nearly 22 percent of Guatemala's population lived on less than one dollar a day in 2004. The most extreme poverty is found among the country's indigenous population, of which around 38 percent subsist on less than one dollar a day. Many indigenous Guatemalans struggle to obtain even the minimum amount of sustenance necessary to survive. The situation is worse in rural areas, which have the lowest levels of development and the highest concentrations of indigenous people.

Hurricane Stan affected 12 of Guatemala's 22 departments, but the worst damage was in the departments of San Marcos and Sololá, which both have elevated levels of poverty and large indigenous populations. Many of these communities are in remote, difficult-to-reach locations, which stalled initial relief efforts and worsened the effects of the disaster.



The western and southern regions of Guatemala felt the brunt of Hurricane Stan

CARE's Response

CARE's work was concentrated in the departments of San Marcos and Sololá, where the effects of the disaster were the most extreme. CARE had ongoing programming in both of these departments prior to Hurricane Stan, and this allowed us to use our strong local connections and knowledge to deliver assistance in the most effective manner possible. In total, CARE's emergency response reached 135 communities, 6,509 families and 39,054 individuals in San Marcos and Sololá, thanks in large part to **Central America Response Fund** donors.

Phase I - Immediate Response

Due to the magnitude of the disaster, the difficult geography of the affected areas, and the involvement of numerous actors, early recovery efforts were not easy. In the initial stages, information was hard to confirm and communication was difficult. Furthermore, landslides and heavy rains had worsened already poor roads, making it extremely difficult to reach many of the remote populations. One community in the municipality of Tejutla was without communication for almost an entire month.

Despite the challenges, CARE worked rapidly with local and national governments and other non-governmental organizations (NGOs) in the area to coordinate a response. CARE's previous

emergency preparation and planning efforts and long-term development work in the affected communities were of immense benefit to the relief effort. Our staff were able to use their knowledge of key community organizations and leaders to quickly mobilize volunteers, distribute supplies and communicate between the different governmental and non-governmental actors.

During the immediate response to Hurricane Stan, CARE's efforts focused on the following areas:

- *Food Security:* CARE provided food and nutritional education to more than 6,000 families in San Marcos and Sololá combined. In addition to food, families received cooking kits with cooking tools and oil.
- *Clean Water and Sanitation:* CARE distributed bottled water and immediately began work to restore water systems for the 135 communities in San Marcos and Sololá, as clean water is crucial in preventing the spread of diseases after a disaster. In addition, CARE constructed latrines and provided hygiene kits to 6,509 families. Each family hygiene kit included five-gallon buckets for washing, one liter of bleach, one dropper, one package of trash bags, clothing detergent, and soap, toothpaste, toothbrushes, hand towels and toilet paper for each family member.
- *Shelters:* CARE oversaw the construction of 18 municipal shelters and 366 family shelters, which provided temporary shelter for a total of 12,476 people. Shelters were supplied with water, food, clothing, blankets, medicine and medical services.
- *Health Care:* In the initial stages of the response, CARE provided basic health care, medicine and blankets for the affected communities.

Phase II – Recovery and Rehabilitation

After the initial response phase, CARE concentrated its efforts on restoring normalcy and revitalizing livelihoods in San Marcos and Sololá as quickly as possible. CARE, in collaboration with the Guatemalan government and other NGOs, has focused our rehabilitation work on the following priorities:

Health and Nutrition:

- *Education:* In addition to distributing food and medicine and providing basic healthcare, CARE provides classes on the prevention of diseases such as diarrhea, dehydration and malnutrition to promote the long-term health of disaster survivors. Furthermore, we conducted classes on nutrition in collaboration with health educators from the *Live Better Association* and a local university. The purpose of these classes is to raise community awareness of preventative nutritional and health practices in order to reduce the frequency of disease and malnutrition.
- *Psychosocial care:* In the wake of such a traumatic disaster, we focused not only on addressing survivors' physical health needs, but also attending to their psychological needs. Psychosocial activities were implemented in each of the target communities in Sololá and San Marcos. These activities included group discussion sessions, organized community sports, games for children and counseling from trained psychosocial health workers. In addition to the stress brought on by Hurricane Stan's destruction, many of the inhabitants of these two departments have lived in the midst of armed conflict for more than 30 years. CARE's psychosocial programming took this added source of psychological stress into account.

Infrastructure: CARE's emergency response teams have rebuilt houses, water and sanitation facilities and school infrastructure throughout the two departments. Reinstating a school routine

is crucial for restoring children's sense of normalcy and fostering good mental health after a disaster. In addition, CARE began reconstruction of damaged roads and bridges immediately after Hurricane Stan struck to permit relief workers access to remote communities, and later, to allow affected populations to return to their communities and renew their lives and livelihoods.

Income generation: CARE has rebuilt irrigation systems and improved soil quality to reactivate agricultural activity in both departments, with an emphasis on San Marcos. This is a particularly fertile area and is home to some of the most important farmland in Guatemala. CARE worked with local communities to repair the damaged infrastructure and land as quickly as possible to lessen the economic effects of the disaster. Prior to Hurricane Stan, CARE's work in San Marcos and Sololá focused in part on agriculture and forestry programs, and CARE's experience in this area has been a great help in the reconstruction process.

Disaster Preparedness: CARE aims to make the affected populations of Guatemala more resilient to subsequent disasters, so that future generations do not have to suffer the degree of loss brought about by Hurricane Stan. This goal is being achieved in part through CARE's work to build stronger infrastructure and improve livelihoods, and in part by involving the population in disaster preparedness training. CARE is working with actors at all levels – from Guatemala's national government down to community development councils – to improve coordination and to empower local community members to better respond to future emergencies.



CARE staff work with a Guatemalan community to address their needs in the wake of Hurricane Stan. Local involvement was central to CARE's response.

Community Involvement: CARE firmly believes that communities should be involved in finding their own solutions to their problems, and thus we have encouraged the participation of community members at all levels of the response. Furthermore, we have paid special attention to local cultural practices in implementing our work. For example, rural populations in Guatemala often live a communal lifestyle, and many people displayed tremendous solidarity in the aftermath of the disaster, working to get help to those families who were worst affected. CARE tapped into these strong community networks to mobilize an effective and timely response to the emergency.

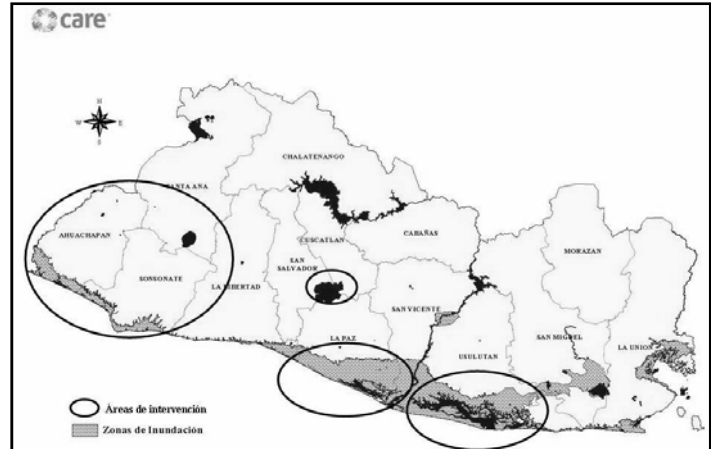
El Salvador

Overview

El Salvador was hit with twin disasters in the first few weeks of October 2005 – first the eruption of the Illamatepec volcano, followed by Hurricane Stan's torrential rain and ensuing landslides. The volcano forced the evacuation of around 10,000 people in the departments of Santa Ana, Sonsonate and Ahuchapán in the southwestern corner of the country. Hurricane Stan made landfall in the central coastal areas, taking the lives of 71 people and driving upwards of 72,000 from their homes.

CARE's Response

CARE's response was directed primarily at rural communities affected by the two disasters in the departments of Sonsonate, La Paz, Santa Ana, San Vicente, Usulután and Cuscatlán. CARE chose to target these areas because of our long-term presence in each department and their high levels of vulnerability. It is estimated that 43 percent of El Salvador's rural population live in poverty, with illiteracy rates of almost 20 percent. Furthermore, 40 percent of rural homes do not have electricity and 52 percent do not have access to potable tap water. Poor rural communities were hardest-hit by the two disasters.



CARE intervened in both the southwestern region of El Salvador, where the volcanic eruption caused serious damage, and in the central coastal area, where Hurricane Stan made the most severe impact.

Phase I - Immediate Response

CARE's long-standing presence in El Salvador was of great benefit in facilitating the response effort. CARE has worked in El Salvador since 1955, when basic supplies were distributed to the country's poorest populations. Since that time, we have enlarged and broadened our work to reduce poverty among and improve the quality of life of El Salvador's most vulnerable communities. Since Hurricane Mitch hit the country in 1998, CARE has had an increased focus on emergency response. This has involved developing a strong crisis plan and working with local populations to reduce their vulnerability to disasters through education, health care and the strengthening of local infrastructure and organization.

CARE's ongoing emergency planning work in El Salvador in coordination with national and local governments allowed for a quick and efficient mobilization of support immediately following the disasters. Through our long-time presence in the country, CARE has developed strong relationships with the Salvadoran government, other NGOs and local communities. These relationships enabled CARE to effectively coordinate the immediate response with key governmental and nongovernmental actors.

Immediately following the disaster, CARE activated an emergency response team, which concentrated its efforts in the departments of Sonsonate, Santa Ana, La Paz, San Vicente, Usulután and Cuscatlán in the following areas:

- *Shelters:* CARE constructed 45 temporary shelters benefiting 2,114 families and 10,364 people. In addition, we distributed 3,651 blankets.
- *Water and Sanitation:* CARE distributed 3,559 potable water bags and 2,500 water containers, constructed 60 latrines, and provided 2,100 emergency kits.
- *Food Security:* Affected families received emergency food support, consisting of a total of 2,350 food rations for children, 282 pounds of corn, bean and rice, 4,137 plastic containers and 1,558 sardine tins.
- *Psychosocial Care:* In addition to addressing the physical health needs of survivors, CARE addressed the psychological ramifications of the disaster through counseling and

social activities designed to help communities in the Santa Ana, Usulután and Sonsonate departments overcome stress.

In order to facilitate a thorough and timely response, CARE used pre-existing community structures to implement the relief activities. This included working through established links with government institutions and NGOs, and using local resources such as school centers, some of which had been established with CARE's support.

Phase II – Reconstruction and Rehabilitation

During mid-November, while continuing to implement immediate assistance activities, CARE began to plan for longer-term rehabilitation of the affected communities. The main purpose of the second phase of response is to restore normalcy and strengthen the capabilities of residents and local governments to respond to future emergencies.

CARE's rehabilitation work in El Salvador has reached more than 8,000 families, and concentrates on ensuring sustainability and gender equity. Components include:

Psychosocial Care: CARE has implemented psychosocial activities for 2,000 Salvadoran children affected by the disasters. This has been done in coordination with the Pan-American Health Organization, UNICEF, the National Mental Health Council and the National Family Secretariat. CARE ensures that psychosocial programming is appropriate for children and adolescents according to their age, and we have prioritized municipalities with high rates of juvenile violence, which were aggravated after the disasters.

Infrastructure: CARE has constructed 172 latrines and rehabilitated 214 wells. Restoring water and sanitation facilities is a crucial step in preventing the outbreak of disease.

Economic Activity: CARE has worked to reactivate agricultural and small economic activities in the affected areas. This has included delivering farming equipment to 225 families, which they have used to plant more than 193 hectares of corn and 66 hectares of vegetables. In addition, we seek to provide economic alternatives for families. This includes training individuals in artisan crafts and promoting the development of family and community micro-enterprises.

Disaster Preparedness: CARE works to strengthen the risk planning capabilities of community members. This includes organizing civil protection community committees, creating civil protection plans and risk maps and providing first aid kits.

The Jiboa river basin experienced severe flooding after Hurricane Stan. In response, CARE has strengthened the emergency response abilities of local residents through the creation of an early alarm system.

Rosa García, who lives close to the Jiboa river in an adobe home and who has witnessed several floods, said that this time the situation was different. Rosa said:

"CARE came just in time to provide us with different alternatives and training on what had to be done in an emergency situation and what had to be done in an evacuation situation....I will always thank CARE and others that have taught us how to proceed before and after an emergency. We are being trained in how to react during an emergency in a much better way than in the past."



Rosa and her daughter

Environmental Rehabilitation: CARE is working with residents to improve environmental planning through training and workshops. Improved management of the environment can help lessen the impact of future disasters. For example, planting additional trees in denuded areas helps to prevent erosion and reduce the likelihood of landslides. We are also working to raise awareness among El Salvador's public policymakers about the environmental risks existing in certain parts of the country, and to enlist their help in mitigating these risks for local inhabitants.

Furthermore, CARE continues to support ongoing and diverse programs that reduce local vulnerability to disasters and strengthen individual coping skills. In the area of health, CARE is working to increase access to quality health services, as individuals in good health are less susceptible to disease and death in the event of an emergency. This includes CARE's PROSALUD project, which works to reduce the incidence of diarrhea in children under age 5, and the SAGYS project, which works to improve health conditions of more than 20,000 Salvadorans living in rural areas. CARE also promotes access to quality education for children, adolescents and women, in the belief that education enables individuals to change their quality of life, and to extend this benefit to future generations. Furthermore, CARE works to strengthen community infrastructure and organization. As an example, CARE has established an early-alarm system in the Jiboa river basin, to alert more than 30,000 local residents of flooding threats (see story on page six).

Conclusion

With your help and with the involvement of the survivors themselves, CARE is rebuilding lives damaged by disaster throughout Guatemala and El Salvador. We are committed to building back stronger communities that are less vulnerable to and better able to cope with future emergencies. CARE is grateful for your generous support of our Central America Response Fund.

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