

Community Partnership for Local Haitian Relief Efforts Organizational Partnership



REPORT AND STRATEGIC PLAN

January 12, 2012

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Executive Summary:

The world was riveted by the January 12, 2010 earthquake in Haiti. People from all walks of life felt compelled to demonstrate their solidarity with the people of Haiti through prayers, expressions of support, financial contributions, workplace collections, volunteer time with relief agencies and other entities involved in humanitarian relief efforts. Throughout the Haitian Diaspora, individuals of Haitian origin or descent mobilized their collective resources to respond to this unprecedented devastation. In South Florida, home to over 300,000 persons of Haitian descent, many relief and short and long-term recovery efforts were launched amid pain, heartache and grief.

Shortly after the earthquake, Sant La convened its partners, including funders and service providers, to coordinate a response to the needs of survivors, and to begin the process of documenting the specific needs resulting from this devastation. We assumed that the arrival of survivors would exacerbate the already precarious socio-economic conditions of many South Florida Haitian households, especially in this post 2008 economic downturn. In South Florida, not unlike other parts of the country with a strong Haitian presence, many survivors were welcomed into the households of friends and family members. Survivors needing life-saving medical attention were airlifted to hospitals specializing in trauma in Florida and elsewhere throughout the country.

Our partners reported that interviewing the survivors of the earthquake was both harrowing and life affirming. The Haitian people have long been described as being resilient. Conducting the individual interviews and focus groups was a reminder of the resilience that seems to be part of the very fiber of their being but also of their positivity and strength. Although all of the survivors had faced an unimaginable and very traumatic ordeal and stared death in the eye, they are determined to move forward and embrace all that life is offering each day. Their overall outlook is not one of bitterness but full of hope. The survivors overall are optimistic in spite of the hardships they face daily. Focus group participants as a whole shared a similar vision for personal independence, self-sufficiency and privacy.

South Florida service providers identified a number of preliminary needs including: culturally responsive mental-health services, stable housing that kept families together, and particularly for survivors and/or medical evacuees with no relatives in the South Florida area, devices to assist amputees, prescription assistance, clothing, educational services, childcare, primary care services, food assistance and cash assistance. Many of these needs have repeatedly emerged as areas causing large gaps in the system of care for survivors. These preliminary needs have already been conveyed to local funders and governmental agencies.

Haitian earthquake survivors were admitted to the United States temporarily, and are trying to rebuild their lives as they adapt to a new life in this country. Unfortunately, access to safety-net services by the majority of these survivors is still limited almost two years later, primarily due to their immigration status, as most were admitted to the US as tourists. As such, they are neither permitted to work nor entitled to receive government-supported assistance including non-emergency medical assistance, food stamps, cash assistance, transportation assistance, and access to local shelters.

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Those survivors who could return quickly have done so; while those remaining in South Florida are in a very difficult limbo, unable to be legally employed, moving from place to place as relatives' ability to house them is limited, and facing an uncertain future in Haiti for many years to come. Hence, the scope of the need for services has grown for the earthquake survivors remaining in South Florida almost two years later.

In response to the unprecedented challenges posed by this tragedy, Sant La created a post-earthquake collaborative, **The Community Partnership for Haitian Relief Efforts (The Partnership)** with a generous planning grant of \$100,000, from the Children's Trust. Over the course of a year, The Partnership has:

- a. Categorized the service needs of the survivor population in the South Florida community as well as the support needed by their host households;
- b. Documented the long-term recovery related issues as faced by the survivor population;
- c. Identified the areas targeted for collective advocacy; and
- d. Created a comprehensive strategic plan that sets forth a collective vision of actions and strategies that will support the healing of the Haitian people, here in Miami Dade County and in Haiti.

The plan's components are based on "System of Care" action strategies. The input from our research is clear--the survivors still residing in South Florida have multiple challenges, and success in their goal to regaining self-sufficiency will require support from very different sectors of the helping community. But this support must be individualized, focusing assistance in a planned step-by-step process over time. The resources needed include investments in culturally responsive supportive services, communications, advocacy, fundraising, developing multi-sector partnerships, and socio-economic capacity building. It is our hope that this living, flexible document about the Haiti Earthquake recovery efforts in South Florida will inform actions and strategies to be taken in future situations or disasters involving the nationals of a country with strong ties to our community.



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A. Introduction

1. 2010 Earthquake and its Impact on South Florida

On January 12, 2010, at approximately 4:53 p.m., the Caribbean island nation of Haiti experienced a catastrophic 7.0 magnitude earthquake, which resulted in the death of over 300,000 individuals. Hundreds of thousands were killed, maimed, gravely injured and left homeless. Damage to the infrastructure was extensive with loss of power and communication networks and more than 275,000 residential and commercial structures were damaged or completely destroyed. This included government buildings, schools, churches, the airport and seaport facilities. There were severe shortages of food, water, medical and other essential supplies. The government itself was at a standstill with missing, injured or deceased employees. Upon this previously unimaginable disaster, tens of thousands of Haitian nationals were admitted to the United States for many different reasons, including medical evacuations, repatriations, family reunifications, pending adoption cases, valid tourist visas, etc.

Within days of the devastating January 12 earthquake in Haiti, Sant La was catapulted into Haiti relief and recovery duties because of a number of factors: our leadership, community standing, credibility, track-record, and a strong and consistent presence in the community since our inception in 2000. Sant La convened its partner agencies to begin the process of documenting the specific needs that would arise in the Haitian community as a result of this devastation. Together, we created a post-earthquake collaborative christened The Community Partnership for Haitian Relief Efforts (The Partnership), with a planning grant from the Children's Trust.

The Partnership was incubated through Sant La's on-going planning and collaborative processes with our partners within **The CBO Roundtable** and **The Provider Network**. These groups consist of organizations that work directly with the Haitian community and in the case of the CBO Roundtable organizations, are located in the heart of the Haitian community. These organizations provide services ranging from health care, after-school enrichment, homeownership assistance, homework assistance and tutoring, family counseling, immigration services, and preventive services for youth. Together, we have historically worked to develop a coordinated service delivery system for mutual clients; to reduce duplication of efforts; to eliminate fragmentation; to improve access to services; and ensure efficient and effective delivery of services.

Also worth noting is Sant La's participation in **An n Avanse**, an initiative spearheaded by The United Way of Miami-Dade, The Beacon Council, and The Greater Miami Chamber of Commerce as well as Komite **12 Janvye**, an ad-hoc committee made up of Haitian-American individuals and organizations dedicated to advocating for strategies and policies that promote the healing and well-being of the Haitian community in their quest to rebuild a stronger and more prosperous homeland.

Hence, The Partnership addresses the need for a local response as well as a comprehensive "System of Care" approach to addressing recovery efforts for Haitian evacuees and survivors of the January 12, 2010 earthquake. It is also an effort to include the voice and participation of the Haitian Diaspora in future efforts. The Partnership worked to document the needs, issues and gaps in services for earthquake survivors, while paying attention to rebuilding efforts in Haiti as well as the ongoing challenges on our local client population.

As one of the largest enclaves of Haitian/Haitian-Americans in the United States, South Florida has seen a large influx of evacuees/survivors. According to the Florida Department of Children and Families, approximately

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26,671 individuals arrived through Florida as a port of entry for emergency repatriation efforts. Following the resumption of commercial flights in February 2010, this number increased significantly, although it has been difficult to formally document through the United States Customs and Border Patrol.

Action Strategies Deployed

The Partnership's objective was to facilitate a South Florida response to the immediate and long-term needs of the survivor population residing in our community as well as their host households. The Partnership deployed four action strategies in order to reach its stated outcomes: Community Involvement and Engagement; Strengthening Community Collaboration; Communications and Advocacy; and Expanding our Network of Allies and Friends.

➤ **Community Involvement and Engagement**

As this community is historically known to be fearful of civic participation, it was imperative that we accurately reflect the needs of the survivors living within the South Florida local community. We probed neighborhood issues and solutions through surveys, individual interviews and focus groups with key stakeholder groups: students, survivors and their host families and relatives, professional and blue-collar individuals.

➤ **Community Collaboration**

Collaborative efforts and relationships are a most challenging undertaking. The mood and urgency created by this devastating earthquake, however, reiterated to our community the value to be gained by reducing fragmentation, competition, duplication of services and funding rivalry. The members of this collaborative have nurtured our collaborative relationships through our monthly meetings, including a strategic planning retreat held in November, 2011 to finalize our Action Plan. We have formally assessed the quality, value, progress and impact of our partnerships through a research-based tool ¹ that measures successful collaborative factors.

➤ **Communications and Advocacy**

The Partnership has strategically communicated and disseminated the progress and results of its work to the community and to a broader segment of collaborative partners. Such communications were in the form of updates to the members of our Provider Network during our quarterly meetings; and to the South Florida Haitian community, primarily through Haitian television, in particular *Teleskopi*. *Teleskopi* is Sant La's weekly cable television program, which has aired for the past six years and reaches a minimum of 350,000 households in South Florida. *Teleskopi* is a talk-show that educates and informs viewers about pertinent community issues and services while promoting access to services and resources. Special television segments, which aired between July 2011 and January 2012, featured members of The Partnership, who discussed the magnitude of the challenges facing survivors in the South Florida area; the incredible progress achieved by many survivors, against incredible odds; as well as a special emphasis on identified service gaps.

➤ **Expanding Network of Allies and Friends**

The Partnership and its members have conducted extensive dialogue with a cross-section of individuals and institutional representatives. These include grassroots, local, state, national and international institutional and organizational leaders as well as Government of Haiti representatives. These discussions promoted the work

¹ Wilder Collaborative Factors Inventory, 2008 Amherst H. Wilder Foundation

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of The Partnership, shared the progress of on-going efforts, solicited input and participation in the process, and urged their adoption and/or support of specific recommendations. The following activities have taken place during local and national meetings: meetings with Vice President Biden in Miami; meetings with Ambassador Tom Adams in Miami and in Washington; meeting with White House officials in Washington, D.C.; a meeting in Miami with the Chief of Staff to the UN Special Envoy to Haiti; meetings with congressional and municipal elected official; meetings with Haitian Organizational leaders in Washington. In addition, Sant La has participated in an ad-hoc group christened *Komite 12 Janvye*, whose purpose is to advocate for policies and investments that will promote sustainable reconstruction in Haiti. This ad-hoc group also provided an opportunity to develop sharper analytical skills with respect to the U.S. and international policy responses to the devastation in Haiti. Finally, Sant La's Executive Director has been increasingly active with the Greater Miami Chamber of Commerce through its Executive Committee; serves on the Miami Dade Public Schools Superintendent's Business Council; and with The Beacon Council's One Community One Goal planning process. These public and private sector institutions have expanded our network of allies and friends.

2. Partnership Goals, Objectives & Governance

Defining a governing structure that establishes a mission, membership and decision-making structure is arguably one of the key components to planning and implementing any successful partnership. The governance structure ensures a place at the table for all relevant stakeholders and formalizes and ensures equality in decision-making. The following defined governance structure is the vehicle through which The Partnership articulated a united mission and vision; reaffirmed its core values, guiding principles and functions; and determined its membership. Through a collaborative planning process, the following Governance Structure was adopted on May 13, 2011.

Mission:

To promote and support the healing of the Haitian community of South Florida and to support long-term recovery efforts in Haiti.

Vision:

To exemplify unity of purpose and action in support of earthquake recovery effort.

Core Values:

The following are the values that were incorporated into the service delivery model established by The Partnership:

- Client-centered services, with the needs of the clients dictating the types and mix of services to be developed and provided;
- Culturally competent services, with agencies, programs, and services that are responsive to the social, cultural, racial and ethnic differences of the target population;
- Services that promote economic independence and sustainability; and
- Broad-based and inclusive partnership.

Guiding Principles:

The following were the principles that guided the Service Partnership through the process of realizing the vision, mission and core values set herein:

- Work collaboratively to achieve the mission and perform the duties of The Partnership;
- Establish strong administration, management and leadership;

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- Set realistic expectations and goals;
- Engage in a transparent process and build upon each partner’s competencies in order to accomplish the project goals;
- Employ Systems of Care methodologies as an approach to services that recognizes the importance of family and community in the healing and integration of survivors; and
- Respect for the dignity of our community members will drive the design of services.

Functions:

The Partnership for Local Relief Efforts is a project of Sant La with its partners in the Haitian Community Based Organization (CBO) Roundtable, and the Haitian Community Provider Network. Its functions include but are not limited to:

- Creating a unified Strategic Plan to address local service demands and support recovery efforts in Haiti;
- Establishing proprietary ownership/use of the products produced during the planning process;
- Providing a forum for coordination of services between key, inter-related stakeholders related to development and implementation of this Strategic Plan including:
 1. Improving awareness and access to services;
 2. Developing deeper collaborative relationships among providers;
 3. Increasing coordination;
 4. Advising on culturally responsive enhancements to the Systems of Care;
 5. Caring for survivor children and their families;
 6. Creating a provider community that respects and values clients’ cultural background and heritage, including the voice of Haitian community members in policy recommendations and strategies; and
 7. Promoting accountability of providers for their increased cultural competency in serving population as well as for providing quality services.
- Providing a safe place for open communications to share concerns, offer constructive feedback between members, and hold members accountable for their contractual obligations related to the Strategic Plan development if needed;
- Identifying gaps, barriers, and community needs and facilitating community activities to address these gaps, barriers, and needs;
- Monitoring the implementation of the unified Strategic Plan related to recovery efforts in Haiti, and support for survivors residing in Southeast Florida; and
- Reporting its activities periodically to the CBO Roundtable and Provider Network.

The Partnership may sunset upon the completion of its functions.

Membership:

Core membership in the South Florida Haitian Community Partnership for Local Relief Efforts was comprised of agencies and organizations that have contractually agreed to participate in the Partnership and conducted activities that resulted in the development of the unified strategic plan as required by the Partnership contract between Sant La and The Children’s Trust. These core members are:

- Fanm Ayisyen Nan Miyami, Inc. (FANM)
- Galata, Inc.

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- Haitian American Chamber of Commerce, Inc. (HACCOF)
- Haitian American Professionals Coalition (HAPC)/ Association of Haitian Social Workers (AHSW)
- Haitian Cultural Arts Alliance (HCAA)
- Haitian Lawyers Association (HLA)
- Lambi Fund of Haiti
- Little Haiti Housing Association, Inc. (LHHA)
- Minority Development and Empowerment, Inc. (MDE)
- Sant La, Haitian Neighborhood Center, Inc.
- United Way of Miami-Dade County- An n Avanse Initiative (UW)

We also made provisions for the possibility that membership changes could as required to meet the requirements of The Partnership's deliverables to The Children's Trust. We agreed that The Partnership members would determine membership of any group/individual by a consensus vote. Members of the Partnership furthered agreed to work collaboratively, with shared expectations and a decision-making process built on consensus, based on the guiding principles and core values set forth by The Partnership as stipulated in its Governance policies.

Meetings:

The Partnership met on a monthly basis on the 2nd Friday of the month. Meetings of ad-hoc workgroups to address specific tasks were held on an as needed basis. The group's intention was to arrive at decisions by consensus whenever possible. All decisions, whether or not consensus had been achieved, were formally approved by majority vote.

Partnership meetings served to:

- Facilitate open communication, reach group consensus, and ensure peer accountability;
- Help member grow in their understanding of the multiple issues involving serving The Partnership's target population;
- Increase member's knowledge about one another's operations, facilities, staff and capacity;
- Discuss planning and project issues, brainstorm new concepts, identify and problem-solve emerging issues and make decisions;
- Develop opportunities and ways to work together effectively; and
- Share information about outreach and advocacy efforts, as well as similar successes and concerns experienced by other group members.

It was also agreed that interested organizations involved with recovery efforts in Haiti and who provided support for survivors living in Southeast Florida could be invited to meetings of The Partnership as appropriate to address the strategic plan goals and implementation activities. Such invitations were subject to review in advance.

3. Community Planning Process

The eleven partner organizations each committed to a specific task(s) based on experience, expertise, available resources including:

1. Researching and Compiling an Inventory of South Florida Relief and Recovery related initiatives with the necessary background information (Lambi Fund).

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2. Scheduling Community Information, Engagement and Outreach Forums including Teleskopi Shows and Radio tours (Sant La and All Partners).
3. Completing a Comprehensive Community Needs Assessment, which included: conducting Focus Groups, Gap Analysis and Completing Telephone Surveys and/or Questionnaires (Galata, FANM, Sant La, MDE, LHHA, HACCOF, HLA, HAPC/AHSW, HCAA and UW).
4. Completing a Socio-Economic Capacity Building Plan to support and enhance the socio-economic capacity of earthquake survivors (LHHA and HACCOF).
5. Creating a plan to support and enhance the complete health care needs of earthquake survivors (HAPC/AHSW).
6. Creating an Advocacy and Communications Plan to share and promote the challenges and success of the survivors as well as those of community providers striving to meet the needs of survivors (HLA).
7. Creating a Fundraising Plan in support of local needs as well as efforts based in Haiti (All Partners).
8. Completing the Wilder Survey (All Partners).
9. Formally executing a Memorandum of Agreement between each partner's board of directors and The Partnership (All partners).

Strategic Partners, a local consulting firm specializing in the strategic management of human services was retained to facilitate the planning process and provide technical assistance to the partner organizations. Monthly meetings were held beginning in February 2011, and continued through December 2011. Strategic Partners was responsible for the following activities:

- Developing and finalizing all needed tools for ongoing assessment of needs, data collection and accountability of partnership activities, level of collaboration and results.
- Facilitating monthly partnership meetings.
- Training the partners on how to use all tools developed.
- Training the partners on how to conduct Focus Groups.
- Reviewing and synthesizing compilation reports.
- Monitoring the planning process to ensure consistency among partner organizations.
- Planning and facilitating a retreat to review report findings.
- Developing a Governance Structure.
- Compiling the final Report and Strategic Plan.

The partners agreed to the community planning workplan and schedule in February, and worked on the governance plan and mission statement in April, approving it in May. The survey and focus group tools were also developed and training was provided to all partners in May. Interviews and focus groups with survivors and their host families were conducted in June-September. Interviews with organizations and key informants providing health and mental health services were also conducted during this period. The Fundraising Plan was developed by the partners as a group at the September partnership meeting.

The draft report was compiled was reviewed by the partners at a retreat on November 5, 2011 and revised based on that discussion.

In addition and to commemorate the second anniversary of *Douz Janvyè*, the January 12, 2010 earthquake in Haiti, The Partnership hosted an event on January 12, 2012. The event was attended by over 100 people with representation from every stakeholders group including survivors, community based service providers, elected officials and the media. Those in attendance had the opportunity to learn about the work of The Partnership, about the lessons learned and the recommendations being made to create a system of care. The attendees were given a 7-page Executive Summary and asked to provide feedback.

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Based on this variety of input, the community planning process was completed during the month of February 2012.

4. Environmental Scan—What is the Current Situation for Survivors Living in South Florida?

Our environmental scan addressed the inter-related questions that constitute a “System of Care” assessment:

- a. The number of survivors still residing in South Florida;
- b. Their current life situation, including economic self-sufficiency;
- c. Their plans to return to Haiti or remain here long term;
- d. Resources/policies essential to achieving those longer term goals, and an assessment of the agencies and programs serving the target population; and
- e. Resources available to support this population’s return to economic and personal independence.

The answers to these questions have led us to the recommendations for a continued local action strategy that now focuses on mid- and long-term assistance for these survivors to regain their self sufficiency and reunite separated and displaced families.

What is the economic background and potential of survivors now in South Florida?

We learned that there are three general economic groupings within the survivor population, but ALL of them have the common thread of trauma experienced by the earthquake survivors:

- Successful business owners and professionals who had financial means and educational status in Haiti. These survivors have acclimated here and have moved forward economically. Some have gained employment or have started businesses in the US.
- Small business owners who were economically self-sufficient in Haiti and who were surviving there, but who lost their businesses and social/professional networks. This group is a combination of those who have formal education as well as those entrepreneurs who do not. These survivors lack the financial means and education to easily start over in the US.
- Those who had very little or no economic means and education in Haiti. These survivors face many barriers in adjusting to life in South Florida, including language, money, and lack of education.

How many survivors arrived through South Florida and where are they now?

As one of the largest enclaves of Haitian/Haitian-Americans, Miami-Dade County has seen a large influx of evacuees/survivors. In many cases, evacuees/survivors fled on humanitarian flights, launched on January 13th, with just the clothes on their backs. As of February 21st, when Emergency Repatriation Centers ended their operations, approximately 26,671 individuals had arrived through various ports of entry in Florida, according to the Florida Department of Children and Families. However, since commercial flights resumed in early February 2010, it is reasonable to assume that this number has increased significantly, although accurate data is not available from United States Customs and Border Patrol. The United States Citizenship and Immigration Services (USCIS) indicates that 27,514 applications for TPS have been received and approved as of February 9, 2012.

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Miami-Dade County Public School Enrollment of Youth who Survived the Haitian Earthquake

The Partnership obtained data from the Miami-Dade County Public Schools (M-DCPS) of youth who indicated that they enrolled because of the Haitian earthquake. As of June 4, 2010, M-DCPS had enrolled 1,138 displaced students from Haiti. By June 2011, that number increased to include an additional 401 students. For the 2011-2012 school year, an additional 82 students identified themselves as enrolled due to the earthquake, bringing the total number of students to date to 1,621.

Miami Dade County Public Schools with 5 or more enrolled Haitian survivor students in 2010-2012

<u>School</u>	<u>09-10</u>	<u>10-11</u>	<u>11-12</u>
FULFORD ELEMENTARY	9	11	
ENEIDA MASSAS HARTNER ELEMENTARY	2	5	
HIBISCUS ELEMENTARY	8	8	
LAKEVIEW ELEMENTARY	9	8	6
JESSE J MCCRARY JR ELEMENTARY	5	18	8
TOUSSAINT L'OUVERTURE ELEMENTARY	9	12	7
NORTH MIAMI ELEMENTARY	16	11	
HUBERT O SIBLEY ELEMENTARY	27	28	
HORACE MANN MIDDLE	8	5	
THOMAS JEFFERSON MIDDLE	18	5	
MIAMI EDISON MIDDLE	8	12	
NORTH MIAMI MIDDLE	49	44	12
HOMESTEAD SENIOR HIGH	9	9	
MIAMI CENTRAL SENIOR HIGH	9	10	
MIAMI EDISON SENIOR HIGH	10	28	
NORTH MIAMI BEACH SENIOR HIGH	41	16	
NORTH MIAMI SENIOR HIGH	88	66	29
MIAMI SOUTHRIDGE SENIOR HIGH	10	5	
Total Students in these schools	335	301	62
Total students in schools with <5 students	803	99	21

B. Major Findings

1. Comprehensive Community Needs Assessment

Strategic Partners supported the partnership by developing a Service Provider Survey (see APPENDIX 1 for Service Provider Survey) to capture the work being done in response to the needs of the survivors and their host families. Each partner completed the survey. The partnership also reached out to other community providers who were serving this target population. Additionally, the United Way worked with the Greater Miami Chamber of Commerce and the Beacon Council to create *An n Avanse – Let's Move Forward*, a community response that focused on the increased needs and service gaps in our own community as a result of the Haiti earthquake. A total of 23 surveys were completed. The responding agencies provided services to 7,206 survivors and/or their host families combined in Miami-Dade County. Subsequently, the United Way of Miami Dade was one of five local organizations that received support from the John S. and James L. Knight Foundation for programs to assist Haitian-Americans and Haitians who relocated to Miami as a result of the earthquake. The Knight Foundation grant, which The United Way Worldwide and Operation Helping Hands

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matched, and The Miami Foundation supported, was used to provide over \$300,000 in financial assistance to those impacted by the earthquake living in Miami through the Haitian Earthquake Relief Fund (see *APPENDIX 5* for the United Way Report).

From June-September, our partners worked to complete a comprehensive community needs assessment by conducting focus groups, completing a gap analysis and completing telephone surveys and/or questionnaires to adequately document the needs and stories of our South Florida's survivor community and their host families (See *APPENDIX 2* for Individual Provider Survey). The partners conducted a combined 33 individual survivor interviews and eight focus groups with 116 participants. Each group was very diverse and represented a cross section of the survivor population. For example, within one focus group of 11 survivors, there was a lawyer; a dentist; an accountant; a taxi driver; a school bus driver; an upholsterer; a fire fighter; an artist and three individuals who had not been working prior to the earthquake. The participants ranged in age from a 16 year old student to an 88 year old retiree, with a gender breakdown of approximately 45% male and 55% female. Below are the partners who participated in this process.

- **Association of Haitian Social Workers (AHSW) under the umbrella of the Haitian-American Professionals Coalition (HAPC)**
AHSW is a non-profit, professional association. Founded on October 1, 2004 as part of a response to the flooding in Gonaives, Haiti, AHSW has since taken on many more national and international causes as part of its effort to bring attention to the plight of the underserved and underrepresented. The organization's membership continues to grow as it educates and advocates for the many needs of the community at-large by providing direct services including: Individual, Group & Family Counseling; Mediation/Conflict Resolution; Mental Health Counseling; Life, Marriage and Financial Coaching; and Youth Prevention/Intervention Services and by providing seminars on Organizational Effectiveness and Psychological First Aid. The mission of the organization is to empower the Haitian community through education, advocacy, and personal development, whereby their social issues are addressed; thus connecting them with community resources to enhance their quality of life. AHSW completed a literature review of available health and mental health services, and compiled results from 17 key stakeholder organizations providing health and/or mental health services to survivors, both locally in South Florida and in Haiti. AHSW utilized multiple interviewing methods including phone, emails, and face-to-face interviews. The research took place from July 2011 to the early part of August 2011.
- **Fanm Ayisyen Nan Miyami, Inc. (FANM)**
Founded in 1991 to work for the social and political empowerment of Haitian women and their families, FANM is a social services agency that provides an array of services. FANM provided case management services as well as some counseling with referrals for further evaluations to the survivors of the earthquake. The case management services included but were not limited to: financial rental assistance, food vouchers, assistance with accessing public benefits and health care, and support services such as after school care, parenting, literacy and computer skills training. FANM also provided immigration service if this was needed. FANM conducted two focus groups (July 7th and July 28th) with 35 participants in which a cross section of issues was presented.
- **Galata**
GALATA is a social services agency, which provides services indiscriminately to minorities and low-income residents of Homestead and Florida City. Galata has been serving survivors since May 2011 and have served 91 unduplicated clients to date. The agency has provided Case Management, Financial Assistance, Mental Health Counseling, Legal Services, Information and Referral and Career Development. Other services GALATA is providing to assist the survivors includes direct psychological services and therapy to

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assist in the emotional trauma caused by the events in Haiti. Focus Groups were conducted on June 15th, June 24th, & July 21st, with 09, 22, 13 participants respectively.

▪ **Haitian Cultural Arts Alliance (HCAA)**

The HCAA was founded in 1994 as a nonprofit organization dedicated to the preservation and promotion of Afro-Caribbean culture, with a focus on Haiti, for the benefit and enrichment of the local community. It is HCAA's objective to become a one-stop information, recreation, and research center for Afro-Caribbean history and art enthusiasts that contributes to a developed strong sense of community awareness, individual pride, self-worth, commitment, and involvement in the Afro-Caribbean community of Miami. HCAA conducted interviews with 16 survivors at Little Haiti Cultural Center Summer Camp Program and Anderson Boyd High School, located in Broward County.

▪ **Haitian Lawyer's Association (HLA)**

Founded in 1997, HLA is a non-profit legal organization dedicated to protecting and advocating for the legal rights of the Haitian community. As a member of The, HLA was tasked to report on the legal issues facing Haitian nationals; with emphasis on Haitians survivors of the 2010 earthquake; to identify methods by which these issues can be addressed; and to identify the stakeholders who would be involved such undertakings.

▪ **Minority Empowerment and Development, Inc. (MDE)**

MDE is a local organization located in Broward County whose mission is to provide professional and culturally competent programs and services that empower Caribbean and minority individuals and families. Since its inception in 1996, MDE has provided social services to Haitians, Caribbean and other minority individuals in Broward and Palm Beach Counties. MDE conducted a Focus Group on June 21st with 10 participants.

▪ **Sant La - Haitian Neighborhood Center**

Sant La is a Miami-Dade County based neighborhood resource center, established on December 6, 2000, that offers a number of vital services to the Haitian community in support of their successful integration. Sant La also serves as a bridge to the countywide systems of care to link Haitian community residents to available services, resources, and safety-net benefits. As of January 25, 2010, Sant La began to serve earthquake survivors and continue to serve them to date. Sant La conducted a focus group on July 22nd with a random group of 11 survivors selected from among 30 survivors who had previously been surveyed about their experiences in the year following the earthquake in Haiti.

▪ **The Haitian-American Chamber of Commerce (HACCOF)**

HACCOF was incorporated in Florida in February 2005. HACCOF is a membership organization that serves as an advocate for the community as well as resource for consumers and businesses. The organization is dedicated to serving both the needs of its members and the economic development needs of the broader Haitian Community. The Chamber is made up of people, professionals and companies from all types of industries and backgrounds, all unified by a common vision of prosperity. The mission of HACCOF is to be the leading organization that brings all types of businesses together.

▪ **The Little Haiti Housing Association (LHHA)**

LHHA is a non-profit community development corporation comprehensively serving the development needs of the low-income residents of Little Haiti. Since its incorporation in 1987, LHHA has been committed to its mission of providing decent, affordable housing as a base for an improved quality of life

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for the residents of Little Haiti and neighboring communities. LHHA is a community development corporation comprehensively serving the affordable housing and community development needs of the Haitian-American community in northeast Miami-Dade County.

To fully understand the Socio Economic needs of the target population, The Little Haiti Housing Association (LHHA) and The Haitian-American Chamber of Commerce (HACCOF) worked collaboratively to interview survivors as well as local agencies working to build the economic capacity of survivors and their host families. The two organizations worked jointly to identify the socio-economic needs of the target population and to come up with short term and long-term strategies to meet these needs. LHHA and HACCOF conducted a focus group with 16 participants on August 3rd.

Our partners reported that interviewing the survivors of the earthquake was both harrowing and life affirming. The Haitian people have long been described as being resilient. Conducting the individual interviews and focus groups was a reminder of the resilience that seems to be part of the very fiber of their being but also of their positivity and strength. Although all of the survivors had faced an unimaginable and very traumatic ordeal and stared death in the eye, they are determined to move forward and embrace all that life is offering each day. Their overall outlook is not one of bitterness but full of hope. The survivors overall are optimistic in spite of the hardships they face daily. Focus group participants as a whole shared a similar vision for personal independence, self-sufficiency and privacy.

While their needs are very individual, there are some other common threads. Many of the survivors do not speak English. We often heard frustration expressed in not being able to communicate fluently in their efforts to assimilate and meet their needs. As in many immigrant populations, far too many lack knowledge of available community services and resources. Many reported not knowing where to go for help and what types of services are available and of which they qualify for. Participants reported that living with relatives in the United States has been a struggle. They indicated that the longest period that a survivor can realistically expect to live with relatives is approximately three months. Participants stated repeatedly that because relatives hosting the survivors have their own responsibilities and financial hardships, their coping skills and ability to accommodate the survivors does not last for more than three months.

Participants reported that after being traumatized by the earthquake, then emigrating to the United States, they are now stressed because they feel as if they are a burden to their host families. As a result, many of the survivors have chosen to go back to Haiti even though the conditions are not any easier there. They reported feeling mentally unstable; experiencing frequent bouts of depression and anxiety. While many moved here right after the earthquake and at the first possible opportunity, others reported moving to Miami due to the increasing violence in Haiti. Many of the teens we spoke with were sent to live in Miami by their parents or other family member in hopes of a better life. The majority of participants were concerned about legalization. The participants stated that one could easily be abused by anyone who is aware of their immigrant legalization status. Some reported having been victimized by relatives, friends and other Haitians because of their legal status. Some participants reported having worked and not being compensated by their employers who took advantage of their fear of deportation. The participants also reported that their children are traumatized and very confused about the abrupt changes they are experiencing in their lifestyle.

Respondents overwhelmingly expressed feelings of disappointment for the lack of support from local government entities, the United States Government and the International Community. They expressed disappointment at the absence of an emotional and financial support system. Most host families and relatives stated that upon coming to the United States they expected a strong “encadrement” or support system. They expected a more receptive welcome from family members, relatives or friends here in the US; they were bitter

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about this lack of support/welcome. Many came with pre-conceived ideas and notions about how prepared and willing the United States would be in meeting their needs that have not been realized.

Participants were asked to describe the contrast in their lifestyles before and after the earthquake and their adaptation in the United States. All participants reported having constant nightmares and stated that life was “normal” before the earthquake. One participant stated, “after the earthquake, life became devastating, loved ones were lost, houses and irreplaceable personal belonging were destroyed; living in America is not easy, one has to completely relearn how to live.”

In our effort to fully document the additional needs of the survivors and their host families, we have classified their needs/issues in three categories: Basic Needs/Socio-Economic, Health and Mental Health, Legal and Immigration Issues.

2. Basic Needs/Socio-Economic Issues — Actions Needed

The actions needed to address these issues focused on stable housing, education for employment, and employment.

- *Lack of stable, permanent housing* – We learned that many survivors have been welcomed by friends and family whose households were ill equipped to handle additional guests because of already over-crowded conditions and financial pressures on already strained households. This situation has resulted in very tense dynamics for many survivors, as their host households have doubled/tripled in size, without the corresponding financial support. Hence, many survivors have been forced to move around between friends and family, or in some cases, families have had to “split up” to attempt to evenly distribute the shelter burden.
- *Access to employment* is a driving need in the lives of the survivors. Although the survivors expressed the desire to work, the legal status requirements and the challenges caused by the current unemployment rates/ employment crisis in the US make this goal unrealistic in the near future. Many reported that only one person in the household is able to work to support several members. Many expressed frustration at seeking assistance just to be turned down repeatedly. Many expressed feelings of being overwhelmed and frustrated because they are not able to find jobs to take care of themselves and their families who are here and in Haiti.

In one focus group with 11 participants, nine (9) reported they were working in Haiti prior to the earthquake, either for a company or were self-employed. 100% of the working respondents reported being able to care for self/family prior to the earthquake. Post-earthquake, 94% of the respondents were unemployed and reliant upon family and friends in both South Florida and Haiti of which 13% have started their own informal business ventures here in the US. Of the 11 participants, 75% are interested in pursuing education or training for employment; 69% would return to Haiti either in the mid-term or long term while 100% reported they would not return immediately; and 63% reported they would consider attending seminars/courses geared towards developing their entrepreneurial/ business skills.

- *Lack of adequate financial resources to care for self and/or family*. All participants indicated that they personally experienced financial hardships; most stated that they were not provided the financial support they expected, either because their host family/relatives could not afford the additional expenses of their care, or were not prepared to house them for such an extended period of time.

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- Education emerged as a primary support need; whether it is English language acquisition, vocational training, an educational degree (post secondary) or some other credential. Resources/money for school/college fees and other associated expenses such as transportation to attend school are not available to them.
- Temporary state of resources. Many expressed feelings of hopelessness, of being overwhelmed and depressed due to their financial situation. Even in cases when short-term tangible resources are put into place, participants are anxious because of the temporary state of these resources and desire more long term solutions to reach their goal, which many said is to become self -sufficient.

3. Health and Mental Health Issues

One component of The Partnership was to conduct a Local Relief Efforts Survey assessing health and mental health needs and analyzing gaps. A Medical and Mental Health Care Provider Survey (see APPENDIX 3 for survey sample) was created to help identify duplicated clients and services, secondary medical illnesses, lack of coordination between the medical and mental health agencies, and gaps in providing basic needs.

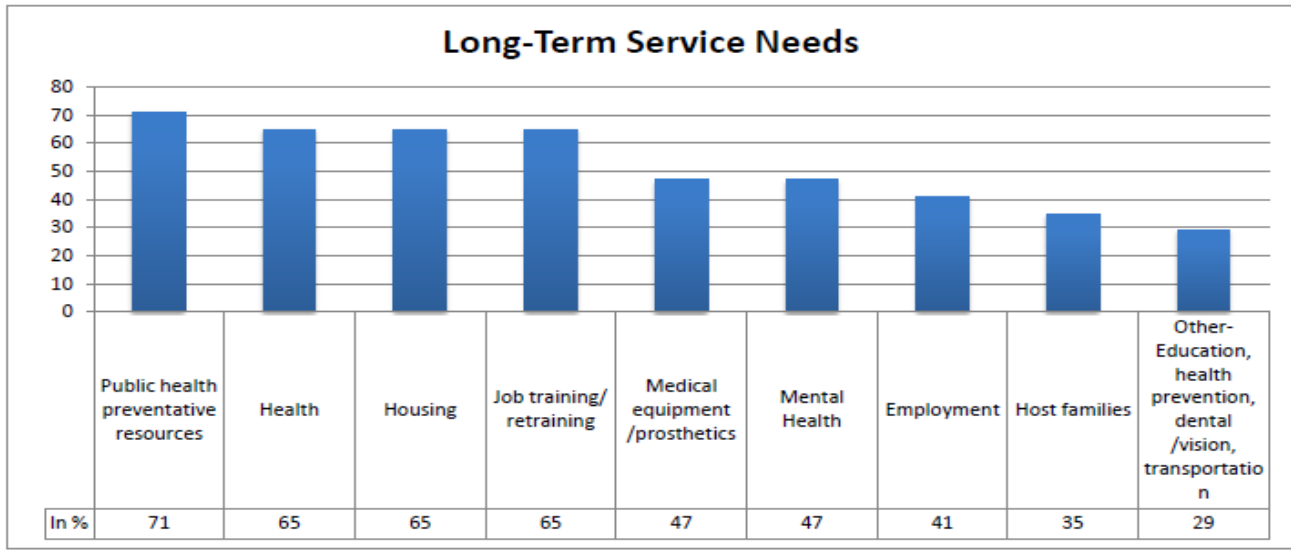
The survey was submitted to agencies of the health and mental health community located in Miami-Dade and Broward counties as well as in Haiti. The members of the Association of Haitian Social Workers, Inc. (AHSW) under the auspices of the Haitian Association of Professionals Coalition (HAPC) conducted the comprehensive assessment with 15 agencies. AHSW utilized multiple interviewing methods including phone, emails, and face-to-face interviews. The research took place from July 2011 to the early part of August 2011.

The purpose of the survey was to gauge the medical and mental health services being provided to earthquake survivors, the short or long-term services that are being utilized to address their quality of life, the current gaps or changes in services, and the recognized short and long term recovery needs. The survey assessed how the survivors' psychological needs are being met since Post-Traumatic Stress Disorder (PTSD) amid the aftermath of a natural disaster is as detrimental to the human psyche as a physical impairment. Additionally, the assessment also identified the existing agencies providing similar services in order to coordinate and streamline efforts, thus reducing duplication and redundancies. Outputs of this survey include the creation of a plan to support and enhance the health and mental health care of Haiti's earthquake survivors.

Major Findings:

1. 88% reported providing health/medical and/or mental health services.
2. 75% reported there are gaps in services they have not been able to adequately respond to including: Clothing – 56%; Food – 62%; Medical supplies – 56%; and Social Services/Counseling – 56%.
3. 64% reported that medical needs have not changed in the 16 months since the earthquake.
4. 67% reported that the mental health needs have not changed during this period.
5. Long-term service needs identified included: Mental health; Health Access; Housing; Medical equipment and prosthetics; Job training/retraining; and Employment.

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The following long-term needs were identified by health and mental health providers:

- Public health preventative resources-71%
- Health-65%
- Housing-65%
- Job training/retraining-65%
- Medical equipment /prosthetics-47%
- Mental Health-47%
- Employment-41%
- Host families-35%
- Other-29% (included education, health prevention, dental/vision, transportation)

The need for mental health counseling in the Haitian culture is secondary to basic needs such as food, shelter, and employment. This often serves as a hindrance in ensuring that clients and their families receive adequate services from a holistic perspective. Mental health care ranked at 47% with concerns about Post-Traumatic Stress Disorder (PTSD) being primary, yet few medical service providers were able to identify agencies providing mental health services. Moreover, agencies able to provide these services, lacked the funding to do so thus this vital area of need went unmet. One respondent mentioned that people were not given the necessary support to manage the trauma they experienced due to the earthquake.

Also noteworthy is the mental health services provided by Project HEART (Haitian Emergency Action Response Team). Project Heart was funded by the Substance Abuse and Mental Health Services Administration (SAMHSA) and is being implemented by New Horizons Community Mental Health Center in Miami Dade County. Project Heart works with several community-based providers, including many of the partners involved in this post-earthquake documentation project, to address the psychological needs of earthquake survivors. The partnership made numerous attempts to include the very specific accomplishments and challenges experienced by Project Heart. Unfortunately, the information was not provided in time for our established printing deadline.

Providers Responding to the Survey:

Of the 15 providers, six provided services in South Florida, five worked in Haiti, and four served both locations. Eight of the 15 offered health services, seven delivered mental health interventions, and four provided both

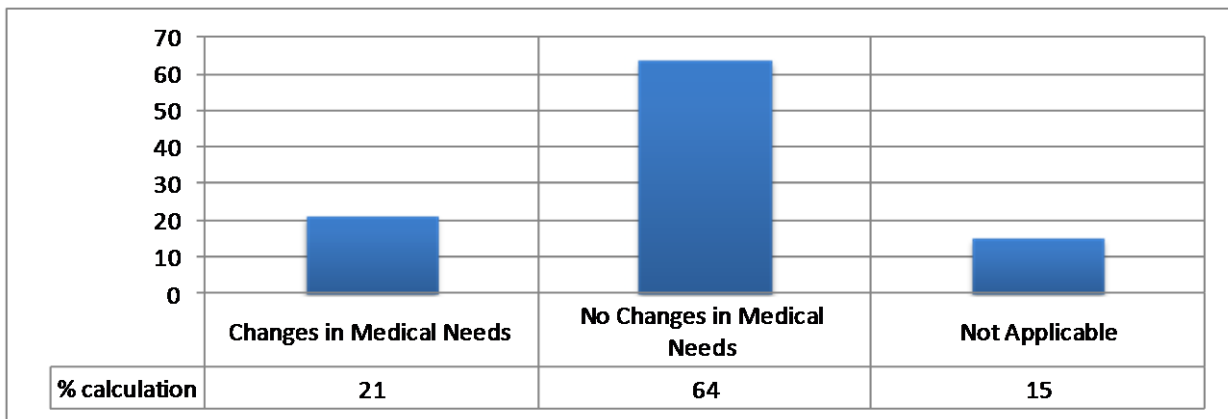
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services. Currently, 88% of the agencies represented are continuing to provide services, but 12% are no longer offering services to earthquake victims.

Changes in Medical Health Needs 16 Months Later

Initially, in South Florida and in Haiti, the medical interventions revolved around earthquake-related injuries. However, currently, South Florida providers are focusing on treatment for chronic illnesses, e.g., asthma, hypertension, and diabetes, which seem to be endemic to this particular population, especially hypertension. Vision and dental care, health education, and medical prevention, such as current immunizations, are other areas of concern.

For health professionals in Haiti, treating diseases, like malaria, cholera, and other contagions remain at the forefront although Obstetric and Pediatric care are priorities. Disease prevention and health maintenance for individuals facing organ damage post-earthquake is a second area of concern. The servicing agencies responded that 21% of clients had changes in their medical needs, 64% reported no changes in these matters, and 15% did not respond to the question. For agencies that answered ‘No changes in medical needs’, the survey did not require any further explanation for this response.



Changes in Mental Health Needs Post-Earthquake

For the seven providers that offered mental health services, 67% reported that Post-Traumatic Stress Disorder (PTSD) is as acute now as it was the day after the earthquake. Clients are currently experiencing PTSD with key symptoms including appetite loss, aggression, flash backs and sleep disturbances. Ongoing counseling for children and their caretakers should address any post-traumatic stress, ongoing loss and/or depression. 33% reported that there have been changes in clients mental health needs within the 16 months post-earthquake

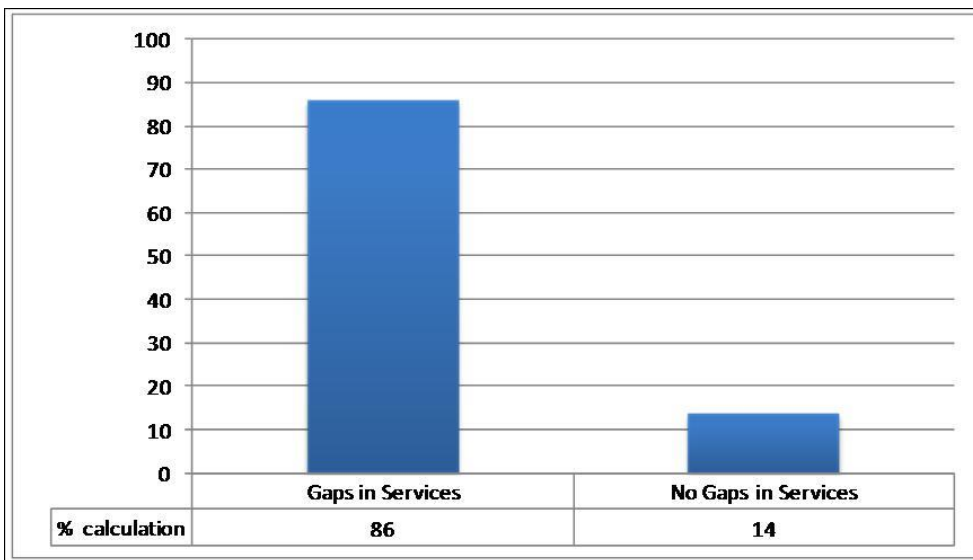
One respondent indicates that adjustment to changes in family roles is also a presenting problem. In South Florida, where children have been sent to live with extended family members or entire families are displaced and living in already congested households, these shifts in the family dynamics are stressful for all parties involved. Refugee children attending school and assimilating within the American school system also find themselves taking on more adult roles and responsibilities, thus challenging the existing Haitian family structure. Parents are experiencing a decreased perception of self-worth and self-esteem due to continued lack of prospects for employment and constant reliance on other family members for their survival. Parental authority and child- rearing issues appear to present conflict in the parent-child relationship.

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Unaddressed Needs/Gaps in Services

Both in South Florida and in Haiti, 86% of the respondents reported gaps in services that are not being addressed. The following needs were listed:

- Immigration status (South Florida)
- Medical coverage (South Florida and Haiti)
- Increased focus on mental health treatment (South Florida and Haiti)
- Increase agency partnerships/client-agency linkage (South Florida)
- Schooling (Haiti)
- Mobile clinics (Haiti)
- Medical Insurance for chronic health conditions (South Florida)
- Housing (South Florida)



Other Organizations known to still be Actively Involved

Respondents identified a number of agencies providing similar services. They are as follows:

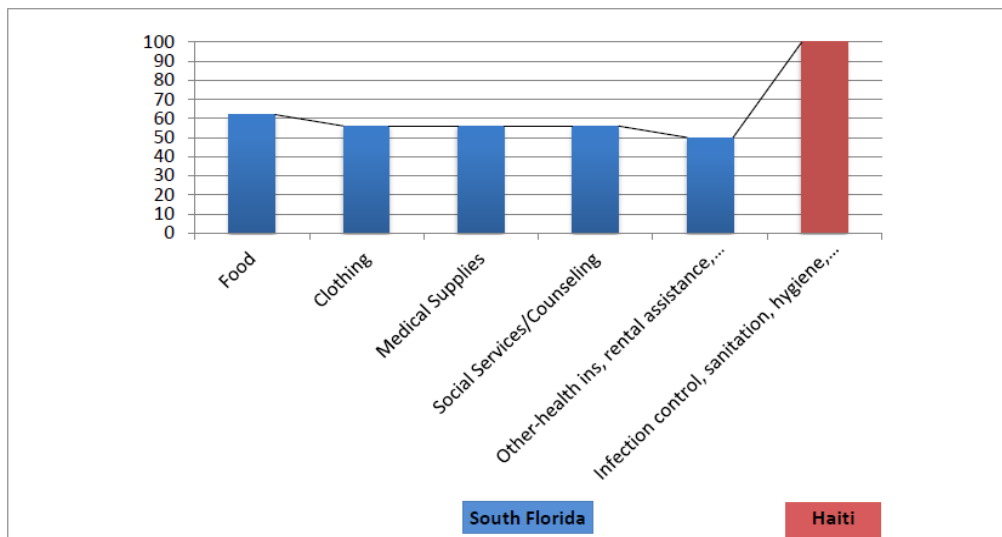
- AIDS Healthcare Foundation
- American Red Cross Broward Community and Family Health Centers
- Broward County School Guidance Department
- Broward County Shelters
- Broward Health
- Broward Housing Authority
- Catholic Charities
- Catholic Community Center
- Church World Services
- Haitian-American Grassroots Coalition
- HANDY – Helping Abused, Neglected, Disadvantaged Youth
- Holy Cross Hospital
- Islam Relief
- Medi-Share

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- Memorial Health Care System
- Minority Development and Empowerment
- New Horizons CMHC
- Our Children Our Future
- Smith Community Health Center

Medical and Mental Health—Basic and Other Needs Requiring Outside Support

The health or mental health agencies found a significant demand for basic needs that other people or organizations could support including: Food-62%; Clothing-56%; Medical Supplies-56%; Social Services/Counseling-56%; and Other-50% (includes health insurance, rental assistance, education/awareness activities). Haiti’s providers reported 100% needing infection control, proper sanitation, hygiene, and proper waste of disposable products.



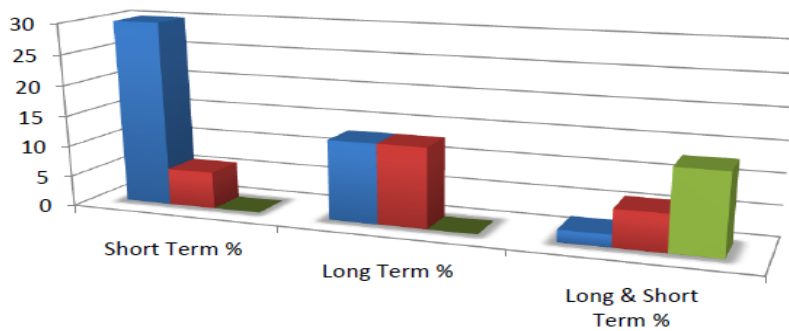
In addition to speaking with providers, the focus groups and interviews with survivors revealed a number of emotional/psychological challenges being experienced by all survivors including:

- **Difficulty with Emotional/Psychological Transition and Adjustment:**
 - Many respondents reported that they suffered from anxiety; headaches; vertigo; panic attacks; insomnia; feeling disoriented and unable to concentrate.
 - Many reported overwhelming feelings of depression, due to financial losses, family losses, and the uncertainty of the future. “What do we do now?” is the question we often heard as very few have a working or realistic plan for the future.
 - All the participants expressed having difficulty talking about the event. They were reluctant to talk about the event in order not to re-live the horrific moments and to avoid posttraumatic symptoms from reminiscing about the Earthquake. Survivors stated that the earthquake left a permanent scar on them financially, emotionally and physically.
- **Frictional relationships with host families:**
 - Friction within the household dynamics once the survivors had been there (in house) over several months. It was reported among several groups that many of the families indirectly make the survivors feel unwelcomed or make them feel that they have over extended their stay.

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- Parents with small children were facing difficulty because the host family may not be tolerable of normal children behavior (running around, playing, and jumping on furniture) and often become impatient with their children.
- Unpleasant living arrangements- in one focus group, 10 out of the 16 youth reported being unhappy with their current living arrangements. Although not currently homeless, they expressed fear and uncertainty around their present living situation. Some stated that their host families were not nice to them. Several of the participants stated simply, "I wish I were living with someone else." All of the youth reported missing their parents/families and yearning to go back to Haiti even if for a short visit.
- Host families are often families in very difficult situations and they themselves experience a great deal of stress. In many instances, some households doubled or tripled in size. Many host families were in dire financial situations and were barely making it and yet they have additional survivors to care for with no additional financial and emotional support. Many are really struggling emotional and feel overburdened and overwhelmed. Many in addition to hosting survivors, have multiple family members in Haiti which they are financial responsible for.
- The children of the host families are also struggling to adjust to having these additional house guests. Many have had to give up a lot to help accommodate these houseguests.
- Many families have been divided because a family may not have been able to take in all family members who relocated here. Sometimes and usually due to financial hardship, family members may go months without seeing each other. Many have family members that were forced to relocate to other parts of the United States which they never get to see.
- Children Survivors are often bounced around from household to household and have very little stability.
- Many host families are suffering from compassion fatigue.
- Inability to fully integrate into a foreign community – Many expressed the importance of wanting to fit in, to fully integrate and feel a sense of connectedness. Particularly with the youth we spoke with, this is compounded by the lack of language fluency, fear of being ridiculed and rejected.

Duration of Services



	Short Term %	Long Term %	Long & Short Term %
South FL	30	13	2
Haiti	6	13	6
Both	0	0	13

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In regards to short-term services, those servicing clients here in South Florida reported that 30% percent received short-term services as opposed to 6% receiving services in Haiti. Agencies providing services in both locations, reported long-term services were provided to 13%. Both short and long-term services were delivered by 2% of the agencies in South Florida, in contrast to 6% in Haiti, and 13% for those furnishing services in both South Florida and Haiti. However, 17% of the service providers did not respond to this question.

Additional Commentary

Respondents were given the opportunity to supply additional comments.

Henderson Behavioral Health reported: Besides emergency mental health services, flex funds were provided and used to purchase uniforms, clothing, bedding and furniture, emergency groceries, bus passes, emergency rental assistance which helped with the youth and caretaker's transition and adjustment into their new environment. Also, sensitivity towards the Haitian culture and its needs require community awareness and education.

Foyer Saint Camille Hospital reported: Education about health prevention, and availability of self-hygiene and sanitation maintenance were persistent problems.

Respondents to the Medical and Mental Health Care Provider Survey included:

American Muslims for Emergency & Relief	Broward County Health Department
Catholic Charities, Inc.	Community Action Agency
Dureny & Associates	Food for the Poor
Foyer Saint Camille Hôpital Croix des Bouquets Haiti	Gulf Coast Jewish & Family Community Services
Haitian American Club	Haitian American Nurses Association of Florida, Inc.
HANDY, Inc.	Henderson Behavioral Health
Institute for Child and Family Health	Jackson Health Systems
Rapha Family Services	

4. Legal & Immigration Issues

The Haitian Lawyers Association (HLA) identified five key issues that need to be addressed to improve the future options for survivors now residing in South Florida. These issues are being addressed currently by a number of stakeholders, including but not limited to: The Miami Law Clinic at UM Law School, Florida Immigrant Advocacy Center (FIAC), Alternative Chance, Loyola Law Clinic, Center for Constitutional Rights, and The Institute for Justice and Democracy. This is evidenced by numerous written communications with the Secretary of Homeland Security as well as with other Department of Homeland Security (DHS) staff, setting forth the concerns and requesting specific outcomes.

The key issues identified include:

- The refusal by the U.S to stop deportations of Haitian Nationals in light of the terrible post-earthquake conditions still existing in Haiti; such deportations have resumed after a halt in 2010.
- The need for a humanitarian parole program aimed at reuniting families.
- The lack of transparency in cases involving deferred actions where the standard for adjudication is not commonly known and the processing period is overly long.

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- The deadline by which Temporary Protected Status (TPS) grantees had to submit their renewal application was August 22, 2011. A request was made by the stakeholders listed below, to DHS to extend the deadline beyond August. In response to that request, DHS advised it would accept late applications on a case-by-case basis provided applicant provides an acceptable reason for the delay.
- DHS is now looking at cancelling work permits for TPS applicants as soon as the application is rejected. Currently, a work permit issued to a person whose application is subsequently denied remains valid during the pendency of an appeal. There is some indication that this might change. A final decision has not yet been made.

Legal Options and Barriers

Deferred Action was one of the few legal immigration reliefs open to Haitians survivors of the earthquake who arrived prior to or immediately after the earthquake. Deferred Action services are particularly hard to obtain because there are no pre-established forms to complete, and USCIS has not clearly defined its own evaluation criteria. This means that only attorneys or accredited representatives have the knowledge and skills to assist victims in preparing their statements and documenting their requests.

On January 15, 2010, in response to the devastation brought about by the earthquake, the DHS announced that it would grant the long-awaited TPS for 18 months to Haitian nationals who were in the United States illegally, prior to January 12, 2010. Under this plan, those who met the requirements for TPS could apply for the designation and a work permit. In addition, U.S. Immigrations temporarily stopped the deportation of about 30,000 Haitian nationals.

In May 2011, the initial TPS designation was extended. An added re-designation allows Haitians who have continuously resided in the United States since Jan. 12, 2011 to obtain TPS, provided they meet all other TPS eligibility requirements. The information listed below was obtained from communication with Haitian attorneys in private practice and lawyers associated with the American Immigration Lawyers Association (AILA), FIAC and Catholic Charities Legal Services.

In addition, to the work conducted by HLA, Legal/Immigration issues identified by our other partners during focus groups with the survivors include:

- The TPS application deadline was missed by a number of survivors. Expectations that the US would assist them with financial support and transportation of their family members from Haiti were dashed. Many felt the level of assistance is inadequate and reported being at a standstill, as they cannot attend school or work due to their immigration status.
- General lack of information on TPS. Many survivors don't know if they qualify. There is also the issue of their perception of what is available versus reality; many are operating based on old and inaccurate information.
- Confusion on whether to apply for TPS versus Humanitarian Visa (provides access to medical care/public benefits, but work is not permitted). People don't understand the difference between the two programs.
- TPS status requires a fee. These fees have been waived in many instances, but some survivors are not aware of this. In some instances, applicants are being told by those who are helping them to fill out the application not to request a fee waiver so they are not viewed as a burden to the US; they are advised a request for a fee waiver may adversely impact the outcome of their application. There is some concern that fees paid by survivors are being pocketed by unscrupulous individuals helping them to fill out their applications.

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- Many student survivors are here illegally and don't know about legal resources, including TPS. These youth have no or very little support, some graduated from high school and have not been able to continue their education.
- They all expressed the urgency of becoming legal by way of Asylum or TPS and hope to become eligible to work and/or receive some governmental benefits.

C. Community Resources -- Inventory of South Florida Relief & Recovery Related Initiatives (Lambi Fund)

Due to its proximity to Haiti, Miami has become the epicenter of US-based NGO (Non-Governmental Organization) activity in Haiti and serves as a very convenient launching point and networking arena for Haiti development work. The major organizations either have offices and representatives here, while the smaller ones were created in the immediate aftermath of the earthquake or represent the multitude of fledgling organizations. This report represents a compilation of such organizations. The research was conducted on the internet, with search words such as Haiti, Haitian organization, Haitian NGO, aid to Haiti etc. The search was narrowed down to organizations based in Miami/Broward or organization with offices or representatives in those two counties. Concerning smaller organizations, the search was also internet based, but enhanced by personal knowledge of the field.

Finding accurate information on non-profits and community based organizations has been very difficult. Websites are often poorly maintained, if they are maintained at all; contact information is often out of date and/or woefully inadequate, and there is often so much institutional turnover that even the people you talk to might not have a clear and comprehensive sense of what is going on within their organizations. That being said, there is information available and people continue to provide direct service projects and undertake fundraising efforts. Most importantly, there are many organizations that, while they did not currently have any operational projects, certainly have the potential, with the right prodding, for service projects/fundraisers to start up again. Therefore, there are sufficient latent resources to assuage the partner's fears that Haiti would be forgotten after the earthquake.

The big NGOs led the charge in that regard. Most of the major international development NGOs in Miami has an enormous variety of projects going on and while it is sometimes difficult to track down the precise locations of projects, there was enough geographic variety, to conclude that many of the problem areas in Haiti are being addressed. The only concern with these organizations is that it is difficult to ascertain exactly what priorities are being identified by the Miami office and to what extent national policy is setting priorities.

The major religious organizations are still participants, much as they were before the earthquake. The Catholic Church and its many service ministries (CRS, ACCADM, and individual churches) are all active, as is the Mormon Church, Baptist organizations, and non-denominational churches. However, these efforts are all heavily influenced by missionary work which brings both negative and positive aspects. The positives are that many of these churches have been in Haiti for many years, which would imply a level of familiarity and efficiency that comes with knowing the land.

The university system is also well represented. Florida International University (FIU) and University of Miami (UM) have both stepped up to the plate, during and after the earthquake. Project Medishare (UM) is very involved and provides multiple services. FIU has conducted several fundraising campaigns and departments such as the School of Medicine, School of Nursing, the School of Law, the Business School and the School of Engineering are involved in projects targeted to Haiti.

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Specific information about many of the organizations is limited to information on their websites. Predictably, large NGOs such as the American Red Cross and Catholic Relief Services have sizable budgets, however smaller organizations are struggling with being able to raise adequate funds to sustain their various projects.

The smaller Haitian led organizations are very hard to reach; most do not have a website or contact numbers for physical offices. When approached, officers or members of such organizations while eager to describe their mission and activities, are less forthcoming with information about their organizational structure, board memberships and funding. Boards of directors are mostly White and Hispanic. However, there is a solid contingent of Haitians on most boards.

Please see *APPENDIX 4* for the full Inventory of Community Resources.

D. Conclusion and Recommendations

1. Basic Needs/Socio-Economic Needs

The focus groups held with targeted groups of survivors quickly clarified that most survivors had established some type of livelihood for themselves in Haiti before the quake and were striving to do more. Although many of them may have been struggling financially, we heard that they were optimistically working towards getting to a better place economically. One has to take into account that the historic context of that period in Haiti, which was one of moderate to good optimism, with relative political stability, increased Diaspora travel and interaction and international investment interest. The earthquake crushed all of these hopes and sent the respondents scrambling to safeguard whatever they had left and emigrate to the United States, or elsewhere in the Haitian Diaspora the first opportunity they got.

Although most of them received support from family and friends here, they were mostly independent and self-reliant individuals that could not accept “handouts” without feeling shame and guilt. Some of the respondents clearly needed to talk not only about their financial and professional stress but also about the psychological stress they are going through by becoming a burden to others. It is also important to note that most of the respondents are individuals who came to South Florida with 2, 3 or 4 family members. The presence of multiple family members implies that their socio-economic needs go beyond business and professional enhancements and involve other aspects of family concerns such as health, education and elderly care.

The majority of survivors not only have a will to enhance their skills but also very good potential for additional professional capacity-building skills. Their eagerness to earn more coupled with their past active professional and entrepreneurial activities will reduce their learning curve in whatever they choose to learn. Most of the respondents were of working age (18-55) and a great many of them expressed a willingness to learn a trade or enhance a skill that they could take back to Haiti (13 out of 16).

Based on the responses provided by the survivors surveyed in our outreach, we recommend the following:

A). Housing

- Housing must be obtained that is permanent, stable, and that keeps families together.

B). Job Training and Development

- The creation of adult focused professional and entrepreneurial education and training programs tailored around market trends in Haiti as well as South Florida.
- Widespread outreach to help identify and recruit potential students.

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- Comprehensive assessments to test current skill sets including language proficiency, education level and professional and trade experience.
- English language skills education.
- Resume writing and interviewing skills education.
- Integration of supportive services based on an individualized student plans that include case management, college and career counseling, tutoring, financial aid counseling, referrals, and follow-up services.

Such an education and training program requires an analysis of the types of supportive services needed, local and regional market trends, and a post program mentoring support system. However, the objectives of such a program may be compromised if not accompanied by language skills enhancement and immigration status regularization.

C). Employment and Job Training

- Must be linked to what is happening in Haiti and what opportunities exist in Haiti. Must look at the needs in Haiti and provide training and education that match those opportunities.
- Must match job search to skill set and job experience.
- Job placement assistance locally and in Haiti including the organization of Job Fairs, identifying opportunities for service learning and internships and linkages with programs and opportunities available in Haiti.

2. Health and Mental Health Needs

Collaboration and partnership—a “system of care” is the most effective organizational structure through which survivors can begin the healing process. As agencies continue to serve this high-needs population, transparency in services and further collaboration are paramount to ensure that clients are being served with utmost fidelity (Hedlund, 2011, p. 12). Earthquake survivors will be struggling with the remnants of this traumatic event for years (Ursano et al, 1995, p. 203), and the services provided should not cause further confusion in what is already a very tense period in their lives.

To create an effective recovery plan for the January 12, 2010 earthquake survivors, service coordination among the providers is paramount. A uniformed service-delivery system should be implemented to prevent duplication of services, to ensure that clients don’t receive redundant or inaccurate information, and can maneuver through the medical and social service bureaucracy with ease and expediency. To adequately meet the Health and Mental Health needs of this target population, we recommend the following:

A). Comprehensive Case Management

Earthquake survivors should complete assessment and service history with their providers, which can be used to track the services already received by clients and to highlight their pending needs.

B). Culturally Responsive/Competent and Comprehensive Primary Health and Mental Services

It is widely acknowledged that Earthquake survivors will be struggling with the remnants of this traumatic event for years. Consequently, the services provided should not aggravate or cause further confusion in what is already a very tense period in their lives. A “system of care” service coordination partnership among providers is paramount in order to assist survivors through this difficult period. Such a system must take into account the following realities:

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- 1). Clients will be more apt to seek out mental health and medical health intervention when the system of care incorporates a comprehensive approach to the client's well-being and livelihood. Mental health services are most effective when they ensure that basic human necessities such as food, housing, employment are addressed, which also support clients' self-worth and lead to improvement in their health prognosis. As acute injuries are no longer a primary concern, health issues such as hypertension, obesity, high cholesterol, and diabetes are of great concern, given the risk factors in this target population. Many survivors are likely to experience preventable illnesses, since health care in Haiti is not easily accessible and available. Thus, seeking out preventative healthcare and services may support survivor recovery.
- 2). A working partnership needs to be developed between the medical and mental health communities to augment the services offered. Providing on-going cross-professional development and workshops can ensure that professionals from both fields are continually exposed to current trends in the treatment of trauma from a holistic perspective. Continuous inter-agency collaborations and community advocacy will ensure that members of the medical and mental health professions do not remain in silos with respect to the work that they do with earthquake survivors.
- 3). Medical professionals can serve as a conduit in introducing clients to much-needed mental health intervention when dealing with a cultural group in which mental health counseling is not encouraged or sought. Medical staff can communicate to clients the interconnectedness between physical well-being and positive mental health, and teach them how a deficiency in one area leads to a deficiency in the other. Medical professionals must make effort to become and remain well-informed about the correlation between medical and mental health issues (Ursano, Fullerton, & Norwood, 1995, pp. 196-197).
- 4). An inclusive plan to address basic needs as an adjunct to medical and mental health services can better serve clients. When health care programs ensure that basic human necessities such as food, housing, and employment are also addressed, clients' self-worth improves and improvements in their health prognosis often occur.
- 5). Lack of attention to the basic needs of survivors compromises treatment effectiveness. Mental health issues, such as depression and feelings of displacement, as well as medical health issues, such as hypertension and diabetes, are aggravated by insecurity in housing, financial security and family stability. Clients will be more apt to seek out and benefit from mental health and medical health interventions when the system of care incorporates a comprehensive approach in their client's well-being and livelihood.

3. Legal and Immigration Needs

The priority legal and immigration strategies are:

- Engage stakeholders in continuous formal conversations/negotiations with members of the U.S Congress, the Administration and any other groups who are friendly to Haitian interests.
- Expand alliances and collaborations with individuals and institutions that are friendly to Haitian community interests.
- Continuing to assist survivors in obtaining TPS status.
- Continue to publicize the plight of survivors throughout key sectors.
- Continue to urge the Obama Administration to implement a humanitarian parole program to reunite family members whose petitions have already been approved and who are awaiting a visa.

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4. Advocacy/System of Care

A). Advocacy

The immediate advocacy issues that have priority for survivors are:

- *Wage theft* – survivors are likely to be victimized by unscrupulous employers who exploit their vulnerability and don't compensate them for work performed.
- *Predatory Practices* – survivors are also likely to be victimized by predatory providers of immigration services.
- *Legal status* – advocate for Federal Government to include Haitian earthquake survivors into the refugee category, which would grant them access to targeted public benefits.
- Seek the support and collaboration of local chambers of commerce, public and private sector organizations, local colleges and universities as well as community-based news organizations to elevate the issues and concerns of this population to jurisdictionally-appropriate entities.

B). System of Care

It is our hope that the following systems of care lessons from the 2010 Haitian earthquake and recommendations from this Partnership will constitute a blueprint to be followed and/or expanded as needed in advance of the next disaster of this magnitude that befalls our community or any segment within our community. These are not new recommendations, as a similar set emerged following Hurricane Andrew in 1992. The lessons for our community appear to be lost between crisis events.

- Local funders should convene service providers to jointly inventory and map available services in the affected community for more effective program delivery.
- Local funders and government agencies should chart an action plan for a coordinated crisis response when a minority population or community is impacted; local funders should also identify and convene a representative group of stakeholders from the affected community for the purpose of providing input, guidance and recommendations for any proposed plan of action—particularly when funding will be forthcoming from national or non-local sources.
- Organize a post-disaster debriefing of front line service providers to review and identify lessons learned about critical interventions, strategies and approaches.
- Funders should also convene providers of key services such as housing, health, mental health to review availability of services, specific eligibility requirements, and identify methods to eliminate barriers for survivors.
- Emergency cash assistance is an essential tool to address basic needs.
- Identify options for sheltering survivors, in case local networks of friends, relatives, family and religious congregations are not available.
- Funding provided by public sources should be provided based upon the following principles:
 - 1). Funded organizations must be culturally and linguistically competent;
 - 2). Funded organizations must be held accountable for providing effective services; and
 - 3). Provider process for reaching the target population must be more effective and outreach efforts to engage clients must include the use of informal grassroots methods and formal social networks such as churches, schools, community based-organizations, and media outlets.

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- Grants to serve minority populations tend to be awarded to large organizations that are perceived to have the operational capacity, rather than smaller organizations that have the capacity, expertise, cultural and linguistic competence, and established connections with the target population. We highly recommend that grants be awarded with joint organizational accountability for deliverables and based on partnerships in which program operations and procedures are jointly designed and adopted.

5. Fundraising Strategies and Recommendations

The partners developed fund raising strategies and recommendations at their meeting on September 9, 2011. It was agreed that the challenges of reconstruction in Haiti are difficult, uncertain and beyond the scope of The Partnership. The Partnership's focus should remain on the survivors residing locally in South Florida, and the service gaps that they are facing on a daily basis. Hence, the consensus was strongly focused on raising funds locally to support survivors still living in the South Florida community to address:

- a). the gaps in services to allow survivors to remain in South Florida in decent living conditions.
- b). the lack of resources to help survivors return to Haiti permanently.

The Haitian American Chamber of Commerce is receiving requests to find qualified professionals to work in Haiti. The partners agreed that a potential first fundraising activity could be to organize a Job Fair targeting businesses who wish to hire workers for their enterprises in Haiti and Haitian survivors looking to return to Haiti. However, there may be a need for additional training to prepare survivors for the available jobs.

Fundraising could be done individually by the partner organizations and other charitable groups who have been actively supporting survivors, or could be done through community efforts co-sponsored by organizations, which have historically supported the needs of Haitians living in Miami. Potential collaborators would be United Way, Catholic Charities, The Children's Trust, The Miami Foundation, and the John S. and James L. Knight Foundation, among others.

Fund raising campaigns should also be utilized to publicize the continuously evolving needs of survivors.

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Appendices

Appendix #1: Service Provider Survey Sample



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SERVICE PROVIDER SURVEY

Are you seeing additional clients as a result of the earthquake in Haiti? Yes No. If yes, how many unduplicated clients have you served? _____

When did you begin providing these services? _____

Have your current clients presented with additional needs as a result from the earthquake? Yes No

Have clients presented for services who are hosting additional people in their homes? Yes No.
If yes, how many families have you seen? _____ What is the average number of additional people per home? _____

What types of service requests have you received? Check all that apply:

- | | | |
|------------------------------------------------|-------------------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> Case Management | <input type="checkbox"/> Child care | <input type="checkbox"/> Education |
| <input type="checkbox"/> Rent/Mortgage/Housing | <input type="checkbox"/> Mental Health Counseling | <input type="checkbox"/> Elder Services |
| <input type="checkbox"/> Clothing/Utilities | <input type="checkbox"/> Medical/Health Care Services | <input type="checkbox"/> Information & Referral |
| <input type="checkbox"/> Technical Assistance | <input type="checkbox"/> Career Development | <input type="checkbox"/> Education/Training |
| <input type="checkbox"/> Other- Please | | |

specify _____

Have you been able to successfully provide these services? Yes No. If no, what have been the barrier(s) in doing so? Funding Capacity/Language Transportation Expertise Staffing
Other: _____

Have you had to employ some creative strategies in meeting these needs? Yes No. If yes, what have you done?

Are there needs/gaps in services you cannot address? Yes No. Please Describe:

What type of additional resources do you need in order to continue meeting the needs being presented to you?

If you are providing additional services, are you getting paid for these services or providing services pro bono?
 Getting Paid Pro Bono

For the most part, are the services being provided more long term or short term? Short term Long term.
What type of more long term services are being identified?

- Employment Mental Health Health Access Housing

Other: _____

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Have you identified any additional resources to refer clients to? Yes No. If so, please list the type of resources being utilized.

When are those clients planning to return? Within the next 30 days 30-60 days
 60-120 days Within 6 months Within a year

For those that are planning to return, what have they reported needs to happen to facilitate their return?

For those clients planning to stay, what are their long term goals?

Is there any anecdotal information you would like to share?

Organization: _____ Name: _____
Position/Title: _____ Phone #: _____
Email: _____

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Appendix #2: Individual Survivor Survey Sample



South Florida Haitian Community Partnership for Local Relief Efforts
INDIVIDUAL SURVIVOR SURVEY

Survivor's Immediate Needs:

Are you currently residing in South Florida as a result of the earthquake? Yes No

County residing Miami Dade County Broward County Palm Beach County

When did you arrive in South Florida? _____

Why did you decide to move to South Florida? Lost Home Economic Reasons Lost Business

Injury/Follow up Health Care Needs Safety Concerns To attend School

Other: _____

Are you currently living with? Family member Friend Other: _____

What is the relationship of the family member you are living with?

Child(ren) Siblings Parents Grandparents Extended family

Do you have family remaining in Haiti? Yes No

If yes, please specify: Child(ren) Siblings Parents Grandparents Extended family

Do you have family in the US that were split up and living elsewhere? Yes No

Have you had to change your residence since moving here? Yes No. If so, what were the circumstances around your move?

Have you been to any organization (non profit, church, government) for help? Yes No

What types of help have you received? Check all that apply:

- | | | |
|-----------------------------------------------------------------|----------------------------------------------------------|-----------------------------------------|
| <input type="checkbox"/> Case Management | <input type="checkbox"/> Child care | <input type="checkbox"/> Education |
| <input type="checkbox"/> Rent/Mortgage/Housing | <input type="checkbox"/> Mental Health Counseling | <input type="checkbox"/> Elder Services |
| <input type="checkbox"/> Clothing/Utilities | <input type="checkbox"/> Medical or Health Care Services | |
| <input type="checkbox"/> English Classes | <input type="checkbox"/> Information & Referral | |
| <input type="checkbox"/> Legal Services/TPS Application Process | | |
| <input type="checkbox"/> Other- Please specify _____ | | |

If you haven't gone for help why or why not? _____

Is there something you've needed help for that you were not able to get? Yes No

If yes, please describe: _____

What is your immigration status?

- | | | |
|-----------------------------------------------|----------------------------------------------|-------------------------------------|
| <input type="checkbox"/> Tourist/Visitor Visa | <input type="checkbox"/> Humanitarian Parole | <input type="checkbox"/> US Citizen |
| <input type="checkbox"/> Deferred Action | <input type="checkbox"/> Permanent Resident | |

Are you currently employed? Yes No

Are you currently seeking employment? Yes No

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What barrier (s) are you facing in getting a job?

- Language – do not speak English Legal – unable to work in the US
 Lack of Work Skills/Experience Lack of Training and/or Education

Other: _____

Survivor's Adjustment Period:

How well do you feel you are adjusting to living in South Florida?

- Very Well Somewhat Well Well Not Well Not Well At All

Please describe:

What has helped you the most to adjust in South Florida? Family Friends School Securing a Job
 Getting help from social service, church, government

Other: _____

Are you planning to stay in South Florida or return to Haiti? Stay Return Not sure

If you are planning to stay in South Florida, what are your long term plans?

If you are planning to return to Haiti, when will you return? Within the next 30 days 30-60 days

60-120 days Within 6 months Within a year

If you are planning to return to Haiti, what needs to happen to facilitate that move?

Are you interested in going into business in Haiti? Yes No

If yes, what type of help do you think you need to help prepare you?

- Technical Assistance Business Development Career Development Education/Training

Other: _____

May we contact you to learn more about the type of help you would like to get? Yes No

Name: _____

Address: _____

Phone #: _____

Is there any additional information you would like to share?

Please tell us a little more about yourself:

Are you? Male Female

Your Age Range: 0-11 12-18 18-25 26-35 36-50 51-65 66 & Older

Number of People in your family: _____

Zip Code where you are now residing: _____

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Appendix #3: Medical and Mental Health Care Provider Survey Sample



South Florida Haitian Community Partnership for Local Relief Efforts
MEDICAL AND MENTAL HEALTH CARE PROVIDER SURVEY

Are you providing health/medical services to individuals as a result of the earthquake in Haiti? Yes No
What services are you providing at this time (Check one) In Haiti In South Florida Both locations

How many unduplicated clients have you served? _____ In Haiti _____ In South Florida

When did you begin providing these services? _____

Have the health/medical needs changed now that we are 16 months out? Yes No

If yes, what needs are you no longer addressing? _____

What are the major health care needs at this time?

Who/what other organizations do you know that are still actively involved with survivors' medical care, both in Haiti and here in South Florida? How do we contact them?

What are the health/medical needs that people/organizations in South Florida can help with? How?

What organizations are most effective in delivering the services to residents in need?

Are there needs/gaps in services you cannot address? Yes No. Please Describe:

What type of additional resources do you need in order to continue meeting the needs being presented to you?

For the most part, are the services being provided long term or short term? Short term Long term.
What type of longer term services are being identified? Mental Health Health Access Housing
 Medical equipment or prosthetics Public health preventive resources Job retraining Host families
 Employment
Other: _____

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Is there any additional information you would like to share?



Organization: _____

Name: _____

Position/Title: _____

Phone #: _____

Email: _____

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Appendix #4 – Inventory of South Florida Relief and Recovery Related Initiatives

Community Partnership for Local Haitian Relief Efforts

Amor en Accion

Address: 9401 Biscayne Boulevard
City: Miami Shores State: FL Zip: 33138
Telephone Numbers: (Main) 305 762 1226 (Fax) 305 702 1247
E-mail Address: Info@amorenaccion.com
Web site: amorenaccion.com
Agency Type: Faith-Based
Person In-Charge of Agency/Title: Teresita “Terry” Gonzalez/ Executive Director
Person to Contact for Services: Teresita Gonzalez **Email:** Tery@amorenaccion.com

Agency Description:

Amor en Accion, a Catholic lay missionary group of the Archdiocese of Miami has been working with local bishops of the Dominican Republic and Haiti since 1976. Amon En Accion provides assistance with local self-help projects of evangelization, nutrition, education, medical assistance, housing and water.

Have you served Survivors of the 2010 Haiti Earthquake? Yes

What is the primary client group you serve?

- Children/Youth Families Elderly
 Internally displaced persons (IDPs) Government

What type of service(s) have your organization provided to Earthquake Survivors?

The Sister School Program provides assistance in paying the salaries of the teachers and/or the nutrition of the children in the rural schools. We also collaborate in new construction or refurbishing of schools that are in great need. The first project of this type was the construction of Nan Palan Center; this is a chapel of the Cathedral parish of Port-de-Paix. Other projects include: Nan Palan Housing project; La Bel Plas Housing/ Mont fort Parish Homes; and “Foyer de la Fraternite” Home for the Elderly. This project was begun by a religious sister in St. Louis de Monfort Parish in Port-de-Paix. Amor en Accion also provides assistance in grant seeking and grant writing, funding and supplies, and organizing periodic medical missions. Furthermore, the agency provides Reforestation/Agriculture/Water Projects; Water Cisterns; Water Purification Systems; Reforestation Education and Experimental Farming; and Andro Project “Farm School of Hope.”

Are you funded to provide these services? Yes
How are these services funded? Donations/Fundraising; Private Foundations
What is your budget for these services? Unknown
How long have you been providing these services in Haiti: 25 years
Do you anticipate that your agency will continue to provide these services? Yes
If so, for how long? Ongoing

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Broward County Red Cross

Address: 6710 W Sunrise Boulevard, Ste 111
City: Plantation State: FL Zip: 33313
Telephone Numbers: (Main) 954-797-3800 (Fax) 954-797-1860
E-mail Address: southfloridaredcross@USA.redcross.com
Web site: http://oglhaiti.com/
Agency Type: Non-Profit
Person In-Charge of Agency/Title: John Karr, Executive Director
Person to Contact for Services: John Karr **Phone #:** (954) 797-3800

Agency Description:

Programs and services provided include disaster services (providing of food, shelter, medical care, and emergency financial support), social services, international services, health and safety services, and youth services.

Have you served Survivors of the 2010 Haiti Earthquake? Yes

What is the primary client group you serve?

Children/Youth Families Elderly
 Internally displaced persons (IDPs) Government

What type of service(s) have your organization provided to Earthquake Survivors?

Disaster services (providing of food, shelter, medical care, and emergency financial support), social services, international services, and health and safety services.

Are you funded to provide these services?

Yes

How are these services funded?

Donations/Fundraising:

What is your budget for these services?

\$1,999,736 total budget/\$585,722 earmarked for disaster relief

How long have you been providing these services in Haiti:

Over 18 years

Do you anticipate that your agency will continue to provide these services? No

If so, for how long?

Ongoing For another year Only if we receive additional funds

Where are services being provided?

10 different regions in Haiti, including the city of Kenskoff

Is your organization governed by a Board of Directors? Yes

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Catholic Charities of the Archdiocese of Miami, Inc

Address: 1505 NE 26th Street (Administrative Office)
(City: Fort Lauderdale **State:** FL **Zip:** 33305
Telephone Numbers: (Main) 305-754-2444
E-mail Address: info@ccadm.org
Web site: http://www.ccadm.org/
Agency Type: Faith Based
Person In-Charge of Agency/Title: Carlo Thertus, CEO
Person to Contact for Services: Carlo Thertus

Agency Description:

Catholic Charities serves as the lead agency for disaster response in the Archdiocese of Miami.

Have you served Survivors of the 2010 Haiti Earthquake? Yes

What is the primary client group you serve?

<input checked="" type="checkbox"/>	Children/Youth	<input checked="" type="checkbox"/>	Families	<input checked="" type="checkbox"/>	Elderly
<input type="checkbox"/>	Internally displaced persons (IDPs)	<input type="checkbox"/>	Government		

What type of service(s) have your organization provided to Earthquake Survivors?

Our hurricane response team is frequently mobilized to provide food, water, and other essential items throughout Florida. When international disasters strike, we work with Catholic Relief Services and CARITAS to provide for those who have been impacted.

Are you funded to provide these services? Yes

How are these services funded? Donations/Fundraising

What is your budget for these services? Unknown

Do you anticipate that your agency will continue to provide these services? Yes

If so, for how long? Ongoing

Where are services being provided? Port de Prince, Haiti

Is your organization governed by a Board of Directors? No

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Cross International

Address: 600 SW 3rd Street, Suite 2201
City: Pompano Beach State: FL Zip: 33060
Telephone Numbers: (Main) 954-657-9000
Web site: www.crossinternational.org
Agency Type: Non-Profit; Faith Based
Person In-Charge of Agency/Title: Jim Cavnar /President
Email: President@crossinternational.org
Person to Contact for Services: Fieldmanagers@crossinternational.org

Agency Description:

Cross International was born out of the vision of two ministries with a heart for the poor – Christian Children's Charity and the Kielar Family Foundation. Founded in the 1990's, these organizations discovered that they shared a call to expand their vision to serve the suffering poor worldwide. Their collaboration resulted in the founding of Cross International, a ministry with a global mission to bring relief and hope to the destitute. Since then, Cross has successfully rallied many Christians to the fight against world poverty, and has touched countless thousands of the poor and oppressed with Christ's unconditional love.

Have you served Survivors of the 2010 Haiti Earthquake Yes

What is the primary client group you serve?

<input checked="" type="checkbox"/> Children/Youth	<input checked="" type="checkbox"/> Families	<input checked="" type="checkbox"/> Elderly
<input type="checkbox"/> Internally displaced persons (IDPs)	<input type="checkbox"/> Government	

What type of service(s) have your organization provided to Earthquake Survivors?

Building Hope for the Deaf - Gonaives, Haiti
 Haiti Calvary Baptist Church School Operations - Haiti
 Calvary Baptist Church School Support; Feeding - Haiti
 Restavek Learning Centers - - Southern Haiti
 Good Sower Feeding Program- Port au Prince, Haiti

Are you funded to provide these services? Yes
How are these services funded? Donations/Fundraising; Private Foundations
What is your budget for these services? Varies
How long have you been providing these services in Haiti: 20 years (first operations started in Haiti)
Do you anticipate that your agency will continue to provide these services? Yes
If so, for how long? Ongoing
Where are services being provided? Port de Prince, Gonaives
Is your organization governed by a Board of Directors? Yes

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Crossbridge Church Miami

Address: 6605 SW 88th Street
City: Miami State: FL Zip: 33156
Telephone Numbers: (Main) 305-661-9900
Web site: <http://www.crossbridgemiami.com/>
Agency Type: Faith Based
Person In-Charge of Agency/Title: Felipe Assis/ Lead Pastor
Person to Contact for Services: Sam Miranda/ Connection Pastor

Agency Description:

Crossbridge Church Miami was birthed out of a convergence of desires placed by God in the hearts of Immanuel Presbyterian Church (MIA), Redeemer Presbyterian Church (NYC) and the Assis family.

Have you served Survivors of the 2010 Haiti Earthquake? Yes

What is the primary client group you serve?

<input checked="" type="checkbox"/> Children/Youth	<input checked="" type="checkbox"/> Families	<input checked="" type="checkbox"/> Elderly
<input type="checkbox"/> Internally displaced persons (IDPs)	<input type="checkbox"/> Government	

What type of service(s) have your organization provided to Earthquake Survivors? Medical Missions

Are you funded to provide these services? No

How are these services funded? Participants pay their own expenses

What is your budget for these services? \$1,000 per participant

Do you anticipate that your agency will continue to provide these services? Yes

If so, for how long? Only if we receive additional funds

Where are services being provided? Port de Prince, Haiti

Is your organization governed by a Board of Directors? Yes

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Catholic Relief Services

Address: c/o Archdiocese of Miami, 9401 Biscayne Boulevard
City: Miami Shores State: FL Zip: 33138
Telephone Numbers: (Main) 888-277-7575
E-mail Address: info@crs.org
Web site: www.crs.org or http://crs.org/countries/haiti
Agency Type: Faith Based
Person In-Charge of Agency/Title: Ken Hackett/ President
Person to Contact for Services: John Rivera/ Director of Communications
Phone #: 443-604-2918 (cell)

Agency Description:

Catholic Relief Services is the overseas relief and development agency of the United States Conference of Catholic Bishops (USCCB) and the US Catholic community. The USCCB is an assembly of the Catholic hierarchy of the United States who jointly exercise certain pastoral functions on behalf of the Catholic faithful of the United States.

Have you served Survivors of the 2010 Haiti Earthquake Yes

What type of service(s) have your organization provided to Earthquake Survivors?

Agriculture Support (supporting farmers and cooperatives) ;Emergency Needs (Food/Water/Clothing); and Medical Treatment.

What is the primary client group you serve?

<input checked="" type="checkbox"/> Children/Youth	<input checked="" type="checkbox"/> Families	<input checked="" type="checkbox"/> Elderly
<input checked="" type="checkbox"/> Internally displaced persons (IDPs)	<input checked="" type="checkbox"/> Government	

Are you funded to provide these services?

Yes

How are these services funded?

Donations/Fundraising; Private Foundations

What is your budget for these services?

Varies

How long have you been providing these services in Haiti?

Over 10 years

Do you anticipate that your agency will continue to provide these services?

Yes

If so, for how long?

Ongoing

Where are services being provided?

All over Haiti

Is your organization governed by a Board of Directors?

Yes

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Food for the Poor

Address: 6401 Lyons Road
City: Coconut Creek State: FL Zip: 33073
Telephone Numbers: (Main) (954-427-2222) (Fax) 954-570-7654
E-mail Address: info@foodforthe poor.org
Web site: www.foodforthe poor.org
Agency Type: Non-Profit
Person In-Charge of Agency/Title: Robin G Mahfood
Person to Contact for Services: Phone #: 1 (800) 427-9104

Have you served Survivors of the 2010 Haiti Earthquake? Yes

What type of service(s) have your organization provided to Earthquake Survivors?

Food For The Poor has 121 projects underway in Haiti and another 464 that have been completed since 1996. Key projects focus on different aspects of development:

Children's Homes

- Notre Dame de l'Espoir
- Maison d'Amour
- Salesian Gressier
- Foyer de l'Avenir
- Little Children of Jesus
- St. Louis Girls Orphanage

Fishing Villages

- Pierre Marie Fishing Village
- Petite-Gonave Fishing Village
- Petite Goave Fishing Village
- Mouillage Fouquet Fishing Village **
- Lozandier Fishing Village **
- Nativity Fishing Village **
- Mole Saint-Nicolas Fishing Village
- Baie de Henne Fishing Village
- Lully Fishing Village
- Pierre Payan Fishing Village
- La Gonave Fishing Village
- Port-au-Prince Fishing Village
- Leogane Fishing Village
- Platon Fishing Village
- Petit Trou de Nippes Fishing Village
- Bon Bon Fishing Village
- Abricots Fishing Village
- Dame Marie Fishing Village
- Anse d'Hainault Fishing Village
- Les Irois Fishing Village
- Tiburon Fishing Village

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- Kafou Fishing Village
- Aabacou Fishing Village
- Aquin Fishing Village
- Puit Sale Fishing Village
- Cotes-Der-Fer Fishing Village
- Bainet Marigot Fishing Village
- Belle-Anse Fishing Village
- Anse Aboeuf Fishing Village
- Cap-Haitien Fishing Village
- Bord de Mar Fishing Village
- Caracol/Madr Fishing Village
- Pepillo Salcedo Fishing Village

Agriculture

- Green Friday Tree Planting Project
- Bord de Mer Agricultural Tools Project
- Agriculture for Gonaives
- Cap-Haitien Fruit & Vegetable Nursery **

Feeding Centers

- FFP Warehouse Feeding Program

Housing & Community Development

- Haiti General Housing
- Mahotiere Housing Project & Community Development
- Emmanuel Village III Housing and Sanitation
- Port-de-Paix Housing Project
- Nativity Village, Housing in Prolonge **
- Boca Grande Friendship Village Community Development

Water

- Cap-Haitien Water Wells
- Port-de-Paix Water Project
- Dupatti Water Development Project
- Willamson Water and Irrigation Project
- Water Treatment Units for Haiti
- Madre de las Lamentaciones Water -Well Rehabilitation

Education

- Caring House School in Gonaives
- Bord de Mer School
- St. Michel Archange Teacher's Salaries & Equipment
- Foyer Notre Dame Altagrace School Expansion
- Haiti Post-Earthquake School Reconstruction

Medical

- FFP Warehouse Clinic
- Our Lady of the Poor Clinic
- Jesus Loves You Clinic
- St. Anthony's Clinic

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Aquaculture

- Mouillage Fouquet Tilapia Ponds
- Terrier Rouge Tilapia
- Basa Santo Farm and Fingerling Ponds
- Nativity Village -Tilapia Ponds in Petite-Anse **

Animal Husbandry

- Santo Chicken Coop
- Goat Breed and Distribution
- Cleriste Pig Farms **
- Cap-Haitian Chicken Farm **

What is the primary client group you serve?

<input checked="" type="checkbox"/>	Children/Youth	<input checked="" type="checkbox"/>	Families	<input checked="" type="checkbox"/>	Elderly
<input checked="" type="checkbox"/>	Internally displaced persons (IDPs)	<input checked="" type="checkbox"/>	Government		

Are you funded to provide these services?

Yes

How are these services funded?

Donations/Fundraising; Private Foundations

What is your budget for these services?

Varies

Do you anticipate that your agency will continue to provide these services?

Yes

If so, for how long?

Ongoing

Where are services being provided?

All over Haiti

Is your organization governed by a Board of Directors?

Yes

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Red Cross of Greater Miami-Dade and the Keys

Address: 335 SW 27th Avenue
City: Miami State: FL Zip: 33135
Telephone Numbers: (Main) 305 644 1200 (Fax) 305 -644- 1038
E-mail Address: southfloridaredcross@USA.redcross.com
Web site: www.Miamiredcross.org
Agency Type: Non-Profit
Person In-Charge of Agency/Title: Sam Tidwell /CEO
Email: tidwells@usa.redcross.org
Person to Contact for Services: Phone #: (954)797-3800

Agency Description:

The American Red Cross (ARC), also known as the American National Red Cross, is a volunteer-led, humanitarian organization that provides emergency assistance, disaster relief and education inside the United States. It is the designated U.S. affiliate of the International Federation of Red Cross and Red Crescent Societies.

Have you served Survivors of the 2010 Haiti Earthquake? Yes

What is the primary client group you serve?

Children/Youth Families Elderly
 Internally displaced persons (IDPs) Government

What type of service(s) have your organization provided to Earthquake Survivors?

In addition, the American Red Cross multi-year spending plans place a growing emphasis – estimated to be between 15-20 percent of our spending on Haiti’s recovery – on helping families rebuild their lives through cash grants, loans and other financial assistance that they can use to buy essential items and empower them as they rebuild their lives. Other spending areas in the multi-year American Red Cross plan will include developing health programs, building the capacity of the Haitian Red Cross to provide humanitarian assistance to the Haitian people, and helping Haitian communities prepare for future disasters such as floods, hurricanes and earthquakes. OGL has served as an umbrella organization, forming community partnerships in 10 different areas of the island of Haiti.

Are you funded to provide these services? Yes

How are these services funded? Donations/Fundraising

What is your budget for these services? \$585,722 earmarked for disaster relief

How long have you been providing these services in Haiti: Over 18 years

Do you anticipate that your agency will continue to provide these services? Yes

If so, for how long? The Red Cross organizations of Miami-Dade and Broward specified a “three to five” year plan.

Where are services being provided? All over Haiti

Is your organization governed by a Board of Directors? Yes

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Haiti Relief Fund

Address: Based in New York but has many ties to Miami organizations
City: Lynbrook State: NY Zip: 11503
Telephone Numbers: (Main) 519-599-4248
Web site: www.haitirelieffund.org
Agency Type: Non-Profit
Person In-Charge of Agency/Title: Carlo Thertus /CEO
Person to Contact for Services: Carlo Thertus
Email: Carlo@haitirelieffund.org

Agency Description:

Haiti Relief Fund, Inc. is a registered 501(c)3 Not For Profit Foundation of the Internal Revenue Code, classified as a Public Charity. Haiti Relief Fund is working on the ground in Haiti helping the earthquake victims and effectively saving lives in the mountain communities from Cholera.

Have you served Survivors of the 2010 Haiti Earthquake? Yes

What is the primary client group you serve?

<input checked="" type="checkbox"/> Children/Youth	<input checked="" type="checkbox"/> Families	<input checked="" type="checkbox"/> Elderly
Internally displaced persons (IDPs)	Government	

What type of service(s) have your organization provided to Earthquake Survivors?

Haiti Relief Fund has been providing basic emergency relief of food, water, clothing and temporary shelters to the earthquake victims of Haiti. Haiti Relief Fund assists in rebuilding schools, medical clinics and hospitals. As healthcare is vital in Haiti, Haiti Relief Fund is focused on donating medical equipment, medical supplies and medicine to all major hospital inside and outside of Port-au-Prince. Haiti Relief Fund had been donating barrels of chlorine bleach and antibiotics to all major hospitals and CTC Cholera Treatment Centers in and around Port-au-Prince help in the fight against cholera. Haiti Relief Fund is in the process of building a Creative Art Center, which will encompass trade skills for underprivileged young people in Haiti, which is greatly needed.

Are you funded to provide these services? Yes
How are these services funded? Donations/Fundraising
What is your budget for these services? Varies
Do you anticipate that your agency will continue to provide these services? Yes
If so, for how long? Ongoing
Where are services being provided? Port de Prince, Haiti
Is your organization governed by a Board of Directors? Yes

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Have It Your Way Foundation

Address: 5505 Blue Lagoon Drive
City: Miami State: FL Zip: 33126
Telephone Numbers: (Main) 305-378-3186 (Fax) 305- 378-7861
E-mail Address: BK_HIYWfoundation@whopper.com
Web site: www.haveityourwayfoundation.org
Agency Type: Non-Profit; For-Profit
Person In-Charge of Agency/Title: Ivette R Diaz/ Executive Director
Person to Contact for Services: Ivette R Diaz
Phone #: 1 (800) 427-9104

Have you served Survivors of the 2010 Haiti? Yes

What is the primary client group you serve?

<input checked="" type="checkbox"/> Children/Youth	<input checked="" type="checkbox"/> Families	<input checked="" type="checkbox"/> Elderly
<input checked="" type="checkbox"/> Internally displaced persons (IDPs)	<input checked="" type="checkbox"/> Government	

What type of service(s) have your organization provided to Earthquake Survivors?

The Have it Your Way Foundation, the charitable arm of Burger King Corp., has donated \$50,000 to the American Red Cross for disaster relief efforts in Haiti. In addition, the company is collecting essential supplies from employees and distributing them in coordination with the University of Miami’s Medical Teams. BKC employees are also rallying to volunteer with local community organizations and assist with relief efforts.

Are you funded to provide these services? Yes
How are these services funded? Donations/Fundraising; Private Foundations
What is your budget for these services? \$50,000
Do you anticipate that your agency will continue to provide these services? Yes
If so, for how long? Ongoing
Where are services being provided? All over Haiti
Is your organization governed by a Board of Directors? Yes

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Konbit for Haiti

Address: 521 NE 81st ST
City: Miami State: FL Zip: 33138
Telephone Numbers: (Main) 786- 358-0565 (Fax) 786-358-0568
E-mail Address: info@konbitforhaiti.org
Web site: http://www.konbitforhaiti.org
Agency Type: Non-Profit
Person In-Charge of Agency/Title: Maggie Austin/Executive Director

Agency Description:

Konbit for Haiti is a 501(c)(3) which launched its community-based hub out of a storefront in Little Haiti and offers considerable capacity to the relief and rebuilding efforts. The Konbit for Haiti partnership is a long-term commitment to addressing Haiti’s recovery needs.

Have you served Survivors of the 2010 Haiti Earthquake Yes

What is the primary client group you serve?

<input checked="" type="checkbox"/> Children/Youth	<input checked="" type="checkbox"/> Families	<input checked="" type="checkbox"/> Elderly
<input checked="" type="checkbox"/> Internally displaced persons (IDPs)	<input checked="" type="checkbox"/> Government	

What type of service(s) have your organization provided to Earthquake Survivors?

Konbit for Haiti’s *Deploy Haiti* program has been serving as a national deployment center for healthcare workers since January, sponsoring trips to Haiti all over the continental United States (not including Alaska). Konbit has been able to build a database of over 1600 professionals ready to volunteer their services to Haiti

Are you funded to provide these services? Yes

How are these services funded? Government; Donations/Fundraising; Private Foundations

What is your budget for these services? \$1000 per participant

Do you anticipate that your agency will continue to provide these services? Yes

If so, for how long? Ongoing

Where are services being provided? Port de Prince, Haiti

Is your organization governed by a Board of Directors? Yes

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Lambi Fund

Web site: www.lambifund.org
Agency Type: Non-Profit
Person In-Charge of Agency/Title: Marie Marthe St.Cyr
Person to Contact for Services: Leonie Hermantin/Deputy Director
Phone #: 202-559-1981

Agency Description:

The Lambi Fund supports projects that embrace the following principles: non-violent, non-partisan, community-based, promoting the advancement of women, using education and training for empowerment, and promoting the overall democratic movement.

Have you served Survivors of the 2010 Haiti Earthquake? Yes

What type of service(s) have your organization provided to Earthquake Survivors?

Agriculture Support (supporting farmers and cooperatives); Training and Technical Assistance

What is the primary client group you serve?

<input checked="" type="checkbox"/>	Children/Youth	<input checked="" type="checkbox"/>	Families	<input checked="" type="checkbox"/>	Elderly
<input checked="" type="checkbox"/>	Internally displaced persons (IDPs)	<input checked="" type="checkbox"/>	Government		

Are you funded to provide these services?

Yes

How are these services funded?

Donations/Fundraising; Private Foundations

What is your budget for these services?

About \$1 million

Do you anticipate that your agency will continue to provide these services?

Yes

If so, for how long?

Ongoing

Where are services being provided?

Rural communities in Haiti

Is your organization governed by a Board of Directors? Yes

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Miami Baptist Association

Address: 7855 SW 104th Street
City: Miami State: FL Zip: 33156
Telephone Numbers: (Main) 305-271-5600 (Fax) 305-771-3530
E-mail Address: info@miami-baptistassociation.org
Web site: www.mbachurches.org
Agency Type: Faith Based
Person In-Charge of Agency/Title: Gary L. Johnson/ Director of Missions

Agency Description:

We are congregations representing 14 different ethnic groups worshipping in 10 different languages. We are a group of over 300 Southern Baptist Churches ministering in Dade County. We are congregations who assemble to worship in church buildings, schools, stores, theatres and homes.

Have you served Survivors of the 2010 Haiti Earthquake Yes

What is the primary client group you serve?

<input checked="" type="checkbox"/>	Children/Youth	<input checked="" type="checkbox"/>	Families	<input checked="" type="checkbox"/>	Elderly
<input checked="" type="checkbox"/>	Internally displaced persons (IDPs)	<input checked="" type="checkbox"/>	Government		

What type of service(s) have your organization provided to Earthquake Survivors?

Missionary trips, fundraising drives, and assessment teams.

Are you funded to provide these services? Yes
How are these services funded? Donations/Fundraising ;Private Foundations
What is your budget for these services? Varies
Do you anticipate that your agency will continue to provide these services? Yes
If so, for how long? Only if we receive additional funds
Where are services being provided? Port au Prince, Haiti.
Is your organization governed by a Board of Directors? Yes

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Operation Green Leaves

Address: 1999 NE 150th St # 109
City: North Miami State: FL Zip: 33181
Telephone Numbers: (Main) 305-944-5445
E-mail Address: nadinecpatrice44@gmail.com
Web site: http://oglhaiti.com/
Agency Type: Faith Based
Person In-Charge of Agency/Title: Nadine Patrice /Executive Director
Person to Contact for Services: Nadine Patrice/Executive Director
Phone #: 305-944-5445

Agency Description:

Operation Green Leaves was founded in 1991 by a group of Haitians and Americans who wanted to answer a call by the late Jacques Cousteau in his video "Haiti Water of Sorrow", to save the island from ecological and environmental peril.

Have you served Survivors of the 2010 Haiti Earthquake Yes

What is the primary client group you serve?

<input checked="" type="checkbox"/> Children/Youth	<input checked="" type="checkbox"/> Families	<input checked="" type="checkbox"/> Elderly
<input type="checkbox"/> Internally displaced persons (IDPs)	<input type="checkbox"/> Government	

What type of service(s) have your organization provided to Earthquake Survivors?

OGL has donated more than 100,000 seedlings to Haiti for the Pine Forest through the Ministry of the Environment, as well as provided seeds and seedlings for its other partner communities throughout Haiti. OGL has served as an umbrella organization, forming community partnerships in 10 different areas of the island of Haiti.

Are you funded to provide these services?

Yes

How are these services funded?

Donations/Fundraising

What is your budget for these services?

Varies

How long have you been providing these services in Haiti:

Over 18 years

Do you anticipate that your agency will continue to provide these services?

Yes

If so, for how long?

Ongoing

Where are services being provided?

10 different regions in Haiti, including the city of Kenskoff.

Is your organization governed by a Board of Directors? No

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Pan American Development Fund Miami Office

Address: 1111 Lincoln Road, Suite 400
City: Miami Beach State: FL Zip: 33139
Telephone Numbers: (Main) 786-497-1853
E-mail Address Info@padf.org
Web site: www.padf.org/ www.imunitedforhaiti.org
Agency Type: Non-Profit; Faith Based
Person In-Charge of Agency/Title: John A, Sanbrulo/ Executive Director
Person to Contact for Services: Jeff Kerzner / Country Director,
Haiti Phone #: 509- 2813-1425/28

Agency Description:

The Pan American Development Foundation brings together all stakeholders to improve livelihoods, respond to natural disasters, support human rights and protect the environment in Latin America and the Caribbean. PADF, a non-profit organization, has worked in every country in the region. In 2010, its programs reached more than 10 million people in 22 countries. PADF's headquarters is located in Washington, D.C.

Have you served Survivors of the 2010 Haiti Earthquake? Yes

What is the primary client group you serve?

<input checked="" type="checkbox"/> Children/Youth	<input checked="" type="checkbox"/> Families	<input checked="" type="checkbox"/> Elderly
<input checked="" type="checkbox"/> Internally displaced persons (IDPs)	<input checked="" type="checkbox"/> Government	

What type of service(s) have your organization provided to Earthquake Survivors?

One of PADF's largest and most-successful programs in Haiti puts residents in control of their economic future. Instead of a well-meaning professional in a distant city deciding on a development project for a town, PADF teaches communities to prioritize, select and monitor what they feel is needed in order to improve their lives. Now in its third year, the Community Driven Development (CDD) program has success stories throughout the country. Today, PADF is working with more than 360 community-based organizations in 14 Haitian districts—all located in some of the poorest and sometimes violent areas—those have identified or are operating more than 700 sustainable projects. In addition to creating economic opportunities, CDD strengthens their communities by laying the groundwork for local governance and cooperation.

Are you funded to provide these services?	Yes
How are these services funded?	Donations/Fundraising; Private Foundations
What is your budget for these services?	\$55 million overall operation budget
Do you anticipate that your agency will continue to provide these services?	Yes
If so, for how long?	Ongoing
Where are services being provided?	14 Haitian districts
Is your organization governed by a Board of Directors?	Yes

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Project Medishare for Haiti

Address: P.O Box 381207
City: Miami State: FL Zip: 33238
Telephone Numbers: (Main) 305-762-6448 (Fax) 305-644-1038
E-mail Address: info@projectmedishare.org
Web site: www.projectmedishare.org
Agency Type: Non-Profit
Person In-Charge of Agency/Title: Barth A. Green M.D./Administrator
Person to Contact for Services: Barth A. Green M.D
Phone #: 305-762-6448

Agency Description:

Project Medishare for Haiti, Inc., a 501c3 non-profit registered in the State of Florida, was founded in 1994 by Drs. Barth Green and Arthur Fournier from the University of Miami’s Miller School of Medicine. It is an organization dedicated to sharing its human and technical resources with its Haitian partners in the quest to achieve quality healthcare and development services for all. This mission is accomplished through two distinct but complimentary programs, which now frequently intersect, the Community Health Program and the Integrated Community Development Program.

Have you served Survivors of the 2010 Haiti Earthquake? Yes

What is the primary client group you serve?

<input checked="" type="checkbox"/> Children/Youth	<input checked="" type="checkbox"/> Families	<input checked="" type="checkbox"/> Elderly
<input checked="" type="checkbox"/> Internally displaced persons (IDPs)	<input checked="" type="checkbox"/> Government	

What type of service(s) have your organization provided to Earthquake Survivors?

School Health Program; Akamil Production Facility; Community Health: Thomonde; Specialty Surgery – Hinche
 Specialty Surgery: Port au Prince; Caporella Family; Earthquake Relief; University Partnership Programs;
 Community Development – Marmont; and Agriculture Program.

Are you funded to provide these services? Yes

How are these services funded? Donations/Fundraising; Private Foundations

What is your budget for these services? Varies

How long have you been providing these services in Haiti: Since 1994

Do you anticipate that your agency will continue to provide these services? Yes

If so, for how long? Ongoing

Where are services being provided? Thomonde , Hinche, Marmont, Port au Prince

Is your organization governed by a Board of Directors? Yes

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Provident Living/LDS Charities/Church of Latter day Saints

Address: 8201 NW 186th Street
City: Miami State: FL Zip: 33156
Telephone Numbers: Main
E-mail Address: lillybo@ldschurch.org
Agency Type: Faith Based
Person to Contact for Services: Benny O lily Jr., Humanitarian Specialist, Caribbean
Email: lillybo@ldschurch.org

Agency Description:

An arm of the Church’s humanitarian efforts to relieve suffering for families of all nationalities and religions and offer hope with the potential for a better life for millions of people around the world.

Have you served Survivors of the 2010 Haiti Earthquake? Yes

What is the primary client group you serve?

<input checked="" type="checkbox"/> Children/Youth	<input checked="" type="checkbox"/> Families	<input checked="" type="checkbox"/> Elderly
<input type="checkbox"/> Internally displaced persons (IDPs)	<input type="checkbox"/> Government	

What type of service(s) have your organization provided to Earthquake Survivors?

125 - person team of doctors, nurses, emergency medical technicians, building contractors and interpreters. The group returned from the desolate remnants of earthquake-stricken Port-au-Prince, Haiti, Friday. Assist in the clearance of orphans destined for American families. Relief supplies include foods familiar to Haitians—beans, rice, oil, sardines, and spaghetti—as well as hygiene kits, newborn kits, tents, and other supplies. Leaders continue to reassess the needs of their fellow Haitians to modify supply requests. LDS Charities trains volunteers in the basic skills needed to run a warehouse. They taught them how to organize the warehouse, keep an inventory, place an order, and drive the delivery trucks. Now Haitian members are running the warehouse entirely on their own. Food and supply shipments arrive at the warehouse two or three days after an order is placed. The warehouse workers unload and stock the supplies. When they receive an order from a bishop, the supplies are pulled and loaded into three large trucks provided by LDS Charities. To avoid danger, the men deliver the food to the meetinghouses during the night.

Are you funded to provide these services? Yes
How are these services funded? Donations/Fundraising
What is your budget for these services? Varies
Do you anticipate that your agency will continue to provide these services? Yes
If so, for how long? Ongoing
Where are services being provided? Port au Prince, all over Haiti.
Is your organization governed by a Board of Directors? No

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Florida International University (FIU)

Address: 11200 S.W. 8th Street
City: Miami State: FL Zip: 33199
Telephone Numbers: (Main) 305-762-1226 (Fax) 305-702-1247
Web site: <http://news.fiu.edu/fiuhaiti/taskforce/>
Agency Type: Public University
Person In-Charge of Agency/Title: Sandra Gonzalez-Levy/Senior Vice President for External Relations/Task Force Chair
Person to Contact for Services: Desiree Rodriguez/Chief of Staff to the Senior Vice President/ Task Force Coordinator

Agency Description:

Florida International University (FIU) has committed to helping the Haitian nation rebuild its educational infrastructure, protect its patrimony, and improve the quality of life for its people by addressing pivotal social, health and economic development needs. FIU continues to leverage its strengths through various professional schools to reconstitute and enhance Haiti’s educational programs and serve as a driving force for economic development in Haiti. FIU is also committed to assisting its students, faculty and staff with ties to Haiti who are experiencing hardship because of the earthquake.

Have you served Survivors of the 2010 Haiti Earthquake? Yes

What is the primary client group you serve?

<input checked="" type="checkbox"/> Children/Youth	<input checked="" type="checkbox"/> Families	<input checked="" type="checkbox"/> Elderly
<input checked="" type="checkbox"/> Internally displaced persons (IDPs)	<input checked="" type="checkbox"/> Government	

What type of service(s) have your organization provided to Earthquake Survivors?

Numerous initiatives in arts and culture, education, fundraising, the local community, legal services, medicine, rebuilding, research and volunteering, FIU is deeply invested in the long-term recovery of the Haitian people, both locally and abroad. The 2011 TAG Project is dedicating itself to donating 500 pairs of shoes to children ages 1-17 currently residing in three orphanages in Haiti.

Are you funded to provide these services?	Yes
How are these services funded?	Donations/Fundraising
What is your budget for these services?	Varies
How long have you been providing these services in Haiti:	January 2010
Do you anticipate that your agency will continue to provide these services?	Yes
If so, for how long?	Ongoing
Where are services being provided?	Port de Pax, Gonaives
Is your organization governed by a Board of Directors?	No

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International Rescue Committee

Address: 730 NW 107th Avenue, Suite 100
City: Miami State: FL Zip: 33172
Telephone Numbers: (Main) 305-640-9881
E-mail Address: Miami@Rescue.org
Web site: <http://www.rescue.org/us-program/us-miami-fl>
Agency Type: Human Rights/Advocacy
Person In-Charge of Agency/Title: Suzy Cop/Executive Director

Agency Description:

The IRC provides opportunities for refugees to thrive in America. Each year, thousands of refugees are invited by the U.S. government to seek safety and freedom. Forced to flee conflict or persecution, many have survived for years against incredible odds. They step off the plane with next to nothing but their dignity, hope and determination. In Miami and many other regional offices across the country, the IRC helps them rebuild their lives.

Have you served Survivors of the 2010 Haiti Earthquake Yes

What is the primary client group you serve?

<input checked="" type="checkbox"/> Children/Youth	<input checked="" type="checkbox"/> Families	<input checked="" type="checkbox"/> Elderly
<input type="checkbox"/> Internally displaced persons (IDPs)	<input type="checkbox"/> Government	

What type of service(s) have your organization provided to Earthquake Survivors?

The IRC is working to reduce the risk of flooding and hurricane damage. The IRC is delivering health care services and fighting a deadly outbreak of cholera. To prevent disease, we are providing clean water, building latrines and washing facilities, and managing waste. We are keeping separated children safe while working to reunite them with family members. The IRC is working to prevent sexual violence against women and to protect and support survivors. IRC economic recovery programs are helping people earn a living.

Are you funded to provide these services? Yes
How are these services funded? Donations/Fundraising
What is your budget for these services? Varies
Do you anticipate that your agency will continue to provide these services? Yes
If so, for how long? Ongoing
Where are services being provided? Port de Prince, all over Haiti
Is your organization governed by a Board of Directors? Yes

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APPENDIX #5: United Way of Miami-Dade's Haitian Earthquake Relief Fund

When a devastating 7.0 earthquake struck Haiti on January 12, United Way reached out to help our neighbors in need. Within hours of activating Operation Helping Hands, its disaster response program in partnership with The Miami Herald/el Nuevo Herald, donations began flowing in. Three days later, United Way released \$500,000 in grants to four nonprofits working on the ground in Haiti – World Vision, University of Miami Global Institute/Project Medishare, Pan American Development Foundation and Food for the Poor. In total, United Way made 20 grants totaling more than \$1.1 million for food, water, shelter, medical supplies, tents, schools and other emergency relief needs in Haiti. On the ground in Miami, United Way helped to coordinate individuals and corporate partners interested in lending a hand, which included everything from recruiting volunteers to sort and package supplies for Haiti, helping to secure ground and air transportation to get relief items to where they were most needed, to matching up those who wanted to help with those who needed help. Recognizing that the healing and rebuilding of the Haitian people in South Florida and Haiti is intertwined, United Way worked with the Greater Miami Chamber of Commerce and the Beacon Council to create **An n Avanse – Let's Move Forward**, a community response that focused on the increased needs and service gaps in our own community as a result of the Haiti earthquake.

Subsequently, United Way was one of five local organizations to receive support from the John S. and James L Knight Foundation for programs to assist Haitian-Americans and Haitians who relocated to Miami since the earthquake. The Knight Foundation grant, which United Way Worldwide and Operation Helping Hands matched, and The Miami Foundation supported, was used to provide over \$300,000 in financial assistance to those impacted by the earthquake living in Miami through the Haitian Earthquake Relief Fund. The following describes the impact of that funding.

- 1. What was your service delivery approach? For example, did families typically require repeated assistance and if so, how were you able to respond? Did you ever refer clients to other services in the community? If so, what types of services were most often requested that required outside referrals?***

CC/Legal Services:

Deferred action applications were the one type of legal immigration relief open to most victims of the earthquake until temporary protected status was made available in May to Haitians who arrived in the US in the year beginning 1/12/10. Deferred action services are particularly hard to provide. In deferred action, there are no pre-established forms to complete, and USCIS has not clearly defined its own evaluation criteria. This means that only attorneys or accredited representatives have the knowledge and skills to assist victims in preparing their statements and documenting their requests. Few deferred action clients know English; many are surviving in unstable circumstances. Outreach to them is especially difficult

In general, applicants must return to our offices repeatedly, first to learn about this type of relief and how it may affect them and to learn about the documents they must provide, next to bring the required documents and prepare a legal statement with the assistance of their attorneys. Later they returned to our offices to respond to federal requests for additional information. Staff referred clients to counseling and case management services at Haitian organizations (FANM and Sant La).

CC/Pierre Toussaint Center:

The program made two levels of services available to the clients. One was the one time assistance, for those who did not feel the need to use our services for long-term success, and those were kept at a minimum. The second level of service was the long-term assistance, where the family/or individual was assessed for their

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needs and linked to the needed resources in the community, as well as given access to direct assistance, whichever it would be.

At intake and assessment, the immediate, short-term, and long-term needs were identified. The tools necessary to overcome the identified barriers were made available, either by the program itself, or through referral to other agencies. Foods, clothes, transportation, were services provided multiple times and identified as immediate needs. Legal assistance, access to health care, rental, vocational school and scholarship for childcare is the short-term assistance that was provided. Employment, vocational school, parenting, acculturation, counseling, these were the long-term services provided to our families.

We worked on helping our clients develop a support system by bringing in different entities into their system of care. We knew that we could not do it alone, and we did not want to duplicate any service in the community. We strongly collaborated with Sant La 9employment), Catholic Legal Services (Legal), Church World Services (Legal), Catholic Charities Refugee Resettlement; South Florida Urban Ministries (Legal); St John Bosco Clinic, Dr. Cedent, Baptist Hospital and Dr. Alphonse Dufreny (Health Care); and North Miami Adult Education Center (Education) are just some of the entities that we worked closely with.

Most of the direct services provided to the families were given at least 2 or 3 times, and were supported with referrals to other agencies providing similar services.

FANM:

FANM's delivery approach for dealing with the families was a holistic approach. FANM staff believed that exploring all areas and linking families to appropriate services is the start of helping the families to cope and to build some structure for possible stabilization. This allows the families the opportunity to deal with some of the posttraumatic stressors that are present. Furthermore, families are able to learn to navigate the different systems in order to survive and maintain their sanity. Most families walked into FANM's office requesting help with "whatever it is" that FANM can assist them with, even if this meant someone that they can talk to or feel comfortable in calling when they were feeling overwhelmed and lost. Some of the most requested services were as follows: Access to Health Care and Public Benefits; Housing; Immigration; Employment; and the need to learn the English language or a trade and daycare or aftercare for their little ones. They stated they wanted a place where the child will identify with others. Most at the same time complained of feeling tired, hopeless, anxious, and states that they are unable to sleep. These individuals were referred for counseling and they were compliant with the referral for counseling. Many worried about hospital bills and collectors that continued to call and harass them and others worried about a continued burden on host family. Some of the services that FANM referred clients to were clinics, DCF for assistance, childcare agencies and possible job links.

GALATA:

Our philosophical approach was to provide assistance only once, although many survivors asked if they could approach the organization for the same assistance repetitively. For those requiring purely assistance again, GALATA attempted to use various other funded resources or referred survivors to other organizations for financial assistance. Other services that GALATA is using to assist those families provided direct psychological services and therapy to assist in the emotional trauma caused by the events in Haiti.

Sant La:

As we began to experience increased demand for assistance in the wake of this disaster, we developed a set of principles and approaches that would enable us to maximize the assistance provided to survivors, while ensuring that program goals were met.

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Principles:

- Assume that all survivors/local community residents were traumatized and were in need of some form of help
- Provide financial support in cases where there is a clear and compelling need
- A concerted effort to limit the likelihood of client “double-dipping” by implementing procedures to control this occurrence and by maintaining close contact with community partner agencies about these survivors
- Limit repeated assistance as to not create a sense of dependency on the part of survivors
- Preference for providing financial assistance for services with the potential of long-term/sustainable benefits

Approaches:

- Establish a process to document all requests for the purpose of gathering baseline data
- Complete intake forms for everyone, whether survivors or family/relatives of survivors
- Maintain accurate count of individuals as well as families requesting services/assistance
- Capture important information about each/all survivors
- Conduct quarterly follow-ups with survivors, in person or via telephone, to ascertain their well-being or to remain informed about their challenges
- Distribute food vouchers during major holidays and back-to-school season
- Utilize our referral process and network for access to services by survivors
- Make this process as seamless as possible for clients

In our experience, all families needed repeated assistance. Nevertheless, we made a concerted effort to follow our established protocols in light of the general impression among Haitian community members as well as survivors that financial assistance was readily and abundantly available. The services for which referrals were provided include those not provided at Sant La, including legal consultation/assistance, mental health counseling and other major medical services.

South Florida Urban Ministries:

Many of our initial clients were referred to us by Haitian pastors in Miami Dade County. We began with a meeting of Haitian pastors on September 8, 2010 and explained the type of individuals and families who would qualify for services. During the initial interviews, we informed each of the host families and/or earthquake survivors that our assistance would be offered 1 time only, due to the funding available. In the first few months, we were optimistic that families would soon receive Deferred Action Status and have access to other resources and the opportunity to apply for work authorization. By December, it was clear that USCIS had all but discontinued processing the number of Deferred Action applications it had received. No explanation was given for this delay in processing, and conditions for host families and earthquake survivors became dire. By February of 2011, we began re-issuing food money and soon thereafter a second round of rental assistance. It had become clear that many host families and earthquake survivors alike were without basic needs for food and shelter. One of our families had become homeless; another left for Canada since she had no way of paying for shelter after our assistance ran out. It was not until May when USCIS announced the extension of TPS to earthquake survivors who had arrived by January 12, 2011 and resided continuously since that time, that hope for relief was reborn. As soon as the TPS extension was announced, USCIS resumed processing Deferred Action applications once again. Although similar to TPS, Deferred Action Status allows eligibility for additional public assistance.

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In addition to direct services provided by SFLUM staff, we also referred clients to other agencies for grief and trauma counseling/mental health counseling and non-immigration related legal aid services. Staff followed up with clients and staff of agencies to whom we referred our clients to help facilitate client access to services.

2. *Were programmatic roadblocks encountered in the implementation of the program? How were they addressed? Were any roadblocks unresolved?*

CC/Legal Services:

In deferred action, the action deferred is deportation. This is not a legal status, only an administrative standing. Unlike the legal status for which some immigrants are eligible that are governed by laws and rules, grants of deferred action are wholly dependent upon the discretion of the USCIS official. We received no guidance from USCIS on what documents and supporting materials to include until the program was well underway.

CC/Pierre Toussaint Center:

The first roadblock was the staffing. Unfortunately, for most programs in the community, dollars were not made available to meet this increased need in services. All agencies struggled to make ends meet and have the adequate staffing to serve the population. Part of it meant coming up with the funds from alternate sources, other solutions meant cross-utilizing staff. At Pierre Toussaint, we came up with the funding for two full-time contractors to provide case management until June 30, 2011. These contractors were paid for by Catholic Charities discretionary funds.

The second roadblock was the emotional stress that the program put on the direct service staff, due not only to the client to staff ratio, but also due to the emotional impact of the population's life stories on the staff. The agency staff was referred to the EAP, but unfortunately, the non-agency staffs were not able to seek professional help, if they needed it. The unresolved portion of the program is not a roadblock, but rather an unfinished work. The funding ended, but the need remains. What do we do now? What will happen to the families who will now have papers, will now be able to work, and will now need to go to school? How will we continue to help?

Sant La:

The roadblocks encountered in the implementation of this program were greatly related to factors beyond our immediate control such as: ineligibility of clients for requested services; generalized limited resources or funds for additional services; absence of supportive network to house injured victims with no immediate family or relatives in the Miami area, who were discharged from area hospitals; and limited availability of affordable housing stock. As previously stated, these were systemic roadblocks more than programmatic or organizational.

South Florida Urban Ministries:

Initially, we found the process of obtaining authorization for rental assistance from Salvation Army to be cumbersome and unnecessary for our clients for the following reasons:

- We conducted extensive initial interviews of the clients.
- We knew the referring pastors who provided us with additional information about potential clients they refer. Thus, we were confident that the information provided to us by the clients was correct.
- In most cases, we were providing additional immigration legal services to the client(s) so we knew our clients' situations quite well.

In addition, we found out that many initial submissions/requests for authorization from the Salvation Army were returned or delayed if the client or host family left out a signature or certain information. None of the

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documents we submitted to the Salvation Army was returned because assistance had already been given. However, when we requested additional financial assistance for some clients, some forms were returned.

The above roadblocks were resolved through the meeting called by Mary Donworth. Said meeting allowed us an opportunity to discuss our needs and the process with the Salvation Army staff. The meeting addressed the issues and cleared some of our difficulty. We do appreciate the due diligence process and requirements of the Salvation Army. After news of available funds for earthquake survivors and host families was published, we began to get more cold calls and walk-ins. These clients were not as well known to us and our uncertainty as to their assistance history made the Salvation Army requests for authorization much more helpful.

3. *What is the profile of the target population served? For example, what % were Miami residents hosting Haitian families and what % were Haitians who relocated to Miami after the earthquake? What % were families and what % were individuals. How would you characterize their socio-economic background and education level?*

CC/Legal Services:

All Catholic Legal Services clients under this program were Haitians who relocated to Miami-Dade after the earthquake. This is because our service specifically addressed their immigration needs, enabling those granted deferred action to work here legally. About 85% of our clients came in families. However, each family member had to apply individually for deferred action. All the clients we served were poor, wholly dependent upon their host families. Many had to move from host family to host family because those families lacked the resources to sustain them. However, most of the Haitians we served had been professionals, members of the middle class in Haiti. Higher education degrees were common among adults, and children had frequently attended private schools.

CC/Pierre Toussaint Center:

Over 75% of the clients served were Haitians who relocated to Miami after the earthquake. Some came with their host families, but most came alone. The trend, once the families were made aware of the services they could get, they did not bring in the host families as they used to in the past.

99% of the clients served were families. Many had young children under the age of 5. Most of the families, over 80% of them were of medium to low income in Haiti. 95% of our families had at least a middle school education level. About 45% of them had a vocational skill, varying from secretarial to car mechanic. A few professionals also received our services, such as lawyers, medical doctors, dentists, nurses.

Sant La:

Sant La provided assistance to approximately 1% of local families who were hosting relatives/family members. Otherwise, 99% of the individuals served were new arrivals or survivors. Sant La processed 301 formal requests for assistance, which represented 121 families and 439 individuals. Unfortunately, our earthquake survivor intake form, as designed initially, did not capture extensive socio-economic data such as educational attainment. Nevertheless, based upon the information gathered from clients, a profile of these individuals and families can be created. In the course of providing background information about their loss or injury, clients generally discussed education, if they or their children were enrolled in school. They also mentioned work if they were employed or their small business venture if they had such an enterprise. Clients also emphasized the loss of property, if that was the case.

While we cannot provide any specific socio-economic indicators at this time, it is safe to assume that survivors admitted with Humanitarian Visas or to receive emergency medical care, were generally the least advantaged

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socio-economically. We hope to gather sufficient data describe the profile of these survivors more completely upon the completion of the work currently underway by the Haitian Community Partnership for Recovery, funded by the Children's Trust.

South Florida Urban Ministries:

All of our clients were part of a family unit or an extended family unit, with the exception of one young adult woman. In most cases, it is not possible to separate the rental assistance given the host families from assistance given to the earthquake survivor because they were from one family unit. For example, an LPR son is hosting his earthquake survivor parents, a US citizen daughter hosting her mother, a brother hosting his sister and an aunt hosting her nieces, etc. Often the host family member and the earthquake survivor came in together for assistance. On a few occasions there was a hesitancy to reveal the address of the "landlord" for fear that somehow records would be leaked that might cause trouble for the property owner. This hesitancy usually related to a situation where a second or third cousin was hosting but violating occupancy rules in the process. On the few occasions where the earthquake survivor was renting from a non-relative, we had the property owner sign a room rental agreement and then gave the assistance to the client or to his/her pastor at a United Methodist Church to distribute to the client. Because the landlord was unknown to us, SFLUM staff were concerned about potential mistreatment of our clients by their landlords and wanted to make sure that the client had money to rent a room even if the landlord did not live up to the signed agreement. There was no requirement, of course, that the client be United Methodist nor participate in a religious activity (United Methodist or other denomination) to receive services. However, qualitative data shows that faith-based institutions are among the primary centers where new immigrants, refugees and those fleeing from disaster go for assistance. Our first referrals were received from United Methodists Haitian Pastors, as we are well known in the United Methodist community. We also received referrals from a Presbyterian and Baptist Haitian pastor.

Staff estimates that 50% of our assistance went to earthquake survivors and another 50% to the family who was hosting them. Funds from the United Way Miami-Dade Haiti Recovery fund were used to assist host families and clients living in Miami-Dade only.

With food cards, we were quicker to offer them to earthquake survivors when requested or the need was known. It has been very difficult to discover that some of our clients were without food on many days. Many of them are embarrassed to disclose this situation. Our partnership with local Haitian pastors helped staff discover this situation sooner, but we still had instances when staff found out about this situation much later.

The need for housing where families can live together and for food is still great. Although TPS has been extended, it is not officially granted until July 22, 2011. For some, the poor economy, lack of transportation and insufficient English language skills may be a barrier to employment once work authorization is obtained.

Since TPS is only a temporary status and if granted requires a new application every 18 months, free immigration legal services for TPS and other immigration issues continues to be an unmet need.

Initially and throughout much of the grant period, our clients were largely middle class residents of Haiti prior to the earthquake and their host families middle to lower middle class families in the United States. The Haitians who came into the United States after the earthquake were largely paroled in to accompany a US citizen minor child or as one who accompanied the minor child of a US citizen or they entered on a pre-existing visitor's visa. In order to obtain this visitor's visa, they had to show financial stability, intent to return to Haiti, and a means of surviving in the United States for the duration of their visit without the need for employment. Most of our clients were educated and involved in a business or profession. Many were students sent to live with US relatives after their school and home was destroyed in the earthquake. As the months went by,

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though, savings vanished and desperation increased. Those who began as middle class are now often penniless. We responded by reversing our initial policy of one time assistance, and offered a second round of housing assistance where needed.

Did the needs of the target population change during the course of the grant? Describe how your program adjusted to address the changes. Are there still unmet needs for the population affected by the earthquake? If so, please describe them.

CC/Legal Services:

The legal immigration needs of Haitian earthquake victims in Miami and the opportunities available to them did not change during the course of the grant. However, in May 2011, a new opportunity has recently arisen: Haitians who arrived between 1/12/10 and 1/12/11 are now eligible to apply for temporary protected status (TPS). TPS applicants, unlike deferred action applicants, can gain work authorizations while their applications are still under consideration, and TPS holders (unlike deferred action holders) gain legal status for a fixed period of time, a period that may be renewable, depending upon the decisions of the Secretary of DHS. Deferred action has made it easier for its holders to apply for TPS because it documents their continuous stay in the US, a TPS requirement.

During the service period, applicants' situations frequently deteriorated. People living with host families often became homeless because the families could no longer support them. Deferred action applications normally take many months to process. Some applicants who applied a year ago remain without approval (or denial). That means they still may not legally work or drive. The federal Office of Refugee Resettlement billed more than a thousand dollars for resettlement services. Clients have also received medical bills they are unable to pay.

CC/Pierre Toussaint Center:

The needs of the Target population did change during the course of the grant. At first, the majority of the families did not have an immigrant status, and were only seeking to have their basic needs met with food, clothing, transportation, knowledge. As their immigrant status started to change and their stay prolonged in Miami, their need was for assistance with legal fees, housing, transportation, employment, education.

We also started to see an increased need for medical assistance from the older individuals, the parents. They also expressed a dire need for therapy, which was becoming more and more pressing. When the program realized the change in need in the population, we started providing them the help they needed by redirecting the funds toward prescription cards, help with USCIS fees for immigrant status. We started paying for school tuition for those who wanted to attend vocational schools. We did provide therapy; however, as DCF made millions available in the county for mental and behavioral health for this same population in the same period, we decided to use our dollars in other areas that the DCF funds were not covering.

Sant La:

The needs within the Haitian community of Miami Dade were exacerbated by the economic downturn and further intensified by the earthquake. Generally, we responded to requests for financial assistance for households hosting survivors. Otherwise, the anticipated needs of the survivor population did not change significantly. The chart below illustrates the variations experienced at Sant La.

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PROPOSED SERVICE AREAS	ESTIMATED UNITS OF SERVICE	ACTUAL UNITS OF SERVICE	EXPLANATION/JUSTIFICATION OF VARIANCE
Food Vouchers	100	537	N/A
Clothing Vouchers	100	20	Clothing was provided through donations received from community members.
Rent/Mortgage	25	2	Provided for one client on two occasions; otherwise provided through another funding source for most clients.
Utilities	50	3	Such requests were not made frequently; clients expressed the need to contribute something to the household, which was in the form of food vouchers.
Personal Care/ Sundries	100	-	Provided through food vouchers.
Counseling (3 hourly sessions per client)	50	-	Providers, in particular Borinquen Behavioral Health Services the Children's Bereavement Center, and the Association of Black Psychologists were all willing to provide services free of charge. For the most part, Clients did not attend their scheduled appointments. They cited distance as one of the key barriers.
GED Exam Fee	20	0	No such requests were received, although requests for tuition assistance were very frequent.
Transportation: One day Pass Weekly Pass Student Pass	300 100 50	0	We opted not to pursue these types of vouchers, as they would compel us to advertise their availability for the sake of utilizing the monthly passes prior to their expiration.
Affidavit of Identify/notary fees	50	0	While we provided these affidavits to over 100 individuals, they generally preferred to pay the notary fee, as many also received food vouchers.
Legal Consultations	25	0	Sant La made over 25 referrals for legal services. All legal consultations were provided on a pro-bono basis by private attorneys or by the Florida Immigrant Advocacy Center and Catholic Charities Legal Services, who had both received funding to provide this type of support to survivors.
School Supplies	100	3	Specific request for assistance made by 3 host families; provided in the form of cash assistance to 2 families.
School Uniforms	100	3	Specific request for assistance made by 3 host families, which was provided in the form of cash assistance to 2 families.
Gasoline Cards	25	0	The initial concept was to provide this benefit exclusively to host families who endured frequent trips to and from medical facilities or to and from our offices. Requests for this assistance were not made.
Prosthetics	1	1	Of the four amputee survivors in Sant La's caseload, only 1 has received this assistance, which was secured through another funding source.

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While a number of needs remain unmet, we know that the services are either available and the individuals who request them are not statutorily eligible to receive these services. We also know that services have been reduced because of the economic downturn. Nevertheless, the unmet needs remain overwhelmingly housing.

FANM:

To some degree the needs of the population did change to where the target population was mostly seeking resources which would assist them in gaining some stability in the areas of housing, employment, vocational training, and immigration services. They complained about over staying their welcome at family or friend homes. They talked about becoming independent and supporting the self.

FANM staff was able to assist some individuals with applying on-line for housing, referring them to job placement, vocational training, and provide them directly with immigration consultation service.

Yes, there are still unmet needs. For this population, there is still some immigration issues with the different visas that was granted, housing, unemployment, childcare, health access and benefits (many do not qualify) target population are just the beginning.

Please describe any lessons learned during the implementation of this program. What, if anything, would you do differently?

CC/Pierre Toussaint Center:

In implementing this program, we learned that social and economic situation of clients will eventually change due to various pressures on the family. Young teens quickly become young adults and single-family households multiply. Displaced wives and children leave behind their husband and father which has eventually caused the break up of the family. Families adapting to new realities in a new country adjust differently to the new culture. Financial needs assessed in the beginning quickly change as host families become overwhelmed by the responsibilities. In order to meet varying needs of families affected by a catastrophe of this magnitude a more anticipatory approach should be considered 6 months to one-year assessment should provide better gauge of needs for services.

Reassessment should be a valuable tool in attempting to keep up with economical and psychological needs of clients.

It would be very helpful to have an internal Agency Roster of all the Agencies that are providing service and what type of service to the community for specific funds. For example List of all agencies providing Haiti's Earthquake Victims Services.

Sant La:

- A better system of care can always be created. However, with disasters of the magnitude of an earthquake in relation to a community's supportive networks there is always room for improvement. We must also remember that in such cases, hindsight is 20/20 vision. While we are still analyzing the implications of the lessons learned, there are preliminary areas of significant learning:
- Need for a dedicated staff person to manage, monitor, document and be well informed about all cases associated with an agency
- Need for intense Community education to dispel myths, announce existing supportive services, inform the community about on-going efforts, challenges and progress and more importantly what type of assistance is available and where this assistance can be obtained.

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- Ensure that each collaborative partner provides assistance in a specific area; this would reduce client “double-dipping” and would increase communication and collaboration among providers
- Request that all partner agencies report, during regularly scheduled quarterly meetings, the number of clients served and any relevant client trends, and the needs or issues encountered
- Not be too careful about announcing/promoting the availability of cash assistance in fear that it might lead to abuse, dependency, or a sense of entitlement on the part of survivors.
- Not be too concerned about expending funds before the end of the grant period, as some clients may not have been provided the extra assistance they desperately needed.
- Recognition that mistakes will be made at the onset and that course corrections should never be viewed as a failure.

Do you have any recommendations to share should United Way fund this type of program in the future?

CC/Pierre Toussaint Center:

Based on our experience for these past few months, taking into account the results of our follow-ups and the feedbacks of our clients, we would suggest the following:

- a. Following the principle of the HAND program, one agency would manage the funding and provide the financial support to the families. That one agency would also reimburse the other agencies for services rendered, with a set price per category.
- b. Agencies would do intake and case management for families and individuals. As they are submitting billing for families, that would allow for verification of duplication of services to a family or individual between agencies.
- c. Agencies would be held responsible for the clients’ success and progress through their case management process, and delivery of service. That is to include delivery of adequate service as prescribed by the program.
- d. A proper understanding of the program’s expectations from each agency would be guaranteed. In addition, the families would have the opportunity to receive the services that the funders were hoping to provide to them. They will have a chance to long-term success.

Sant La:

Unfortunately, we are likely to see different types of disasters impact different segments of our community. While a model does not exist that could be replicated, funders and providers should work to establish an appropriate disaster protocol, similar to the processes and procedures established in our countywide hurricane procedures.

Immediate efforts to stabilize and assist the affected population are essential. What becomes a bit more complicated and difficult to manage are the follow-up requests especially when 1) the affected community does not have significant resources, such as in the case of Miami-Dade County’s Haitian community; 2) when the needs are beyond our means and resources as a community, going through a challenging economic period.

As housing emerged as one of the greatest needs, we should explore the feasibility of creating a community-based network of temporary and long-term shelters to address:

- a. Housing for injured victims who are receiving care from local hospitals;
- b. Housing for victims who have been admitted to the country and have no local relatives/family or community ties.

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In terms of Medical and Mental Health Services, it is recommended that a community network be created to:

- a. Secure pro-bono medical attention/care from local Haitian-American physicians;
- b. Strengthen the mental health infrastructure in the Haitian community such that Creole-speaking counselors are continuously recruited and trained to serve the local population
- c. Create a post disaster counseling training to familiarize all human services professionals with rudimentary principles to help in stabilizing survivors of any disaster.

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Appendix #6 - Bibliography and External Reports

a.) Health and Mental Health – Disaster Recovery Response, Vicki Rosenthal, MSW, AHSW

Disasters have enduring consequences, even for persons who are not directly involved, per the Centers for Disease Control and Prevention (CDC, 2010, ¶ 1). The International Society for Traumatic Stress Studies (ISTSS, n.d., ¶ 1) confirmed that mental health issues are directly tied to those who lived through a traumatic event, particularly ones who suffered a serious loss, such as a limb, or the death of a friend or family member. Courtois (2008, p. 2) describes complex traumatization as a series of life threatening stress and suffering, not only experienced on an individual basis, but societies can experience multiple stresses that form cumulative anguish and create problems for a lifetime, unless they are addressed and treated. Therefore, when disaster strikes, such as the Haiti Earthquake of January 2010, an immediate and long-term response for health and mental health related issues is needed.

Background

A comprehensive recovery approach addressing issues caused by disasters can produce life-saving results (CDC, 2010, ¶ 1). Having a plan on how to address recovery issues after disaster strikes provides efficient and successful interventions to suffering individuals, community, or country (United Nations Development Program [UNDP], 2011, p. 4). National Voluntary Organizations Active In Disaster (NVOAD, 2004, p. 2) stressed that responding agencies work together and systematize their activities.

Addressing medical needs of a devastated area are very demanding. The difficulties in stabilizing the injured population and preventing disease outbreak are largely determined on the surrounding resources and / or the development of the country, and the structure of the government and its systems (Radford, 2011, ¶ 5-6). In comparing the 2011 tsunami and the nuclear reactors' failures in Japan to the 2010 earthquake in Haiti, the recovery response and systems were dramatically different, as analyzed by Benjamin Radford (¶ 6,8). In the immediate aftermath, Japan's government was able to provide the basic needs of shelter, food and water then moved onto building temporary housing, and led the relief response. To the contrary, Nicolas Zifcak (2011, ¶ 8) explained that Haiti is not only a poorer country than Japan, but its governmental infrastructure was devastated. Many aid organizations needed to step in to help coordinate the recovery efforts (¶ 7). Lack of sanitation, electricity, road access, hospitals, and airport runways caused the delay of medications and medical supplies (¶ 16-17). Ten days after the earthquake, Partners in Health (as cited in Dugan & Dade, 2010, ¶ 5-6) described that at any moment, over a thousand people would be waiting for surgery at a medical site, and that daily possibly 20,000 were dying of gangrene and sepsis.

The number of persons physically injured in Haiti far exceeded the anticipated numbers in Japan (Radford, 2011, ¶ 2,6) and most of the medical response in Japan came from within the country and not from international aid organizations (Zifcak, 2011, ¶ 14). By contrast, international aid for Haiti has been a vital source of assistance for the health of the population (Zifcak, 2011, ¶ 8). Haiti - Health For decades, many people in Haiti have relied on international healthcare aid. Health organizations, like Doctors without Borders, utilized Haitian staff and workers to help bridge the gap of cultural issues and communication (Doctors Without Borders, 2011, p. 3). However, disconnect and / or mistrust towards these organizations permeates the relationships, primarily due to the lack of understanding the organizations have toward Haiti's complex history, society, and culture (Rencoret, Stoddard, Haver, Taylor, & Harvey, 2010, p. 17). South Florida - Health

Among Haitians in South Florida this lack of trust and connection to health care also prevail. As Albertini & Barsky (2003, p. 14) describe, a primary factor is an agency's lack of knowledge of the Haitian community's values and belief systems which incorporate understanding their views on personal privacy and self-reliance,

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and their conceptions on disease and established healthcare systems. Other disparities affect the lack of medical care for the Haitian community, such as “fear of deportation or governmental harassment, transportation, unsupportive service providers, and lower socioeconomic status” (p. 17). Fourteen hundred refugees of the January 12th earthquake were issued Humanitarian Parole, which allows employment authorization (Bello, 2011, ¶ 6). Even those who are able to work are faced with many challenges, like medical and housing services (CBS Broadcasting Inc. [CBS], 2011, ¶ 2). For example, Prevenir Julian, a 42-year-old father lives in a homeless shelter with his 8-year-old son, who has suffered head trauma from the earthquake (¶ 3). An additional 1300 Haitian refugees were given Visitors / Tourists visas, which do not allow persons to work (Bello, 2011, ¶ 7). Therefore, many were unable to support themselves (CBS, 2011, ¶ 2). Haiti - Mental Health

Dr. Paul Farmer describes the January 12th event “acute-on-chronic” (Partners in Health, 2010, ¶ 6). From January 2010 to January 2011, Haitians experienced a devastating earthquake with insufficient buildings crumbling and maiming 300,000 (est.) or killing 220,000 (est.) (as cited in Hedlund, 2011, p. 3), rains and flooding from Hurricane Tomas (Bigg, 2010, ¶ 3), a cholera epidemic (¶ 1), and the return of a prior oppressive dictator, “Baby Doc” Duvalier (Charles, 2011, ¶ 1). Series of events, like these, can augment stress and shock, resulting in complex trauma as described by Courtois (2008, p. 3). Complex trauma gives an added dimension to Posttraumatic Stress Disorder (PTSD) and provides more understanding to a person’s behavior and the requirement of different therapies (Courtois, 2008, p.8). South Florida - Mental Health Mental health stress not only affects the ones who lived through the experience but the rescue workers, the family caregivers, and the host families (ISTSS, ¶ 2). In addition, many persons worldwide can feel psychological affects of a devastating experience through audio and video images of the event (¶ 2). With the interconnection between medical and mental health, mental health issues can bring on physical health problems (ISTSS, ¶ 2). Medical staff must be educated as to the common symptoms of psychiatric issues (Ursano, Fullerton, & Norwood, 1995, pp. 196- 197). Additionally, refugees and immigrants have a higher rate of psychiatric disorders (Davis & Davis, 2006, p. 10). The more intense the disaster the greater chance for post event psychological problems (Ursano et al., 1995, p. 199). One specific indicator to gauge the severity of an event is the number of persons injured and prior cases show that injured persons are at a higher risk for psychological issues (p. 199).

Conclusion

Immediate response is prompted because of a disaster with a rush of goods, services, and supplies supplementing the loss (NVOAD, 2004, p. 4). However, this relief flow decreases as people turn their thoughts and energies elsewhere (p. 4). Yet, a well-developed long-term response initiative can continue to create interest and resources successfully addressing the chronic recovery issues (p. 4). Affects from a disaster can last for years (Ursano et al, 1995, p. 203) and a long-term recovery plan is determined by creating a picture based on an evaluation that captures the distress presented by the disaster and the capacity to fulfill those obligations (NVOAD, 2004, p. 11). The National Voluntary Organizations Active In Disaster (2004, pp. 10-12) explains two plans for a “successful recovery: Long-Term Recovery Organization and Long-Term Recovery Committee”. Each of these plans relies on communication, collaboration and leadership (pp. 10-11). The recovery strategy needs to hold standards of “transparency, information sharing, and consultation” (Hedlund, 2011, p. 12). The community, non-governmental and governmental offices, and organizations involved in implementing the long-term recovery plan benefit from this essential initiative (NVOAD, 2004, p. 29). The added bonus is that these entities and its leaders are prepared for future traumatic events and have been elevated to a more functional and serving level for its people (p. 29).

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b.) Florida Foundation & Corporation Response to the Haiti Earthquake Disaster



Florida Foundation & Corporation Responses to the Haiti Earthquake Disaster

How Florida Philanthropic Network members and other Florida foundations, corporate givers and other grantmakers are responding to the Haiti earthquake disaster (last updated 7/2/10).

Summary

- Florida foundations and corporations have contributed or pledged more than \$30.34 million to Haiti earthquake relief and recovery efforts to date.
- Many Florida corporations have established new programs to help their customers donate to Haiti earthquake relief and recovery efforts, provided in-kind donations and engaged in other efforts, raising more than \$4.4 million in additional contributions.
- Florida community foundations have helped their donors and other community members donate to Haiti earthquake relief and recovery through such efforts as creating new funds, partnering with community organizations, and donor education and outreach.

Florida Grantmaker Actions

AT&T and AT&T Foundation	The AT&T Foundation is providing a \$50,000 donation to Telecoms Sans Frontieres to support their relief work on disasters in Haiti and around the globe. In addition, AT&T wireless customers can send \$10 donations to the Red Cross International Relief Fund by typing the word "Haiti" and sending it to 90999 via text message.
Allegany Franciscan Ministries	Allegany Franciscan Ministries has approved a \$10,000 grant to Catholic Relief Services, Inc. in Baltimore, MD, to address immediate recovery and relief needs in Haiti and a \$10,000 grant to Global Health Ministry, Inc. in Newtown Square, PA, for a GHM medical team and the rebuilding of Hospital St. Francis de Sale in Port au Prince, which has served the city's poor since 1881.
BankAtlantic	BankAtlantic has joined with CBS 4's Neighbors 4 Neighbors to raise funds for the earthquake victims in Haiti. All BankAtlantic branches will serve as collection sites for those wishing to donate to Neighbors 4 Neighbors' Haiti earthquake relief fund. Neighbors 4 Neighbors is collaborating with relief and recovery organizations to facilitate donations of money and resources in Haiti.
Bank of America Charitable Foundation	Bank of America committed \$1 million to aid Haiti earthquake victims, which includes a \$500,000 grant to the American Red Cross for the Haitian Relief and Development Fund. The remaining \$500,000 will be directed towards long-term recovery efforts to restore basic medical services and fund the rebuilding of homes, schools and other structures critical to the affected communities. In addition, Bank of America will match associate pledges through the bank's Matching Gifts program and will not limit its overall relief donation.
Blue Cross and Blue Shield of Florida	Blue Cross and Blue Shield of Florida donated \$10,000 to the American Red Cross in Miami for Haiti earthquake relief efforts.

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Florida Grantmakers' Actions (continued)

Burger King & Have It Your Way Foundation	The Have it Your Way Foundation, the charitable arm of Burger King Corp., has donated \$50,000 to the American Red Cross for disaster relief efforts in Haiti. In addition, the company is collecting essential supplies from employees and distributing them in coordination with the University of Miami's medical teams. BKC employees are also rallying to volunteer with local community organizations and assist with relief efforts.
Carnival Corporation	Carnival Corporation and its affiliated cruise brands are donating at least \$5 million toward relief efforts in Haiti. The \$5 million donation includes a large corporate contribution along with monies raised from a variety of fundraising efforts coordinated by Carnival Corporation cruise brands.
Dade Community Foundation	The Dade Community Foundation has established the Dade Community Foundation Haiti Relief Fund and a separate group has set up the LGBT Community Response to the Crisis in Haiti Fund at the foundation. The foundation is partnering with Miami Dade County, the American Red Cross and Catholic Charities to appeal for cash donations to the Haiti earthquake relief effort.
Darden	Darden donated \$100,000 to the American Red Cross for Haiti earthquake relief efforts.
Edyth Bush Charitable Foundation	The Edyth Bush Charitable Foundation has committed \$50,000 to the American Red Cross of Central Florida and Catholic Charities to help offset their increased operating cost due to the current crisis impacting the Haitian community in Central Florida.
The Florida Bar Foundation	The Florida Bar Foundation awarded grants totaling \$297,000 to legal aid offices in Florida that have seen an influx of Haitians applying for Temporary Protected Status, which the U.S. government extended to allow Haitians already living in the United States to continue to live and work in the country for 18 months from January 2010.
FPL Group Foundation	The FPL Group Foundation has donated \$100,000 to the American Red Cross Haiti Earthquake Relief Fund.
Bill & Melinda Gates Foundation	The Bill & Melinda Gates Foundation offered \$10 million in prizes to encourage companies to offer cellphone-based financial services in Haiti.
Gulf Coast Community Foundation of Venice	Gulf Coast Community Foundation of Venice has created the Haiti Earthquake Relief Fund to facilitate donations to help Haiti earthquake victims. Contributions to the fund will be quickly directed to responsible and effective organizations that are providing urgently needed relief and recovery support in Haiti. The foundation has directed the first two rounds of donations made to the Fund to Venice-based Agape Flights and the American National Red Cross.
Harris Corporation	Harris Corporation announced plans to send up to \$1 million worth of communications equipment to Haiti to help aid agencies coordinate the earthquake recovery effort. Harris is also matching employees' American Red Cross Haiti fund donations up to \$15,000.
Jessie Ball duPont Fund	The Jessie Ball duPont Fund awarded \$300,000 in emergency relief funds to support aid to the victims of the Haiti earthquake. This includes \$150,000 to the Archdiocese of Miami, which will work through Catholic Charities and Catholic Relief Services to provide food, temporary shelter, medicine, water equipment and other supplies to the people of Haiti; \$50,000 to the American Red Cross, through the America Red Cross of the Delmarva Peninsula, to support its relief efforts; and \$100,000 to the University of Miami to support a range of activities in Haiti. The University's Miller School of Medicine operates Project Medishare, which works to achieve quality health care in Haiti and runs a community health project in Haiti's Central Plateau, as well as a family medicine training program for Haitian physicians in the city of Cap-Haitien. In addition, the University is working through its Haitian Student Organization and the Butler Center for Service and Leadership to coordinate additional relief efforts.
JM Family Enterprises	JM Family Enterprises and Southeast Toyota Distributors LLC donated \$100,000 to support the American Red Cross effort in Haiti.

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Florida Grantmakers' Actions (continued)

John S. and James L. Knight Foundation	The John S. and James L. Knight Foundation awarded a \$200,000 grant to Internews, an international media development group, to help keep Haiti's radio stations broadcasting key information to survivors. Internews will assess the damage done to Haitian news organizations and provide resources for them. The Knight Foundation also awarded \$600,000 to five Miami-based nonprofit groups to address both short- and long-term challenges facing Haitians in South Florida due to the earthquake in Haiti.
Lennar Corporation	In a donation that will exceed \$1 million, the Lennar Corporation has pledged to match, dollar for dollar, donations to the Athletes Relief Fund for Haiti, which was created by Alonzo Mourning to support medical needs in Haiti.
Office Depot Foundation and Office Depot	Office Depot Foundation has donated \$10,000 to Doctors Without Borders to provide medical supplies to Haiti and \$10,000 to Feed The Children, which will provide 40,000 pounds of rice to Haiti—enough for 160,000 individual meals. Office Depot has also pledged to give Feed The Children 2,500 backpacks to help children in Haiti who have nowhere to keep their possessions, is providing more than 20,000 square feet of store space in the Miami area to the Save the Children organization for use as a distribution warehouse, and through its stores is offering free faxing to Haiti to assist with recovery and rebuilding efforts. In addition, the company announced that it will support, for the fourth consecutive year, the National Disaster Help Desk for Business, which provides on-the-ground coordination of information among businesses, local chambers of commerce, nongovernmental and nonprofit organizations, government responders and disaster recovery specialists.
Publix Super Market Charities and Publix Super Markets Inc.	Publix Super Markets Charities donated \$100,000 to the American Red Cross for Haiti earthquake relief efforts. In a separate donation, Publix Super Markets Inc. established a program where its customers can add any amount to their grocery totals that will be donated to the American Red Cross and designated specifically for the Haiti Relief & Development Fund. As of February 17, 2010, Publix customers and associates have contributed more than \$4.4 million to the Fund.
Quantum Foundation	The Quantum Foundation approved emergency grants of \$10,000 each to two local Haitian organizations, Hands Together of the Palm Beaches and Intercultural Family Health Education Center, for general operating support. The dollars will be used to support local efforts in the Palm Beach County Haitian community and be directed towards the residents who are most affected by the devastation.
Royal Caribbean Cruises	Royal Caribbean Cruises plans to provide at least \$1 million in humanitarian relief to Haiti, and will be partnering with charitable organizations—such as Food for the Poor, Pan American Development Foundation, and the Solano Foundation, the company's foundation in Haiti—to provide additional assistance to the people of Haiti. The company will also be delivering much-needed goods and supplies to Haiti via its cruise ships.
Southern Wine & Spirits of Florida	Southern Wine & Spirits of Florida contributed 50 pallets of water for Spirit Airlines' relief flight to Haiti.
Spirit Airlines	Spirit Airlines pledged to provide up to \$10 million to Yele Haiti for relief efforts in Haiti. Spirit will give \$75 to Yele for every person who applies for and uses a Free Spirit MasterCard by Jan. 25 and uses it once by March 31. In addition, the airline has completed its first relief flights to Port-au-Prince, sending 20,000 pounds of water.
Walt Disney Company	The Walt Disney Company contributed \$100,000 to the Red Cross International Fund to support Haiti's relief efforts.
Winn-Dixie Foundation and Winn-Dixie Stores	The Winn-Dixie Foundation has partnered with the Western Union Foundation to donate \$200,000 to the American Red Cross International Response Fund. In addition, Winn-Dixie Stores, Inc. is implementing its "Neighbors Helping Neighbors" program in all of its stores to allow its customers to donate to the Red Cross disaster relief efforts in Haiti at the cash register.

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c. City of North Miami: Mayor’s Haitian Earthquake Impact Evaluation Taskforce Report

Introduction and Background

On January 12, 2010, Haiti was devastated by an earthquake which has resulted in the relocation of many of its citizens to South Florida, including the City of North Miami. At a public hearing held on November 23, 2010, North Miami’s Mayor and Council adopted Resolution 2010-140, which directed the City Manager to create the “**Mayor’s Haitian Earthquake Impact Evaluation Taskforce**” to “evaluate and ascertain the impact that the influx of displaced Haitian citizens has had on the socioeconomics, transportation system, housing, education, and other aspects of the North Miami community” (R-2010-140, **Appendix 1**). “This taskforce would not only evaluate the impact, but also present a plan of action supported by primary and secondary research.”

According to the **R-2010-140**, the taskforce “shall comprise of nine (9) members, which includes one representative from the Office of the City Manager of North Miami, Miami-Dade County School District, North Miami Police Department, City of North Miami Community Planning and Development Department, and a social service agency servicing the City of North Miami; along with two representatives from Miami-Dade County government and two residents of the City of North Miami.”

Taskforce Composition

For three months, the Mayor’s Haitian Earthquake Impact Evaluation Taskforce members, Gepsie Metellus, Roseline Philippe, Lubby Navarro, Carmen Spelorzi, Tanya Wilson-Sejour, Major Robert Bage, and Lumane Pluioise-Claude, have worked to produce this report. They were strictly guided by their primary mission: to understand how the influx of the displaced Haitian citizens has affected South Florida, and especially, the City of North Miami’s socio-economics, transportation system, housing, and education.

Methodology

At the taskforce’s first meeting on February 7, 2011, members agreed on the need to collect all relevant existing data and divided the task of collecting data as described below. In addition, Taskforce members designed brief face-to-face questionnaires to be administered to key informants.

Sources of Data Collection

- School District and Human Services Coalition
- Department of Children and Families (DCF) and Child Care Providers
- Churches and Schools
- Transportation
- Utility and Housing
- Social Service Agencies

Taskforce Member

- Lubby
- Roseline and Gepsie
- Robert and Carmen
- Tanya
- Lumane
- Gepsie

Face-to-Face Interviews

Primary data was collected using face-to-face interviews between taskforce members and key informants from different institutions and agencies. The questions asked aimed to document “who and how many Haitians came and who asked for what.” Taskforce members were also interested in finding out where the victims lived and who resided in the geographically bounded North Miami zip codes: 33181, 33161, 33160, 33167, and 33168.

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Questionnaires

Several North Miami churches were approached with these questions: 1- How many people have come to your church for assistance as a result of the earthquake? 2- How many people in your church were earthquake victims? 3- What type of assistance have you offered to the victims? 4- What type of assistance do they still need and ask for? **(Appendix 2)**

A questionnaire was also designed and faxed to school principals to access information from the local public schools. The following questions were asked: 1- Were there any special needs from the earthquake victims? 2- Did they need any school supplies? 3- Was there anything they needed that you could not provide? 4- What type of assistance would have helped or made things easier? 5- Are there any other comments that could help the city prepare if there were ever another disaster that displaced people? 6- Are there any ongoing problems or concerns? **(Appendix 3)**

Secondary Data

Secondary data was collected from DCF, the Miami-Dade County School Board, and the North Miami NOMI Bus and Utility Billing Division. Taskforce members tried to obtain information on how many people came, where they went and for what. In other words, taskforce members wanted to understand the earthquake victims' involvement in the North Miami community in assessing services after they entered South Florida.

An n Avanse – Let's Move Forward had conducted a Community Needs Assessment Client Survey to understand what is left and/or remained to be addressed months after the earthquake. This group wanted to document the gap between what was done and what is waiting to be done. An n Avanse felt the need to inform and advise policy makers in South Florida on imminent and future needs of those displaced immigrants due to the earthquake in Haiti **(Appendix 4)**.

Findings

The Department of Children and Families (DCF) has compiled data on earthquake survivors from Haiti who entered South Florida via the Miami international Airport from January 15 to February 19, 2010. Accordingly, from the 5,370 earthquake survivors flown from Haiti to the Miami International Airport, 4,928 obtained some kind of help from DCF (Table I).

Table I Haiti Earthquake Survivors Entered South Florida via the Miami International Airport: Interaction with the Department of Children and Family From January 15, 2010 to February 19, 2010

Number of Survivors	Total
Passengers	5,370
Served	4,928
Accepting the Resettlement Assistance Loan	1,786

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**Table II Haiti Earthquake Survivors Entered South Florida
via the Miami International Airport: Accepting the RA Loan
From January 15, 2010 to February 19, 2010**

Classification	Total
Adults	1,095
Children Accompanied	658
Children Unaccompanied	33
Total	1, 786

From the 1,786 earthquake survivors who accepted the Resettlement Assistance loan, 1,095 were adults, 658 children were accompanied by adults, and 33 children were unaccompanied (Table II).

Accordingly, DCF expended \$191,444.19 to provide services such as, airfare, hotel and/or transportation, and the provision of cash (Table III).

**Table III Haiti Earthquake Survivors Entered South Florida
via the Miami International Airport:
Interaction with the Department of Children and Family
From January 15, 2010 to February 19, 2010**

Services Provided	# Recipients
Airfare	1,174
Hotel	128
Transportation	113
Cash	546

Nine of the Early Learning Centers located in the 33161 zip code area reported that ten families requested daycare services for their children and enrolled 18 children (Table IV).

**Table IV Haiti Earthquake Survivors From the North Miami Zip
Code 33161: REQUEST FOR EARLY LEARNING SERVICES**

February 2010 to February 2011

People Who Requested Services and Are Being Served	Number of People
Parents who requested services	10
Parents who were served	10
Children who are still enrolled	18

North Miami Schools – Elementary, K-8, Middle, and Senior High – received 325 earthquake survivor students for the academic year 09/10, and 130 students for the academic year 10/11 (Table V). In fact, North Miami schools enrolled 25.5% of earthquake survivor students throughout Miami-Dade County in the academic year 09/10. Best of all, for the academic year 10/11, 35.6% of earthquake survivors throughout Miami-Dade County

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are enrolled in North Miami schools. This represents an increase of more than 10% compared to the previous academic year (Table V).

Table V Students Who Entered Public Schools in North Miami As a Result of the Earthquake in Haiti		
SCHOOLS IN NORTH MIAMI FEEDER PATTERNS	School Year 09/10	School Year 10/11
Elementary Schools		
Arch Creek	24	4
W. J. Bryan	20	0
Benjamin Franklin	17	3
Gratigny	32	0
Natural Bridge	13	0
North Miami	18	15
K-8 Centers		
Linda Lentin	17	3
David Lawrence, Jr.	18	3
Middle Schools		
Thomas Jefferson	19	4
North Miami	51	38
Senior High Schools		
Alonzo & Tracy Mourning	4	4
North Miami	92	56
TOTAL	325	130
Miami-Dade County Public School		
	1,273	365
North Miami Feeder Schools		
	325	130
Percent of Students Enrolled in North Miami Feeder Schools Compared to other Miami-Dade County Public Schools		
	25.5%	35.6%

Five North Miami Schools Principals – North Miami Elementary, North Miami Senior High, North Miami Middle, W.J. Bryan Elementary and Alonzo and Tracy Mourning Senior High – responded to the provided questionnaires (**Appendix 4**). Principals from these schools unanimously reported that they did not receive any student with special needs from Haiti due to the earthquake. The principals commented that every day school supplies were given to all the earthquake survivor students. However, these principals understand it would have been easier if students received medical assistance and counseling that still remain a need. They recommended, in case of another disaster, government provide a centralized place or a one-stop center to offer needed services and information.

Through a face-to-face interview, six North Miami churches were surveyed on the number of people assisted and the extent of services provided. They collectively reported serving 382 earthquake survivors over a one-

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year period. They confirmed a direct correlation between an increase in their church membership and the Haiti earthquake (Table VI).

Table VI Number of Earthquake Survivors Assisted by North Miami Churches

Name of Church	Number of People Assisted	Increase in Church Membership
Christian Church	10	10
Holy Cross Lutheran	20	40
Oasis Church	20	25
Shalom Community Church	20	50
First Church of North Miami Congregational	12	200
Holy Family Church	300	200
TOTAL	382	525

Table VII Number of Earthquake Survivor Families Benefitted From Faith-Based Assistance 2010 and 2011

Type of Assistance	Number of Families Assisted	Number of Families Who Still Needed Assistance
Counseling	5	0
Clothing	3	0
Education	0	2
Food	4	5
Fundraising	4	0
Job	0	2
Medical	0	4
Money	6	5
Shelter	1	5
TOTAL	23	23

These churches have collectively provided 23 families with assistance, such as, counseling, clothing, education, food, fundraising, job search, medical, money, and shelter. At the time of this survey, these churches were still serving the same number of families who were still in need of more services (Table VII).

Sant La, the Haitian Neighborhood Center, assisted 186 families, 228 adults and 177 children, who are earthquake survivors from Haiti. Ninety-five (95) of those families reside in the geographically bounded North Miami zip codes 33160-33168. In other words, 51% of the earthquake survivor families served by Sant La resided in North Miami (Table VIII).

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Table VIII Number of Earthquake Survivors Assisted by Sant-La from Late January 2010 to February 2011			
Families	Adults	Children	North Miami Residents
186	228	177	95

On the other hand, several other social service agencies in and around North Miami were approached about services provided to earthquake survivors. They attested being approached by many earthquake victims and being responsive in helping and guiding them through the system. Unfortunately, they failed to record their involvement and the extent of help provided.

Data Analysis

After the January 12, 2010, earthquake in Haiti, people and institutions throughout the United States were willing to help and be responsive to the needs of the survivors who fled to the United States. In Miami-Dade County, especially in North Miami, many institutions could not modify their structures and/or change their mode of operation to quickly accommodate the victims and account for their presence. For example, if an agency uses a waiting list procedure for intake, this agency placed the new arrivals or earthquake survivors from Haiti on the usual waiting list to obtain a service based on availability and in the order registered. In other words, earthquake victims from Haiti were not exempt from many agencies' every day routines and procedures for intake.

Some institutions and/or agencies just responded to the survivors' needs as much as they could without documenting the extent of their services. Other institutions that provided free services were just responding to more individuals without asking additional questions. Consequently, data on earthquake victims from Haiti is scarce in South Florida, especially in North Miami. In many cases, services were rendered, but data on the number of refugee utilizing or needing services was not collected.

For instance, the North Miami NOMI free shuttle bus experienced a 13% increase in ridership from January to May 2010, as compared to the previous year; however, the data collected did not definitively indicate that the increase was attributed to the newly arrived survivors. Nonetheless, the city's Planning staff strongly believes that the influx of refugees may have been a contributing factor in the increase in ridership (Table IX).

Table IX Number of NOMI Shuttle Riders from January to May 2010				
Jan 2010	Feb 2010	Mar 2010	Apr 2010	May 2010
23,864	24,049	26,511	26,634	27,132

In addition, Miami-Dade County Public Schools received more than fifteen hundred students from Haiti as a result of the earthquake but did not document the impact of these students on the district. The students seemed to be treated like American students returning back home, since the majority spoke English and expressed minimal problems in adjusting to the new setting.

Likewise, the North Miami Utility Billing Division did not account for any changes in water usage between February 2010 and February 2011. We can only assume that changes were unnoticeable because they were insignificant.

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Conclusion

Both primary and secondary sources of data used in this research revealed that a number of earthquake victims arriving from Haiti were also residents of North Miami. Since their arrival these survivors have used services from local schools, churches, municipal government, and/or social service agencies. Except for Miami-Dade County Public Schools that kept a systematic count of new student enrollment, most agencies and institutions failed to document their involvement in servicing those survivors. People were instinctively responding to a compelling need without having a second thought to methodologically documenting the facts at hand.

These findings are well supported by another study conducted six months after the earthquake by *An n Avanse – Let's Move Forward*, a community initiative focused on facilitating the healing of Haitian people in Miami-Dade County. An n Avanse wanted to identify gaps that may need to be addressed in our community in the aftermath of the earthquake (**Appendix 4**).

An n Avanse concluded that 54% of the survivors are still living in the Miami area, 88% of the survivors reside with family members and friends, and 69% are receiving services from different agencies. While Catholic Charities, a county-based organization, served 24% of those survivors, Sant fLa, a community-based social service agency, served 15% of them (**Appendix 4**). In other words, Sant La served more than half of the population served by Catholic Charities, which is a better funded organization.

All things considered, the Mayor's Haitian Earthquake Impact Evaluation Taskforce and An n Avanse's research projects support the argument that a large number of earthquake victims from Haiti reside in our community. These survivors are using different services and they are still in need for more in their adjustment process. Moreover, local agencies and institutions seem to go above and beyond the call of duty to serve and accommodate earthquake survivors from Haiti.

Recommendations

Based on the above stipulated findings and conclusion, the Mayor's Haitian Earthquake Impact Evaluation Taskforce recommends that the city of North Miami:

- 1- Continue and maintain its efforts to support various institutions and agencies that serve the survivors.
- 2- Encourage coordination between the schools, churches and organizations that serve the survivor population to improve their access to support services that were and remain needed.
- 3- Urge city-based providers to improve their intake system by including in their intake forms relevant questions regarding significant happenings that might affect their services.
- 4- Promote activities that facilitate the full integration of these new residents in the North Miami community.
- 5- Provide pertinent information related to city services, citizenship, voter registration, census participation, attending council meetings, etc. Haitian radio should be used as an efficient tool to reach the target audience for maximum educational impact.


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Community Partnership for Local Haitian Relief Efforts
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d. Miami-Dade County: Haitian American Emergency Relief Committee Report



**JOE A. MARTINEZ
MIAMI DADE COUNTY COMMISSIONER
DISTRICT 11**

Memorandum

To: Commissioner Audrey Edmonson
From: Commissioner Joe A. Martinez 
Date: February 24, 2010
Re: Haitian American Emergency Relief Committee's After Action Report

Since you are the liaison to the Board of County Commissioners for the Haiti relief effort, I am attaching for your review the Haitian American Emergency Relief Committee's (HAERC) after action report submitted to me by Mr. Didier J. Fabien, who is my appointee to the Black Affairs Advisory Board, of their trip to Haiti to distribute Miami-Dade County's donations for the victims of the earthquake.

Please advise my office if you need additional information.

cc: Chairman Dennis C. Moss and
Members of the Board of County Commissioners

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After Action Report

Event: Haitian American Emergency Relief Committee (HAERC) of Miami-Dade County Donation Distribution

Date: February 13, 2010

Synopsis of Event:

- Miami Air Transport donated DC 6 with flight crew
- Miami Baptist Association provided \$12,000 for the cost of fuel
- 25,000 lbs. of donations collected by Miami-Dade County were taken
 - Ready to eat food
 - Medical supplies
 - Tents
 - Water
- Security detail was provided through the Mayor of Port au Prince by the United States Army
- Distribution took place at Fortune Guerry School located in Port au Prince, near Carrefour at 11:00 AM
- Location was determined by the greatest needs
- USICAN, group of volunteers trained by the HAERC (equivalent to the Good Will Ambassadors in Miami) assisted in the distribution of the goods to the residents of the area
- Elderly, pregnant women, disabled and mother with children were assisted first
- Approximately 20 lbs. of food were given to over a 1,000 victims of the earthquake

Areas of Improvement:

- This was appreciated by the residents of Haiti, but more donations are greatly needed
- Donations vastly needed are:
 - Tents
 - Food
 - Medical supplies

Future Goals:

- Future trips are dependant on monetary donations for transportation

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**Haitian American
Emergency Relief Committee**



**SUMMARY OF MEETING WITH CENTRE D'OPERATION D'URGENCE NATIONAL (COUN) DE LA
DIRECTION DE LA PROTECTION CIVILE ON MAY 19TH, 2011**

DIDIER FABIEN

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HAERC Executive Director Didier Fabien was present on May 19th, 2011, at a meeting held at the new emergency management warehouse of the Office of the Civil Protection of the Interior Ministry. This meeting was one of the first to inform the First Lady, Sophia Martelly, about the planning for the upcoming hurricane season and also the activities involving the public awareness and needs of the Civil Protection Office. At the meeting the First Lady inquired about why the stop of the public awareness program for earthquake, the members of the Office of the Civil Protection explain that the campaign was multi risks awareness and that they still have training and awareness in every department. The Ministry of Interior is in preparation for the risks management that will be in place for the launch of the Hurricane Season for June 1st. The First Lady assures them that they will have her full support.



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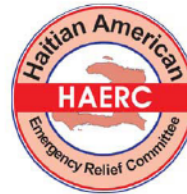
Afterward M. Fabien met with the First Lady Sophia Martelly and Mrs. Alta Jean Baptiste the Director of the Office Protection of the Ministry of Interior, to inform them of the Haitian American Emergency Relief Committee (HAERC) previous relief effort in past emergencies and particularly after the earthquake. They discuss also of the important role that HAERC can play in the recovery effort in case of disaster and the link they have with Miami Dade County Board of County Commissioners Office of the Chair and Office of Emergency Management. The First Lady and Mrs. Jean Baptiste are looking forward to this collaboration.



First Lady Sophia Martelly, Didier Fabien, Alta Jean Baptiste



Report of Haitian Earthquake January 20, 2010



A needs assessment from the
Black Affairs Advisory Board (BAAB)

and

Haitian American Emergency Relief
Committee (HAERC)

Black Affairs Advisory Board

- Created by ordinance in 1979 by BCC
- To address the issues and concerns of Miami-Dade citizens
- Established relationship with HAERC as a result of the Emergency Summit on Haiti in May 2008
- A public and private non-profit partnership to provide logistical support for emergency relief collection and distribution to Haiti

Haitian American Emergency Relief Committee (HAERC)

- Established to solicit donations for the redevelopment and stabilization of the economy in Haiti
- A resource center for the collection and distribution of monies, food, medicines and other supplies needed to assist the people of Haiti
- Membership includes elected officials, community leaders, non-profit representatives and grassroots activists
- Arranges for consolidated shipments to Haiti while, researching recipients of these donations

BAAB & HAERC Past Collaborations

- Food Shortages
August 2008
- Hurricane Hanna
September 2008
- Hurricane Fay
August 2008
- Hurricane Ike
September 2008
- Hurricane Gustav
August 2008
- Christmas Toy Drive
December 2009

HAERC departs for Haiti on 1/14/10



Port-au-Prince Airport



Entering the City



Caribbean Marketplace



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Five-story School in Carrefour



Damage to City Hall & Post Office



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HAERC Wish List for Donated Items

- Food – Non-Perishables & Energy bars
- Water – Energy drinks, etc
- Medical Supplies – greatest need for face-masks
- Outdoor Camping Equipment – tent, sleeping bags, tarps etc.
- Toiletries – Soap, towels, etc

Time is of the Essence

- Miami-Dade Police & Fire Stations
- Other Miami-Dade facilities are available
- 3-1-1 will provide specific locations



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CURRENT STATE OF AID FLOW



DONATIONS ARE COLLECTED THROUGHOUT THE COUNTY, TRANSPORTED TO WAREHOUSE WHERE THEY ARE SORTED AND BOXED THEN TRANSPORTED TO SHIPPING COMPANY FOR FINAL DESTINATIONS. THIS PROCESS CAN TAKE WEEKS.



THE DONATIONS ARE THEN PLACED IN A CONTAINER; WHEN THE CONTAINER IS FULL THEN IT IS READY FOR SHIPPING; THAT CAN TAKE ANOTHER WEEK + SHIPPING TIME FROM MIAMI TO HAITI TAKES 3-4 DAYS TRAVELLING TIME. WHEN THE CARGO ARRIVES TO HAITI IT NEEDS TO BE INSPECTED AND CLEARED BY CUSTOMS THEN, ONCE THEY DETERMINE HOW MUCH TO CHARGE DEPENDING ON THE VALUE THEY COME UP WITH, IT CAN COST FROM HUNDREDS TO THOUSANDS .THE AVERAGE COST FOR A 40FT CONTAINER FROM MIAMI TO HAITI IS ABOUT \$2500.00 US DOLLARS. WHEN YOU TAKE IN CONSIDERATION LABOR, STORAGE FEES, BOXES, TAPE,GASOLINE, TRANSPORTATION, CUSTOM FEES ,TRANSPORTATION IN HAITI AND DISTRIBUTION COST, THE FREE DONATIONS COLLECTED AND DELIVERED IN HAITI CAN COSTFROM \$5,000.00 -\$7,500.00 & TIME FRAME FOR PROCEDURE FROM TO 1-3 MONTHS.



Haitian American Emergency Relief Committee

MIAMI-DADE COMMISSIONERS VISIT TO HAITI



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Haitian American Emergency Relief Committee

PROVIDING TRAINING & BUILDING RELATIONSHIPS



Haitian American Emergency Relief Committee

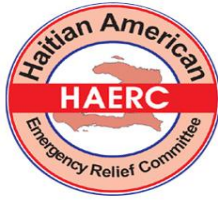
WORKING HANDS ON WITH PARTNERS



IN DEC 2008 THE MATTEL TOY CO. DONATED 7 PALETS OF TOYS TO HAERC FOR THE CHILDREN OF HAITI .WITH THE HELP A.A.AIRLINES CARGO, THE COLLABORATION OF THE OFFICE OF THE PRIME MINISTER,AND THE RHAU FOUNDATION IN HAITI ,THE TOYS WERE DELIVERED AND DISTRIBUTED DURING THE MONTH OF JANUARY 2009



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Haitian American Emergency Relief Committee

FOOD TRANSPORTED BY US MILITARY TO REMOTE LOCATIONS



Haitian American Emergency Relief Committee

PROVIDING TRAINING FOR USICAN DURING CARNAVAL



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Haitian American Emergency Relief Committee

THE CITY OF MIAMI & THE CITY OF PORT-AU-PRINCE PRESENTS.....
WAKE UP! LET'S KEEP PORT-AU-PRINCE CLEAN



Haitian American Emergency Relief Committee

MIAMI DELAGATION COMPLETING MURAL WITH ARTIST



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Haitian American Emergency Relief Committee

TURNING SOLID WASTE INTO FUEL HOPING TO REPLACE CHARCOAL



Haitian American Emergency Relief Committee

DISCUSSING T.P.S. FOR HAITIANS WITH
CONGRESSMAN MARIO DIAZ-BALARD



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Appendix #7 - Photos

Sant La Photographs of Earthquake Survivor Focus Group



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**Sant La Haitian Neighborhood Center
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Haitian Cultural Arts Alliance

Mireille Chancy-Gonzalez and Martine Buissard with students from Anderson Boyd High School



**Sant La Haitian Neighborhood Center
Community Partnership for Local Haitian Relief Efforts
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Community Partnership, Executive Summary Report Release, January 12, 2012



From Left to Right - Row One: The Honorable Jean Monestime, Miami Dade County Commissioner; The Honorable Ralph Latortue, Haiti Ambassador to the Bahamas; Leonie Hermantin of the Lambi Fund of Haiti; Anneze Brown, Rapha Family Services; Row Two: Thamara Labrousse of Strategic Partners; Gepsie Metellus of Sant La; The Honorable Francois Guillaume, General Consul of Haiti in Miami; Youth Earthquake Survivor; Row Three: Jacqui Colyer of The Children's Trust; Group photo of Mary Donworth, Thamara Labrousse and Anneze Brown; Row Four: Gepsie Metellus sharing a laugh with an earthquake survivor; and Mary Donworth of The United Way of Miami-Dade County.