

## Before the Next Big One

The China earthquake, 2008. New Orleans' Hurricane Katrina, 2005. The Indonesian tsunami, 2004. These are the Big Ones that startle the front pages and bring disaster home. But the last story lies behind the headlines where vulnerabilities are laid bare, and between the disasters themselves, where the opportunity for mitigation begins.

Indeed, when the world's governments met in Kobe, Japan in 2005, the resulting Hyogo Framework for Action seemed to definitively reorient disaster strategies towards reducing vulnerability, and hence risk, across the board and over the long term. Yet, there is no doubt that decision-makers are still worlds apart on disaster management. In some quarters, the door has been opened to privatization, as corporations capitalize where government action has fallen short, providing protection and evacuation for those who can afford them. At the same time, the International Federation of the Red Cross (IFRC) dedicates its 2007 World Disaster Report to ending disaster response discrimination against "those already marginalized by society", an imperative echoed by those who argue that disaster management should be a public endeavor, with government bearing responsibility for protecting the lives of all its citizens and, to a greater or lesser degree, their property and livelihoods.

From the decade-long trend in rising natural disaster frequency, one thing is clear: there is no time to waste in getting it right. UN Under-Secretary-General for Humanitarian Affairs John Holmes remarked last International Day for Disaster Reduction: "The number of people threatened by natural disasters has increased by three times over the last 30 years, and the number of people affected by [them] has doubled every ten years." He went on to warn of the evident link between climate change and the increase in disasters.

Hydro-meteorological events account for the lion's share of natural disasters, and these floods and storms are the main driving force behind disasters' upward trend, which continued through 2007. Last year, hydrological disasters were the most common type, with 219 floods and 10 wet mass movements (229 total) reported worldwide. The human impact was high: over 177 million people were affected, 82% of all disaster victims for the year. The number of meteorological disasters (cyclones and other storms) increased in 2007 to 105, from 76 the previous year.[1] An unusually low number of geophysical natural disasters was reported in 2007, a hiatus interrupted this year by the earthquake in China.

With this issue of the journal, we join agencies such as the UN Development Program (UNDP), the Pan American Health Organization (PAHO), UNICEF, OXFAM,[2] and the Caribbean Community (CARICOM), who have found it useful to review the Cuban experience in disaster management for its theoretical as well as practical lessons.

Our attention is drawn to Cuba's evolving strategies and cumulative results because, among other reasons, they provide an example of a *public* disaster mitigation, response and recovery

model; they describe the country's defense primarily against tropical cyclones, the world's most reported type of meteorological disaster in 2007, accounting for 96% of meteorological disaster victims;[1] and they are generated in a resource-constrained environment, similar to the rest of the Caribbean and many other developing nations.

### Cuba's evolving strategies and cumulative results provide an example of a *public* disaster mitigation, response and recovery model

An interview with Dr José Betancourt of Cuban Civil Defense (*You Can't Stop the Rain*) provides context for the issue, as well as reflections on recent changes in disaster management strategies; while Dr Guillermo Mesa's article zeroes in on the pivotal role of the health system (*Cuba's Health Sector & Disaster Mitigation*). We offer three features on Cuba's assistance to disaster victims abroad: a conversation with Dr José Rodríguez, head of the Cuban medical team dispatched to China in May 2008 (*Cuba's Man in Sichuan, China*); *Psychological First Aid for Haiti's Storm Orphans*; and *Cuban Health Cooperation Turns 45*, which contemplates disaster response as part of a broader global program.

Scientific articles on a Cuban vaccine in post-disaster use (*Study of a Leptospirosis Outbreak in Honduras Following Hurricane Mitch and Prophylactic Protection of the vax-SPIRAL® Vaccine*); and *Race: A Risk Factor for Dengue Hemorrhagic Fever* are carried in our Reprints section. And, as always, we publish papers on key medical and population health subjects, in addition to those on the issue's main theme. Thus, we include *Epidemiology of Asthma Mortality in Cuba and its Relation to Climate, 1989 to 2003* – a preview of the issue we will be dedicating to climate change, the environment and health in 2009.

Two articles focus on women's health in Cuba. The first is *Severe Maternal Morbidity in the Intensive Care Unit of a Havana Teaching Hospital, 1998 to 2004*, research on "near-miss" maternal deaths, which may offer important clues to Cuban health authorities as they continue to address the complex puzzle of reducing maternal mortality. In *Viewpoint*, a leading Cuban voice on women's health takes on the issue of *Women in the Middle: Cuba's Sandwich Generation*, calling for the wellbeing of middle-aged women to be re-evaluated through a gender lens. No doubt it will not be the last we bring you on this important Cuban – and decidedly universal – topic. 

#### The Editors

1. Scheuren, J-M et al. CRED Annual Statistical Review. The Numbers and Trends 2007. Center for Research on the Epidemiology of Disasters (CRED). Brussels. 2008. p.16.
2. See articles this issue, as well as Thompson M. *Weathering the Storm: Lessons in Risk Reduction from Cuba*. OXFAM America. Boston. 2004.