

**Ministry of Health & Medical
Education
Response
to
Bam Earthquake Disaster**



Citadel of Bam surviving more than
2000 years before the Earthquake



Citadel after the earthquake

The Bam
Earthquake,
one of the
most
devastating
natural
disaster in
the world



Disaster and Population affected

- Disaster Struck on Friday, December 25, 2003, at 05:27 O Clock A.M With the strength of 6.8 on the Richter scale
- Population of affected areas:
 - ◆ Total: 240,000
 - ◆ Urban: 97,000
 - ◆ Rural: 143,000

HEALTH FACILITIES

- Health Houses 95
- Health Centers 23 (10 Urban & 13 Rural)
- Hospitals 3 (250 beds total)

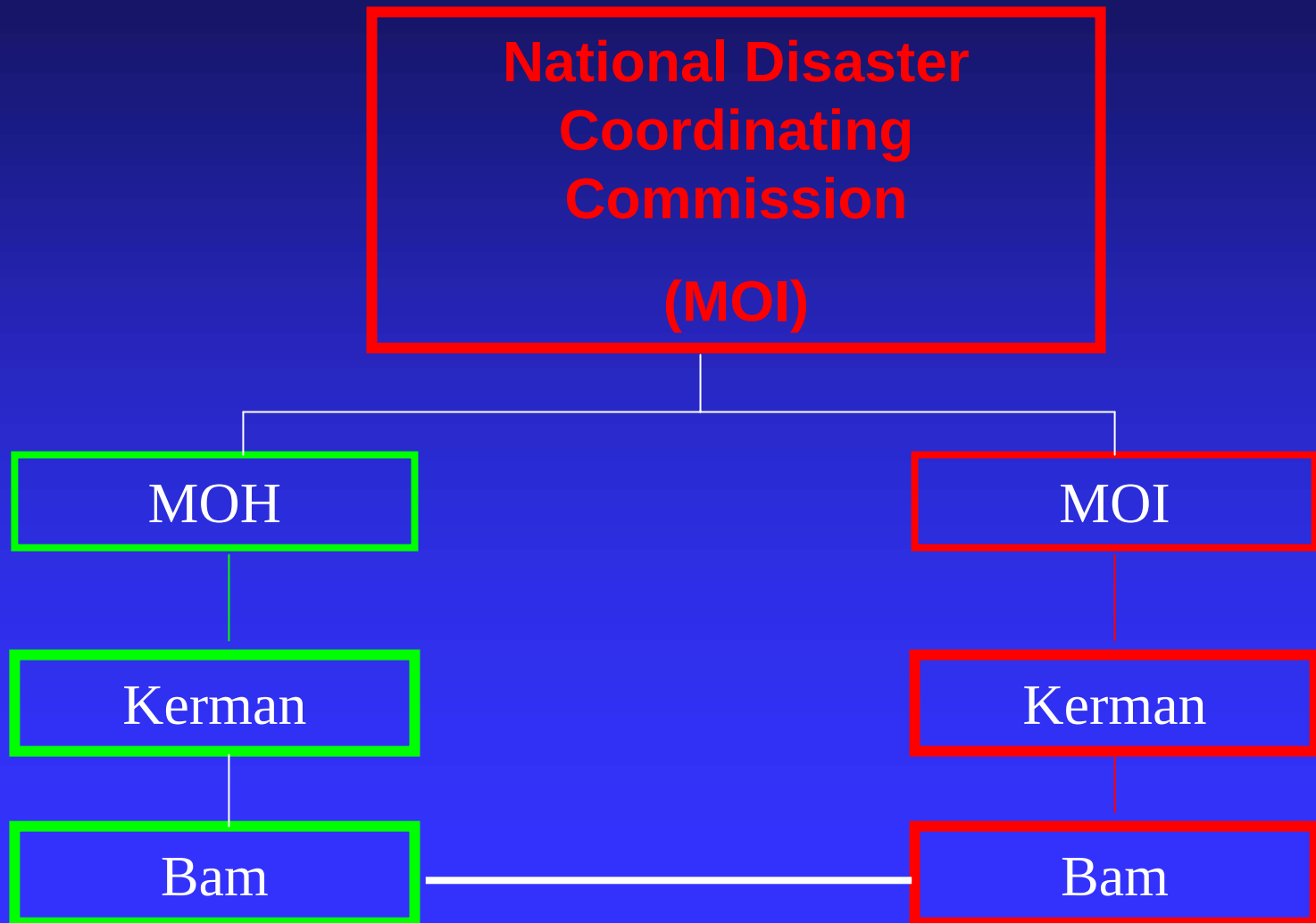
Damages caused in the health sector

- 50% of health personnel dead
- All health facilities destroyed

Causalities

■ Dead	27000
■ Injured Persons	22000
◆ Hospitalized	7400
◆ Outpatient care	9600
◆ Home care	5000

Coordination Of national and local Disaster organizations



Rescue and relief

- **Recovery of injured and dead**
- **Air lifting of injured**
- **Overall operation coordination.**
- **National, provincial and district response committees.**
- **International teams.**



Medical care for injured

- More than 10,000 injured air lifted to other cities,
- Urgent care in affected areas
- Severely injured treated in medical universities hospitals.
- Active tent to tent search for injured and traumatized

Disease surveillance

- **Active case finding for communicable and non-communicable diseases tent by tent**
- **Registration**
- **Follow up**

Environmental Health

- Water supply
- Sanitation
- Bathing facilities
- Food safety
- Solid wastes
- Environmental
disinfection/decontamination

Reactivation/and management of health services

- **Reactivation of of the health network**
- **Dividing the affected areas into 14 health zones**
- **Sub dividing each health zone into 7-9 blocks.**
- **Each health zone is managed by medical university of the supporting provinces.**

Documentation and Evaluation

- **Preparedness, Mobilization and Coordination**
- **Timeliness and efficacy of assessment and response**
- **Evacuation and caring of injured**
- **Reactivation/rehabilitation of health services**
- **Skills and training of staff**
- **Information/communication, Media and public relation**
- **Supplies and logistic support**
- **Need for guidelines for all stages and aspects**

Lessons Learnt

- Strong health system and experienced national staff invaluable
- In spite of experience early shock and rush of volunteers and people created problems.
- Army proved a critical resource
- People play crucial role.
- International support coordination improvement.
- Many donors pledged but did not deliver
- WHO support judged extremely effective.