REPORT ON CONDITIONS IN PUERTO RICO AND CALL FOR IMMEDIATE CONGRESSIONAL ACTION

On the southern edge of San Juan municipality, where there has been no contact with FEMA, Red Cross or any official relief. This family has been sleeping in their roofless house on soaking wet furniture for weeks. The youngest child has (unsurprisingly) developed a rash. When RN Lucia Lopez gave the mother hydrocortisone cream, she burst into tears.
For more information, please contact National Nurses United at 240-235-2000.
A large delegation of 50 volunteer registered nurses from across the United States returned on October 18, 2017 from Puerto Rico after a two-week disaster relief effort in the wake of Hurricane Maria. The returning nurses are part of the Registered Nurse Response Network (RNRN), a disaster relief program sponsored by National Nurses United, and are among 300 union members the AFL-CIO organized for the relief mission to Puerto Rico.

While working in Puerto Rico, these RNs witnessed communities and neighborhoods that remained devastated four weeks after hurricane Maria made landfall. They provided care and other support for residents living in severely damaged homes who had not received help from FEMA or any other relief agency. These RNs described an ineffective federal response that has led to deadly conditions including extreme lack of food, water and medicine; people living in houses infested with black mold; and water-borne illnesses such as leptospirosis.

The RN volunteers witnessed the perilous conditions residents are enduring. From the outskirts of San Juan to isolated mountain towns, they encountered many residents who had yet to be assisted by the U.S. government’s relief effort. Many were staying in houses that had been destroyed by the hurricane – they were flooded, roofless, and most do not have electricity, sufficient food, and clean drinking water. Many residents told the nurses that they were the first people offering them assistance. In addition to providing medical care, the RNs created public health pamphlets to distribute and instructed residents on how to decontaminate their water and remove black mold from their homes. They also visited community radio stations where they provided health tips and water decontamination instructions on the air.

Nurse Testimonies

“These communities are at great risk of water borne illness epidemics. They need clean water that is safe to drink. It is outrageous that we are leaving our fellow Americans with essentially no aid. Many more will die if we don’t step up.”
— Erin Carrera, RN

“Today our team traveled into the center of the island into the mountain town of Utuado. These towns are so isolated that relief efforts have not made it into these areas. It was due to impassable roads. But the local community cleared most of the roads. People said we were the first relief group to come into the area ... They’re struggling to get basics such as food, water and medicine.”
— Roxanna Garcia, RN

“We couldn’t believe this is part of the United States. We did home visits in a low-income community with the public health liaisons who identify those in need and help them do basic blood pressure checks, blood sugar checks, refill their meds, etc. They have already had chronic diseases going on and now their environment is full of hazardous materials and sanitation is so poor.”
— Hau Yau, RN
Dire conditions reported in Puerto Rico

Among conditions our RNs witnessed:

- Many communities had still not received any federal assistance or relief from FEMA or other agencies by the end of this deployment on October 18, 2017.
- Residents who had contact with FEMA stood in line for hours in the blistering heat, waiting for desperately needed water and food. Instead, many were asked to fill out paperwork “to collect data” and apply for FEMA assistance. They were given only a small bottle of water and a small pack of Cheez-It crackers.
- Residents in communities where FEMA personnel were not present have been unable to apply for FEMA assistance online because of the lack of electricity and internet service.
- Residents continuing to live in houses with roofs blown off and soaked interiors where there is dangerous black mold growing that creates respiratory distress and illness.
- Residents desperate for water using containers that used to hold anti-freeze and other toxic agents to gather water from potentially contaminated streams.
- Major areas away from urban centers where residents still had received no provisions, had no running water and no electricity.
- Nurses had to sometimes clear debris in roads themselves in order to gain access to communities who had not received any aid since the hurricanes struck.
- Many people who have lost weight since the hurricanes hit due to lack of food (skipping meals, or giving their food to their children instead of eating themselves).
- A lack of basic healthcare services – many local doctor’s offices were closed and hospitals were often full and lacking supplies (including clean drinking water), and running on generators that sometimes fail.
- An outbreak of leptospirosis, a dangerous bacterial disease that had already claimed lives.
- Numerous communities without clean water that are at risk of the outbreak of water-borne illness epidemics.

The nurses’ first-hand accounts are supported by official government sources, including the Federal Emergency Management Agency (FEMA), the government of Puerto Rico, and the Centers for Disease Control and Prevention (CDC); advocacy and professional organizations; and news reports. Many of the same conditions they witnessed continue five weeks after Hurricane Maria made landfall.

- Approximately one million people lack access to running water. According to status.pr, 74% of Puerto Rico Aqueduct and Sewer Authority (PRASA) customers have water service. However, contrary to a statement on the FEMA website, this water may not be potable. Those with running water have been advised by the Puerto Rican water authority to boil it for five minutes or treat it with chlorine. Those without access to running water are drinking and bathing in water from contaminated rivers and wells. With just over half of wastewater treatments operating, AP reports that raw sewage is pouring into Puerto Rico’s rivers and reservoirs. Some have resorted to drinking from wells on superfund sites that have been contaminated by hazardous chemicals.

- There is a daily shortfall of 1.8 million meals. According to the Guardian, FEMA officials report that, together with its partners, they are providing only 200,000 meals a day when more than 2 million people are in need. “We are 1.8 million meals short,” said one senior Fema [sic] official. ‘... And it’s not going away. We’re doing this much today, but it has to be sustained over several months.’ In addition, with 1.3 million of Puerto Rico’s poorest residents receiving food stamps, only 39% of businesses are able to process the electronic payments that make up 75% of the monthly benefit.
• More than three-quarters of Puerto Rico Electric Power Authority (PREPA) customers are without electrical service.10 Although Governor Roselló has pledged to have 95% of the power restored by December, his public affairs secretary, Ramón Rosario Cortés stated: “We have 230 brigades. If we used only these brigades, we’d be talking long months — years.”11

• 37% of telecommunications has yet to be restored.12 This figure includes wired and wireless service. Nearly half of cell towers and two-thirds of the cell antennas are down.

• Most roads remain impassable. According to FEMA: “392 miles of Puerto Rico’s 5,073 miles of roads are open, allowing for passage through the outer ring of the island.”13

• 60,000 homes need roofing help but only 38,000 tarps have been delivered.14 One type of roof repair being provided is designed to last only 30 days making roofing repair and exposure to the elements an ongoing problem.15 Those that went up first may already need to be replaced.

• The healthcare infrastructure has been devastated. Although 65 of 67 hospitals are operational, only 49 have electricity.16 In addition, most of the hospitals are only partially functioning and are using generators; only twenty are actually connected to the electricity grid.17 Those running by generator are vulnerable to lapses in fuel delivery. Although most dialysis centers are open, some have shortened hours and reduced dialysis treatments from four to three hours.18 Yet, despite great need, the Navy ship USNS Comfort remains largely idle. The Wall Street Journal reports: “The USNS Comfort, a 70,000-metric-ton ship staffed with roughly 800 medical and support personnel and 250 beds, has treated only about 150 people since it arrived on Oct. 3, said a U.S. Navy spokesman aboard the vessel.”19 CNN reports: “Only 33 of the 250 beds on the Comfort – 13% – are being used, nearly two weeks after the ship arrived.”20

• Disease outbreaks and serious health problems loom. According to the Infectious Diseases Society of America, Puerto Ricans are at serious risk of waterborne, mosquito-borne, foodborne, and mold-related illnesses.21 The CDC has advised healthcare providers “to be vigilant in looking for certain infectious diseases, including leptospirosis, dengue, hepatitis A, typhoid fever, vibriosis, and influenza.”22 According to Puerto Rico state epidemiologist Carmen Deseda, 74 cases of leptospirosis had been reported as of October 19, 2017, which is more than the 60 cases Puerto Rico typically experiences in a year.23 In addition to the increased risk, the healthcare system is severely compromised. The Huffington Post reports: “When asked if the health system on the island currently had the infrastructure to deal with a possible outbreak of any disease, [Governor] Roselló admitted that the hospital system is ‘very frail’ ...”24
Nurses demand the following actions be immediately taken to address the crisis:

- **Congress must exercise its oversight authority to ensure the expeditious functioning and efficacy of FEMA and other U.S. relief efforts on the ground.** To deal with the immediate crisis, FEMA and the U.S. armed forces should greatly expand the use of air drops into Puerto Rico of water, food, and medicine. Human and financial resources must be deployed to overcome the bottlenecks that are keeping help from reaching those most in need, which range from a lack of communication to blocked roads to a shortage of vehicles and drivers to make deliveries.

- **The Department of Defense must supply greater technological and logistics support to Puerto Rico.** This should include providing technical assistance with restoring electricity to the island, installing temporary telecommunications connections in remote areas, and continuing to deploy boots on the ground to help clear roads and deliver humanitarian aid.

- **Congress needs to immediately provide resources this fiscal year to address Puerto Rico’s looming Medicaid crisis.** The Medicaid shortfall was a problem before Hurricane Maria, and is now even more severe given the public health dangers following the storm. In the long term, Congress must ensure that Puerto Rico receives the same federal Medicaid funding as U.S. states, which would save Puerto Rico hundreds of millions of dollars annually. Efforts to address Puerto Rico’s humanitarian needs in the wake of Hurricane Maria are inadequate if not extended to solving the island’s impending Medicaid crisis. Without immediate action from the U.S. Congress, the territory will not have sufficient funds to continue operating its Medicaid program in 2018, which would strip nearly half of its 3.5 million residents of health insurance at a time when they need it most.

- **The federal government must immediately ensure that patients who need care can access the services of the USNS Comfort.** The Comfort has served as a critical site for emergency medical treatment in the aftermath of natural disasters, and RNRN/NNU volunteers have served on missions including disaster relief in Haiti after the 2010 earthquake as well as the humanitarian assistance mission “Continuing Promise” in 2010 and 2015. The USNS Comfort has critical staff, equipment and supplies that are not readily available to many people in Puerto Rico right now. At a time of increased health care crises, we must use all resources available to us to care for patients in need, and our hope is that more people who are not able to get the care that they need can be transferred to the USNS Comfort.

- **The administration must respond immediately to the governor’s request to waive FEMA cost-sharing requirements for all categories of expenditures.** Given Puerto Rico’s financial situation, this waiver must be for 100% of all cost-sharing. This will allow FEMA to immediately authorize full reconstruction aid, known as C-G public assistance, to Puerto Rico. C-G public assistance would provide Puerto Rico with critical infrastructure aid in the rebuilding of roads and bridges, water control facilities, and public buildings and utilities. After Hurricane
Katrina in 2005, FEMA spent $13.4 billion to rebuild parts of Louisiana, almost $10 billion of which came from the C-G assistance program. While FEMA authorized C-G assistance for Texas only 10 days after Hurricane Harvey made landfall, Puerto Rico continues to suffer without this critical aid five weeks after the disaster.

- **FEMA must extend the 60-day deadline for filing claims for disaster relief.** While much of the island remains without reliable electricity and internet connections, it is nearly impossible for people to assess the property damage and submit claims in the normal timeframe. Considering estimates that Puerto Rico’s power grid may not be fully operational for as long as six months, FEMA must extend the deadline to file a disaster claim by at least an additional 120 days, or until power and internet is fully restored to the island.

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### Conclusion

The response to the crisis in Puerto Rico from the U.S. federal government has been unacceptable for the wealthiest country in the world.

During this humanitarian crisis, nurses urge the Trump Administration and Congress to take immediate action for the people of Puerto Rico by enacting the series of urgent measures outlined above. The U.S. federal government must do everything in its power to assist the Puerto Rican people to recover from Hurricane Maria.
Appendix

Following are some of the first hand reports from registered nurses on the ground:

“We met a man who lives in a two-story house with his elderly mom. He was sitting in a wheelchair on the second floor where there used to be a roof. His right ankle was wrapped with toilet paper roll with a dirty gauze underneath. When unwrapped, a portion of internal fixation metal hardware used to stabilize his right ankle is exposed. There is also a quarter-sized ulcer with yellow drainage on his dorsal foot. He told us he has had multiple orthopedic surgeries for his right foot due to a former injury. Because of the hurricane, he loses follow up with his doctor and now he is stuck because his cell phone stops working and he has no transportation to go to a doctor’s visit. We told him that his foot looked infected and he needed to go to an emergency room. He replied that he worried no one will take care of his foot because he has no money, and he would just sit and wait in the ER for hours without being attended. He asked us to talk to a local doctor, any doctor who can ensure his admission in the hospital. We brought his information back to the command center but the answer was disappointing—that we have no legitimate status to make referrals in Puerto Rico, and that a local doctor would need to see him first—but there is no timeline on when and how it’s going to happen. We left this guy with questions unanswered, along with the risk of sepsis and death from an infected foot hardware.”

—Hau Yau, RN

Each person received a small bottle of water, a mini bag of Cheeze-Its and a little pack of vanilla cookies. Outrageous. Meanwhile grocery stores have limited supplies and lines for many blocks. What amazes me is how kind, calm and sharing the Puerto Ricans are, sharing with and helping their friends, family and neighbors. We were able to provide care to some, not nearly enough, but one small contribution to this tragedy today.”

— Erin Carrera, RN

“Today we went to Corozal after meeting in the disaster command center this a.m. We set up a clinic at a school where families are living, and then the mayor drove us up a hill to do door-to-door assessments. Families were extremely relieved to see us. We are seeing a breakout of leptospirosis in the community here, at least three people have died and FEMA is not releasing water to the community. Yesterday, people stood in line since 10 p.m. the previous night in hopes FEMA would show up and give them food and water. To everyone’s dismay FEMA showed up, but they were not there to get food or water, they were there to fill out paperwork. They handed one bottle of water and a snack pack of Cheez-Its. I saw many patients yesterday; there were so many I lost count. It was really sad, however it’s always amazing to see the spirit of the community. Neighbors are banding together to care for each other offering their last food to us not knowing if there will be any more food delivered to them.”

— Kent Savary, RN

“FEMA is here with supplies, but out of approximately 40 towns accessed so far FEMA hasn’t released food or water in ANY of them other than one air drop. The people of Puerto Rico are starving and have no access to water. People are dying from leptospirosis, a specific bacteria in the water system. The situation is becoming dire.”

— Randee Litten, RN
“It’s hell here. The people have nothing, yet they are first to offer you the shirt off their back.”

– Laura Maceri, RN

“Today we went to a town called Barraquita. They had almost no water or food. They were desperate. Even asking if we had carried any water at all for them to drink. It was hard to even fathom the destruction and how they can even begin to clean it. They are relying on rain water and 1 million chickens died there in the storm and the decomposed bodies are causing people to be sick. There is hardly any way for them to clear the debris and they have little money, no way to work, and they are afraid to drive anywhere for help because they have little gas and they are afraid what they will do if something happens to their car. We did a lot of teaching about purifying water for drinking, handed out solar lamps and a lot of emotional support. Overwhelming is the only thing I can say to describe it. They are even afraid to get aid dropped in their barrio because of the potential for violence.”

– Jordyn Olachea, RN

“Yesterday we went to Utuado, a town up in the center of the island. We stopped many times along the way to educate people on water safety. It’s a mountain community with small pueblos all over, many cut off since Maria by fallen bridges and blocked roads. We stopped in the center of town at the National Guard. They had lists of all the areas that had been seen by medical groups. We went to an area that nobody had visited where roads were recently opened. People are somehow surviving with the food and medicine they had on hand. They have received NO provisions. There is no running water and no electricity. Nobody is aware of the risks of drinking untreated water. We went house-to-house teaching families and asking that they spread the word. We also provided urgent care where we could.”

– Erin Carrera, RN