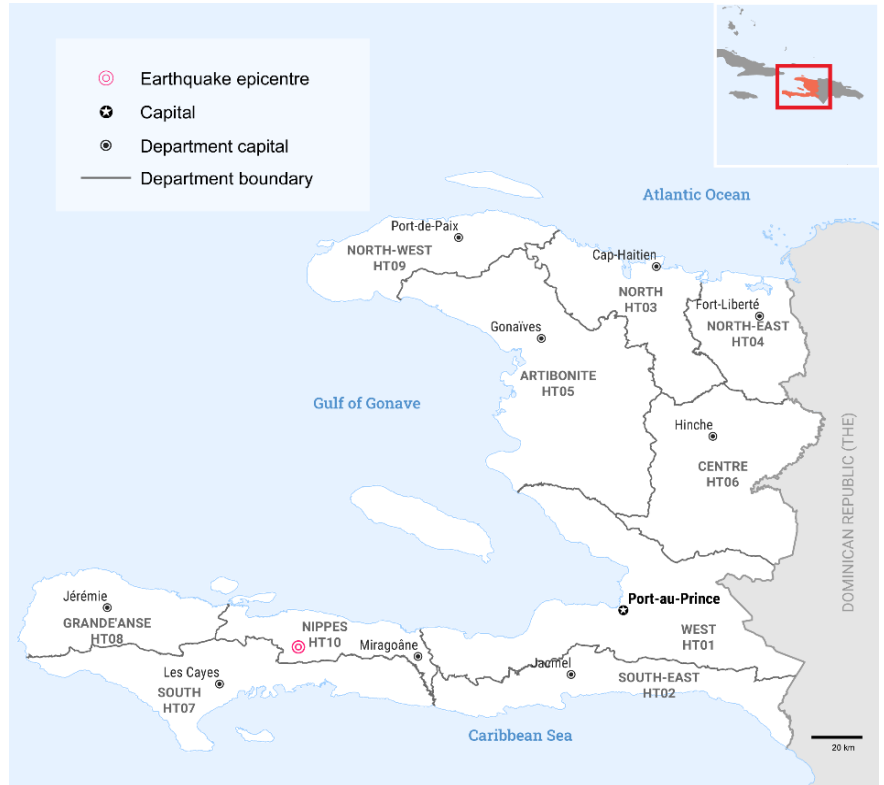


This report was produced by OCHA Haiti with contributions from United Nations Agencies, Funds and Programmes, non-governmental organizations and humanitarian partners.

HIGHLIGHTS

- In the aftermath of the devastating 7.2-magnitude earthquake that hit Haiti on 14 August, authorities report more than 2,200 people dead, at least 344 missing, over 12,000 injured and upwards of 130,000 homes damaged or destroyed.
- Under the leadership of the Government, national and international humanitarian partners are scaling up multi-sectoral response efforts in all quake-affected areas.
- Tensions on the ground are mounting as aid trickles into the hardest hit communities, while the Government looks to increase the frequency of humanitarian convoys and step up security measures.
- Despite negotiation of a humanitarian corridor, access constraints and insecurity remain a key challenge facing humanitarian partners across all sectors.
- Additional human and financial resources are needed to respond to the crisis, as organizations are stretched thin from responding to multiple simultaneous crises in the country.



The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.
 Creation date: 15 Aug 2021 Sources: CNIGS Feedback: ocha.haiti.im@gmail.com | www.unocha.org www.reliefweb.int

828K+

affected people

(Source: DGPC)

650K

in need of emergency humanitarian assistance

(Source: UN System in-country)

2.2K+

people dead, with more expected

(Source: DGPC)

344

people still missing

(Source: DGPC)

52.9K

destroyed homes

(Source: DGPC)

77K

damaged homes

(Source: DGPC)

SITUATION OVERVIEW

After a powerful 7.2-magnitude earthquake and tropical depression hit Haiti on 14 and 17 August, respectively, compounding the destitution brought by escalating gang-related displacements, chronic food insecurity and recurrent climatic shocks, humanitarian needs are growing rapidly, outpacing the speed of national authorities and humanitarian partners to reach affected populations.

The passage of Tropical Depression Grace only worsened conditions on the ground following the earthquake, dumping extremely heavy rains in the same southern parts of the country reeling from the impact of the 7.2-magnitude quake just a few days earlier and delaying the quick rollout of sector-based assessments and the delivery of life-saving humanitarian assistance. While the Sud-Est department was largely spared the consequences of the devastating quake, Grace's driving rains triggered floods in the department which affected hundreds of homes, generating competing needs from overlapping emergencies.

As of 21 August, the death toll has risen to 2,207 people and there are 12,268 more injured, as well as 344 still missing, figures that continue to rise by the hour as search and rescue teams will be hard-pressed to find more survivors with each passing day. While the number of critically injured people continues to grow, the already limited health system's capacity to respond is becoming increasingly more strained. Many of those lucky enough to have escaped with their lives now find themselves homeless, without access to safe water and sanitation, and at greater risk of violence and abuse, including gender-based violence (GBV), as the protection environment remains dire.

Per the UN System in Haiti, 650,000 people are in need of emergency humanitarian assistance in the three most affected departments (Sud, Grand'Anse and Nippes). Agriculture and related livelihoods have been hard hit in affected areas, threatening to exacerbate food security in a country where 4.4 million people – nearly 40 per cent of the population – were already acutely food-insecure. Some of the most affected areas, such as the Nippes department, have already been struggling with the negative consequences of cyclical droughts and soil erosion in recent years, likely pushing many to resort to negative coping mechanisms as they lack the capacity to deal with the latest crisis.

Per UNICEF, an initial assessment in the Sud department showed that 94 of the 255 schools had been destroyed or partially damaged, while reports from Grand'Anse indicate the destruction of 63 schools and damage to 39 more. The new school year is set to start on 7 September; however, considering the scale of destruction to education infrastructure and population displacement, the devastating impact of the earthquake could prevent children and adolescents, who have been out of school for months over the past two years due to insecurity and the COVID-19 pandemic, from returning to their classrooms, depriving them access to the one of the few safe spaces they enjoy as well as the services provided by schools, such as school feeding programmes and health services.

In the health sector, an initial rapid assessment across the three most affected departments revealed that 36 health facilities had been affected, including 4 destroyed and 32 damaged, of which 12 were severely damaged. The Ministry of Health has deployed engineers to assess the safety and structural integrity of affected health facilities, as improvised tents lacking adequate medical supplies and WASH facilities are set up outside hospitals whose cracked walls and floors leave people in fear of entering amid powerful recurrent aftershocks. Access to safe drinking water also remains a serious concern. Based on preliminary assessments being carried out by the National Directorate of Drinking Water and Sanitation (DINEPA), in close coordination with UNICEF, it is estimated that more than 119,000 people are in urgent need of safe water in quake-affected areas.



Photo credit: UNICEF Haiti

Almost 53,000 homes have been destroyed and just over 77,000 have sustained damages, leaving thousands in need of emergency shelter and protection interventions. However, following the passage of Tropical Depression Grace, the conditions on the ground have yet to permit a complete assessment of the structural integrity of shelters and other buildings that could accommodate displaced people, leaving many with no other option but to set up makeshift tents at informal assembly points.

With the peak of the hurricane season just around the corner, mushrooming tent settlements and makeshift hospitals in the most affected areas must be urgently addressed with durable shelter solutions and urgent health rehabilitation interventions to reduce the exposure and vulnerability of displaced and injured people in the southern peninsula, a part of the island frequently hit by tropical cyclones. While there is an urgent need for emergency shelter assistance, the Government has requested that humanitarian actors refrain from setting up camps, as was done after the 2010 earthquake and Hurricane Matthew in 2016, and instead provide tents and tarpaulin for displaced people so they can stay near their damaged or destroyed homes.

The international community has acted quickly to mobilize rapid response teams and deliver much needed humanitarian relief supplies to Haiti. However, persistent access constraints, security concerns and roads damaged or blocked by hundreds of landslides and mudslides, have slowed the delivery of assistance to affected areas. According to the Director of DGPC, Jerry Chandler, the Government is working to increase humanitarian convoys by land, aiming to reach three per day soon, facilitated by the humanitarian corridor negotiated by the Government and humanitarian partners which has increased access to the southern peninsula.

Prime Minister Ariel Henry, who declared a one-month national state of emergency following the quake, stated that his administration would work hard to effectively manage and coordinate international assistance to make sure it reaches those who need it most in an effort to avoid the kind of chaos and mishandling of aid that ensued in the aftermath of the 2010 earthquake.

As the situation worsens, tensions on the ground continue to rise as relief assistance fails to reach those in need fast enough. On 18 August, affected people surrounded the airport in Les Cayes just as an aid flight was being unloaded onto trucks for distribution. This comes after communities blocked humanitarian convoys on separate occasions during the previous days, with the Government urging those who have yet to receive assistance not to block convoys en route to the most affected areas. Meanwhile, security measures are being ramped up as humanitarian personnel and relief supplies increasingly move through areas experiencing gang-related violence.

Accountability to Affected Populations (AAP) and Communication with Communities (CWC)

In such a fragile response environment with largely unmet needs accumulated from previous disasters, communities are suffering and frustrated. Hopes are being sustained by the expectation of fast-paced and scaled-up response efforts. Transparent, accountable and well-coordinated humanitarian action is critical in order to secure access to communities and quickly reach the most vulnerable. Integrating mechanisms to ensure Accountability to Affected Populations (AAP), including effective two-way Communications with Communities (CwC), is imperative to delivering effective assistance and protection.

This requires humanitarian actors to listen and respond to communities and adapt program design and decisions based on their expressed needs and concerns, as well as providing life-saving information to affected people. Engagement and open dialogue with those in the most affected areas is a means to explain the challenges and limitations of the humanitarian assistance. This information flow can be coordinated through implementing agencies via the reactivation of the CwC working group.

Humanitarian organizations must provide affected people with clear information on humanitarian interventions: *why, what, when* it starts and when it ends, *how* and *who* can access assistance, openly explaining selection criteria and listening and responding to concerns. The humanitarian sector must first and foremost disclose that it does not have the operational capacity nor the resources to address all the needs of all the vulnerable and affected people in Haiti, but nevertheless is committed to do what is possible. All of which may not only help mitigate safety and protection risks, especially during and after relief distributions, but more importantly, will demonstrate in practice an effort to build trust and fulfil our responsibility to principled humanitarian action.

GENERAL COORDINATION

The response to the catastrophic destruction left in the wake of the earthquake is being led by the Government of Haiti through the DGPC, with international and regional actors complementing national response efforts. The DGPC is spearheading coordination through its National Centre for Emergency Operations (COUN), receiving technical support in coordination from OCHA and the Caribbean Disaster Emergency Management Agency (CDEMA). To strengthen Government-led coordination efforts, the Prime Minister has designated the Minister of the Status of Women and Women's Right (Sud department), the Minister of Tourism (Nippes) and the Minister of Environment (Grand'Anse) to oversee relief operations and the distribution of supplies to affected areas.



Photo credit: UNDAC

As humanitarian, military and other actors arrive en masse, national authorities are urging regional and international actors to communicate and coordinate with DPGC to ensure an effective and well-coordinated humanitarian response. While there is a significant need for humanitarian assistance, the Government wishes to avoid similar bottlenecks and challenges to those confronted in previous emergencies, including the 2010 earthquake and Hurricane Matthew in 2016, also emphasizing the need for relief supplies to correspond with identified needs and meet international quality standards.

Based on lessons learned from the 2010 earthquake, and noting the immediate goal to save lives, there is a shared perception among response actors on the need to capitalize on national expertise, capacities and knowledge to ensure a rapid and effective response. The Government-led response is emphasizing coordination among all response actors as well as support for national and local actors, capacities and economies to effectively contribute to recovery and development efforts.

Through the COUN in Port-au-Prince, DGPC is closely coordinating with non-governmental organizations, UN agencies, donors, civil society organizations and the private sector, receiving support from OCHA on the coordination of international response activities. The 10-member UN Disaster Assessment and Coordination (UNDAC) team, with support from operational partners like the Americas Support Team (AST) and Atlas Logistique, helps strengthen coordination at both the national and departmental level. The UNDAC team has established an On-Site Operations Coordination Centre (OSOCC) in Port-au-Prince, and deployed response teams to Les Cayes, Jérémie and Miragoâne, to establish a critical link between international responders and the Government, coordinate and facilitate international relief efforts, and provide a common space to facilitate cooperation, coordination and information management among humanitarian partners.

Intersectoral coordination has been taking place both at the national and regional level through existing and streamlined coordination structures. At the national level, coordination efforts are being carried out through the members of the Humanitarian Country Team (HCT) and their respective sector-based lead ministry counterparts, according to the established humanitarian architecture in-country. Additionally, sector-based Working Groups are holding regular coordination meetings to create a common operational picture, identify pressing response gaps and forge synergies within and across sectors.

At the regional level, OCHA's Regional Office (ROLAC) in Panama continues to convene regular meetings with partners of the Regional Group on Risks, Emergencies and Disasters for Latin America and the Caribbean (REDLAC) to exchange important sector-based information and coordinate response activities. The Caribbean Development Partner Group on Disaster Management (CDPG-DM), a partners' forum of CDEMA's Regional Response Mechanism, continues to convene daily coordination meetings, bringing together Caribbean Community (CARICOM) institutions, UN agencies, donors and

other specialized agencies. Additionally, the Multinational Caribbean Coordination Cell (MNCC) has been activated to better coordinate the response from foreign military assets and personnel.

The UN Volunteers Programme (UNV) has activated their rapid deployment workflow in support of the UN Humanitarian Crisis Team and UN Country Team in Haiti. UNV can deploy skilled national and international UN Volunteers within 7 to 20 days to complement local mechanisms and the UN system. Contact: unvrolac@unv.org

FUNDING

With assessments still in their early stages, response needs and financial requirements for the emergency are being considered by the members of the Humanitarian Country Team (HCT) with the information currently available. UN agencies and partners are working collectively to develop a common operational picture based on needs assessments to construct sector-based response plans to inform the launch of a Flash Appeal.

The Central Emergency Response Fund (CERF) has allocated US\$8 million to provide life-saving assistance in health, WASH, shelter, protection, logistics and food security, while the International Federation of the Red Cross and Red Crescent Societies (IFRC) has launched an appeal for \$10.9 million to support the Haiti Red Cross to deliver emergency assistance and support the early recovery of 25,000 affected people.

The Caribbean Catastrophe Risk Insurance Facility Segregated Portfolio Company (CCRIF SPC) will pay-out approximately \$40 million to the Government of Haiti. CCRIF SPC will release the first tranche of \$15 million to the Government within a week of the devastating earthquake that hit on 14 August, with the remaining amount of about \$25 million set to be received within a 14-day period.

While donors have acted swiftly to provide resources for response activities, UN agencies and humanitarian partners still urgently need additional human and financial resources to quickly scale up response efforts to match the scale of needs arising from this rapidly deteriorating humanitarian situation. Humanitarian organizations are already responding to multiple simultaneous crises in Haiti, including the COVID-19 pandemic, gang-related internal displacement and worsening food insecurity. While the current quake-related needs remain the most urgent priority, humanitarian partners must also ensure that existing critical needs are not overlooked. Around \$2.2 million is still urgently needed to support the Government's plan to relocate about 1,666 households from three primary sites for internally displaced people (IDP) (Delmas 103, Saint-Yves Church and Carrefour Sports Centre) by September 2021.

UNICEF estimates that it will need around \$15 million to respond to at least 385,000 people, including 167,000 children under 5, over the first two months of the humanitarian response. WFP requires an initial amount of \$12.2 million (\$7.6 million for emergency assistance and \$4.6 for service provision) to deliver emergency food and nutrition assistance, support medical operations and provide logistics services until January 2022. On 19 August, IOM launched an appeal for \$15 million to provide emergency assistance in shelter, non-food items (NFIs), camp coordination and camp management (CCCM), protection, health, including mental health and psychosocial support, as well as community stabilization and early recovery activities. UNFPA is looking for \$5 million to finance its immediate response during the first 6 months to ensure that women have access to life-saving sexual and reproductive health services and are protected against all forms of sexual and gender-based violence as well as sexual exploitation and abuse.

Organization/Country	Amount (US\$)	Action
Caribbean Catastrophe Risk Insurance Facility Segregated Portfolio Company (CCRIF-SPC)	\$40 million	Relief allocation for the Government of Haiti
Central Emergency Response Fund (CERF)	\$8 million	Life-saving assistance in health, WASH, shelter, protection, logistics and food security
European Union (EU)	\$3.5 million	Provision of medical assistance to overwhelmed hospitals and WASH, shelter and protection services
Government of the United Kingdom	\$1.36 million	Support to CARICOM Operational Support Team (COST) and Emergency Medical Team

Government of Korea	\$1 million	Support to relief efforts
Consortium of Canadian banks	\$323,978	Contribution to Canadian Red Cross
The Spanish Agency for International Development Cooperation (AECID)	\$292,790	Contribution to IFRC Emergency Appeal
Kindernothilfe	\$117,442	WASH, Food Security, Child Protection
Welthungerhilfe	\$117,135	Support to relief efforts
Finn Church Aid	\$117,135	Support to relief efforts

HUMANITARIAN RESPONSE

Camp Coordination and Camp Management

Response:

- Assessments are ongoing in the three most affected departments to identify displaced people, their vulnerabilities and most pressing humanitarian assistance needs.
- Coordination among partners and relevant authorities is being ensured to provide basic living conditions for IDPs at assembly points.
- Support DGPC to coordinate the delivery of humanitarian assistance, rapid response and support to IDP families in the event of additional hazard impacts.
- Provide support to the DGPC in the assistance of affected people, visa distributions and 'build back safer' awareness activities, as well as coordination with protection sector activities and mental health and psychosocial support (MHPSS).
- Further engage civil society organizations and community-based groups, with a special focus on women's groups and associations of people with disabilities, to strengthen humanitarian response and early recovery and develop interventions that fully consider people with specific needs.
- IOM produces and shares with partners assessment materials to facilitate CCCM activities, notably Copernicus, DTM and 'Flow Minder' products. IOM is also monitoring the flux of displacement between Dominican Republic and Haiti to track any new displacement trends related to the earthquake.
- Generate community communication strategies in line with the principle of 'do no harm'.

Early Recovery

Response:

- UNDP will be supporting Government's request for a post-earthquake needs assessment, under the overall coordination of the Humanitarian/Resident Coordinator's Office in Haiti and the technical facilitation of UNDP, in alliance with international development partners.

Education

94

of the 255 schools in the Sud department have been destroyed or partially damaged

Needs:

- Establish safe temporary learning spaces that will provide psychosocial care, recreational activities and social-emotional learning activities.
- Provision of COVID-19 prevention and hygiene kits to protect the health of children and their families.
- Rehabilitation of affected schools and the provision of school kits, desks, furniture and hygiene kits.
- WASH interventions in schools.

Response:

- The Ministry of Education is deploying teams to conduct a rapid needs assessment for the education sector. Support is being provided by UNICEF through data collection equipment/tools as well as assistance from organizations in the country's Education in Emergencies (EiE) Working Group.
- The co-lead organizations of the country's EiE Working Group have requested support from the Global Education Cluster (GEC) to strengthen coordination and information management. So far, the GEC has provided remote support through two information management personnel, who supported the development of a rapid needs assessment tool for education and will support the analysis of the data gathered through assessments.
- At the regional level, the activation of the Education Cluster has been recommended under the leadership of the Ministry of Education to help strengthen response coordination with the other sectors and to ensure, together with the Ministry, accountability and the relevance of activities based on lessons learned from previous emergencies.
- A technical support exercise is being carried out in affected areas through the deployment of regional and global staff on EiE from World Vision and Save the Children.
- UNICEF shipped 5 tents, 500 School-in-a-Box Kits (each supporting 46 students), 500 Early Childhood Development (ECD) kits and 100 recreation kits.
- Save the Children delivered 25 tents for temporary learning spaces as well as child friendly spaces in addition to 100 recreation kits for initial assistance to the educational needs of the affected population.

Gaps & Constraints:

- Challenges have been identified in institutional coordination at the local level.
- Significant lack of funding for education partners to support response activities and limited prioritization of the Education Sector in resource mobilization efforts.


Food Security

18K+

people have received
one month of food
assistance since 14
August

Needs:

- The earthquake hit the country amid the harvest season for many staple crops, including beans, maize and yams, in the southern peninsula which will likely increase food prices and reduce availability in quake-affected areas.
- Emergency food assistance, inputs for rapid reactivation of agricultural production, and rehabilitation of irrigation systems and other agricultural infrastructure as well as livestock protection.

Response:

- WFP procured 3 tons of ready-to-eat meals to support hospitals in affected areas as its primary food response, while assessments were continuing to identify other urgent food needs among the quake-affected population.
- With support from USAID/BHA, who released 10 tons of food from its contingency stock, including beans, rice and vegetable oil, WFP is distributing hot meals to more than 3,000 people at hospitals in Jérémie and Les Cayes.
- Since 14 August, WFP has provided more than 18,000 people with one month of food assistance consisting of 39,000 kilos of rice, beans and vegetable oil and \$295,700 in cash transfers.

- An emergency food security assessment coordinated by the National Coordination for Food Security (CNSA) is underway. The findings of the assessment will provide more details on the damage suffered in the agricultural sector.
- REACH will launch a joint market monitoring initiative.

Gaps & Constraints:

- Landslides and mudslides triggered by the earthquake and Tropical Depression Grace have rendered numerous roads impassable, destroying bridges on critical supply lines and disrupting private-sector food and agricultural inputs supply chains.
- Initial rapid assessments have shown that markets and agricultural infrastructure (storage and processing facilities, dairies, irrigation canals, rural roads, etc.) have been affected by multiple hazards.
- The proximity of the planting season requires quick action to avoid a further deterioration in food security.
- African swine fever, already present in neighbouring Dominican Republic, poses a threat in the aftermath of the earthquake. As such, mobile veterinary clinics are urgently needed to treat animals injured by the earthquake through prevention and management actions to combat this highly contagious and deadly viral disease for domestic and feral swine.

Health

36

health facilities affected, including 4 destroyed and 32 damaged, of which 12 have been severely damaged

Needs:

- Per the Ministry of Health (MSSP), there is a lack of medical personnel, including general practitioners and specialists, medicines and medical supplies, such as antibiotics, surgical and rehabilitation supplies, and logistical support to delivery materials, deploy personnel and transfer patients.
- Ensure proximity and access of emergency care services to victims in remote communities, as access to hospitals in major cities remains cut off for these populations, limiting access to health services.
- Increased risk of infectious diseases, including cholera, acute respiratory infections, diarrheal diseases and malaria.
- Despite daily COVID-19 infections decreasing in recent weeks, the risk of COVID-19 contagion could rise as displaced people gather in shelters and at assembly points with poor sanitary conditions and limited physical distancing.
- Primary care and management of chronic diseases are expected to grow in the aftermath of the quake.
- Immediate sexual, reproductive and maternal health support as well as assistance for survivors of sexual and gender-based violence.
- Field hospitals and psychological care.
- WASH assessments and interventions in health facilities.

Response:

- The Government of Haiti has deployed engineers to assess the structural damage suffered by health facilities. Additionally, the Government deployed 15 trucks filled with essential medical supplies as well as specialized medical personnel to affected areas to treat trauma and orthopaedic needs.
- PAHO has deployed three rapid response teams to the Sud department to carry out coordinated initial assessments together with the Ministry of Health.
- UNFPA strengthened the team based in Les Cayes with additional technical staff who conducted assessments of Emergency Obstetric and Neonatal Care (EmonCs), providing medical supplies and Inter-Agency Reproductive Health Kits to manage deliveries, obstetric emergencies, sexually transmitted diseases, particularly HIV, and the clinical management of rape.
- Project Hope has deployed an Emergency Response Team to the Sud department, which is providing critical medicines and MEDICAL supplies to health facilities in Les Cayes and surrounding areas. Additionally, airdrops of supplies are being carried out in rural areas where clinics are experiencing severe shortages.

- Samaritan's Purse has deployed an Emergency Technical Team (EMT) Type 2 (1 surgical room and 36 beds) to the Nippes department.
- USAID deployed two helicopters with medical staff and supplies and are also transferring critically injured patients to Port-au-Prince, as possible.
- IOM will train health workers on Mental Health and Psychosocial Support (MHPPS), as appropriate, while IOM's psychologists will provide tailored psychosocial support and ensure appropriate referral for specialized services.
- Médicos del Mundo Argentina mobilized 2 health response teams (8 medical professionals and logisticians) working with the Sud Departmental Directorate of the Ministry of Health in the communes of Cavaillon, Chantal, Maniche, Les Cayes and Port Salut.
- Humanitarian Open Street Map team are starting a mapping project in Haiti and producing special data focusing on the Sud and Nippes departments: https://www.hotosm.org/disaster-services/project_activations.html.
- The Government of Spain, through its Agency for International Cooperation and Development (AECID), is deploying technical teams specialized in WASH to support the reactivation of water treatment units affected by Tropical Depression Grace.
- PAHO, in coordination with the IFRC, mobilized three tons of medical supplies and equipment, including emergency kits, hurricane kits, emergency tarpaulins and lighting equipment.

Gaps & Constraints:

- Logistics and security challenges limiting the delivery of supplies, deployment of personnel to affected areas and the transfer of patients to hospitals that are not overwhelmed.
- Some affected hospitals are functioning on generator power and have limited fuel supplies.
- Most of the medical staff members have been affected by the earthquake. They are as much in need as the other people affected in their communities; however, while they are working in the health institutions, they are not present in their communities to benefit from humanitarian assistance.
- Increased risk of maternal and newborn deaths, as maternity and surgical wards are not functional for safe deliveries and caesarean section, requiring temporary measures to be established in order to reduce the risks faced by pregnant women.
- Water problems in health facilities in the communes outside Les Cayes.

Nutrition

1.67K

children under 5 at risk of malnutrition, disease and death

Needs:

- The MSPP has requested nutrition supplements to prevent malnutrition in vulnerable groups, as well as ready-to-use infant formula for infants who cannot be breastfed as a result of the earthquake (e.g., death/absence of the mother). The MSPP also requested inputs regarding the methodology and questionnaires to conduct the nutrition needs assessment.
- An analysis of the situation through a rapid nutrition assessment is urgently needed to i) estimate the number of pregnant and lactating women and children under 5 in need of immediate nutrition support, particularly children under 2; ii) identify prevalent feeding practices in the affected areas and urgently identify non-breastfed children, who are at higher risk of disease and death; and iii) estimate the amount of supplies needed (nutrition supplements and ready-to-use infant formula).
- Prevent morbidity and mortality of children under 5, especially children under 2, as well as pregnant and lactating women in affected areas.
- Protect, promote and support optimal infant feeding practices among infants under two in affected areas. In order to do so, training of health and community workers is needed, as well as the establishment of safe spaces for mothers to breastfeed, and a separate space to support non-breastfed children.
- Awareness raising among donors, humanitarian partners and the general population on the importance of protecting and supporting infant and young child feeding (IYCF) and avoiding donations and the untargeted distribution of breast-milk substitutes.

- Ready to use infant formula.

Response:

- The Nutrition Sector is focusing its initial response on preventing the deterioration of the nutritional status of population groups most at risk of malnutrition, disease and death through the protection, promotion and support of optimal IYFC practices among children under two, and nutrition supplementation of children under five in the affected areas.
- UNICEF has virtually deployed (remote support) an advisor on IYCF in emergencies and is looking for potential candidates to be deployed in-country.
- UNICEF prepared an initial methodology with questionnaires focused on maternal and child nutrition for the nutrition needs assessment. It is expected to be reviewed and used once the Government gives permission to begin the needs assessment.

Gaps & Constraints:

- Scarce funds available from the nutrition partners to support response activities and limited prioritization of the Nutrition Sector in resource mobilization efforts.
- Potential donations of breast-milk substitutes and untargeted distribution to infants and young children affected by the earthquake, putting them at risk of malnutrition, disease and death.

Protection

5.9K

women and girls,
including 720 women
with disabilities, require
food and hygiene kits

Needs:

- Strengthen protection coordination mechanisms both at the national and local level, ensuring the centrality of protection in the emergency response and providing protection mainstreaming support to other areas of the response.
- Promote access to justice and legal aid for human rights concerns, including those relevant to the loss of civil and property-related documentation and housing.
- Establish and maintain effective feedback systems (including comments, suggestions and complaints), using a variety of communication channels that are accessible to all affected people and that are appropriate for both sensitive and non-sensitive feedback.
- Initial assessment carried out by UNFPA and the Ministry of Women Affairs (MCFDF) in the Sud department found that access to GBV services and case management has been significantly reduced. Additionally, the assessment carried out at ten assembly points revealed several protection issues, including a lack of lighting, security force or police presence, and the lack of separate showers and toilets.
- Preventive measures against child trafficking and smuggling.
- Promote and strengthen inclusive and accessible accountability mechanisms, with a special focus on protection against sexual exploitation and abuse (PSEA).
- Conduct and compile comprehensive Protection Analysis that details the main protection threats, risks, vulnerabilities and coping strategies of affected people to inform decision-making and programming.
- Establish safe spaces for children and adolescents, women and other vulnerable groups, including people with disabilities.
- Assistance is needed for women and girls, including pregnant minors, affected by the earthquake and exposed to increasing GBV risks in the affected areas, especially in the face of limited access to emergency shelter.
- MHPSS services for children, adults, service providers and other vulnerable groups are required. Services should include psychological first aid, structured psychosocial support, case management, and recreational and specialized support for children, among others.

- Women and girls are struggling to meet essential hygiene needs, particularly items for menstrual protection. Delivery of dignity protection kits for women and adolescent girls is needed to prevent impact on their health, risk of GBV and negative coping mechanism.

Response:

- OHCHR deployed one staff member to the COUN to coordinate the protection response and two others to affected areas to conduct assessments in coordination with Government counterparts and humanitarian partners on protection concerns, including among women and children, the elderly, LGBTIQ+ and children-headed households, minorities with disabilities, IDPs and people in detention.
- The Global Protection Cluster (GPC) announced a ProCap protection deployment for 6 months starting as of 1 September.
- OHCHR is supporting the DGPC, through its protection focal point, to develop key messages for the protection of the most vulnerable groups, access to humanitarian assistance and the importance of pregnant women being able to access sexual and reproductive health services.
- UFPFA delivered 500 hygiene kits in the Sud department and UNICEF distributed hygiene kits and tarpaulins to 10 orphanages in the department.
- UNFPA is supporting the MCFDF and BSEIPH to carry out GBV assessments, analysis of services, behaviours and specific needs of women and girls facing GBV in addition to assessments of capacities of GBV service providers and case management in the remaining safe spaces in affected areas.
- UNFPA supported the MCFDF to reactivate the GBV Working Group in the Sud department. The coordination mechanism will be activated for the three affected departments. A meeting was convened to identify the needs and coordinate the ongoing response, while establishing a referral pathway for GBV survivors.
- UNICEF, in coordination with Government counterparts and humanitarian partners, is carrying out rapid assessments of children's needs. UNICEF is supporting IBSER to establish focal points at the entrance of health facilities to monitor entries and exits in order to prevent human trafficking, including the trafficking of children. This measure is already in place at Les Cayes Hospital and will be implemented in other health facilities.
- OHCHR, in collaboration with UNFPA, is supporting the roll out of protection mainstreaming in response efforts and providing key messages to highlight and prevent human rights violations.
- A Rapid Gender Analysis is being carried out by UN Women, Care International, UNFPA and UNICEF to assess the differentiated impact of the crisis on women, girls and adolescent girls, and to design an evidence-based humanitarian protection response.
- 11 prisoners were released from the prison in Les Cayes for humanitarian reasons and assessments of prison buildings in Jérémie and Anse-à-Veau by engineers from UNDP and DAP are ongoing.
- OHCHR, together with UNFPA, IOM and UNICEF, are leading advocacy efforts to ensure that the protection is prioritized in funding requests and allocations as a cross-cutting and life-saving objective.
- IOM is conducting protection assessments and raising awareness around PSEA. IOM's free 840 hotline is open to make complaints and provide feedback as well as for information or to receive psychosocial support.

Gaps & Constraints:

- The actions of the implementing partners are very limited due to burnt out staff and a general lack of human resources.
- The effect of the earthquake on the health system will have negative consequences for the clinical management of rape services.
- Women's organizations reported that women are exposed with their children and living in the streets without a tent or even a tarp and the lack of communication, including difficulty with telephone and internet communication, hampers women's efforts to locate family members or access services. This limits access to life-saving information for early preparedness as well as emergency and other services.
- It is crucial to reinforce the awareness of GBV prevention and risk mitigation in the affected areas. The assessment carried out by UNFPA and MCFDF found that 7 out of 10 key informants identify domestic violence and sexual violence as one of the main issues that women and girls in the community were already facing before the earthquake. Four of the assembly points visited are well known for incidents of rape, robbery and a high rate of prostitution involving girls under 18. All the informants identified physical violence as a concern for men and boys in the community, while 2 others mentioned armed robbery.
- The scale of humanitarian action and lack of information among the population could lead to incidents of sexual exploitation and abuse (SEA). Humanitarian actors need to ensure that their staff and partners are properly trained and that community members are well informed in order to prevent SEA.



Shelter

650K

people in need of shelter
support

Needs:

- Emergency shelter solutions and essential household items.
- The Government has requested tarpaulin be distributed to the affected population, adding that tents should only be used for hospitals. The Government has preliminarily requested 60,000 tarpaulins to support families with emergency shelter needs.
- Plastic sheeting, blankets, tarpaulin, waste bins, food, water, medicine and hygiene kits needed in temporary shelters.

Response:

- IOM is co-leading the Haiti Shelter/NFI/CCCM Working Group in support of the Government, specifically DGPC and UCLBP, through the provision of technical and strategic guidance for shelter partners and coordination support.
- IOM is rolling out the Displacement Tracking Matrix (DTM) to gather and analyse critical data and information on the needs and vulnerabilities of displaced people.
- IOM will provide specialized psychosocial support.
- To mitigate COVID-19 contagion risks, IOM will distribute washable masks and circulate COVID-19 awareness and prevention messaging through various communication channels.
- Thanks to emergency donor support (BHA and ECHO), IOM has the capacity to support 70,000 people as part of its non-food item (NFI) distribution activity. IOM already mobilized from its Port au Prince warehouse blankets, fixing kits, hygiene kits, jerry cans and tarps. These items have been dispatched in the three warehouses in sub-offices of affected departments. IOM distributions are already ongoing, coordination with partners is ongoing to facilitate common supply of items through the IOM NFI pipeline, in coordination with DGPC. Consolidated figures of distributions will be made available shortly.
- UNHCR, in coordination with the Haitian Red Cross, is delivering 4,400 jerrycans, 16,560 blankets, 3,840 buckets, 6,228 tarps, 7,360 solar lamps and 168,950 soap products.
- USAID Disaster Assistance Response Team (DART) is coordinating with humanitarian actors to facilitate the distribution of prepositioned shelter commodities, including blankets and hygiene, kitchen and shelter repair kits, for almost 50,000 people. Additionally, USAID is activating a shelter advisor to support the delivery of shelter assistance.
- IFRC sent 15 tons of essential goods and more than 37 tons of aid to Haiti, including shelter tool kits, tarpaulins, buckets, kitchen kits, blankets, personal protection equipment and mosquito nets. Additionally, IFRC is mobilizing NFIs for Haiti via the humanitarian corridor activated in neighbouring Dominican Republic.



Water, Sanitation and Hygiene

119K+

in urgent need of safe
water

Needs:

- Initial rapid assessments conducted by DINEPA, with support from UNICEF, revealed that 25 water supply piped systems had been damaged.
- Provision of safe drinking water and hygiene kits for those whose homes have collapsed.
- Improve water storage capacities and construction or rehabilitation of sanitation facilities in affected health centres receiving injured people.
- Rehabilitation of damaged water supply systems and provision of chlorine (HTH).

- Handwashing facilities, soap and critical hygiene supplies in health centres to prevent the COVID-19 risk as well as water-borne diseases, such as cholera.

Response:

- UNFPA, in coordination with the Ministry for the Status of Women and Women's Rights, is delivering hundreds of dignity kits to women and families affected by the quake in the Sud, Nippes and Grand'Anse departments.
- Water Mission is delivering emergency water treatment systems, generators and water treatment packets to provide safe water for more than 60,000 displaced people. The first shipment left its warehouse in Port-au-Prince on 19 August and the second is en route to the island via Water Mission's warehouse in North Charleston, South Carolina.
- UNICEF is mobilizing prepositioned WASH supplies to be immediately distributed to around 20,000 to 25,000 people based on initial assessments.
- IOM has distributed 5,000 hygiene kits in Les Cayes, with 200 jerrycans and wool blankets, reaching 1186 families.

Logistics

6K

kilos of essential medical supplies transported to affected areas by UNHAS

Response:

- Daily UN Humanitarian Air Service (UNHAS) flights are available for response personnel heading to affected areas in the south, as available. Since 14 August, UNHAS has transported at least 105 medical staff and over 6,000 kilos of essential medical supplies.
- OCHA, WFP and the UN Department for Safety and Security (UNDSS) are organizing up to seven trucks to Les Cayes with a police escort.
- WFP continues to provide logistics support to search-and-rescue teams in Les Cayes, Camp Perrin, Marceline and Maniche.
- Humanity & Inclusion (HI) is providing a 10-vessel coastal shipping service with a capacity of carrying approximately 160 tons. Requests for these services can be sent to: m.vidon@hi.org.
- WFP has contracted a 50-ton capacity coastal barge to access southern shores.

Constraints:

- Despite the negotiation of a humanitarian corridor with armed gangs, the security situation remains extremely unstable and humanitarian access to the most affected areas remains restricted.
- The presence of armed gangs along land routes connecting Port-au-Prince to earthquake-affected areas has forced humanitarian actors to rely on limited air and sea transportation assets for the distribution of humanitarian relief, reducing the frequency and volume of assistance deliveries.
- Fuel shortages in the southern peninsula could interrupt humanitarian response efforts in the coming days as tensions mount over the speed of relief assistance.
- Affected communities with unmet needs are blocking humanitarian convoys en route to the most affected areas.
- Logistical arrangements for the delivery of information and communication technology assets.



Accountability to Affected Populations and Communication with Communities

Needs:

- AAP and PSEA must be core commitments of the response strategy and mainstreamed in operations and coordination.

- An AAP-oriented CwC strategy that is agile and reflects the changing reality and complex context, engages different groups of affected people with timely information and mitigates protection risks, especially for women and girls.
- Robust, safe and inclusive interagency Community Feedback Mechanisms using accessible community preferred channels to receive questions, suggestions and demands for information and sensitive complaints, including SEA and GBV.

Response priorities:

- Reactivation of the national CwC Working Group to develop a common strategy and priority actions for communications and community engagement, positioned as a key part of the humanitarian architecture.
- Dialogues and consultations with different groups of communities to identify the most urgent needs and priorities, including information needs and preferred two-way communication channels.
- AAP, CwC, PSEA and gender priorities are integrated into multi-sectoral and sectoral needs assessments with findings guiding project design and humanitarian response planning.
- Priority is given to delivering transparent, clear and timely information about how affected communities can access aid, responding to needs and concerns and addressing the challenges and limitations of providing humanitarian assistance.
- Information about humanitarian interventions and projects such as - *why, what, when* it starts and when it ends, *how* and *who* can access harmonized and timely delivered assistance.
- In consultation with communities, establish and coordinate inclusive and safe inter-agency collective community feedback and complaints mechanisms, avoiding duplication of efforts and proliferation of project-based hot lines. Ensure communities are informed about how to utilize these mechanisms.
- Follow and respond to the feedback and complaints received, prioritizing sensitive and risk-related complaints and information received from affected communities and acting on identified need for corrective measures. Ensure complaints and feedback are recorded and analysed and brought into decision-making and response planning.

Potential gaps & constraints:

- Lack of attributed value and common understanding of AAP, CwC and community engagement by agencies, organizations and humanitarian leadership, leading to affected communities' voices and views being absent from response planning.
- Sectors, agencies and partners designing projects that do not enable the operationalisation of AAP and PSEA commitments.
- Required technical capacity in AAP/CwC coordination and information management not assigned by leading agencies, partners and inter-agency coordination.
- Assessments failing to integrate communication preferences, information needs and SEA risks, creating evidence gaps that may lead to the decrease of strategic priority.
- A fast-changing context that prompts rumours and misinformation in an information and communication ecosystem that outpaces response, accumulated needs and frustrations due to multiple consecutive crises.
- A response that is sectoral, agency-specific and supply-driven instead of demand-centred, which is not agile, and may contribute to escalating tensions among communities with mounting unmet needs, creating protection risks and impacting perception and levels of acceptance and trust in humanitarian action.

For further information, please contact:

Delphine Vakunta, OCHA Haiti: vakunta@un.org; Telephone/WhatsApp: +509 37 02 5790 or **Omar Kurdi**: omar.kurdi@un.org; Telephone: +1 347 414 4598

For more information, please visit www.unocha.org / www.reliefweb.int.