







For the past years, Haiti has been engulfed in a socioeconomic, political, and humanitarian crisis that has reached critical levels since mid-September 2022 with the intensification of gang violence and social unrest. The widespread insecurity and political instability have drastically affected the country's access to essential goods and services, including food, water, and health.

The current fuel supply crisis has affected the water and electricity supply to the population, health centers, and hospitals. Due to problems of insecurity and violence, patients and health personnel have difficulty accessing hospitals and health services. In parallel, the public health system and international partners face limited response capacity due to reduced international personnel in Haiti, logistics issues, and difficulties in importing supplies. Indeed insecurity, roadblocks, and lockdowns are affecting the importation of internationally procured goods, which may slow the arrival of essential lifesaving supplies to support cholera response efforts.

This scenario is particularly problematic, as cholera recently resurfaced in early October. Armed gangs now control over 60% of the metropolitan area of Port-au-Prince, affecting at least 1.5 million people, and have expanded their influence outside of the capital city, interrupting vital humanitarian programs in most of the national territory, including COVID-19 vaccination campaigns.

The national road to the Southern peninsula, blocked since June 2021, has cut off some 3 million people and affected response and recovery efforts following the severe earthquake that affected southern health departments in August 2021. At the same time, the country experienced the third consecutive year of recession, with an inflation rate of 30% in July 2022. The price of the food basket increased by 63% over a year, while global inflation on fuel and gas has further increased the cost of imported goods.

According to the last Humanitarian Response Plan (2022), nearly half of Haiti's population faces high levels of acute food insecurity—a figure that has doubled in the

previous four years—and 43% live in rural areas. Food insecurity's main drivers include civil and political unrest, chronic poverty, natural disasters, and COVID-19. In this volatile socio-economic context, the Government's decision to scrap expensive oil subsidies set off massive and sometimes violent nation-wide protests and blockades.

In addition, the fuel shortage, exacerbated by the rise in international oil prices in early 2022 and culminating with the blockade of the oil terminal of Varreux by armed gangs starting mid-September 2022, is disrupting water distribution, power supply, and telecommunications and causing hospitals to shut down critical services.

The resurgence of cholera in early October, after over three years with no confirmed cases in Haiti, occurred in a highly challenging context of restricted humanitarian access and severely deteriorated living conditions in a country where over two-thirds of the population have no or limited access to essential drinking water and sanitation. Despite initial pledges by the international community, improved access to potable water, sanitation, and hygiene (WASH) has been marginal since 2010.

From 2010 to 2020, the percentage of the Haitian population with access to essential drinking water services increased from 62.2% to 66.7%. The Haitian population with access to sanitation services increased from 27.2% to 37.1%.

Today, electricity power supply problems, fuel shortages, and movement restrictions affect the population's water access, exacerbating the precarious situation many Haitians face and increasing their risk factors for cholera infection. In the areas affected by the violence, malnutrition was present and will worsen, increasing vulnerability and risk of severe cholera cases, especially among children.

In this complex and prolonged humanitarian context, estimates indicate that almost half of the Haitian population requires humanitarian assistance.



STRATEGIC OBJECTIVES

» Strengthen surveillance systems for cholera and other epidemic and pandemic-prone diseases

Strengthen and scale up national and departmental surveillance systems to support case investigation, data management, contact tracing, sample collection, and laboratory detection capacities.

» Scale-up health services' emergency preparedness and response capacities -

Facilitate the rapid reactivation and expansion of operational health emergency response structures and mechanisms of the Haitian Ministry of Public Health and Population (MSPP) and health partners to save lives through timely and appropriate emergency clinical care.

» Maintain continuity of essential health services delivery

Support continuity of health service delivery to maintain access to critical services, including sexual and reproductive health, preventing endemic and epidemic diseases, and immunization against vaccine-preventable diseases.

» Protect vulnerable groups at risk of infection with cholera and other health issues

Increase WASH, Infection Prevention and Control, and risk communication interventions in health facilities and at the community level to protect patients, relatives, and frontline workers.

RESPONSE STRATEGY

PAHO's humanitarian priorities for 2023 in Haiti aim to save lives, address the immediate needs of the Haitian population in areas affected by the resurgence of cholera, and protect the most vulnerable population groups impacted by violence, insecurity, and rising poverty who are at risk of health status deterioration.

Efforts will focus on supporting, expanding, and strengthening the response capacities of the MSPP and health partners already operational to manage and control cholera

outbreaks, reduce mortality and morbidity, and limit its spread to other communities, departments, and countries.

Direct efforts will support and sustain essential preventative and curative health programs at the primary care level to avoid excess morbidity and mortality from preventable causes and target care for individuals in situation of vulnerability and those most disproportionately affected by the ongoing complex crisis.

Crucial support is needed to expand health institutions' lifesaving care delivery capacity, strengthen partners providing cholera treatment services to the affected population, and maintain essential services operational, such as maternal and neonatal care and emergency services. Substantial efforts are being made by all health partners to rapidly ramp up care delivery capacities throughout the country to avoid the loss of lives and increases in preventable mortality. PAHO's priorities will focus on ramping up capabilities for early detection and confirmation of cholera cases and for the timely and adequate clinical management of cholera patients. Actions will also address disruptions to essential health services affected by the multiple simultaneous crises by providing critical medical supplies and equipment, fuel, human resources, and the deployment of an emergency medical team to assist saturated and overstretched health services.

Cholera prevention and treatment requires a multi-sectorial approach incorporating public health actions and water, sanitation, and environmental health interventions. PAHO ensures complementary actions and coordinated interventions within and across sectors through strengthened sectorial and inter-sectorial coordination.

In the current context of violence and insecurity and limited access to health services, community-based strategies are crucial to protect families and support timely access to care. PAHO will continue to engage and empower community members to support community preventive and control measures and protect at-risk individuals through sensitization and risk communication actions.

EMERGENCY RESPONSE ACTIVITIES

Urgent actions are primarily needed to save lives, control cholera morbidity and mortality in active hotspots, and limit the spread of the disease to other communities and departments. PAHO's emergency response actions in 2023 will focus on procuring essential life-saving medicines and health supplies for cholera case detection, confirmation, and treatment, facilitating the establishment and operations of cholera treatment facilities in or near affected communities, monitoring availability and occupancy rates of cholera beds and supporting effective referral of severe cases, and disseminating protocols for cholera case management.

Other priorities will include establishing and strengthening community-based surveillance systems, training, and increasing available human resources to expand the national and departmental surveillance system for case investigation, data management, contact tracing, community response activities, and sample collection. To prevent and control contamination PAHO will support procuring essential WASH supplies and implementing Infectiona Prevention and Cpontrol (IPC)measures in cholera treatment facilities to ensure appropriate WASH and IPC norms are in place.

While health partner interventions will concentrate on tackling the resurgence of cholera in Haiti to prevent it from becoming endemic, response actions will continue to address other acute health and humanitarian needs. This includes severe malnutrition, COVID-19, and recovery of care delivery capacity in areas impacted by the 2021 earthquake. In particular, recognizing that only 2.3% of the Haitian population has completed a whole COVID-19 vaccination series of two doses as of 8 March2023, efforts will continue to promote vaccination against COVID-19, and other vaccine-preventable epidemic-prone diseases such as polio and measles, which are also critical diseases to monitor for future outbreak prevention.



IMPACT STORIES

Haiti: Community health workers on the frontline of Haiti's cholera response

Since its resurgence in October 2022, cholera has claimed hundreds of lives in Haiti. Communicating how to prevent cholera, treat symptoms, and seek assistance is essential to save lives and is vital to the country's response. But bringing information to populations in areas beset by civil unrest and urban violence is a challenge. Trust is essential to ensure the information is well received.

PAHO/WHO has worked with Haiti's Ministry of Health and Population to train and deploy 900 community health workers (CHWs) in the Ouest and Center departments to disseminate life-saving information in affected communities and mobilize communities to prevent cholera and seek treatment. The effort represents a more personalized and house-to-house approach, complementing other outreach activities, such as mass distributing text messages and daily radio broadcasts.

Community health workers are a trusted bridge between communities, health authorities, and partners on the ground. They are also critical for registering and reporting suspected cases and deaths in the community and referring patients to nearby cholera treatment centers.

In the Ouest department, where preliminary data is available, deployed CHWs supported the identification of approximately 2 348 suspected cases of cholera, of which 65% were referred to Cholera Treatment Centers (CTCs), and the CHWs directly managed 34% of mild cases. The CHWs visited 29 500 homes during their first month of work, which allowed the distribution of 3 650 oral rehydration solutions (ORS) and 160 000 Aquatabs for water treatment. The CHWs were also given training for risk communication and health promotion to sensitive community members on vital primary care health issues, including breastfeeding, mental health, and identification/referral of gender-based violence.



Read the full story here.

IMPACT STORIES

PAHO's Labo Moto project uses nurses on wheels to improve cholera surveillance in Haiti

In the first four months of the new cholera epidemic affecting Hispaniola Island, over 28 000 suspected cholera cases have already been reported in Haiti. Yet, gangs hold many affected areas, and roads are virtually impassable, resulting in risks of underreporting and limiting timely access to needed health care. Providing humanitarian assistance has become particularly difficult due to political instability, lack of fuel, food insecurity, and deterioration of water, hygiene, and sanitation conditions.

To mitigate some of these challenges, PAHO/WHO has scaled up its Labo Moto initiative, which supports "nurses on wheels" who travel across the country by motorcycle to collect cholera samples from suspected cases and deliver them for laboratory analysis, contributing to rapid diagnosis and response. This way, access to life-saving treatment and preventative measures is timely.

There are currently 28 Labo-Moto nurses covering all ten departments who have facilitated the collection of more than 3 462 samples during the current epidemic, playing a crucial role in helping hard-to-reach areas and strengthening the decentralization of detection capacities for a timely and targeted response.

Read the full story here.



HOW TO SUPPORT THIS APPEAL

Generous donations from the international community allow PAHO to deliver its technical cooperation and deploy its operational and logistics support to address existing and emerging public health challenges impacting the countries and territories of the Americas.

The financial requirements outlined in this appeal are pivotal to providing lifesaving health assistance and protective services to communities affected by emergencies without leaving anyone behind. PAHO ensures it will distribute funding most efficiently and where needed, in coordination with public health authorities, United Nations agencies, civil society organizations, and other humanitarian partners.

Here are some ways private or public organizations and individuals can contribute to this donor appeal.



Financial contributions from governmental aid agencies, multilateral institutions, foundations and philanthropic organizations, and other public and private sector partners are among the most valuable and effective forms of support for health emergency response. The main characteristic of a financial donation is its flexibility to support an agile response. The resources obtained can be used quickly and efficiently, responding to the most acute needs and ensuring that the funded actions fully align with the local priority public health actions.

Donating organizations are invited to contribute cash to support one, several, or all priority actions highlighted in this appeal. To donate to PAHO, please contact Julie Mauvernay (mauvernj@paho.org).

Individual donations can also make a difference and help save lives by supporting the delivery of essential supplies and critical assistance to people in need. Individuals can contribute to PAHO's Health Emergency Appeal by mailing checks to PAHO, 525 23rd St NW, Washington, D.C., 20037.

DONATING IN-KIND RESOURCES AND SERVICES

PAHO encourages the private and public sectors to align response efforts to this Appeal's priority lines of action. Donations from corporations must comply with PAHO's guidelines and roadmap for engagement with the private sector.

To make an in-kind donation of goods and services, please contact Julie Mauvernay (**mauvernj@paho.org**) or **donate@paho.org** to guarantee coherent priorities, minimize gaps and duplication in the health response, and ensure quality assurance of the goods offered.

PAHO appreciates and thanks in advance its donors for their generous contributions to support the delivery of its humanitarian health assistance throughout the Region. PAHO will report contributions to this Appeal on its webpage to acknowledge and give visibility to donors' generosity, report on funding received, and identify remaining financial gaps.

Help us provide lifesaving health assistance and protective services to communities affected by emergencies, without leaving anyone behind.