

This report was issued by OCHA Haiti. The next report will be issued on or around 19 November.

I. HIGHLIGHTS/KEY PRIORITIES

- The Ministry of Health reports 1,039 dead and 16,799 hospitalised cases of cholera.
- 30 cholera treatment centres with a bed capacity of at least 1,600 beds have been established. 9 CTCs are operating in Port-au-Prince.
- Violence in Cap Haitien has affected humanitarian response causing WASH partners to suspend activities and the UN to cancel flights carrying supplies.
- Material and personnel gaps have been reported in the North and Northwest departments. As reports of cholera outbreaks

II. Situation Overview

The Ministry of Public Health (MSPP) reports the latest statistics on the cholera epidemic as 1,034 deaths and 16,799 hospitalised cases according to data collected up to 14 November. To date, cases have been confirmed in the Artibonite, Centre, North, Northwest, Northeast, South and West departments. To respond to needs of cholera patients, 30 cholera treatment centres (CTCs) and 27 cholera treatment units (CTUs) are operational across the country as well as a number of rehydration stations where oral rehydration salts are distributed.

Civil unrest in Cap Haitien on 15 – 16 November has slowed cholera prevention and treatment supplies from reaching the area in the past two days. The Nord Department is currently experiencing a case fatality rate of 7.5 per cent, which is the highest in Haiti. Prevention of cholera transmission through water, sanitation and hygiene initiatives has also been affected. Oxfam reports suspension of a project to chlorinate water for 300,000 people living in and around Cap Haitien until the violence subsides. A nearby World Food Programme (WFP) warehouse was looted of 500 metric tonnes of food and subsequently burned. WHO/PAHO reports that cholera training of health professionals has halted while noting the lack of public information materials available to sensitize the population in prevention of cholera.

III. Humanitarian Needs and Response

Health

In metropolitan Port-au-Prince, cases of cholera have been confirmed in six of seven communes. Nine CTCs are operational, with an estimated bed capacity of 600-1,000. Médecins du Monde -Canada is operating three mobile clinics which serve a population of 45,000 people in 14 camps in Cite Soleil as well as 55,000 people who live in areas surrounding the camps. Health cluster partners are particularly concerned with cholera cases increasing in Cite Soleil due to poor sanitation, lack of access to clean water and crowded living conditions.

Nationwide, 30 CTCs operated by health cluster partners treat patients daily with estimated bed capacity of 1,600-2,000 beds. There are 27 smaller cholera treatment centres, across the country CTUs often established to compliment CTCs or hospitals where the prevalence of cholera requires treatment of 40 patients or less. The establishment of new CTCs and increasing beds in existing CTCs are planned as is the construction of additional rehydration stations.

Health experts estimate needing 15 nurses for every doctor. Nurses, nurses' aides and cleaners are all needed urgently. In the department of Artibonite, departmental health authorities have stated the need for 260 "community health workers" who can administer oral rehydration salts and help with cleaning and disinfecting areas where patients in communities are being cared for.

Training on management of dead bodies was held by departmental health authorities in Port-au-Prince on 14 November. 20 participants were trained on treatment and transportation of corpses from medical facilities and

from communities. Under departmental health authorities' supervision, participating organizations will be provided with appropriate vehicles, personal protective equipment and supplies to manage dead bodies. The Haitian Red Cross has provided guidelines for the management of dead bodies, which include standardized disinfection measures. Messages on the management of dead bodies, detailing strategies to most effectively limit transmission of cholera have been disseminated. These messages are available upon request from the cluster.

The Northeast department has confirmed cholera cases in with Ouanaminte, Terrier Rouge, Trou du Nord, and Perche, all communities close to Dominican border. PAHO/WHO reports supporting the MSPP in the department through provision of medical supplies, logistics, and training of medical staff. In Artibonite, nine CTCs are operational, with a bed capacity of 750. Partners in Health/Zanmi Lasante staff continue to see increasing numbers of patients with cholera in the Artibonite, Centre and West departments, including a total of 7,159 hospitalized patients in their facilities in Artibonite and Centre.

Gaps & constraints

In the Northwest and North departments a significant increase in cases has been reported over the last three days, with implementing partners working to find suitable space for patients and supplies for treatment. A lack of medical supplies such as Ringer's lactate has been reported. Protests on November 15 and 16, restricted distribution of critical health supplies and public information materials to support the cholera sensitization campaign. Furthermore, trainings led by WHO/PAHO for health care workers have also been postponed due to the civil unrest in Cap Haitian. MSF-Switzerland, which operates the CTC in Cap Haitian, plans to increase the number of beds available and to construct another CTC. WHO/PAHO plans to continue to support the MSPP and health facilities in providing medical supplies in the following locations: Limbe, Plaisance, Milot, Cap Haitian, and Galeman du Plat.

In Port de Paix in the Northwest department the capacity to treat the increasing case numbers and hospitalizations is insufficient. There has been a significant rise in cases over the last three days and a lack of nurses, vehicles to transport patients and lack of sanitation supplies. The MSPP deployed 100 community health workers in partnership with CARE and Catholic Relief Services (CRS), but more assistance is needed.

The lack of transport for sick people to hospitals and CTC/CTUs has been a noted gap in the cholera response. The government is reported to be setting up regulation centres, but have stated they need further information on resources available from different agencies. Health cluster partners have reported vehicles and ambulances stuck at the customs for months and that their release would help alleviate this problem.

Despite reports of progress being made with respect to disposal of dead bodies, there remain a number of reports that suggest protocol is not being followed. Information and resources should be made available to those responsible to enable appropriate procedural follow-through.

Water, Sanitation and Hygiene (WASH)

The International Federation of the Red Cross (IFRC) is training volunteers in Léogane and Jacmel over the next two weeks and be accompanied by the distribution of 20,000 informational leaflets and 10,000 jerry cans and bars of soap and 1.5 million water purification tablets (Aquatabs) for 20,000 households for 30 days.

Distribution of water purification tablets, oral rehydration salts/zinc by ACTED and Action Contre la Faim in Artibonite have so far covered an estimated 130,000 people out of a total target of 450,000. DINEPA, the water and sanitation directorate has made available trucks and equipment for de-sludging latrines at CTCs pending a memorandum of understanding with WHO, the MSPP and the IFRC. As a prevention measure, the Netherlands Red Cross together with the Haitian Red Cross in the South East & West Department is working to contain the spread of cholera through hygiene promotion and Jerry Cans, soap, and water tablets distribution.

As part of its scaled-up hygiene promotion and cholera prevention efforts, the American Red Cross will have 82 health promoters working this week on health messaging in public places across Pétion-Ville, including markets, churches and bus stations. In its first two weeks of this scaled-up programming, the American Red Cross trained more than 220 promoters in hygiene promotion and cholera prevention, who then worked in a total of 41 camps. In the first phase, the promoters were deployed to a total of 34 camps

Gaps & constraints

Reports that water purification tablets are being eaten and oral rehydration salts taken as a means to prevent cholera transmission demonstrate for the further need to sensitize the population on the use of such materials.

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The WASH cluster reported that ACTED cancelled the distribution of water and sanitation materials near Grand Saline due to security concerns. The cluster also reports an increase in demand for supplies and human resources in the North and Northwest departments for both WASH and health partners. In Artibonite, rural areas have a lack of agencies and supplies to respond to needs. DINEPA stocks in St Marc are reportedly low, with a noted lack of chlorine powder and water purification tablets.

Camp Coordination and Camp Management (CCCM)

CCCM carried out sensitization activities in 170 camps throughout the earthquake affected communes to inform the people on how to prevent the disease. As of 15 November, CCCM partners have assessed 75 sites of the 89 identified by the Ministry of Health as potential sites for Cholera Treatment Units (CTU) implementation. CCCM partners continue to distribute hygiene kits across IDP camps and 1 million water purification tablets to Cite Soleil in the coming days.

Two rounds of SMS messages to over 120,000 households respectively with information on cholera prevention and treatment were sent by CCCM partners during the weekend. To date, CCCM partners have assessed 75 sites of the 89 identified by the Ministry of Health as potential sites for Cholera Treatment Units (CTU) implementation.

Food

WFP has assisted over 3,600 beneficiaries with 71,598 meals-ready-to-eat (MREs), 0.67 metric tonnes of high energy biscuits (HEB) and 4.3 metric tonnes of dry rations as part of the cholera response. WFP met with the head of the public hospital in Les Cayes yesterday to discuss possible food support to patients, hospital staff and caretakers. WFP has distributed to schools in affected areas 2,037,420 water purification tablets in Gonaives and 496,500 in Hinche. Soap will be distributed this week. WFP plans to distribute a total of 8,342,550 water purification tablets in schools to 278,085 children in affected areas and then expand to reach 941,411 children in schools in all non-affected areas with 28,242,330 tablets.

To respond to Hurricane Tomas WFP assisted approximately 62,573 people with 60,718 MREs, 7.3 metric tonnes of supplementary Plumpy and 49 metric tonnes of HEB for the post-hurricane response. These figures are not final as we are still awaiting updated reports from partners.

Education

The education cluster continues to focus on the response to cholera in schools. To date, cluster partners have conducted sensitization in 634 schools: 120 schools in Artibonite, 106 in Centre, 170 in the West, 122 in the Southeast and 116 in Northeast, with different forms of interventions¹. The Cluster partners are also advancing with the quick planning of the cholera response: more than 10,000 schools will be covered with various types of interventions, being almost 50% of the total school network in the country. The Ministry of Education and representatives from WASH and health clusters are to discuss the strategy on the cholera response in schools.

Logistics

Following advocacy by the logistics cluster, the Government of Haiti is considering the re-implementation of special procedures for incoming humanitarian cargo that were initiated after the earthquake, to allow relief items to be imported quickly. These new customs clearance procedures have been signed by the Prime Minister this week. The endorsement by the Ministry of Finance is pending.

On 12 November, MINUSTAH transported 10 tons of medical supplies for the ongoing outbreak. This donation was made by the Spanish Government to the Government of Haiti through the Spanish Agency for International Development Cooperation (AECID).

Communication

Communicating with Disaster Affected Communities (CDAC), the Communications Sub Group updated a 3Ws document (who, what and where) on cholera communication campaigns and initiatives that is available on the website www.cdac-haiti.org and integrated the 3Ws data into a database for OCHA to create a map. The CDAC communication sub group in conjunction with UNOPS, IOM, Internews, IFRC, the Haitian Red Cross and community mobilizers trainers put together a sample baseline survey to evaluate the impact of the communication campaign on cholera. This Survey started Monday 15 November.

¹ please see the latest 4W posted on the Haiti One Response website :

<http://haiti.humanitarianresponse.info/Default.aspx?tabid=72>

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In their morning animation 'Vwa Pa W' (Your voice), MINUSTAH FM invited listeners to communicate their knowledge of cholera and animator responded by giving feedback based on the spots/posters/SMS messages approved by the MSPP. The IFRC information phone line (*733) was also promoted through the show. Responding to misconceptions about CTCs within the population, MINUSTAH FM broadcasted a show last week with a WHO Public Health Advisor detailing CTCs functioning, hygiene and referral rules, and talking about access to health in remote areas. Answering to SMS messages sent by listeners, IOM representative sought to clarify question about CTCs, prevention and treatments.

UNOPS community mobilisers carried out cholera prevention in camps in Martissant (Port-Au-Prince metropolitan area). IOM and IFRC continued sending SMS messages throughout the country and their community mobilisers worked on cholera prevention in cite Soleil. Save the Children conducted cholera trainings for camp sensitizers with 60 participants in Léogane. UNESCO trained journalists on cholera with trainers from ACF, MSF and MDM, respectively in Gonaives, St Marc and Miragoane.

The MSPP plans to publish the official list of CTCs using media throughout the country. Over 50,000 MSPP-approved flyers have been distributed nationwide to date. More than 2 million SMS have been sent by IFRC to people in the Artibonite and across Port-au-Prince, providing people with basic but potentially life-saving information. 2 million more will be sent nation-wide next week.

Funding

To support the humanitarian response to cholera, the following contributions have been made:

Germany: \$170,000 to World Vision

Sweden: \$1,489,647 to Action Contre la Faim, \$ 2,979,294 to IOM and \$ 84,433 to Save the Children; the ERF (OCHA): \$516,000 to Action Contre la Faim

In addition to this funding, bilateral and in-kind contributions from a number of countries have been reported, as well as some funding received prior to the launch of the cholera response plan. Brazil (bilateral to Haitian government) made an in-kind contribution to a group of four epidemiologists integrated in the PAHO/WHO response team; medical supplies and chlorine tablets. France donated \$ 111,111 to UNICEF and \$ 138,889 to France Red Cross. Japan (bilateral to Haitian government) made an in-kind contribution of emergency relief goods (water purifiers, water tanks, portable jerry cans). Spain (bilateral to Haitian government) donated medicine, water and complementary supplies. Spain also mobilized a team of experts in communicable diseases, epidemiology and other disciplines. They have also committed to the distribution of 2 tons of chlorine and 24 million purification tables as well as medical supplies with a total estimated worth of in-kind support is \$ 3,591,837.

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For more information on the response in Haiti, please visit:

<http://haiti.humanitarianresponse.info>

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