Situation Report #8
May 18, 2023

KEY HIGHLIGHTS

- Project HOPE’s cholera and insecurity response program has reached nearly 15,000 people in its first four months of implementation.
- Insecurity continues to impact the availability and provision of health care, especially in Port-au-Prince and other urban areas.
- Project HOPE’s assessments in Grand Sud have found that over 50% of people in the region have to travel over an hour to access health care.
- Nearly half of women surveyed in the assessment reported not having access to a health facility during childbirth.

SITUATION OVERVIEW

Haiti’s political turmoil and insecurity have continued, with over half of Haiti’s population estimated to need some form of humanitarian assistance. Violence has continued across the country, catalyzing the rise of citizen vigilante units fighting back gangs as part of a movement named “Bwa Kale,” the translation from Creole meaning “peeled wood.” The name reflects the vigilante groups’ dedication to rapid justice for the communities suffering from gang violence. The insecurity, which has crippled much of Haiti’s urban regions for months, has now resulted in more than half of Port-au-Prince suffering from limited capacity for transit and movement.

With 48% of Port-au-Prince’s hospitals in gang-controlled areas, there is a significant lack of access to health care and multiple health facilities have been forced to close. The United Nations Office for the Coordination of Humanitarian Affairs has reported that there have been 330 obstructions to humanitarian assistance, and Project HOPE’s Haiti team has also been forced to shelter-in-place or refrain from travel due to insecurity in Grand Sud.

The Famine Early Warning Systems Network estimates that 1.5 to 1.9 million people in Haiti are food insecure, with 1 in 5 households suffering significant or extreme food consumption gaps and many people facing acute malnutrition. The Cité Soleil area of Port-au-Prince, where up to 8,000 children under 5 are at risk of dying from acute malnutrition, has the highest food insecurity levels in the country.
PROJECT HOPE’S ASSESSMENT

Health needs continue to grow in the Grand Sud region. Earlier this month, Project HOPE carried out an assessment to identify community needs around Gender-Based Violence (GBV), mental health, primary health care, Water, Sanitation and Hygiene (WASH), and nutrition in Sud, Nippes, and Grand’Anse. A team of 20 data collection officers surveyed a sample population of 560 individuals and 11 medical personnel from the eight communities Project HOPE is currently implementing programming in: Baradères, Les Anglais, L’Asile, Jeremie, Les Cayes, Fond Des Blancs, Corail, and Hatte Henry. Key findings include:

- Fifty-four percent of participants reported having to travel over an hour to access a health facility. While this is a significant barrier on its own, respondents reported that the biggest obstacle for accessing health care was the lack of financial resources to support both the cost of travel and the cost of health care itself, which patients are required to pay for before being diagnosed or treated by a medical professional.
- Forty percent of participants do not eat on a regular basis or have only one meal per day—which predominately consists of rice — and only 58% eat two or three meals a day. Our assessment also showed that 34% of individuals spend somewhere between 6,000 and 15,000 gourdes (roughly $40–100 USD) per week on food.
- Forty-six percent of women stated they did not have access to a health facility for childbirth and were instead tended to by family and neighbors in their house during labor.
- Primary health care facilities reported regular shortages of drugs and gaps in training for their staff, including for mental health care and nutrition. Facilities also reported they were unable to provide care for malnourished patients due to lack of technical knowledge and financial support for families who require housing for longer-term nutrition care. Referral mechanisms are also disrupted, including referrals for malnutrition. Health facilities are unable to access areas with high malnutrition rates without mobile medical units.
- Health facilities also reported a lack of capacity to conduct larger-scale nutrition surveys and track trends in their communities.

Anecdotal evidence from Project HOPE’s staff on the ground in Haiti further supports the data collected above. Primary health care facilities attached to Project HOPE’s Cholera Treatment Centers are understaffed, lack essential pharmaceuticals and medical supplies, and are unable to provide adequate support to the communities they serve. As Haiti’s insecurity continues, there is a correlating need for increased support to the primary health care system.

PROJECT HOPE’S RESPONSE

In early 2023, Project HOPE began implementing a multi-sectoral response to Haiti’s complex humanitarian crisis driven by the recent cholera epidemic and compounding instability. Our response is addressing health, protection, and water, sanitation, and hygiene (WASH) needs at health facilities in communities across the governorates of Sud, Grand’Anse, and Nippes.

Project HOPE has conducted multiple capacity-strengthening workshops with local staff, physicians, nurses, social workers, and several hundred Community Health Agents. These trainings covered cholera prevention, treatment, and infection control. Project HOPE also completed a baseline survey in the targeted communities as part of our comprehensive monitoring and evaluation plan.
Our team has also educated vulnerable community members in St Boniface, l’Asile, and Corail hospitals on how to recognize symptoms of cholera and avoid transmission. Project HOPE will continue to coordinate prevention activities with treatment centers and Community Health Agents throughout the duration of this program.

Project HOPE is preparing a widespread distribution of hygiene kits at Cholera Treatment Centers in the next few months. The contents of these hygiene kits are in line with standards set by the Haitian Directorate of Potable Water and Sanitation.

Despite the challenging security context and access limitations in violence-afflicted areas, Project HOPE has made substantial progress in its launch of its cholera response program, which has reached nearly 15,000 community members with cholera treatment and health education since January 2023.

**PROJECT HOPE’S IMPACT**

- **8** Cholera Treatment Centers supported
- **14.5k** Individuals reached with treatment and health education
- **2.5k** Hygiene and dignity kits under procurement
- **24** WHO Cholera Kits distributed to Cholera Treatment Centers (eight Central Kits and 16 Community Kits)