

This report is produced by OCHA Haiti in collaboration with the WHO, other UN agencies and humanitarian partners. The next report will be issued on or around 13 April 2020.

Key Messages

- **As of 6 April, 24 cases of COVID-19 have been confirmed in Haiti.**
- **Equipment and materials, including PPE, are still urgently needed.**
- **Government has set up additional mechanisms to coordinate the health response.**

Updates from the Government

- As of 6 April, the Ministry of Health (MSPP) has reported 257 suspected cases, of which 24 have been confirmed by laboratory testing. To date, one death has been reported in the country.
- The government has set up a structure for crisis management under the authority of the Prime Minister, which includes three dedicated cells: a scientific cell, a communications cell and a cell for socio-economic response.
- The Ministry of Economy and Finance (MEF) has asked the General Tax Directorate (DGI) to adopt, as of 1 April, measures to mitigate the anticipated negative impacts of the health crisis caused by COVID-19. Among these measures are the postponement of the date of payment of Income Tax and the cancellation of fines and penalties related to late payment.
- On 31 March, the MSPP informed pharmacies that, in order to avoid self-medication, chloroquine must be dispensed only upon presentation of a medical prescription.
- The Haitian National Police (PNH) has been mobilised to ensure compliance with the COVID-19 preventive measures, including the curfew, the ban on large gatherings and other measures to limit the risk of transmission.
- The Ministry of National Education and Vocational Training (MENFP) has set up a Task Force to respond to COVID-19 in the education sector. This Task Force has been working closely with the UN in coordinating the response. A response plan for the Education sector has been prepared aiming, among other objectives, to enable distance learning for students and their return to school when feasible.

Key Issues

- The [shortage in materials and equipment](#) remains a major issue of concern. Several orders have been placed, however, the cost for PPE transportation to Haiti is extremely high and continues to rise. Regulations to ban PPE export from some countries exacerbates the problem¹. An evaluation of equipment needs for the next three months indicates that a large amount of PPE is required for an adequate response. Hospitals continue refusing to treat

¹ An EU implementing regulation to ban PPE exports from the EU that was imposed on 16 March and later amended to include a humanitarian exemption, exacerbates the problem. MSF reported that several MSF cargos are being blocked from leaving Belgium.

patients due to PPE shortages. For example, the “Hôpital Français d’Haïti” temporarily suspended its emergency and hospitalization services, citing the inability to protect patients and service providers from the virus. This is also impacting the PNH, who are struggling to provide protective equipment to their officers which increases the risk of absenteeism. The NGO consortium CLIO has issued a press release², emphasising the need for protective equipment for NGO staff in order to enable the continuity of humanitarian activities. To alleviate the issue of PPE shortages, discussions between the industrial manufacturing / textile sector, the RC/HC, PAHO/WHO and UNOPS are underway to assess the possibility of 1) meeting the required specifications, 2) guaranteeing that a % of productions stays in Haiti to meet local needs, and 3) augmenting production.

- The International Organization for Migration (IOM) reports an estimated 96,000 [border crossings between Haiti and the Dominican Republic](#) between 17 and 29 March, including deportations, voluntary returns and daily crossings to purchase/sell goods, among others. An increase of voluntary returns of Haitians has been observed, notably at the official border crossing points of Ouanaminthe/Dajabon and Belladère/Elias Piña. Some people crossing the border were reportedly registered with fever upon arrival into Haiti.
- The COVID-19 crisis is expected to have a significant [socio-economic impact](#). In addition to loss of income in the country, increase in unemployment among the Haitian diaspora in the United States could have a negative economic impact through the reduction in remittances. Investment in social protection programmes is therefore essential and discussions are ongoing with the Ministry of Social Affairs and Labour (MAST) regarding appropriate policy development.
- The [identification of dedicated COVID-19 health care facilities](#) is proving to be a real challenge. One of the reasons for this is that communities living around the facilities that are currently being considered by the MSPP are unwilling to have COVID-19 patients in their areas.

Response

- [Hospitals and medical staff](#) continue preparing to receive COVID-19 patients. A document for early detection of COVID-19 cases has been distributed to all Departmental Health Directorates, and staff who have been trained on early detection will replicate the training at health institutions in their respective departments. Staff from all hospitals designated for COVID-19 case management by MSPP have been trained on IPC measures.
- Ten [medical regulators](#) (one for each department) are being recruited. These physicians will be in charge of follow-up of COVID-19 patients (appropriate care, notifying of possible staff contamination, etc.), adequate usage of PPE stocks, training for healthcare workers of COVID-19 case management institutions, among other responsibilities.
- The [purchase of equipment](#) is under way. It includes PPE, oxygen masks, and oxygen concentrators to ensure appropriate medical care of COVID-19 patients. However, the delivery of some of these materials is experiencing delays.
- WHO and UNICEF are providing the MSPP with [medical materials and equipment](#), including 36 health emergency, midwifery and obstetric kits, which include essential drugs, medical supplies and equipment to serve 120,000 people for three months and PPE. To date, 6,000 surgical gowns, 5,000 gloves, 4,500 surgical masks, 660 N-95 masks, among others, were delivered to the MSPP to support case management, laboratory testing, and surveillance activities.
- The MSPP continues [raising awareness and sensitizing communities](#) on COVID-19 with support from the UN and partners. Activities include preparation of key messages; production of video, radio and sound-truck spots; dissemination of messages through sound trucks; and distribution of flyers, leaflets, and posters. UNICEF and UNFPA influencers have made songs and videos to convey messages on handwashing, stigma, protection for elderly people and inclusion to prevent the spread of the disease. NGO partners have started to disseminate these messages in communes. Child Protection sector partners are conducting awareness-raising activities and

² <https://reliefweb.int/report/haiti/clio-communique-de-presse-covid-19>

disseminating information on the prevention of COVID-19 and the importance of protecting those who may be ill to mitigate risk of stigmatisation. A targeted video around the need to care for the elders, who are one of the risks groups, gathered 90 thousand views and reached more than 150 thousand followers on social media. With a strong presence at the border (both official and non-official points), IOM plans to launch an informative campaign at the points of entry and in highly-populated areas, such as IDP sites and prisons, to bring awareness to the population and reduce the spread of the virus. Furthermore, to support ongoing efforts to provide clear and accurate information to the public, IOM is in close discussion with the MSPP Communication Unit to establish a partnership through its call center known to the public as 840.

- **Prevention activities** in the field are ongoing by WASH NGOs and community-based organisations, prioritizing vulnerable urban areas and communities along the Dominican Republic border. Activities include the dissemination of prevention messages on hygiene behaviors and hand washing, the installation of hand washing stations in key public sites, raising awareness among the population on how to protect themselves from COVID-19, as well as ensuring availability of safe drinking water in the most vulnerable areas. With the support of UNICEF, the national child protection institution (the Institute for Social Welfare and Research³) is ensuring that 754 residential institutions hosting more than 25,000 children have the necessary hygiene supplies and information to prevent spread of the virus and/or mitigate any potential spread of the virus.
- Efforts to **increase tests and laboratory capacity** are underway. In addition to the 1,500 COVID-19 tests distributed by PAHO / WHO to the National Laboratory (LNSP) in March, 5,000 test kits are being ordered, which will allow the testing of 3,000-4,000 suspected cases. The LNSP is also requesting 10,000 cartouches for PCR testing to be used by laboratories of the Gen X network, present in all 10 departments.
- The MENFP, with the support from UNICEF as co-lead of the Education in Emergency group, is developing a comprehensive COVID-19 **response plan for the education sector**. It will help to disseminate key prevention messages to the education communities, to ensure the continuity of learning during school closure and to prepare for the reopening of schools when the time comes.
- Efforts are underway to **reinforce capacities and establish protocols at the border with the Dominican Republic**. On 3 March, the UN, in coordination with MSPP, undertook a field visit to the official border crossing point (BCP) of Ouanaminthe/Dajabon to start the implementation of the COVID-19 *Protocol to Detect, Refer, Support and Follow-up on Potential Migrants with COVID-19 at the official BCPs of the land border between Haiti and the Dominican Republic*. IOM is working closely with national and local authorities to identify additional spaces with facilities that could be used to host medical staff and suspected COVID-19 cases in quarantine.

Gaps in the Response

- Significant gaps remain in the **health response**. The lack of equipment and materials, including PPE, and oxygen masks and ventilators is a major concern. There is a shortage of hospital beds, in particular for Intensive Care Units. Coordination challenges also persist.
- In line with the appeal of the United Nations High Commissioner for Human Rights for the urgent **release of prisoners** around the world to prevent the COVID-19 pandemic from causing devastation in the often overcrowded prisons⁴, it is important to support the Ministry of Justice and Public Security to accelerate the release of eligible prisoners, particularly women and children in prolonged pretrial detention. Additional support to prisons is necessary to ensure the highest level of hygiene to prevent and mitigate the risks of COVID-19.
- Negotiations are ongoing between health authorities and healthcare personnel on **salary/work conditions** for COVID-19 response. Some hospitals not designated for COVID-19 case management are reporting issues with their staff due to health concerns.

³ Institut du Bien Être Sociale et de Recherche (IBESR) in French.

⁴ <https://news.un.org/en/story/2020/03/1060252>

- The MENFP does not have updated [distance learning modules](#) ready to be shared with schools. Partners through the Education in Emergencies platform led by MENFP, are exploring creative alternative ways to support students and partners with the challenges of learning from home.
- Considering the migratory flows at the border between Haiti and the Dominican Republic, [screening and hygiene measures for returnees](#), as well as tracking of returnees' needs, and mapping of their destination need to be reinforced. Concurrently, epidemiological surveillance for research and follow-up of cases needs to be strengthened.
- [Awareness raising campaigns](#) should be reinforced, including in remote communities and at the points of entry. The latter is required to ensure that migrants and returnees receive appropriate information on key behaviors and means to reduce the disease's propagation (hand hygiene, respiratory hygiene, social distancing etc.), as well as a list of potential hospitals and health centers which are equipped to treat the disease.

Impact of the Crisis on Humanitarian Operations

- The Cash-Based Transfers (CBT) Working Group has asked members to adjust existing cash operations to minimize the risk of exposure of personnel, partners and beneficiaries. Through Lajan Cash, Mercy Corps has the ability to provide to the community a contactless payment between the beneficiaries and a selected network of markets. Adjustments may include an increase in the number of distribution sites to avoid large gatherings (ex: CRS), collapsing monthly transfers into a single up-front transfer (ACTED, Solidarités International), or set up a hand washing area with adequate supply of hand wash solution. Cash distribution activities are also leveraged to disseminate sensitization messages at community level, in alignment with the MSPP and local authorities.
- The nutrition sector has suspended preventive activities, including malnutrition screenings, as households will not accept home visits without PPE. The Ambulatory Malnutrition Care Units and Nutritional Stabilization Units operate within existing health structures. However, the majority of the health structures housing the PTAs/Nutritional Stabilization Units do not have the necessary supplies/equipment to prevent COVID-19 transmission. Nutritional inputs are available at health structures in all departments.
- The COVID-19 pandemic is exacerbating the risks to children in institutions and prisons which are frequently overcrowded. Coupled with poor sanitation, overcrowding can lead to the spread of health problems. The child protection sector thus continues to prioritise family tracing for unaccompanied children, including child migrants, children in institutions and children in detention. To prevent and mitigate transmission risks the child protection sector has suspended group activities, including psychosocial activities, training for child protection actors and collective awareness raising activities. To adapt to the changing context and meet the needs for information, partners are increasingly using megaphones to transmit key COVID-19 prevention and child protection messages.

Additional Information about COVID-19

For more information on COVID-19 in Haiti, please visit OCHA Haiti's dedicated COVID-19 page:

<https://www.humanitarianresponse.info/en/operations/haiti/covid-19>

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