Key Messages

- As of 27 April, 74 COVID-19 cases and six deaths have been confirmed in Haiti.
- The Government of Haiti announced the extension of the state of health emergency until 20 May 2020.
- Subcontracting factories have reopened on 20 April and have adopted measures to prevent the spread of the virus.
- Health facilities to treat COVID-19 are being identified and prepared across the country.
- Food insecurity is expected to further increase due to the COVID-19 context.

Updates from the Government

- As of 27 April, the Ministry of Health (MSPP) has reported 769 suspected cases, of which 74 have been confirmed. To date, six deaths and seven cured patients have been reported.

- On 19 April 2020, the Government of Haiti announced at a press conference at the Permanent Information Centre on Coronavirus (CIPC) the extension of the state of health emergency that was announced on 19 March for an additional month, until 20 May 2020.

- In order to guarantee jobs provided by subcontracting companies, the Government authorized these factories to gradually resume their activities from 20 April 2020, while respecting the measures to prevent the spread of the virus. These measures include, among others, the operation of the factories on a rotating basis with only 30% of their workforce, measuring the temperature of the workers upon entry to the factory, respecting a distance of at least one meter between people, the obligation to wear masks and the installation of handwashing points.

- As part of the response to COVID-19, the Government announced on 15 April, at a press conference at the CIPC, the publication of a protocol for the care of COVID-19 deceased persons.

- On 18 April, the Government published a communication and social mobilisation strategy for COVID-19, which was jointly developed by the Communication Cell under the Prime Minister's Office, the MSPP, and international and civil society partners.

- The Multisectoral Commission for the Management of the COVID-19 Pandemic that oversees the coordination of the COVID-19 health response has held working meetings to elaborate a response plan. Several working groups were
created to address six thematic areas: Patient care; communications; logistics and distributions; surveillance; laboratories and research; transparency; information technology.

- On 24 April 2020, the Ministry of National Education and Vocational Training launched the digital platform of educational and learning resources called PR@TIC. This pedagogical tool will facilitate learning activities outside the classroom from pre-school to professional level.

**Key Issues**

- While the logistics and commercial sector seems able to continue operating in the country, procurement of key protective and medical items remains a challenge. The UN system is supporting the newly established Multisectoral Commission for the Management of the COVID-19 Pandemic through a dedicated working group to elaborate a supply and logistics plan, looking at the upstream and in-country pipeline of critical response items such as oxygen, personal protective equipment (PPE) and medicines.

- Concerns were raised regarding the situation of vulnerable groups in the context of COVID-19, including persons with disabilities. On 15 April, a member of the Association "Nou tout se moun" alerted the press on the situation of people with reduced mobility living in a camp in Delmas 2 in Port-au-Prince, one of the three sites housing persons with disabilities after the earthquake of 12 January 2010. Under faulty hangars, these people live in an environment full of waste, with a lack of drinking water and exposure to insecurity.

- IOM reported an estimated 17,430 border crossings between Haiti and the Dominican Republic (where 5,044 COVID-19 cases had been confirmed as of 22 April), between 12 and 19 April, including deportations, voluntary returns and daily commute to purchase/sell goods. An increase of voluntary returns of Haitians has been observed (an estimated 3,198 returnees during that week). Necessary screening and hygiene measures for returnees remain a priority. Concurrently, the use of mobility data combined with epidemiological surveillance for research, identification of possible hot spots needs to be strengthened. Lastly, awareness raising campaigns should continue at points of entry to ensure that migrants and returnees receive appropriate information on key behaviors and means to reduce the disease’s propagation (hand hygiene, social distancing, etc.). A list of potential hospital and health centers fit to treat those affected by the disease should be elaborated.

- COVID-19 is expected to lead to a further increase in food insecurity across the country due to a rise in food and agricultural inputs prices and a decrease in the purchasing power of most rural households. While the extent of this impact is currently being estimated, concerns were raised, as there is already a significant response gap in this sector. According to the latest updates shared by partners, current funding will make it possible to cover in 2020 approximately 40% of the target for food assistance, initially set at 1.2 million people, and less than 15% of the target for support to livelihoods and agriculture, set at 1.41 million people. If additional funding is not mobilized quickly, the impact of COVID-19 in Haiti could significantly increase this response gap.

**Response**

- The MSPP continues to investigate suspected cases of COVID-19 across Haiti’s ten departments, with support from PAHO/WHO. The MSPP and PAHO/WHO are also collaborating on the development of a unified protocol to ensure the harmonization of surveillance activities at the local level. These activities include the investigation of suspected COVID-19 cases, contact tracing, and data management. Implementation of the protocol will begin in three departments (Centre, Nord-Est, and Ouest) and will later be extended to the rest of the country.
• The identification and rehabilitation of health facilities to treat COVID-19 or to serve as quarantine centres is ongoing across the country. To date, 3 facilities are treating COVID-19 patients. Additional facilities are being evaluated and prepared.

• To support the timely testing of suspected COVID-19 cases, PAHO/WHO has procured an additional 3,600 test kits, which are being distributed to the National Laboratory (LNSP). To further strengthen the country’s laboratory capacity, 2 additional laboratory technicians are being hired. Moreover, 8 field nurses, known as LABOMOTO nurses, are being contracted to support the sampling of suspected COVID-19 cases and the transport of the samples to the LNSP.

• The MSPP has installed hand washing kits provided by UNICEF in health institutions and markets in the West Department, enabling about 25,000 people to wash their hands regularly.

• IOM along with the partners of the Directorate of Civil Protection’s (DPC) technical group on evacuation shelters (CTEGAP) is working on a strategy/protocol to adapt some existing evacuation shelters to support the MSPP in terms of the quarantine spaces for COVID-19 cases or dormitories for medical staff. As most of the existing evacuation shelters are schools, it was decided to focus on multi-functional buildings. However, the CTEGAP partners are waiting for MSPP to share the criteria list for quarantine spaces as well as the priority areas before moving forward with the strategy.

• The strengthening of protocols at entry points is ongoing. In Ouanaminthe (Nord-Est department), the protocol for the detection of COVID-19 cases among migrants who return from the Dominican Republic is being implemented. 1,500 hygiene kits and sensitization materials (more than 2,000 flyers) have been sent to Ouanaminthe for an upcoming distribution to migrants. The center that was identified to serve as a quarantine space is being rehabilitated by IOM. Training of staff from the MSPP, POLIFRONT (border police), ONM (National Migration Office), and PAHO/WHO is ongoing to ensure a good implementation of the protocol. A joint MSPP-IOM-PAHO/WHO field visit was organized to Belladere on Wednesday 15 April to meet the local authorities and partners to discuss the implementation of the protocol at this official border crossing point. Water, sanitation and hygiene installations were assessed by a joint team from UNICEF, ACTED and OREPA Centre, who are ready to intervene. A list of needs will be shared by the Departmental Director of the MSPP in order to rehabilitate the identified quarantine centre and another visit will be organized to include the surveillance of strategic unofficial border crossing points near Belladere.

• The new COVID-19 communication and social mobilization strategy developed by MSPP and UN partners has been adopted by the Multisectoral Commission. It aims at fighting disbelief, denial and refusal behaviours as positive cases increase. The strategy will use more deeply rooted socio-cultural messages, embodied by credible influencers, community and religious leaders, as well as coordinate institutional and community-led messaging and reinforce digital media, radio and TV. In the meanwhile, several UNICEF partners continued to carry out communication, community mobilisation and awareness raising activities in different departments (Artibonite, Centre, Ouest, South, South-East) in coordination with the MSPP, through soundtracks, megaphones, communication material distribution, and trough the installation of handwashing points at the most frequented public places. Over the last two weeks at least 200,000 people have been reached with these messages. UNICEF sensitized 1.4 million people on the transmission of COVID-19 and on handwashing practices through social media. UNICEF has also conducted a U-Report survey with key information on the level of understanding among the youngest population, in order to better target COVID-19 communication. In addition, local maternity healthcare professionals raised awareness on COVID-19 guidelines for pregnant women through a video that reached more than 152k people on social media. In collaboration with MSPP, this video produced by UNFPA, sent a clear message about protecting pregnant women and their newborns throughout this pandemic. The MSPP and UNICEF are organizing the training of 512 health workers, including 399 ASCPs and 113 nurses and auxiliaries for sensitization and community mobilization in the
South-East and Central Departments, which are bordering the Dominican Republic. These agents will be provided with protective equipment and work materials by UNICEF.

- In order to overcome the possible future limitations in terms of access and to continue to provide an uninterrupted supply of needed materials for the ongoing response, WFP maintains common surface, air and sea transport services. Those services are offered to the humanitarian community and governmental counterparts.

- The Office for the Protection of Citizens (OPC), the national human rights organisation, is currently elaborating a response strategy to ensure the protection of vulnerable groups in the context of COVID-19.

Gaps in the Response

- The majority of children’s homes in Haiti are supported by small private donors such as individuals, churches or faith-based groups. There is concern that these children’s homes will not receive their regular donations and risk interruptions in financial and material support, including essential daily living supplies such as food, propane for cooking, and hygiene and cleaning materials, due to international travel restrictions and a worsening socio-economic situation. The Institute for Social Welfare and Research is coordinating with protection actors to best mitigate the risks while advocating for prevention of family separation and acceleration of family reunification to reduce the number of children in these homes which are high risk for transmission given the close proximity in which children are in these homes.

- In order to continue providing common services to the humanitarian community, WFP needs further funding to cover operational requirements in the coming months. Current funding only guarantees the continuity of air (UNHAS) and sea transportation capacity up to mid-May 2020.

- Significant gaps continue to persist regarding the availability of equipment and materials, in particular PPE.

- The technological tools used for distance learning such as the online platform and television-based courses do not yet reach the most vulnerable children, including children living with disabilities in urban and rural areas, due to limited access to these means of communication as well as electricity problems.

Impact of the Pandemic on Humanitarian Operations

- Child protection activities involving large groups have been suspended. However, actors are continuing select routine activities in small groups while respecting physical distancing and/or on an individual basis to ensure ongoing service delivery such as case management, psychosocial support, home visits and cash assistance.

- Preventive activities in the nutrition sector, including active screening for malnutrition at the community level, were suspended. In some localities, health institutions receive only emergency cases and are being frequented less and less by population to avoid exposure. As a result, malnourished children sometimes do not get the necessary care.

- Food insecurity is expected to increase significantly in the context of COVID-19. While the impact is currently being assessed, regular response activities have been adapted to the new context by introducing hygiene measures and carrying out sensitization on the spread of the virus with the beneficiaries. During the week of 6 to 12 April 2020, the WFP and its partners distributed 349 tons of food to 4,869 households (24,345 people) in the departments of Grand’Anse, Nippes, West. In the coming weeks, distributions will continue in the departments of Ouest, Grand’Anse,
Artibonite, Nippes and Nord for a total of about 10,000 households. At the same time, the FAO and partners are organizing a distribution of seeds and seedlings for 9,900 vulnerable households for sowing/planting in the spring season 2020, in the departments of Grand’Anse, North-West, North-East and Nippes. FAO is also purchasing vegetable seeds, veterinary drugs and goats to assist 13,000 vulnerable households in the same departments, which will benefit from vegetable production (9,500 households, 60% of which are women heads of household), veterinary treatment of their sick animals (2,500 households) and restocking of small livestock (1,000 women/girls heads of household) starting May 2020. Additional funding is urgently required to continue activities in response to food insecurity.

Additional Information about COVID-19

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


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