

This report is produced by OCHA Haiti in collaboration with PAHO/WHO, other UN agencies and humanitarian partners.

Key Messages

- **As of 21 May, 663 COVID-19 cases and 22 deaths have been confirmed in Haiti.**
- **A first round of shipments of PPE and other equipment arrived in Haiti. However, a lack of PPE, oxygen, dedicated beds, materials for laboratory testing, and adequately trained staff still persists.**
- **Five of 42 designated health facilities have been equipped for the management of COVID-19 cases. The preparation of COVID-19 case management structures is extremely challenging due to rejection by local communities.**
- **Misinformation and denial among the population, expression of hostilities towards COVID-19 treatment structures and stigmatization towards affected people remain a concern.**

Updates from the Government

- As of 21 May, the Ministry of Health (MSPP) has reported 2,352 suspected cases, of which 663 have been confirmed. To date, 22 deaths and 21 cured patients have been reported.
- The Multisectoral Commission for the Management of the COVID-19 Pandemic that oversees the coordination of the health response is finalizing with the Ministry of Public Health and Population (MSPP) a detailed operational COVID-19 response plan with support from UN agencies.
- In a press statement published on 30 April, the Prime Minister announced the mandatory wearing of face masks in all public spaces as of 11 May. This measure particularly applies to employees in their workplace, drivers, passengers of public transportation, people circulating in any public space, as well as in hospitals, shops, banks and any other private or public institutions.
- The President announced on 15 May that all shipments of equipment and material for the COVID-19 response worth US\$ 18 million that had been ordered by the Government had arrived in Haiti by air. The shipments include PPE (visors, surgical masks, N95 masks, and protective goggles), oxygen, oxygen generators, hospital beds and ventilators. More equipment is expected to arrive by 23 May.
- According to [local media](#), on 5 May, the first official meeting between Haitian and Dominican authorities took place since the beginning of the COVID-19 pandemic, to discuss the bilateral cooperation to manage the crisis. During the meeting between the foreign ministers of the two countries, among the points discussed were the mass repatriation of Haitian nationals to Haiti and the issue of visas for Haitian students in the Dominican Republic.

Key Issues

- While five [health facilities](#) have already been prepared to treat COVID-19 patients, the identification of additional facilities in the departments remains a challenge due to rejection by local communities.
- A number of incidents related to [Protection](#) were reported: Since the introduction of the curfew on 20 April, the Human Rights Unit of BINUH has observed at least four cases of ill-treatment, the last of which was on 28 April, by the police against persons in breach of the curfew. Expressions of hostilities against the preparation of health centres to receive COVID-19 patients were reported, in Port au Prince (Hôpital Bernard Meus), in Gonaïves (Hôpital La Providence), and in Les Nippes in Chalon as well as Jacmel in the former MINUSTAH base. Another incident related to COVID-19 occurred on 3 May in Terrier Rouge (North-East Department), where a coffin was left in the street when residents opposed the burial of an individual they thought could have died of COVID-19. A mob wielding machetes and rocks blocked the entrance of the cemetery with burning tires. The HNP intervened to calm the situation.
- IOM reported an estimated 17,271 [border crossings between Haiti and the Dominican Republic](#) in 50 border crossing points (4 official and 46 unofficial) between 26 April to 3 May, including deportations, voluntary returns and daily commute to purchase/sell goods. Out of these, 5,961 movements were registered towards the Dominican Republic and 11,310 towards Haiti (of which 2,414 were voluntary returns most of them carried out on the official border crossing points of Ouanaminthe and Belladère). The Haitian press has reported that the mayors of border municipalities such as Laschaobas (Centre) and Anse à Pitre (Southeast) have warned of their lack of capacity to provide health assistance to migrants arriving from the Dominican Republic through unofficial border points and staying in their municipalities.
- Various scenarios are being discussed for the [resumption of school activities as soon as the situation allows it](#). However, the lack of sanitation facilities in schools exacerbates the already existing risk of diseases, including COVID-19 situation. Given that only 45% of schools in Haiti have drinking water and only 30% have sanitary blocks, the inability to practice hygiene, especially hand washing to limit the spread of the virus, remains a significant challenge for the reopening of schools.
- Regarding the expected deterioration of the [food security situation](#) due to the impact of the COVID-19 pandemic, a first rapid market assessment was conducted by the CNSA (National Food Security Coordination) in collaboration with WFP. The survey that was conducted in 11 communes, through phone calls to vendors and key informants, indicates reduced availability of products, in particular those locally produced, and an increase in prices of around 5%. Vendors also reported increased limitations for the functioning of markets namely the low purchasing power of the households, the lack of access to water, sanitation and hygiene and handwashing materials and the liquidity shortages. While food security sector partners were able to provide food assistance equivalent of one month's food ration to 331,000 people in the first trimester of 2020 (40% in-kind assistance, 60% direct cash transfers or vouchers), the food security response continues to be underfunded for the coming months.

Response

- On 30 April, the Multisectoral Commission presented the list of the 42 structures and health institutions selected in each department for COVID-19 [case management](#); however, some institutions selected are still under revision at departmental level. So far, 10 institutions have been equipped for the management of COVID-19 cases. PAHO/WHO organized a meeting with international and national partners to engage in the set-up of advance triage for early detection and isolation of COVID-19 suspected cases in health institutions that will not do COVID-19 case management. WFP has provided light engineering support for health structures and stands ready to continue support in this field with its expertise and deployable assets. In parallel, as of 16 May, 16 structures had been assessed by ACTED, ACF and Solidarité Internationales in the Centre, West, Artibonite, South East, North and North West

departments to identify critical WASH needs and undertake rehabilitation works as soon as possible. UNOPS provided technical support for the maintenance of the oxygen production system (HCR Bon Repos) and supported the technical evaluation and upgrading of health facilities.

- In addition to the shipments ordered by the government, [procurement of equipment and materials](#) continued from the UN side with the purchase of 350 oxygen cylinders, hygiene equipment and PPE.
- On 8 May, a training on the set-up of advance [triage and patient circuit for non-COVID sites](#) and health institutions was prepared by MSF-Belgium and hosted by PAHO/WHO for national and international partners willing to support this activity throughout the country. A total of 16 organizations took part in this training. MSF-Belgium has already supported the set-up of 3 isolation rooms in the South department. PAHO/WHO completed a mission in the North department, staff from Justinien University Hospital (40 staff) and Convention Baptiste Hospitals (25 staff) were trained on the correct use of PPE and on IPC norms. Isolation rooms from both hospitals were also evaluated and recommendations were made to hospital managers. Missions to the North and Artibonite departments were done by PAHO/WHO to support departmental crisis cells.
- PAHO/WHO continues to collaborate with the MSPP on the development of an operational response protocol for the strengthening of COVID-19 [surveillance](#) (investigation of suspected cases and contact tracing). Implementation of the plan is ongoing in 7 departments (Artibonite, Centre, Grand'Anse, Nord-Est, Nord-Ouest, Ouest, and Sud).
- PAHO/WHO has reoriented the tasks of 12 field nurses to support the [sampling](#) of suspected COVID-19 cases and transportation of samples to the National Laboratory. To date, these nurses have sampled 366 people across the ten departments. Between 7 and 8 May, PAHO/WHO conducted a mission in Grand'Anse to evaluate the surveillance system at the departmental level and understand potential challenges faced by field personnel.
- PAHO/WHO continues to [distribute PPE items](#) to institutions involved in the response. To date, over 42,000 PPE items have been distributed. Additional items are being procured.
- [Training](#) and capacity building activities are continuing:
 - PAHO/WHO in collaboration with other UN agencies and NGOs, is strengthening training of medical staff on oxygen therapy and respiratory rehabilitation, on infection prevention and control, and/or the management of suspected COVID-19 cases, on early detection of COVID-19 and the continuity of care for other programmes, such as vaccination and prenatal care.
 - Upon request of the MSPP, UNFPA supported a mission of the Unit for Infectious Diseases Control (Unité de Contrôle des Maladies Infectieuses et Transmissibles UCMIT) to five departments in order to strengthen the capacities of the Equipe Santé Famille (ESF) through orientation / training sessions on community response to COVID-19; the direct beneficiaries of these information, awareness-raising and orientation-training meetings are departmental managers (departmental directors, programme coordinators, epidemiologists, M&E staff, departmental administrators, departmental technologists, etc.), municipal leaders and delegates.
- The [Communication](#) working group co-led by the MSPP and UNICEF conceived new messages on mask wearing, stigmatization against people affected by COVID-19, violence against COVID-19 observation centres, based on the the COVID-19 Pandemic Multisectoral Management Commission (CMGP) communication strategy. To amplify the communication on COVID-19, UNICEF and UNESCO have signed a MoU with six of the most influential media and journalists' networks. UNICEF has sensitized over 6.2 million Haitians through social media messages.
- On [community engagement](#), awareness raising and hand washing, the following progress has been made to date by UNICEF-supported NGOs: some 7,300 community leaders, influencers, local authorities and volunteers have been engaged in the communication campaign; some 1.2 million people have been reached with sensitization and awareness raising messages; more than 750 hand-washing points are installed and functioning (with water and

soap). In support of the MSPP's Family Health Department, UNFPA is launching a public information campaign on the protection of pregnant women from COVID-19. Through 10 episodes, midwives respond directly to the concerns of pregnant women in order to contribute to the reduction of maternal deaths. The campaign will be broadcast through the community radio network and on local television stations.

- The implementation of the [response protocol at entry points](#) is ongoing by IOM and partners, in particular in Ouanaminthe (Nord-Est department) and Belladère (Centre department). This includes awareness-raising through sound trucks, distribution of sensitization materials, training of staff from MSPP, POLIFRONT (border police), DPC, Red Cross, and ONM (National Migration Office). MSP, PAHO/WHO and IOM continue to coordinate the implementation of the protocol, the provision of critical WASH services and support in medical staff and the equipment of tents as quarantine centres. In addition, follow up on migrants and returnees at risk of COVID-19 started in Ouanaminthe. IOM continues to offer psychosocial support through its hotline 840 to all migrants in need of assistance.
- The Brigade for the [Protection of Minors](#) of the Haitian National Police and the National Committee against Trafficking in Persons launched a portal for reporting online child sexual abuse images in Haiti (<https://report.iwf.org.uk/ht>) on May 6, 2020. The establishment of the portal is particularly timely given the greater number of people staying at home and online during the global pandemic increasing the risks of online sexual abuse of children.
- Given the delays in the decongestion of [prisons](#), an advocacy note was finalized by the Prisons and Security Country Team group, which refers to international standards that should guide the decongestion of prisons and decisions on release of prisoners as part of the prevention of contamination in detention centers. The note aims at prioritizing decisions based on vulnerabilities of prisoners, through a contingency plan between the Direction de l'administration pénitentiaire (DAP) and the Ministry of Justice. The note was given to the DAP and was also shared with the OPC to guide its advocacy.
- In order to support the common COVID-19 response, WFP continues to offer [essential transport and storage services](#) to the humanitarian community and governmental counterparts, including surface, air and sea transport services. Logistics coordination and information sharing mechanisms are in place in order to maximise the use of the limited available resources. UNHAS flights are a key tool for the movement of health workers and supplies.

Gaps in the Response

- The preparation of COVID-19 case management structures has proven to be extremely arduous as local communities have often objected to the transformation of health institutions or facilities presumed to be designated for the management of COVID-19 patients. Furthermore, there have been several reports of unwarranted behaviour, ranging from verbal assault to physical violence towards hospital staff, field epidemiologists, and community health workers. All these elements alongside the current lack of PPE, oxygen, dedicated beds, materials for laboratory testing, and adequately trained staff increases the possibility of spread of COVID-19 in Haiti over an extended period of time and across large swathes of the country.
- In order to continue providing common services to the humanitarian community, WFP needs further funding to cover operational requirements in the coming months, taking into consideration as well the increased needs expected during the cyclonic season. Current funding only guarantees the continuity of air (UNHAS) and sea transportation capacity up to the end of May 2020. Light engineering capacity and engineering assets necessary for the rehabilitation or establishment of COVID treatment centers remain a crucial gap to be covered as soon as possible.

- There is a need to reinforce the tracking of mobility trends along the border, as well as in the rest of the national territory in order to understand the displacement patterns caused by this crisis and to orient actions to better support the affected areas.
- New COVID-19 messages on mask wearing, violence against people infected or affected by COVID-19 have been conceived but communication tools such as posters, leaflets and flyers are not printed yet. After clearance in a meeting held on 20 May, MSPP is seeking additional financial resources to reach 50% of its needs and print first set of samples. The training of 3,000 polyvalent health community workers has started and their deployment will help boost communication in all regions.

Impact of the Pandemic on Humanitarian Operations

- As of 11 May, the GoH has made it mandatory to wear masks all over the country. Humanitarian actors involved in non-medical interventions have underlined the need to be provided with PPE and/or to be able to rely locally produced masks to allow for the continuity of essential activities.
- Child protection actors have highlighted the need to maintain case management and psychosocial support services for children throughout the pandemic however many frontline workers do not have access to PPE to enable them to confidently and safely continue work particularly in dense urban areas. To overcome this child protection actors are conducting remote support through telephone when networks permit however its recognized that many children may not have access to their own phone thus its essential to continue individual home visits and service provision while respecting social distancing guidelines and hygiene measures.
- All health institutions continue to treat children suffering from acute malnutrition. However, attendance is declining and varies from one commune to another depending on the number of confirmed cases of COVID-19. Preventive activities at the community level (screening for acute malnutrition and referrals) are timidly carried out in only two departments out of ten because of the lack of individual protection materials. Follow-up with the heads of institutions is done by telephone.

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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