Haiti: From Emergency to Sustainable Recovery
IOM Haiti Two-Year Report (2010-2011)

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Migration for the Benefit of All
IOM is committed to the principle that humane and orderly migration benefits migrants and society. As an intergovernmental organization, IOM acts with its partners in the international community: to assist in meeting the growing operational challenges of migration management; advance understanding of migration issues; encourage social and economic development through migration; and uphold the human dignity and well-being of migrants.

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Above: Cité Soleil. commemoration of the 12 January 2010 earthquake. The balloons launched skywards represent the souls of those who died in the tragedy.
We have a saying in Haitian creole: “men anpil chay pa lou”, or as you might say in English, “many hands make it light work”.

In my capacity as Foreign Minister, it is my responsibility to ensure that the many hands of the international community work alongside the Haitian people to build a better, and brighter, country for our children.

After the devastating earthquake of January 12, 2010, the solidarity and generosity from around the world brought many to our shores. There was an enormous outpouring of the help in the aftermath of the quake and now as we enter the recovery phase, we call on our partners to accompany us on this journey.

Reconstruction and development require as much cooperation as responding to an emergency. We will continue to rely heavily on partners such as the International Organization for Migration (IOM) to keep supporting our vision throughout this phase.

Providing solutions and answers for the most vulnerable, is a huge challenge. One that can only be tackled through a joint commitment to build a brighter Haiti for its people.
Above: Mangeois, Paco. IOM shelter beneficiary.
IOM’s People-Driven Mission for Haiti

Two years ago, the world awoke to the news that Haiti had been struck by one of the most devastating natural disasters of all time. Hundreds of thousands people were crushed to death beneath tons of rubble, and over a million sought refuge under the open sky with little more than the clothes on their back. The international community mobilized to respond at the peak of its capacity to provide life-saving services and shelters to the over one million persons that ended up homeless on the streets in the days and months after the earthquake. As global cluster lead for camp coordination and management in situations of natural disaster, and with a presence in Haiti for over 15 years, IOM was well positioned - with local expert and international staff - to rapidly scale up the relief and assistance effort, thereby helping to protect the most vulnerable members of the population who found themselves homeless.

Hard on the heels of the quake came Hurricane Tomas, followed quickly by cholera and IOM was an important part of the humanitarian response effort.

On the second anniversary of the disaster, half a million people remain in camps, sheltered by tawdry plastic sheeting and living precariously. Haiti’s challenges span the public health risks of urban slums and the deforestation of rural areas that pushes poor people to flee, whether to already over-crowded towns and cities in the country or overseas.

IOM is committed to supporting the Government of Haiti as it redoubles its efforts to reconstruct neighborhoods and to provide sustainable and long lasting solutions to its people. In the months ahead, IOM will be handing responsibility for the provision of essential services to national and local authorities. We intend to strengthen our institutional partnerships, deepen our cooperation and adapt to the needs of earthquake-affected population and migrants in Haiti and abroad.

Through 2012, IOM will help relocate people from camps to communities while ensuring that their basic human rights are respected. To that end we will steadfastly protect the vulnerable, pay great attention to sex and gender based violence and speak out against unfair treatment of those being pushed out of the camps without due process.

As it has always done, IOM will continue to stand beside the most vulnerable Haitian people, helping them meet the challenges ahead.

Luca Dall’Oglio
Chief of Mission, IOM Haiti
Many Programs, with Complementary Purposes

IOM has been present in Haiti since 1994, when the organization began partnering with the Government of Haiti on migration management and capacity building programs following years of turmoil that had caused internal and international displacement, forced migration and considerable economic decline. In later years, IOM extended its cooperation to address and mitigate the effect that natural disasters have on the most vulnerable sections of the population. Such cooperation has included addressing the consequences of Tropical Storm Jeanne and the massive flooding in Fonds-Verettes, to which IOM responded by adding drainage, reforestation and watershed management to its project portfolio.

Across the globe, IOM responds to emergencies that result in mass displacement. IOM acts as the lead agency for the Emergency Shelter and Camp Coordination and Camp Management (CCCM) Cluster in the event of a displacement crises caused by a natural disaster. After the 2010 earthquake in Haiti, IOM personnel responded within 24 hours, providing and coordinating life-saving services and eventually partnering with the Government of Haiti and the international humanitarian community in the search for durable solutions to the displacement crisis. During the rainy seasons of 2010 and 2011 IOM acted as the agency of last resort in the provision of emergency shelters and NFI for the over 1 million camp resident IDPs and communities. Over the nearly two-year period since the earthquake, the IOM-Haiti budget expenditure was $191 million USD, diversified among 43 active projects in the following programmatic areas:

- Camp Management Operations, WASH, Site Planning, Protection;
- Data Management, Census, Enumeration;
- Health, Psychosocial;
- Communications;
- Temporary-Shelter, Non-food items;
- Community Stabilization and Early Recovery;
- Disaster Risk Reduction;
- Counter-Trafficking; and
- Capacity-Building on Migration Management.

Two Years After the Earthquake, IOM Helps Haiti Cope with a Multitude of Challenges

Two years after the devastating earthquake of 12 January 2010, a litany of challenges remain. One of the largest urban displacement crises in the world persists; reconstruction of the affected areas is slow; the risk of a cholera epidemic persist; and environmental degradation continues increasing the exposure to risk of the Haitian people and their property. Despite these formidable challenges, however, there is cause for hope as the country has shown signs of improvement since January 12th, 2010. The displaced population has fallen to about a third of its original size and these persons have been provided with various housing solution schemes; the cholera mortality rates have decreased from a height of 8% to its current 1% level- a mortality rate considered manageable by international standards; and there are various and aggressive measures being taken to address environmental degradation and disaster risk management throughout the country, led by the Government of Haiti. Suffice to say, obstacles exist, albeit surmountable.

There has been a significant decrease in the number of camp resident IDPs: from 1.5 million to 520,000. This is due in part to deteriorating camp conditions due to the diminution of camp services, but similarly to the resilience of Haitian people as well as to the provision of durable housing solutions and other relief efforts provided in communities. To date, 6,500 damaged homes have been repaired, 4,500 new or rebuilt permanent houses constructed, and more than 100,000 transitional shelters (T-shelters) solutions provided. An additional 5,000 families are in the process of leaving some of Haiti’s most visible camps through the Haitian government’s “16 Neighborhoods, 6 Camps” (16/6) Program— an initiative supported by IOM and its partners. The 16/6 aims to relocate residents from 6 camps in metropolitan Port-au-Prince into 16 reconstructed neighborhoods.

Right: Champs de Mars. The National Palace, damaged by the 2010 earthquake, faces a public square hosting displaced persons.
Despite the various initiatives that address the precarious living conditions of camp-resident IDPs, housing needs greatly outnumber the achievements. Such a gap is unsustainable given the fact that those IDPs who remain in camps are among the country’s most vulnerable populations in terms of access to housing, risk of eviction and the hazards linked to over-crowded living conditions. Whereas the original distribution of camp resident IDPs showed approximately a 60%/40% distribution of homeowners-to-home renters, currently, the latter group represents almost 80%; conversely, there is a severe shortage of rental housing stock available in Haiti. Further contributing to the vulnerability of IDP camp residents is over-crowding and the accordant health and safety risks that follow. With a myriad risks and not enough solutions yet available, the profile of the camp-resident IDP has evolved over time towards increasing vulnerability. However, with the establishment of a new housing entity, L’Unité de Construction et Logement de Batiments Publics, the Government of Haiti has created much-welcome leadership and momentum in the effort to address the displacement crisis.

Despite signals of progress in ending displacement and providing housing solutions, post-earthquake vulnerability similarly increased due to the cholera epidemic, beginning in October 2010. Since the autumn of 2010, over half a million Haitians have been infected with the ailment and over 6,634 killed. IOM has and continues to work closely with the Ministry of Health and Population (MSPP) to administer treatment.
and undertake prevention efforts to keep infection rates low in IDP camps. However, despite the efforts by the Government and the international community to suppress infection rates--especially in the IDP camps--a spike in cholera cases nevertheless followed the onset of the rainy season in May 2011, and continues to claim lives. Both the tragedy and the hope of the cholera epidemic is that this disease is entirely preventable, with awareness-raising and minimal treatment. To prepare Haitians against a resurgence of this disease in the next rainy season, IOM-Haiti has mounted mass sensitization campaigns and trained two thousand health brigadiers in early detection and response. However, with a constrained national health system, the resurgence of cholera and other communicable diseases remains a critical challenge which requires reinforced awareness-raising and capacity-building for response and prevention measures.

On-going mass internal displacement compounded by a cholera epidemic and environmental vulnerability in a disaster prone region demonstrate that the post-earthquake crisis is not yet over. To the contrary, urgent needs persist and life-saving measures still comprise much of the response today. That said, the challenges that pre-date the earthquake similarly require redress in tandem with the provision of life-saving assistance. IOM-Haiti stands ready to accompany national authorities in responding to both the most urgent humanitarian needs as well as addressing the longer-term recovery requirements posed by the complexity of the post-earthquake situation.

Above: Port-au-Prince. IOM Staff conducts visit to a house chosen by camp resident under the Government of Haiti’s return programme. “16/6” This particular house was not approved because of protection concerns for the prospective female tenant. IOM helped her find another more suitable house and provided rental subsidies for a year.
Camp Management Operations

Living conditions continue to deteriorate in camps as funding diminishes, but successful methodologies for return have been developed that could address the problem if sufficient resources were made available.

Assembled and deployed shortly after the earthquake, IOM teams have been responsible for managing the largest number of camps in Haiti, acting as the provider of last resort for the Emergency Shelter and CCCM Cluster. Present in the twelve communes where camps are located, IOM has coordinated the overall response in camps by working in close partnership with camp management agencies, service providers, camp populations, and the Government of Haiti, while also engaging directly in the implementation of life-saving activities.

Above: Camp Vilam Beta, Port-au-Prince. Many camps are under pressure, as funds dry up for basic services like toilet desludging and tent repair.
Aiming at addressing the most urgent needs of the populations in camps, IOM teams have carried out daily camp management operations making sure that basic services were provided, including distribution of non-food items (NFIs); camp infrastructure improvement; referral of vulnerable cases to health and protection partners; support to statistical data collection; support to cholera response operations in camps; and emergency response (e.g. during Hurricane Tomas and several other storms).

While undertaking life-saving actions to alleviate the challenging situation of displaced Haitians since the onset of the emergency, efforts have also been oriented towards finding more dignified housing solutions for those left homeless by the earthquake, with the objective of limiting the lifespan of camps.
Return to Communities

Thus far, IOM has assisted 4,884 displaced Haitian families to voluntarily return to places where they lived before the earthquake: back to their houses if these were assessed as “safe” by the Government of Haiti; to transitional shelters built in their neighbourhoods or in other location of their preference, or to rented houses. Temporary solutions include the distribution of shelter materials and other items, transitional homes, transportation, and cash grants to pay the rent. All return operations have been implemented in collaboration with partners and the Government of Haiti.

IOM is currently supporting the “16 Neighbourhoods/6 Camps” program of the Government of Haiti, and other initiatives which will provide housing solutions to thousands of families camps to return to their neighbourhoods of origin.

Relocation

Relocation operations have taken place to move camp residents to safer sites when these become available. Especially during the first months of the emergency, these operations permitted to transfer displaced Haitian families from spontaneous encampments where they faced risks of flooding, evictions or lack of services, to planned sites that comply with minimum internationally-recognized standards.

As a result of these operations, 3,174 families have been relocated and 89 camps have been officially closed.

Defense From Forced Evictions

Forced evictions continue to put additional pressure on displaced people to leave the occupied plots. IOM estimates that around 100,000 homeless people (i.e. 1 of every 5) are living under threat of eviction.

Through its mobile teams deployed in camps, IOM intervenes in eviction cases to avoid forced expulsion of families from the camps and negotiates with the landowners to get time extension while exploring other sustainable accommodation solutions.
photo: the left hand side of the park is already empty, after relocation, the other half still awaits.

Above: Cartoonist Chevelin Pierre designed this IOM flyer for low-literacy beneficiaries. It explains through comics the importance of choosing a “Green house” as identified by the MTPTC (Ministere des Travaux Publics, Transports et Communications): over “Yellow” (still to be repaired) or; “Red houses” (slated for demolition).
Building Capacities in Camp Management

Shortly after the earthquake, IOM implemented a strategy to assist partners involved in camp coordination and camp management activities to increase the effectiveness of their actions in camps by providing them with relevant knowledge and diverse practical tools. Capacity building of national and local authorities and the provision of guidance and technical assistance to all humanitarian partners ensured that international standards were consistently applied in all the areas of intervention.

Building on IOM global experience, multiple training modules covering camp management topics were rapidly developed and started to be carried out in Haitian Creole (198 trainings), French (70 trainings) and English (4 trainings) in all the communes of intervention, reaching government officials (mainly from the Directorate of Civil Protection – DPC), camp committee members, military and police personnel of the United Nations Stabilization Mission in Haiti (MINUSTAH), and members of UN agencies, international organizations and NGOs.

Above: Morne Hercule, Port-au-Prince. IOM’s Emmanuel Gay leads the first ever community platform meeting.
The range of topics covered in the trainings include humanitarian principles and actors, coordination, registration and information management, site planning, water, sanitation and hygiene (WASH), prevention of Sex and Gender-based violence (SGBV), Protection, accessibility in camps for disabled people, care and maintenance in camps, camp closure, and conflict resolution.

Through the dissemination of guidelines, key messages and best practices, camp management partners have improved their skills to address the needs of the displaced population, increasing the impact of their actions and reducing the response gaps in displacement sites.

Above: Port-au-Prince. IOM’s Chiara Milano conducts a training session aimed at reinforcing IOM’s capacity to support beneficiaries.

6,867
people trained
In camp coordination and camp management

3,675
Camp committee members,

1,813
NGOs and IO staff members,

619
DPC Agents,

558
Government Officials

202
UN military/police personnel

272
Trainings delivered

224
delivered in Port-au-Prince

48
delivered in other earthquake-affected regions
Protecting the Most Vulnerable

The scale and nature of the emergency, combined with the pre-existing deep gender inequalities and the survival challenges faced by the people who lost their relatives, homes and property, have severely exposed an already vulnerable population to violence, human rights violations and abuses. IOM identified the protection of women, children, elderly people with special needs, and people with disabilities and health conditions as a priority within its relief strategy.

IOM protection activities have been carried out in camps providing immediate response to cases of SGBV, child protection concerns, forced evictions and other vulnerabilities faced by displaced populations. This was realized in close collaboration with UN actors (the Gender and Human Rights Units of MINUSTAH and UNPOL), with Government authorities and in particular the Ministry of Women’s Affairs and the with the Concertation Nationale de Lutte Contre la Violence Faite aux Femmes and other NGOs.

IOM played an important role in the development of procedures and strategies to ensure the mainstreaming of protection in emergency response operations, with a particular focus on women and girls, and also operated their direct implementation in camps. These efforts resulted in the possibility to collect disaggregated data for displaced women victims of violence in the national data collection tool on violence against women, as well as information on the location of assault. By obtaining comprehensive data on reported cases of violence against women and girls living in the camps, it was possible to carry out sites assessments and identify protection gaps to tailor the response mechanisms accordingly.

Concrete actions included community-based trainings on the prevention, referral and monitoring of SGBV cases. These capacity building initiatives have been targeting camp management officers, grassroots associations, local authorities, the Directorate of Civil Protection and camp-based protection committees (13 women committees, 9 youth committees and 66 security committees), among others, to strengthen coordination mechanisms within camps for the management of SGBV cases and awareness raising on causes and consequences of the acts of violence and existing services for the assistance of violence survivors.

Left: Croix-des-Bouquets. IOM’s Nathalie Adolphe conducts a monitoring visit in Camp Corail.
Case management of SGBV survivors has involved different levels of engagement by IOM protection teams, in close coordination with local and international partners, including case identification, interviewing, referral to the relevant bodies (such as medical assistance, police, counseling service), escorting of victims to and from service providers, relocation of survivors, monitoring and follow-up.

IOM has also been conducting in-depth assessments, including security assessments in coordination with UNPOL and the military component of MINUSTAH, to capture and address protection concerns prior to relocation operations, during threat of evictions, in anticipation of construction of transitional shelters and to produce risk maps of sites for UNPOL patrolling planning.

A very successful strategy to prevent SGBV incidents has been the provision of solar-powered lamps for the camps. Not only did this effort empower the local communities which actively participated in the planning and installation of the lamps, it also reinforced the synergy between local and international security actors under the guidance of IOM protection teams.
Displacement Tracking and Data Management

Since the immediate aftermath of the earthquake, IOM Haiti has played a leadership role among humanitarian partners in consolidating, analyzing and disseminating vital information about the displaced population and the spontaneous sites that were emerging to accommodate them.

Data management activities began in February 2010 to provide baseline data in support of the planning and implementation of targeted and effective programs in camps, and provided timely and accurate statistical information to the CCCM and other clusters. As efforts transitioned from emergency response towards return and reconstruction, data management activities adjusted accordingly and the focus narrowed to provide more specific information on population movement. In addition, initiatives were developed to gather data on the conditions of earthquake affected neighborhoods and the population within these areas, with a view to advise long-term strategies to find alternative housing solutions for the displaced eventually leading to the closure of settlements.

IOM’s displacement tracking operations required the development of tools and methodologies that were continuously revised to address the specific challenges posed by the sheer impact of the earthquake both in camps and communities, the urban context, the protracted nature of the displacement and the delays in reconstruction.

The Displacement Tracking Matrix (DTM), an institutional tool developed by IOM to gather data on camps and camp-like settings, was rolled out in Haiti in partnership with the Department of Civil Protection in an effort to provide up-to-date and regular information on the displaced population and conditions in sites. The DTM is a camp-based, rapid assessment that gathers general information and covers all identified sites through observation, physical counting and informant interview. It includes data on camp identification (name of site, GPS coordinates and location), classification of the site and ownership of the land, services and security provision, type and number of shelters, amount and place of origin of the camp-resident population.

![Sample KMZ file](image)

Above: Sample KMZ file. This is an extract from a map created by our Data Management Unit through using satellite imagery. It identifies IDP sites in a portion of the Delmas commune, and provides information on the population size living in the listed camps.
A separate but complementary tool now integrated to the DTM is registration, an operation that aims to establish detailed profiling of the displaced people at the individual and household level. Registration is carried out in target sites upon request of partners with planned interventions and collects demographic data, house ownership status, and post-earthquake condition of their previous accommodation.

Cross-checking of these data permits users to draw a profile of the current displaced population, which is composed of 78% tenants (compared to 60% recorded in March 2010) and 19% home owners (compared to an initial 34%). Of the latter group, 10% owns a house that cannot be repaired, and only 9% owns a house that can be repaired upon availability of resources. Regarding the occupation of public and private land, the DTM shows that there was a 42% decrease in the number of camps on private land compared to 18% decrease on public land between 2010 and 2011. This type of data and trend analyses is shared with partners through a dedicated website and regular reports, in compliance with IOM data protection policies to safeguard personal information.

One year after the earthquake, humanitarian actors faced significant delays in implementing reconstruction activities as a result of the unavailability of information on land tenure and population. Data from the national census were dating back to 2003 and the existing land tenure information is mostly out of date or was lost and/or compromised following the disaster.

To facilitate housing and neighborhood reconstruction, IOM information management teams mobilized to facilitate the production and accessibility of clear data on the status of houses, infrastructure and ownership of parcels of land and buildings in the earthquake affected area through the Over-Coming Land Tenure Barriers (OLTB) project.

**DTM offers:**

- **Overall data on displaced population living in identified sites gathered and made available for use as baseline data since July 2010.**
- **Detailed population profiles of all identified IDP sites available upon request.**
- **Data gathered, analyzed and made public through the website http://iomhaitidataportal.info and other formats (narrative reports, tabular reports, maps and other spatial data formats).**
Overcoming Land Tenure Barriers (OLTB)

Above: Tabarre. OLTB field teams plans operations using maps developed by IOM GIS experts.

In collaboration with the Government of Haiti and other reconstruction actors, IOM started in January 2011 a three-component methodology to address the significant obstacles posed by the absence of a land tenure system in Haiti. Adopting a community based approach called enumeration, the activities lead to the identification of land ownership and tenancy in earthquake affected areas within Port-Au-Prince. The first component consists in mapping the area through GIS data collection, leading to the creation of an inventory of all the buildings, and plots within a community. The second component is the household registration, whereby critical occupancy and demographic information required for reconstruction is gathered for each building. Community validation, then, ensures verification with the community that the information gathered through mapping and registration is accurate. In the event of a property dispute, the project provides legal mediation and referral services. Data gathered through this project is shared with reconstruction partners and public information activities ensure that the communities are informed and aware of the process.

Census of Earthquake Affected Neighborhoods and Population

In partnership with UNFPA, IOM is working to build the capacity of the Institut Haitien de Statistique et d’Informatique (IHSI) to carry-out a census and to make data on buildings and households in the earthquake-affected areas available to actors involved in the reconstruction efforts. To date, IOM has rehabilitated the IHSI Office by repairing the building, improving its internet and electric capacities and providing essential equipment such as computers and vehicles.

IOM has also facilitated the development of the census methodology and provided training for IHSI staff to ensure that they are qualified to carry out their activities in support of national reconstruction, including cartography. The production of clear maps of the affected areas, which is ongoing, will guide teams in data collection throughout 2012.

Over 9,000 buildings or plots mapped
Over 9,000 households associated with mapped buildings/plots

Data gathered is available in tabular reports, maps and spatial data files
Mediation and referral mechanisms to address land disputes are in place

IHSI staff trained to carry-out cartography activities
Institut Haitien de Statistique et d’Informatique building rehabilitated.
Census methodology created

80
**Distribution of Non-Food Items**

In the aftermath of the earthquake, and during the subsequent crises that hit Haiti in the two proceeding years, external support for logistics was a crucial aspect of humanitarian relief. The quick procurement and distribution of essential commodities and supplies such as blankets, water purification tablets (aquatabs), emergency shelter materials, basic hygiene materials, and kitchen utensils contributed to saving lives and maintaining the dignity of the people who had lost everything.

Building on its expertise and strong field presence, IOM was able to mobilise resources and start distributing these essential non-food items (NFIs) within 24 hours, reaching some of the most remote areas in Haiti. Items were prepositioned in 6 strategic areas, i.e. Gonaïves, Jacmel, Cap Haitian, Port de Paix, Les Cayes, and Petit Goave. This decentralized approach ensured that the people and resources in the recipient areas were not strained as a result of having to absorb a large influx of people in their areas. This also further minimized the likely occurrence of conflict that would have come as a result of competition for resources by the hosts and the displaced people. The availability of non-food items further facilitated recovery efforts through the support of the population that was migrating to pre-displacement areas.

The organization was also able to establish and maintain a logistics pipeline that provided cargo consignment, transportation and warehousing for NFIs. The significance of this supply artery was seen through the mobilization of in-kind contributions from various donors, and provision of logistic support for humanitarian partners.

To enhance the effective and timely delivery of assistance and minimize the risk of duplication, IOM maintained close working relationships with national authorities, partner agencies and military actors throughout the emergency response.

![Above: Bolosse, Port-au-Prince. IOM distributes tarpaulins, jerrycans and hygiene kits to a community of 1,000 families displaced by the earthquake.](image)

**1,112,326** families assisted

**3,209,164** non-food items distributed for earthquake response

**40,027,571** non-food items distributed for cholera mitigation

**107,547** non-food items distributed for hurricane response

**432** partner organizations assisted through the logistics pipeline

**6** logistics hubs established in different locations
Water, Sanitation and Hygiene (WASH)

The right to water and sanitation is a basic human right, and access to those services is critical after a natural disaster. In close collaboration with Haiti’s Direction National de l’Eau Potable et l’Assainissement (DINEPA), IOM provides water and sanitation to thousands of persons displaced by the earthquake in hard to reach areas, public spaces and areas not suitable for any kind of construction in Port-au-Prince and in the regions of Jacmel, Leogane, Gressier, Petit Goâve and Grand Goâve. Two years after the quake, the provision of a minimum level of those basic services is still necessary for those people still living in camps, for whom no housing solution has yet been found.

Maintenance and the proper decommissioning of WASH infrastructures after camp closure are of utmost importance to avoid public health risks through environmental contamination. For this reason, the ongoing financial, technical and capacity-building support to camp committees that are managing those infrastructures must be ensured until the final closure of camps in Haiti.

Reaching out to over 100 camps, IOM constructed emergency toilets with attached hand-washing stations and rainwater collection serving approximately 32,400 families; and built 48 temporary water points, providing for the daily drinking needs of up to 192,000 persons. To foster the sustainability of IOM activities, as well as to promote the sense of ownership of camp residents, groups of volunteers were trained and equipped for the maintenance of emergency infrastructures.

To limit the risk of water and sanitation borne diseases in the camps, mitigation works were implemented as part of vector control activities. Alongside these structural interventions, several initiatives looked into raising awareness to address pressing health and environmental concerns. 117 community action groups were set-up and trained to carry out regular hygiene promotion activities and to train additional promoters. Several camps were equipped with solid waste skips, and regular collection services and recycling campaigns were started in camp adjacent neighborhoods for the collection of plastic bottles, which were then sold to a private company by the displaced persons directly.

While maintaining services in the camps, IOM intervenes in neighborhoods where displaced populations progressively find housing solutions but access to potable water and sanitation is insufficient. Building on a highly participative approach, the upgrade of infrastructures in return and relocation areas also serve the purpose of mitigating conflict, stabilizing communities and enhancing their resilience to disasters through the prevention of floods and other environmental risks.

Left: Croix-des-Bouquets. Sanitation facilities where none existed before; IOM-built latrines block in a community of return.
In 2011, 175 community toilets were constructed in densely populated areas where space limitations do not permit for the construction of family toilets, and handed them over to community based organizations to provide sustainable sanitation solutions to beneficiaries. An additional 320 family toilets were constructed to complement T-Shelters, with another 1,600 currently under construction.

With a view to facilitating access to water in neighborhoods, the WASH program also focuses on the repairs of hand pumps and drilling of wells. A special focus on solid waste management activities succeeds in adding value to the product chain (refuse – reuse – recycle), and includes special livelihoods trainings on how to recycle valuables and use materials considered waste to transform them into new useable products.

Water and sanitation related diseases are amongst the most preventable, if basic rules of hygiene are complied with. Through the provision of the necessary hardware, such as toilets, hand washing stations, potable water and capacity-building in positive hygiene behavior and rules, the displaced people are assisted in camps as well as throughout the return process, to reduce their vulnerability to public health risks, acutely prevalent in dense camps and neighborhoods lacking basic sanitation services.

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<th>Statistic</th>
<th>Details</th>
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<td>30 IDP camps covered with solid waste manage-</td>
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<td>45,800 beneficiaries of the return and relocation process having access to water and improved sanitation infrastructures</td>
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<td>117 community based hygiene promotion groups</td>
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<td>trained and deployed in camps and neighborhoods</td>
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<td>648 emergency toilets constructed and maintained in camps</td>
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<td>3,000 gallons of drinking water delivered</td>
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Healthcare

The earthquake destroyed health facilities, and overall severely damaged an already fragile and under-resourced health system. This has significantly increased physical, mental and social health vulnerabilities for the survivors and the host population.

The damages to the health system, coupled with the diminishing presence of international partners providing health care, have created an environment of increased health risks for the population living within and outside of camps. Those who remain in a condition of displacement are perhaps the most vulnerable. For them, incurring an accident or having to pay for medical care constitutes a significant obstacle to finding a durable housing solution out of camps and back to neighborhoods. There is a critical need to address the health and psychosocial barriers to the return processes and to provide specific assistance to the most vulnerable.

In the immediate aftermath of the disaster, IOM health teams intervened with actions aiming to decongest hospitals, link earthquake survivors (e.g. disabled persons, elderly, women and children) with health services. Through coordination with national and international health partners, coordinated referrals, assisted transfer, directed transport and accompanied discharge, 2,431 patients and family members have been assisted with medical care, thus far.

Above: Fond Parisien. Health assessment following discharge from hospital of earthquake survivors.
Moving towards the recovery phase, IOM works to support vulnerable people living in 40 priority camps to help them identify and overcome the many barriers to accessing health care. A number of concurring factors prevent people from accessing health care services in the post-earthquake period, adding to an already poorly functioning health system, limited mobility, physical damage of health clinics, lack of knowledge on services and their location, lack of economic means for transportation and healthcare fees. If not addressed, these factors can interfere the sustainability of the return and resettlement strategy.

To mitigate this complex situation, IOM has trained 137 community health agents living in camps on preventive health education topics, including tuberculosis, HIV, diarrheal diseases, maternal and child health and vector borne diseases. The community health agents serve as the first source of health information for displaced people providing information on how to access basic health care services. In coordination with partners, IOM conducts health promotion activities, regular home visits to families, registration of pregnant women and referral to nearby health facilities for antenatal care, identification of tuberculosis cases, and referrals of medical cases for specialized care. In addition to services in camps, families in need are also assisted during and after the return and relocation processes, through direct support on health education and information, medical service, referrals and transportation assistance.

In the past two years, IOM health teams have reached 218,000 persons, responding to subsequent crises and contributing to bridging critical gaps in public health.

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**Left: Port-au-Prince. Transitional pediatric wards built by IOM at the University General Hospital.**

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**Table: Key Achievements**

- **2,500** Assisted discharge, return and referral (patients and family escort)
- **131,781** Total number of individuals in IDP camps reached with health education activities
- **137** Trained Community Health Agents
- **140** Trained “Matrones” / Birth Attendants in the IDP camps
- **74,711** Home visits
- **314** Pregnant women referred with complications
- **300** TB suspected cases referred
**Psychosocial Support**

Individual and collective feelings of loss, grief, non-clinical depression, withdrawal, denial, guilt towards those who died, confusion, anxiety about the future and anger characterize the life of many Haitians today as a result of the quake and its effects. In several cases the feelings of fear and anguish and the symptoms of distress represent concrete and significant barriers for families to leave camps and return home, even when this option is available to them.

Within the framework of the recovery efforts to provide return, relocation, and resettlement assistance to people living in camps, IOM pays special attention to the need to address the psychological, social and anthropological factors related to these rehabilitation processes.

IOM started the first emergency psychosocial assistance activities in priority locations in Port-au-Prince in February 2010 to provide psychosocial support and psychosocially aware humanitarian assistance for earthquake-affected victims living in camps. Since July 2011 the activities also focus on the victims who are leaving camps and moving to communities.

IOM psychosocial activities focus on three components. The first is support to national coordination. In tandem with our humanitarian partners, available mental health services are mapped, and referral mechanisms developed. Matrices of the actor mapping and referral mechanisms are made available to partners and beneficiaries in need of specialized psychological and psychiatric services. In addition, joint key messages have been developed for the community, and educators and religious leaders. Furthermore, trainings targeting humanitarian workers from local and international organizations on psychosocial matters during the provision of humanitarian assistance are also organized.

*Above: Cité Soleil. Volunteers supported by IOM and CARICOM at the “Kool Haiti” community center.*
The second component is direct psychosocial support to the population. To respond to the immediate needs after the quake, IOM has established six psychosocial mobile teams providing psychosocial first aid, counseling, support groups and recreational activities to the affected population. The multi-disciplinary teams (composed of psychologists, social workers, artistic animators, educators and team leaders) are selected from the graduates of the State University of Haiti, then trained by IOM psychosocial experts and given technical oversight by their university supervisors. The psychosocial teams’ activities include community messaging, artistic mediation activities, recreational sessions, family support, and counseling services. IOM psychosocial teams also incorporate Ministry of Public Health messages, hand-washing demonstrations and stress management as part of their regular activities. Counseling sessions and psychological first aid sessions are being organized with displaced people who have lost family members or relatives in the emergency.

The third component of the psychosocial program is the support to the professionals. Specialized trainings are organized in coordination with the Ministry of Health and Population and conducted by international psychosocial experts for mental health professionals, psychology students and IOM psychosocial teams.

Above: Camp children relieve their anxieties through artistic expression.

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<th>Priority camps (including 2 psychiatric facilities) representing 150,000 IDPs have benefited from Psychosocial support sessions and community mobilization events</th>
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<td><strong>Over 21,200</strong></td>
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<td>individuals have benefited from individual counseling or family support.</td>
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<th>Humanitarian workers and 100 psychology students have been trained on psychosocial support in emergency settings and psychosocially aware provision of humanitarian services</th>
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<td><strong>Over 1,500</strong></td>
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<th>Large scale inter-agency psychosocial needs assessment has been carried out by IOM, involving 18 organizations and 950 respondents. The report was published and disseminated, and serves to inform on-going and future strategies for psychosocial initiatives.</th>
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**Cholera Response**

At the end of October 2010, a cholera epidemic was officially declared by the Ministry of Health. To date, cholera claimed the lives of 6,634 people and 573,000 cholera cases have been reported.

By the end of 2011, partners providing health services have significantly withdrawn from camps, causing the deterioration of living conditions in the sites and leaving critical gaps in the response to the cholera epidemic. Despite a decrease in cholera cases since the onset of the disease, waves of the epidemic are likely to continue during the next few years before becoming endemic at a lower stable rate. With under-resourced and overstretched national health services, continued support to national efforts to prevent cholera is still necessary, as well as an enhancement of response capacities in the camps and in vulnerable communities.

IOM contributed to the reduction of the mortality and morbidity of the cholera epidemic in Haiti through partnering with the Government of Haiti, local and international actors in a range of cholera response initiatives from the first days of the outbreak to present.

With the concerted efforts of IOM specialized health, WASH and camp management teams, Oral Rehydration Posts were established in 250 camps, in vulnerable rural communities and at key border crossing points, providing first line treatment to 25,000 patients showing symptoms of cholera before their transportation to Cholera Treatment Facilities. 2,000 brigadiers in camps were trained on community based cholera prevention and first line treatment.

Regular hand washing training sessions and the construction of simple hand-washing facilities are key in preventing further spread of Cholera. In addition, hygiene education and sensitization campaigns carried out across the country reached nearly 1 million people.

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| >200 | ORPs established |
| >2000 | Brigadiers trained |
| >25,000 | Patients seen |
| >800,000 | Persons reached with sensitization |
| 85 | IDP camps supported with sanitation |
| 25 | IDP camps supported with water |
| 500,000 | Print messages delivered |
| 51 radio stations | 300 tap-taps |
| Radio program dissemination | 1,086 |
| Camp management cholera activities (e.g. distributions, supplies) | 6 |
| Additional warehouses established | 31,587,906 |
| Aquatabs distributed | 8,359,529 |
| other items Cholera response items distributed | |

Above: Camp Capva, Cité Soleil. One of the Oral Rehydration Post established by IOM in camps, vulnerable rural communities and border crossings.
IOM mobilized its mass communications teams and used various multimedia technologies to spread messages on cholera prevention and treatment throughout camps and the country using comic-based newspaper journals (including the Chimen Lakay), SMS, local radio stations, film screenings evenings, carnival floats, and an innovative “Radyo Tap-Tap” in-trip edu-tainment program.

Above: Terre Neuve. An IOM-trained health worker in the remote Terre Neuve mountainous area holds an anti-cholera flyer.

**Cholera Logistics Pipeline**

To respond to the outbreak of cholera, IOM developed an effective and timely logistics pipeline that provided cargo consignment, transportation, and warehousing for NFIs specifically dedicated to cholera response efforts. The pipeline mobilized in-kind contributions from donors and provided logistic support for humanitarian partners. The pipeline was established in six different locations, or logistics hubs, throughout Haiti in order to accommodate and disperse NFIs for cholera prevention and treatment to partners and at-risk areas. For the cholera response, IOM’s warehouse cumulative storage capacity reached 8,299 square meters. This was a significant increase as compared to the storage area of 2,500 square meters in the warehouse in Port-au-Prince during the earthquake response. Each of the warehouses also maintained a standard capacity of transport machinery that could be used to deploy NFIs to the needed locations. The cumulative NFI hauling capacity for IOM was 731.4 metric tons.

The combination of storage space, hauling capacity and availability of logistics personnel in all the hubs enabled IOM to distribute 40,027,571 NFIs throughout Haiti for cholera response, through a network of 137 partner organizations. The items included 31,587,906 water purification tablets, 1,417,281 bars of soap, 20,266 gallons of chlorine, and 5,367,715 oral rehydration salts.

Throughout this process, IOM has worked in close coordination with the Ministry of Health, WASH cluster, and Emergency Shelter and CCCM cluster (for camp-related distributions) to identify priority areas and assess the NFI needs of vulnerable populations. In this way, IOM has worked to support the partners involved in the response to the epidemic through the provision of essential NFIs for treating the symptoms as soon as possible, and establishing massive awareness campaigns on water, sanitation, and hygiene.

Above: Map shows IOM warehouses across Haiti.
Awareness Saves Lives

Magalie, a mother of three children, lives in the Place Fierte camp in Cite Soleil. During the height of the Cholera epidemic, on a Saturday night, her 7 years old daughter fell ill with symptoms of vomiting and diarrhea.

“I felt that my daughter was dying. My grandmother suggested she might have a mystical disease, but I remembered about what [sic] the IOM brigadier told me about cholera during the visit to my tent and I gave my daughter 2 Oral Rehydration Salt that he had left me in case someone got sick. I decided that I had to bring her to an Oral Rehydration Point. It was almost midnight. They kept hydrating her and monitoring her. But after 30 minutes they decided to take her to the Cholera Treatment Centre at CHOSCAL hospital. I was afraid to go there, since I had only five gourdes in my pocket, but the brigadiers told me that everything was free. They came with us to the centre and my little girl was hospitalized for 3 days. When I came back to my home, my family informed me that a brigadier had come and made the decontamination [sic]. We received several visits from them since my daughter came back home. I will never forget the support I received from the IOM team. Thanks to them, my daughter is alive”.

Above: Morne Hercule, Port-au-Prince. Children at IOM open air cinema to see cholera prevention cartoon.
Above: IOM’s rapid response to the cholera outbreak was reinforced with cartoon messaging. Chimen Lakay—the way home—is drawn by the Haitian artist Chevelin Pierre. This issue includes instructions on how to make oral solution for cholera victims.
**Shelter**

Over 114,000 tent materials and 100,000 transitional shelters have been provided for the displaced population from Haiti in 2010-2011 by humanitarian actors including IOM. Efforts to provide permanent solutions, including house repairs and house construction are progressing, albeit slowly. IOM’s latest available statistics show that 127,658 families still remain in IDP camps across the earthquake affected area. According to an estimation based on current commitments, there will be a gap of 74,405 houses for camp-based families by the end of 2012. It means an estimated 312,501 people will remain in camps through 2012 if no additional housing solution is found. Transitional shelter remains a viable option to temporarily resolve the protracted displacement in 2012.

As of December 2011, IOM has delivered 10,428 transitional shelters (T-shelter) to displaced and homeless families. Along with the delivery of shelter itself, IOM supports the rehabilitation of affected communities through rubble removal from roads and plots, construction of retaining walls, drainage canals and footpaths, and WASH support, which creates a safer environment to live. To facilitate people rebuilding their lives, Non-food Items are distributed; these NFIs include kitchen and hygiene kits, garden and cleaning tools, and solar lamps.

A standard IOM T-shelter (18m²) uses a concrete base, a timber or metal frame, plywood or cement board walls and metal roofing sheets.

IOM T-shelters are mostly erected in affected neighborhoods from where beneficiaries originate; some shelters have been built on planned sites provided by the government. IOM T-shelter assistance have reached an estimated 43,797 people in 10 communes in Haiti, including Croix-des-Bouquets, Port-au-Prince, Petion-Ville, Delmas, Leogane, Petit-Goave, Grand-Goave, Jacmel, Cayes-Jacmel, and Bainet.

One of the major obstacles in providing housing solutions in post-earthquake Haiti is limited availability of land and complex land tenure. To mitigate land disputes and to enable swift provision of a shelter solution, IOM legal experts conduct land tenure investigations and facilitate negotiations between beneficiaries and landowners as needed.

In addition to the 10,428 T-shelters built, IOM has also constructed 36 permanent shelters in les Cayes in support of the Government of Haiti’s social housing initiative.
Monitoring visits confirm that 98.3% shelters are occupied by intended beneficiaries. The high occupancy rates suggest that overall quality of the services provided, including shelter, information outreach, and NFI provision are satisfactory.

Transitional shelter solutions have provided 10,428 households with a decent place to live, and allow them to focus on rebuilding their livelihoods in a difficult situation, without wondering if they will have a roof over their head at the end of the day. The assistance prioritized more vulnerable households including those with no income, the elderly, families caring for disabled/chronically ill, and pregnant women. IOM T-shelters are resistant to strong winds and are suitable for hot climates, thus ensuring that beneficiaries are protected from environmental hazards relevant to Haiti. In January 2012, IOM visited T-shelters constructed in May-June 2010 to observe the condition of the structure. The monitoring visit confirmed that despite having been exposed to two hurricane seasons, all the T-shelters were structurally in good condition, and likely to survive beyond their minimum lifespan of three years.

T-shelters were built by local small and medium sized firms, thus contributing to job creation and strengthened capacity of local contraction workers through knowledge transfer.

Above: Mangeois, Paco. An elderly Haitian earthquake victim in front of her IOM-built transitional shelter.
Site Planning

A post earthquake bird’s eye view of Port-au-Prince and other affected regions show an altered urban landscape. A carpet of white and blue tent cities made up of tarpaulins, tell the story of the comprehensive displacement crisis following the earthquake. Communities, infrastructure, residential and commercial buildings and institutions, were severely damaged or destroyed during the earthquake. For lack of other housing solutions, families settled in any open spaces available. Spontaneous IDP camps rapidly emerged on previously unoccupied land in public spaces, industrial sites, roadsides, sports arenas, or on steep hill sides. This land is in many cases unsuitable for human habitation. As a consequence, displaced populations are often vulnerable to natural hazards and disasters, security and eviction threats, and live under challenging sanitation conditions.

Due to an extensive urban growth in the last three decades, the state of the urban infrastructure and number of dwellings in metropolitan areas is insufficient to meet the needs of the Haitian population even preceding the earthquake. Humanitarian reconstruction efforts strive to address more sustainable return and relocation alternatives for displaced populations by providing reconstruction support both in new and existing communities.

IOM Haiti’s Site Planning team has engaged in planning and implementation of emergency and transitional relocation settlements, urban planning and reconstruction in communities, supporting durable relocation and return solutions to IDPs living in spontaneous camps, since the earthquake. The team also provides technical assistance to partners in conducting land suitability assessments, physical hazard assessments and mitigation works in IDP camps, in Port au Prince and surrounding affected communes.

The team consists of architects and engineers, a GIS analyst, a land surveyor, community mobilizers, and legal personnel specialized in land tenure issues.

New planned relocation settlements

In collaboration with local authorities and among others WASH and Shelter partners, IOM has developed 5 new planned relocations settlements. This has allowed more than 11,400 individuals to relocate from camps to new communities planned according to international humanitarian minimum standards.

Above: Croix-des-Bouquets. The evolution of the planned camp, Santo 17, for earthquake victims. The settlement now accommodates 380 families.
Mitigation Task Force - Risk reduction in camps

IOM has been participating in the Mitigation Task Force (MTF), an initiative established to determine camp based environmental hazards and link engineering assessments with organizations to undertake mitigation works. This was a joint operation between IOM and UNOPS, and the assessments are conducted by engineers from both organizations. A weekly meeting with potential responding organizations is chaired by OCHA. Under this constellation, the MTF conducted 248 assessments between May and October 2010.

Responding to reconstruction needs in communities

A factor slowing down the implementation of new relocation settlements over the two last years has been limited access to suitable land to develop. As a result, IOM has included urban planning and site preparations support to facilitate reconstruction in existing communities.

Community Return Program

To further facilitate the safe and permanent return of residents to pre-earthquake places of origin, the Communities Return Program (CRP) was established to provide reconstruction assistance where debris removal and site preparations were too demanding for individual households to undertake. A pilot project is underway in Morne Hercule community (Mon Ekil in Creole), a particularly badly damaged neighborhood in the Port-au-Prince metropolitan area where residents live in nearby camps. 80% of the houses either collapsed or are not safe to inhabit. A comprehensive neighborhood investigation has been prepared—including enumeration—to facilitate reconstruction and shelter implementation. Pre-earthquake residents have been registered according to registrations methods developed by IOM’s Registration unit. Arial maps and land surveys of all land parcels in Morne Hercule precisely document the delimitation and legal status of damaged plots and buildings. Detailed reconstruction needs assessment have been conducted of all land parcels in the community, identifying debris removal, improvement of access, retaining wall, and WASH needs. The result is a precise analysis of all necessary reconstruction needs to rebuild a safe community. The information collected is used to generate a (needs-based) community plan which is used a decision making tool to determine response priorities.

To further improve the limited accessibility to the community and to prepare and stabilize plots for housing reconstruction, IOM is reconstructing pathways and installing retaining walls. Morne Hercule is now one of the communities that will undergo extensive reconstruction under the Government led 16/6 project.
As Haiti moves from emergency to recovery, it is essential that Haitians be given the tools to carry on. In a country with high illiteracy rates, communications is a vital part of that handover exercise. IOM Haiti has developed a series of products to communicate effectively with the population. They include a comics-based newspaper, Chimen Lakay, pre-recorded programs played during long journeys on public transport and now a high-quality TV sitcom called Tap Tap, made by Haitians. Non-commercial public media that stresses civic responsibility and education is a vital part of any strategy to reduce aid dependency in Haiti.

To communicate with 1.5 million displaced Haitians, IOM built information kiosks with letter-boxes to encourage two way communication. The response was overwhelming - over 3,000 letters - seeking housing, jobs and education. In parallel IOM developed a Creole language comics-based newspaper (Chimen Lakay), which, at its peak, circulated 400,000 copies around the country. Chimen Lakay has a sophisticated crowd sourcing mechanism and readers are offered a prize for calling in with answers to questions; this provides donors with evidence of distribution, as calls are geo-located.

A parallel program targets the tens of thousands of Haitians traveling long and short distances on the brightly painted Tap Taps. These radio skits are recorded in a studio and aimed at passing on precise messages, whether on cholera-prevention, domestic violence, or children’s rights. Radio Tap Tap is also supported by the call center and incentives are provided for listeners to call in.

The Government of Haiti’s return program “16/6” saw IOM develop new tools to encourage a cooperative spirit to rebuild the country.
The Tap Tap sitcom and short videos made by IOM staff target people in camps and in communities who will benefit from reconstruction. Open aid screenings bring both entertainment and key information to areas still ravaged by the earthquake.

Finally, as part of this series of activities, IOM has developed effective flyers which can be adjusted to circumstances. With step-by-step drawings targeting low literacy Haitians living in camps and communities.

By focusing our communications activities on prevention and protection and using Creole language, low literacy publications and media, we aim to inform highly vulnerable populations. By demonstrating the reach of this form of media we also reinforce the need to communicate directly with the population using two-way flows. The tools used to underpin communications – the call center and crowd sourcing of responses, provides key indicators on areas of important humanitarian need and vulnerability.

### A Sitcom to Lift Haiti’s Spirits

Made by the talented young Haitian director Zaka, with IOM’s support and funded by the government’s relocation program. Tap Tap is a sitcom that focuses on the lives of hard-working Haitians.

The goal of the Tap Tap series is to represent real-life interactions in which Haitians can recognize themselves and their challenges, and celebrate their vibrant culture.

The tap tap is a symbol for Haitian movement and daily life; it is a vehicle designed with Haitian ingenuity, resourcefulness and artisanal aesthetic. In the movies, the tap tap winds its way through areas devastated by the earthquake, past ravines and hillsides with camps clinging to the sides, through wealthier areas and the very heart of the capital. We follow the adventures of its owner-driver Mercidieu, his Facebook-loving son and the manager who endured the hardship of being a restavek or child domestic worker life.

See the film at www.facebook.com/TapTapHaiti
Livelihoods and Support to IDPs Host Communities

After the earthquake, as many as 600,000 of those displaced by the destruction of their homes went to stay with friends and family in those regions not directly affected. While Haitians have a strong welcoming tradition, this influx of additional people strained local resources. By December 2010, an estimated 150,000 IDPs remained outside the earthquake-affected areas. Through targeted programming aiming at stabilizing communities hosting displaced Haitians, IOM worked with displaced people, host families, host community members and local government to address the needs of earthquake survivors and host communities alike.

While the international community has been able to address some of the needs of just over half of the displaced population in the provinces, many households and host communities have not recovered to the same levels of income as before the earthquake. IOM provides assistance to persons who fled the earthquake areas and their host families in the North, South and Artibonite Departments. Working closely with local authorities and community members to identify the most urgent needs, IOM engages in a number of projects to create short-term jobs and income-generating opportunities for displaced persons and their hosts, to improve public infrastructure in the area of agriculture, education, water systems and environment, and to restore the minimum income levels of those who have lost everything.
Working together with host communities to build new school buildings and improve access to clean water, displaced people begin the process of integrating into their new community. Helene Eliston, who relocated to Artibonite Department, says “Before working on the project, I didn’t know many people here. Now people invite me over to their house.”

Traditional hand-dug irrigation canals are upgraded to concrete, allowing local farmers to double their harvest and sell agricultural surpluses; new drainage canals are built to avoid flooding during the rainy season and damage to housing and roads; schools are expanded with additional classrooms and supplied with additional benches to receive approximately 150 additional children.

For IDP households that lost most of their belongings in the earthquake, the distribution of non-perishable items improves their living conditions in their new homes. Sonson Prival, who resettled in the South Department, chose a table and chairs for his family’s NFI kit, “Now, I am happy. Now, I can welcome people to my home.”

By creating income opportunities, improving the productivity in the agriculture sector, increasing the reception capacity of schools, and providing access to clean water, these initiatives are critical in helping to sustaining the communities in order to receive new arrivals by alleviating the pressure placed on their limited resources.

Above: Les Cayes. A micro-canal to help share water between farmers has an immediate impact on production.

IDP households received non-food item support to improve their living conditions

Over 8,500

IDPs participated in short-term labor projects to improve their host community

Over 14,000

host family and host community members participated in short term labor projects
Disaster Risk Reduction and Preparedness

Haiti has repeatedly experienced natural disasters which cost the lives of thousands and caused severe damage to housing, infrastructure, agriculture and livelihoods. The situation in the country was further exacerbated by the January 2010 earthquake.

Well before the destruction brought by the quake, the main reasons for this level of vulnerability are the lack of tree cover in the highly mountainous areas due to extensive deforestation; limited state capacity in terms of disaster planning and response; inadequate infrastructure; lack of knowledge about natural disaster risk management among the population; drainage canals blocked by garbage; and a serious lack of evacuation shelter space.

For Haiti to emerge from the earthquake as a better constructed, better managed and safer country for its population, addressing this extreme vulnerability to natural disasters must be considered as prerequisite.

IOM’s involvement in Disaster Risk Reduction efforts throughout the last two years encompassed a wide variety of activities that could be divided into three main interrelated areas: i) evacuation management; ii) community level disaster preparedness; and, iii) flood prevention and control. The activities in these areas covered the departments of Port-au-Prince, St Marc, Gonaives, Port-de-Paix, Jacmel, Leogane, Petit-Gôave, Cap Haitian and Les Cayes, and were implemented in close collaboration with the Ministry of Interior (which includes DPC), the Ministry of Environment, the Ministry of Agriculture, the Ministry of Public Works, local authorities (at departmental, commune and sub-commune levels) and Haitian civil society.

During 2010 and 2011, IOM constructed ten new evacuation shelters and rehabilitated 19 others. Because physical infrastructure is but one component of evacuation management and in order to ensure safe, orderly and well-managed evacuations in case of emergency, IOM and the Thematic Committee on Evacuation Shelter Management (the national government policy forum for evacuations, of which IOM is a key member) created a national policy on short-term evacuations, covering preparation, pre-evacuation, evacuation and post-evacuation stages. The state officially adopted the “Guide de Gestion des sites et abris d’évacuation” on 16 December 2011.

Above: Croix-des-Bouquets. Hurricane Tomas approaches camp Corail, near Port-au-Prince. Haiti is particularly vulnerable to hurricanes and, because of deforestation, to mud-slides and flooding.
In a joint activity with the Department of Civil Protection (DPC), the World Bank and the Government of Haiti, 500 potential evacuation sites in Port-au-Prince have been evaluated to determine structural stability for use as evacuation shelters. This is considered to be of particular importance due to concerns over structural stability following the earthquake. Additional activities in this sense include shelter management training for Civil Protection and policy workshops among others.

At the community-level, and in coordination with the Red Cross/Red Crescent Movement and DPC, IOM trained and equipped 81 disaster management committees in camps in the earthquake affected zone. This methodology, as well as IOM’s community disaster preparedness activities, includes training in basic first aid; hazard, risk and evacuation route identification (including community risk mapping); health and hygiene in emergencies; establishment of local-level early warning systems; community mitigation and drainage; sensitization of the population through a variety of media and other activities relevant to emergency preparedness and response in the Haiti context.

In terms of flood prevention and control, IOM programming contributes to the process of minimizing physical risks faced by the population. This includes improved drainage in lower-lying areas (construction, rehabilitation and debris removal/cleaning) and watershed management in the mountains above in order to reduce the amount of water which descends into populated areas in the first place. This mixed approach has already proven successful in reducing flooding and surface run-off in the areas where it has been implemented (including certain sections of Artibonite, Martissant and Petit-Goâve). Considering, however, the scope and severity of the problem (98% deforestation, grossly inadequate water management infrastructure, for example) an immense amount of work remains to be done to reduce these risks to acceptable levels in vulnerable areas of Haiti.

Below and right: Petit Goâve. Watershed management activities in the mountains, to reduce the risk of flooding.

81 disaster management committees trained and equipped.

28 evacuation shelters built or rehabilitated.

1,382,725 trees planted

155,159 meters of drainage canals constructed or rehabilitated
Above: Issue 5 of the Chimen Lakay on rainy and cyclonic season emergency preparedness.
Community Stabilization and Decentralization

Haiti’s longstanding developmental problems include crumbling infrastructure, unplanned urbanization, underdeveloped agriculture, high unemployment, poor access to education, lack of investment, weak state institutions and severe environmental degradation. Moreover, Haiti has long struggled with destabilizing elements that have frustrated efforts to address these structural problems, including crippling gang violence, political instability, and incapacity to manage the risks of regular rainy and hurricane seasons. Unemployment rate was 41% as of 2010, and underemployment is pervasive. 80% of the population lives below the poverty level, with 60% living in abject poverty.

IOM’s community stabilization and decentralization programming works with communities in six regions in Haiti to identify small-scale, high impact projects realizable by the community. The program facilitates cooperation between government and marginalized communities by creating opportunities for dialogue and collaboration around the rehabilitation of public infrastructure. Schools, small roads, canals, bridges, public squares, water systems, peri-urban agriculture and irrigation infrastructure improvement are part of a larger campaign to promote positive civic participation, community cohesion and reconciliation. These activities are designed to highlight the importance of community commitment and involvement in the peace, reconciliation and development process. These activities have reduced conflict and promoted sustainable economic development. Thousands of short-term jobs have been created via projects implemented by hundreds of small, local contractors.

In response to the earthquake, the community stabilization program—which existed prior to the quake—immediately mobilized to address quake-damaged infrastructure and create thousands of short-term jobs both in the affected area and for thousands of people displaced to the provinces. In the West department this included clearing rubble from 50 earthquake-damaged schools in the Port-au-Prince metropolitan area in just over five weeks, and restoring water supply to 150,000 people. Coordinating with the Ministry of Education to prioritize schools based on enrollment, IOM began clearing the first school sites on 8 February 2010. A total volume of 184,319 cubic meters of rubble was cleared from public and congregational school sites through this partnership. Reopening schools was a fundamental step in the city’s recovery.

In the South, North and Artibonite, the program rapidly expanded its large scale high labor intensity projects to provide thousands of short-term jobs to displaced people and those sheltering themselves. These projects not only provided jobs and injected cash into local economies—assisting people to meet their daily needs—it also enabled displaced people to invest in small businesses and settle in new areas. In the process, these large scale employment projects built durable, productive infrastructure such as soil conservation structures, irrigation canals, drainage systems, and farm-to-market roads that will continue to yield developmental benefits for years to come.
The focus on durable infrastructure development, integrated rural programming, and the stabilizing effect of the community empowerment approach, have generated outstanding results for social and economic development. Income and commerce in both rural and urban targeted communities have grown. Community associations have been strengthened through trainings in conflict resolution, transparency and management. Local contractors’ capacity has been developed through thousands of small to medium sized construction projects. The provision of basic services in some of the nation’s most destitute areas has been greatly improved.

Acutely vulnerable populations such as people living with HIV/AIDS and physical disabilities have also been supported through opportunities to work on community projects. These provide short term income as well as assist in destigmatization and building self-esteem by enabling these traditionally marginalized groups to contribute to high priority community impact projects and integrate into society.

Increasing rural incomes through basic agricultural investments (irrigation, farm to market roads, processing and storage facilities) has improved food security, made households more resilient, and helped slow the exodus to the city and across borders. These infrastructural investments provide protection against extreme weather: irrigation canals provide insurance against droughts and floods; road and bridge reinforcements reduce the risk of losses and isolation from floods. Spring cappings and wells reduce the risk of water borne illnesses. Drainage canals mitigate losses and disease by managing storm water run-off. Reforestation and terracing at upper elevations reduce the frequency and intensity of flooding and mudslides, and reduces local droughts by recharging both groundwater and surface water.
Counter Trafficking

Trafficking in persons in Haiti is unique compared to the forms the phenomenon takes in neighboring countries. A local system of child domestic servitude, known as the restavek, is endemic in Haiti. Estimates based on field work indicate that about 250,000 children in Haiti are currently being exploited as domestic servants. In the wake of the 2010 earthquake newly orphaned children dramatically increased the pool of individuals vulnerable to trafficking. Furthermore, many children cross illegally into the Dominican Republic where they are exploited sexually or serve as beggars. Haiti is also a destination for hundreds of Dominican commercial sex workers, many of which are recruited based on deceptive and/or coercive promises. Many become victims of trafficking once they reach Haiti.

Right: Mirebalais. Counter-Trafficking programme officer Rodrigue Joseph accompanies a trafficked boy (restavek) during family reunification.

Since 2010, IOM Haiti has provided assistance to more than 774 victims of trafficking, mainly restavek children. Immediate protection and assistance has been provided to victims including reunification with families or care givers for children, and social reintegration (including livelihood training and grants) for adults. IOM Haiti works with a network of 12 local NGOs to provide these services. All operations are undertaken in cooperation with the Ministry of Social Affairs, Institute for Social Welfare and Research (IBESR) and the Brigade for the Protection of Minors (BPM) of the Haitian National Police. Apart from restaveks, IOM Haiti has also assisted 32 children that were being exploited in the Dominican Republic, both sexually and as beggars in the street. More recently IOM Haiti has worked with IOM Dominican Republic to investigate the dynamic of Dominican women being trafficked to Haiti for the purpose of sexual exploitation. Through months of research, field visits and interviews, new light is being shed on this complex migration dynamic. IOM Haiti has also worked with regional partners to facilitate protection measures for returning unaccompanied minors.

92 awareness-raising sessions have been held, engaging over 5,000 citizens in all 10 provinces of Haiti. These sessions focused on the dangers of sending children to work away from home, the rights of the child, and the nature of trafficking in persons.

By reducing the economic push factors and the corollary perceived pull factors, such as the hope for free education and a “better life”, IOM Haiti aims to facilitate a stable home environment where the child can develop fully. The victim’s biological families undergo a pre-return risk assessment, they receive income generating activity training resulting in a business plan and a microgrant to either reinforce an existing business or to start a new one. IOM supports the Table Sectorielle on restavek children and recent efforts have focused on revitalizing this system which is an essential long-term development coordination platform. Currently, IOM is working with governmental and non-governmental partners to produce a draft national action plan to combat the restavek phenomenon.

| 774 victims assisted in 2010-2011 |
| 6,599 individuals have participated in community based awareness raisings |
Being a Regular Child Again

A. left home when she was 4 years old from the rural area of the West Department, and was sent to live in an “orphanage” by his parents because they could not feed her. When this orphanage closed, she was 9 years old and was sent by her father to work in the home of an acquaintance in Port au Prince. There she was forced to carry water, clean the house, take the children to school, cook meals, wash clothes and dishes; never having gone to school A. was physically abused on a daily basis. After 3 years, she could not bear with this life anymore, and escaped. She was brought to the nearest police station when an adult found her several days later. The police worked with the Social Welfare Institute to accommodate her, and requested IOM support. IOM Haiti undertook the family tracing, handled the psycho-social assistance, supported her education opportunities through the payment of her school fees for one year, and provided income-generating training for the family prior to returning A. The family was shocked to hear what had befallen her, thinking that they were providing her with a better standard of living. With a micro-grant from IOM her family established business plan expanding on their existing agricultural plot. They purchased a mule allowing them to transport their products to sell them at the market. A. is visited once a month by an IOM Haiti social worker, to ensure that her reintegration is successful and that she goes back to having a normal childhood and family life. At present, she is quickly catching up on her school work and hopes to some day go to university to study medicine.
Migration Management

IOM in Haiti has a well-established history of engagement in migration management programming, specifically that pertaining to traditional and challenging mobility issues, such as trafficking in persons, assisted return migration and border management. Such longer-term initiatives have become even more important in light of the earthquake’s destabilizing effects and the strains placed on the Government of Haiti as a result.

The assisted voluntary return and reintegration program, based in the Northern region of Haiti, mitigates the dangers associated with irregular migration. One of the primary intervention tools of this program is public awareness campaigns regarding the risks associated with irregular migration. Returning migrants are given critical immediate relief like food, water and clothing, and are offered a chance to start over in Haiti by becoming beneficiaries of reintegration programs such as micro-credit schemes and agricultural training.

IOM’s capacity-building program in migration management aimed at strengthening the capacity of the Government of Haiti to manage migration and improve the security of Haitian borders by fostering a unified approach to migration and border management and coordinating activities of all relevant public institutions.

In partnership with the Ministry of Interior and of Collectivités Territoriales, this program aims to reinforce the technical as well as human capacities of the Haitian Government. As far as technical resources are concerned, activities included the extension of a Border Management Information System (BMIS) to control migrants’ entry and exit fluxes on the main land, air and sea ports, the review and update of the existing national legislation on migration, as well as the organization of regular consultations on border management for Haitian and Dominican border agencies.

In relation to human development, activities focused on the creation of a permanent Training Unit on Border Management within the MICT for officers of the three Haitian Border Agencies (Im-

Above: Malpasse. The Special Intervention Team DIP (Douanes, Immigration, Police) in action at the border post.

<table>
<thead>
<tr>
<th>Count</th>
<th>Description</th>
</tr>
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<tbody>
<tr>
<td>170</td>
<td>Immigration, police and customs officers trained in the Integrated Border Management Training, IBM, Level 1</td>
</tr>
<tr>
<td>10</td>
<td>Immigration, police and customs officers trained as trainers on all 3 IBM trainings;</td>
</tr>
<tr>
<td>183</td>
<td>Immigration border officers trained in English/Spanish and IT skills;</td>
</tr>
<tr>
<td>4</td>
<td>Technical Workshop run for the Haitian and Dominican Border Agencies to address problems in border management;</td>
</tr>
<tr>
<td>35</td>
<td>Control operations run border posts to deal with emergency and fight transnational crime;</td>
</tr>
<tr>
<td>4,919</td>
<td>Migrants assisted in returning to Haiti</td>
</tr>
<tr>
<td>Over 18,000</td>
<td>Individuals benefitted from assistance from community infrastructure projects funded by the AVRR programme</td>
</tr>
<tr>
<td>1,500</td>
<td>Micro-grants have been disbursed to small business owners</td>
</tr>
<tr>
<td>5,500</td>
<td>Cash for work and Food for Work jobs were created</td>
</tr>
<tr>
<td>10,000</td>
<td>Individuals benefitted from agricultural support in the north of Haiti</td>
</tr>
</tbody>
</table>
migration, Police and Customs) and counter-trafficking and anti-smuggling training for borders Law Enforcement Officers.

Through the assisted return migration operations, IOM works in partnership with the National Office for Migration (ONM) to address the root causes of irregular migration from major communities at risk, with the aim to tackle and reduce this phenomenon. Activities are concentrated in the North Western region, including the large urban slum areas and its surrounding communal sections. The commune of Port-de-Paix is characterized by widespread poverty, a general very low socio-economic development and run down or non-existent infrastructure. Such factors easily lead the residents of this area to consider illegal migration by sea to other Caribbean Islands or to North America as the sole survival option remaining. This area is also infamously known for its illegal drug and goods trafficking in addition to the smuggling of migrants. To achieve the reduction of illegal migration flow from this area, the project targets both Haitian migrants returned to Haiti as well as those at risk of becoming irregular migrants.

IOM migration management activities aim at improving the capacity of the Haitian institutions responsible for regular and irregular migration management through the provision of in-depth training on border management as well as specialized security equipment to humanely manage movement, promote the respect for migrants’ rights, allow communication and information-sharing among border posts and provide a reliable database on migration. It also aims at reducing the risks of dangerous departures by sea, through stabilizing selected migration-prone communities in the Port-de-Paix area, and engaging them in a process designed to create an environment conducive to sustainable development and income generation, through access to capital, and improved community-based facilities.

This directly contributes to increased security at the national level and to the security of land, sea and air borders, thereby reducing the occurrence of transnational organized crime in Haiti and on the entire island of Hispaniola.

**Socio-Economic Reintegration for Haitian Returnees from the United States**

Mr. Metellus Tellilor returned in Haiti in July 2011, but was ostracized by his family in Haiti because of his former lifestyle in the United States. When he learned of the USAID/IOM Assisted Voluntary Return and Reintegration program, he applied for grant to build upon his past skills as a barber, and purchase the equipment needed to earn his living in his own barbershop by cutting hair and selling men’s hair care products.

Accompanied by an interpreter from DIPS Org NGO, Mr. Metellus found suitable on-the-job training at Fritzer Barbershop, and a location to start his new business. Recently, Mr. Metellus successfully completed 5 weeks of training, and he is now awaiting the tools and equipment to open up “Zoe Cuts” in Delmas, Port-au-Prince.
Above: Camp Mayard, Jacmel. IOM shelter beneficiary gardening in front of his new home.
Financial Overview

Donors committed to fund the International Organization for Migration for a total of 230.9 million USD in 2010 and 2011 to support its activities in Haiti, including its emergency response to the earthquake. For the same period, a total of 190.67 million USD has been spent by IOM Haiti to implement its activities.

Figure 1. Donor-wise Funding for IOM Haiti for 2010-2011*

* Figure 1 represents donors’ confirmed funding for 2010 and 2011. IOM expenditures for 2010 and 2011 are of USD 190.67 M.

Figure 2 illustrates spending by programme area in the framework of our Camp Coordination and Camp Management (CCCM) component.

Figure 2. CCCM Expenditures by Activities for 2010-2011*

* Figure 2 reflects our expenditures by activities in camps. Percentage relates to IOM activities in camps only, dividing between our different CCCM components, and does not refer to the overall activities of IOM Haiti.
IOM and the Emergency Shelter and Camp Coordination and Camp Management Cluster (CCCM)

The International Organization for Migration (IOM) has been Lead Agency for the Camp Coordination and Camp Management (CCCM) Cluster since the Earthquake in January 2010 and for the combined Emergency Shelter and CCCM Cluster since September 2011. The forty Cluster members comprise, *inter alia*, of international and national Non Governmental Organizations, International Organizations, and representatives of the Donor Community and the Government of Haiti.

The focus of the Emergency Shelter and CCCM Cluster is on: camp management activities, provision of emergency, transitional shelters and distribution of non-food items.

The core functions of the cluster are: coordination with various stakeholders, preparedness and capacity building, needs assessment and planning, information management and reporting, application of international standards, monitoring of cross cutting issues, advocacy and resource mobilization.

The Emergency Shelter and CCCM Cluster is concentrating its efforts in two main directions: ensuring that displaced people have access to durable return or relocation solutions and maintain decent living conditions and protection for those still living in camps.

The Emergency Shelter and CCCM Cluster is currently co-chaired by the *Unite de Construction de Logements et des Batiments Publics (UCLBP)*, recently established by the Government of Haiti. The cluster is also working to transfer its responsibilities to the UCLBP, the *Direction de la Protection Civile* (DPC), and the *Centre National d’Information Geo Spatiale* (CNIGS) by the end of 2012.

To continue its effort to alleviate Haiti displacement crisis, the Emergency Shelter and CCCM Cluster is advocating for the provision of 75,000 additional return shelter solutions targeting people that otherwise will continue to be remain in camps at the end of 2012.

For more information, please visit: [http://www.eshelter-cccmhaiti.info/](http://www.eshelter-cccmhaiti.info/)

Above: Port-au-Prince. Cluster’s Strategic Advisory Group meeting at ECHO office.
**Partnerships**

Cooperation with partners is an essential part of IOM involvement and implementation of activities, especially in the context of emergency response and recovery activities, where a close collaboration with local authorities, civil society and humanitarian actors is the key to sustainability and effectiveness of any operation.

As an intergovernmental organization working within the UN-led interagency humanitarian structure, IOM-Haiti has a natural responsibility to maintain a close relationship with the Government and its institutions, with national and international non-governmental organizations, with the UN family, with community based organizations, and with other social networks.

Aware that partnership is essential to harnessing the comparative technical and operational advantages, IOM believes that enhancing the abilities of affected populations contributes to prevent crises, improves humanitarian assistance through coping mechanisms of the affected or receiving communities, and facilitates sustainable development.

In Haiti, IOM has a long-term commitment in accompanying and partnering with the Government and the Haitian people to strengthen their capacity to cope with the challenges of displacement, mobility and development. In doing so, it ensures community members participation and ownership, accountability to all its beneficiaries and transparency of practices, which includes sharing of information and coordination.

A great deal of IOM’s efforts to date focus on assisting the Haitian people cope with the effects of the earthquake and the cholera outbreak. In tandem with other agencies and organizations, cluster partners, UN agencies, non-governmental organizations, and civil society—we now move into the next phase of recovery and reconstruction.

IOM’s activities would not have been possible without complementary initiatives of other organizations, and cooperative relationships with financial contributors.

IOM wishes to thank the generous support of all its donors – Governmental and Intergovernmental institutions, UN and other organizations and programs, and private financial entities - that made possible the realization of those activities presented in this report, and namely:

**AECID-SPAIN, AMERICAN RED CROSS (ARC), AMERICARES, BEHAVIORAL SCIENCE RESEARCH INSTITUTE (BSRI), DFAIT-CANADA, DFID-UK, CANADIAN COMMERCIAL CORPORATION (CCC), CARICOM, CERF-UN, CHEMONICS, CIDA-CANADA, CLINTON FOUNDATION, COMMUNITY CHEST OF KOREA (CCK), ECHO-EU, ERRF-UN, EU, FAO, FRANCE, HAITI RECONSTRUCTION FUND, IOM, JAPAN, MDG-F/SPAIN, MINUSTAH-CVR, MINUSTAH-QIPS, MULTI-DONOR, OCHA, SIDA-SWEDEN, START-CANADA, UNAIDS, UNDP, UNICEF, USA-GTIP, USA-USAID, USA-OFDA, USA-PRM, USAIM, UN STAFF ASSOCIATION, and WFP.**
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