BACKGROUND

CURRENT SITUATION

GOVERNMENT OF HAITI

Government of Haiti website: www.haiti.org
Government of Haiti Information Center

INTERNATIONAL ORGANIZATIONS

Pan American Health Organization
RELIEFWEB
UNICEF
One Response
World Food Programme
Global Logistics Cluster
Shelter Cluster
IRIN

US GOVERNMENT ORGANIZATIONS

The Department of State
U.S Embassy in Haiti
State Dept.'s DipNote on Twitter
State Dept. Background Note
U.S. Agency for International Development
OFDA
USAID Country Profile
CIA World Fact Book
The Department of Defense
US Southern Command
The Department of Homeland Security
U.S. Coast Guard
The Department of Health and Human Services
Centers for Disease Control and Prevention

RELIEF ORGANIZATIONS

AmeriCares
American Red Cross
CARE
Charity Navigator
Doctors Without Borders
Mercy Corps
OXFAM
Partners in Health
Save the Children

KEY LINKS

GOVERNMENT OF HAITI

This report is released on a weekly basis.
Next report: 25 April 2010
A series of major earthquakes struck Haiti on 12 January in the area around the capital, Port-au-Prince. The strongest of these occurred at around 1700 hrs local time and was reported at 7 on the Richter scale.

The earthquake is estimated to have killed 222,517 people and displaced more than 1.3 million people into over 630 spontaneous settlements and organized sites. 597,801 people have migrated from Port-au-Prince to outlying departments, with the majority, an estimated 162,509, going to Artibonite, and an estimated 160,000 persons to the border area with the Dominican Republic.

The most affected cities are Port-au-Prince, Carrefour and Gressier (40-50% destroyed), Jacmel (50-60%) and Leogane (80-90%). Major damage had been reported to buildings, infrastructure, hospitals and schools. Communications are difficult: roads and bridges have been considerably damaged, as well as roads connecting rural areas to cities.

According to a study by the Inter-American Development Bank (IDB), the cost of rebuilding Haiti’s homes, schools, roads and other infrastructure could be nearly $14 billion.

The United Nations multi-national response to this disaster has been organized into Clusters that are similar in construct, though not the same as Emergency Support Functions (ESF) in the U.S. National Response Framework.
Even as post-recovery efforts gain momentum, the rainy season threatens to stress a fragile humanitarian situation with outbreaks of vector-borne diseases, mud slides, and unhygienic living conditions.

Figures from the latest Displacement Tracking Matrix (DTM) identified 1,373 settlement sites in Port-au-Prince, Jacmel, Leogane, Petit and Grande Goave, which was considerably higher than initial estimates.

According to OCHA, the Shelter cluster remains on target for delivering 2 tarpaulins per family by 01 May.

The official date for the reopening of schools in the areas most affected by the earthquake in the West Department was 05 April. The reopening will be done progressively with UNICEF supporting the Ministry of Education to reopen a first phase of 611 priority schools benefiting 200,000 children.

Health partners are reporting an increase in suspected malaria. In view of the rainy season, long-lasting bed nets are required for 1.4 million people.

With rains becoming an increasingly more frequent occurrence in Haiti, disaster preparedness plans are being finalized for surge activities which will go into effect in the event of heavy rains or flooding.

According to the Red Cross, there are continued concerns over the recent Haitian government decision to stop food distributions (which took place over the reporting period), and government plans to curtail the provision of free water and health care to communities over the coming months which present challenges to program implementation.
• At the Water, Sanitation and Hygiene (WASH) Cluster meeting held over the reporting period in Port-au-Prince, six key constraints were identified as a common experience of Cluster members implementing activities in response to the earthquake. These constraints are:
  1. land ownership issues/availability of space (many sites are on privately owned land);
  2. no clear camp management beyond the communal committees;
  3. no agency coverage of sites/too many agencies working in one site;
  4. customs procedures;
  5. human resources; and
  6. uncertainty of sites.

• The most significant issue relates to land ownership and the lack of clarity over land tenure and ultimate ownership.

• The resources mobilized in the wake of the disaster hold the potential to think bigger—to plant the seeds of a “transformative agenda” for a more equitable and participatory state, with decentralized social services and a solid social protection.

• With the upcoming rainy and hurricane seasons, the relocation of displaced people to safer shelters, along with the provision of basic services and the protection of children and women, remain a priority.

• There is a risk of severe flooding of urban areas including settlement sites due to blocked drainage canals as a result of the earthquake, long term silting and blockage of water evacuation systems and urban drainage systems by piles of debris.

• There is urgent need to extend emergency shelter assistance to affected people living in mountainous areas. Secondly, people living in the plains are in dire need of Transitional Shelter assistance before the start of the rainy season.

• Road damage from the earthquake has increased the inaccessibility of some areas. This condition could deteriorate further during the rainy season.

• Of the 3,000 phones donated by Digicel to improve communication between camp committees, 102 have so far been distributed to members in 65 sites.

NOTES:
– Aid agencies need to work with the Haitian government to determine who owns sects of land. Surveyors may be needed to help end disputes and the Haitian government needs to have final say on who has land ownership. Only after these disputes have ended can sites be erected and maintained properly.
– Extra focus should be given to distributing aid items that will help aid agencies coordinate response, such as the Digicel phones.

SOURCES:
IFRC OPERATIONS UPDATE - 13 APR 2010
OCHA SITREP #33 – 12 APR 2010
PAHO SIT REP 26 - 15 APR 2010
UNICEF THREE MONTHS LATER – 13 APR 2010
HUMANITARIAN ASSISTANCE TO HAITI

USG HUMANITARIAN ASSISTANCE TO HAITI FOR THE EARTHQUAKE

KEY

USDA/OFDA  USAID/FFP  USAID/OTI  USAID/DR  USAID/HAITI
AGRICULTURE AND FOOD SECURITY
ECONOMIC RECOVERY AND MARKET SYSTEMS
EDUCATION
EMERGENCY RESPONSE ACTIVITIES
HEALTH
HUMANITARIAN AIR SERVICE
HUMANITARIAN COORDINATION AND INFORMATION MANAGEMENT
INFRASTRUCTURE REHABILITATION
LIVELIHOODS
LOGISTICS AND RELIEF COMMODITIES
NUTRITION
PROTECTION
PSYCHOSOCIAL SUPPORT
SHELTER AND SETTLEMENTS
TITLE II EMERGENCY FOOD ASSISTANCE
TRANSITION INITIATIVES
URBAN SEARCH AND RESCUE
WATER, SANITATION, AND HYGIENE
04.09.10

AFFECTED AREAS

WFP and NGOs
Chemonics
DIM
AIR
UNHCR
UNICEF
IDM
ISOF
DII
ARC
Caritas
Concern
Médecins Sans Frontiéres
Nepal Trust America
Oxfam
World Vision

Locations

Port-au-Prince
Pétion-Ville
Cap-Haïtien
Gonaïves
Artibonite

MAGNITUDE 7.0
1/12/10  21:53:09 UTC
• Haiti's parliament has approved the creation of the Interim Haiti Recovery Commission. The commission will be co-chaired by Bill Clinton and Haitian Prime Minister Jean-Max Bellerive. Under the co-chair will be an equal number of Haitian and non-Haitian representatives. The body will determine which reconstruction projects will receive backing from multibillion-dollar funding pledged by foreign donors. While some consider the commission a violation of state sovereignty, donors are pleased to have oversight in place.

• The Board of Executive Directors of the Inter-American Development Bank announced the approval of an Account for the Administration of Donor Resources for Haiti, which may receive contributions totaling up to $100 million from the countries in the Union of South American Nations (UNASUR).

• Bill Clinton said on 14 April 2010 that with the support of its partners, Haiti should be able to have safe and legal elections by the end of 2010. Legislative elections were due to be held on 18 Feb 2010 and the presidential term is due to expire 11 Feb 2011. President Rene Preval says he will not seek to extend his term beyond its legal limits.

• The Ministry of Public Health and Population (MSPP) has extended free access to medicines until 12 July.

• The IFRC and other organizations continue to express deep concerns over the recent Haitian government decision to stop all general food distributions, and government plans to curtail the provision of free water and health care to communities over the coming months.

• PAHO/WHO, UNICEF, and IOM have been working with MSPP to finalize the national plan for mental health and psychosocial support. The draft plan is now being circulated for feedback among other government agencies, health professionals, and partnering institutions.

• PAHO/WHO and the CDC were invited by the Ministry of Health Directorate of Epidemiology, National Laboratory and National Malaria Program to jointly design interventions for malaria prone-regions of the country.

• PAHO/WHO, UNICEF and the Haitian Ministry of Health collaborate on a two-part train-the-trainer program designed to address treatment of severe malnutrition in hospital settings, as well as to design a training program for waste management in shelters.
UNICEF and IBESR have prepared a strategy on foster care which has been shared with the Ministry of Social Affairs for review and approval.

The with support from UNICEF, the Government has prioritized the opening of 120 schools in the PaP area.

The Ministry of Education is also spearheading the “movement for learning”, a multi-level effort to transform the education system in Haiti, has three priorities:

1. Education for ALL children – supporting a massive enrolment leading to September 2010;
2. Equitable access to quality education – to ensure free and equitable access to quality education for all children;
3. Regulation and transformation – to assist with the long-term rebuilding of the education system.

The results of an assessment conducted by Oxfam found that 42.6% of those polled thought that the Haitian government’s intervention had little efficiency, whereas only 13.3% thought favorably or very favorably of the government’s intervention. However, the majority of those polled (71.3%) thought highly of the interventions made by foreign governments, foreign armies, and international NGOs.

NOTES:

- The Government has a responsibility to invest in disaster-resilient infrastructure, building codes, and policy reforms and to partner with communities to ensure knowledge and early warning systems are in place.
- The Government needs to provide clarity on the length of tenure allotted to designated transitional spaces.
- Ministry of Education should go further in their educational reform and introduce school and teacher accreditation, as well as a standardized curriculum at all levels.
- The Ministry of Environment should be empowered through legislation that clarifies their powers and duties, and establishes MoH liaisons to give technical advice on environmentally sustainable development in each sector.
# CLUSTERS

## Cluster Coordinators

Yellow highlights indicate changes from the previous schedule.

<table>
<thead>
<tr>
<th>CLUSTER</th>
<th>AGENCY</th>
<th>FIRST NAME</th>
<th>LAST NAME</th>
<th>PHONE</th>
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</thead>
<tbody>
<tr>
<td>Agriculture</td>
<td>FAO</td>
<td>James</td>
<td>TERJANIAN</td>
<td>3436 0092</td>
<td><a href="mailto:agricluster.haiti@gmail.com">agricluster.haiti@gmail.com</a></td>
</tr>
<tr>
<td>CCCM</td>
<td>IOM</td>
<td>Giovanni</td>
<td>CASSANI</td>
<td>3803 2105</td>
<td><a href="mailto:gcassani@iom.ch">gcassani@iom.ch</a></td>
</tr>
<tr>
<td>Early Recovery</td>
<td>UNDP</td>
<td>Robert</td>
<td>PRZEDPESKI</td>
<td>3791 9481</td>
<td><a href="mailto:relevement.pnud.haiti@gmail.com">relevement.pnud.haiti@gmail.com</a>/robert.przedpelski@undp.org/jean-baptiste.nkusi@undp.org</td>
</tr>
<tr>
<td>Education</td>
<td>UNICEF</td>
<td>Lisa</td>
<td>Doherty</td>
<td>3492 0813</td>
<td><a href="mailto:idoherty@unicef.org">idoherty@unicef.org</a></td>
</tr>
<tr>
<td></td>
<td>Save the Children</td>
<td>Mera</td>
<td>Thompson</td>
<td>3715 4464</td>
<td><a href="mailto:mthompson@savechildren.org">mthompson@savechildren.org</a></td>
</tr>
<tr>
<td>Emergency</td>
<td>WFP</td>
<td>John</td>
<td>Bursa</td>
<td>3715 7133</td>
<td><a href="mailto:John.bursa@wfp.org">John.bursa@wfp.org</a></td>
</tr>
<tr>
<td>Telecommunications</td>
<td></td>
<td>Karen</td>
<td>Barsamian</td>
<td>3786 6240</td>
<td><a href="mailto:Karen.barsamian@wfp.org">Karen.barsamian@wfp.org</a></td>
</tr>
<tr>
<td>Food</td>
<td>WFP</td>
<td>Catherine</td>
<td>Feeney</td>
<td>3751 1657</td>
<td><a href="mailto:foodcluster@wfp.org">foodcluster@wfp.org</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td>George</td>
<td>Aelion</td>
<td>7371 1657</td>
<td><a href="mailto:Catherine.Feeney@wfp.org">Catherine.Feeney@wfp.org</a>/George.Aelion@wfp.org</td>
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<tr>
<td>Health</td>
<td>WHO</td>
<td>Anshu</td>
<td>BANARJEE</td>
<td>3612 5351</td>
<td><a href="mailto:bani@euro.who.int">bani@euro.who.int</a>/hai.clusters@paho.org</td>
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<tr>
<td>Inter-Cluster</td>
<td>OCHA</td>
<td>Patrick</td>
<td>Lavand'Homme</td>
<td>3491 7274</td>
<td><a href="mailto:interclusterhaiti@gmail.com">interclusterhaiti@gmail.com</a></td>
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<tr>
<td>- Gender Mainstreaming</td>
<td>OCHA</td>
<td>Caroline</td>
<td>Blay</td>
<td>3853 2919</td>
<td><a href="mailto:gencap.haiti@gmail.com">gencap.haiti@gmail.com</a></td>
</tr>
<tr>
<td>- Protection from Sexual</td>
<td>OCHA/HC</td>
<td>Nadia</td>
<td>Guillian</td>
<td>3486 5697</td>
<td><a href="mailto:pseahaiti@gmail.com">pseahaiti@gmail.com</a></td>
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<td>Abuse and Exploitation (PSEA)</td>
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<tr>
<td>Logistics</td>
<td>WFP</td>
<td>Martin</td>
<td>BETTLELEY</td>
<td>3778 1936</td>
<td><a href="mailto:haiti@logcluster.org">haiti@logcluster.org</a>/Edmondo.Perrone@wfp.org</td>
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<td></td>
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<td>Edmondo</td>
<td>Perrone</td>
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<td>Bekim</td>
<td>MAHMUTI</td>
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<tr>
<td>Nutrition</td>
<td>UNICEF</td>
<td>Erin</td>
<td>BOYD</td>
<td>3381 2345</td>
<td><a href="mailto:nutritionclusterhaiti@gmail.com">nutritionclusterhaiti@gmail.com</a></td>
</tr>
<tr>
<td>Protection</td>
<td>OHCHR</td>
<td>Elio</td>
<td>Tamburi</td>
<td>3748 0682</td>
<td><a href="mailto:protectionhaiti@gmail.com">protectionhaiti@gmail.com</a>/tamburi-minustah@un.org</td>
</tr>
<tr>
<td>- Child Protection</td>
<td>UNICEF</td>
<td>Henrik</td>
<td>HAGGSTROM</td>
<td>3881 2381</td>
<td><a href="mailto:haiticpwg@gmail.com">haiticpwg@gmail.com</a></td>
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<tr>
<td>- Gender-based violence</td>
<td>UNFPA</td>
<td>Lina</td>
<td>ABIRAFEH</td>
<td></td>
<td><a href="mailto:saferlina@gmail.com">saferlina@gmail.com</a></td>
</tr>
<tr>
<td>Shelter NFI</td>
<td>IFRC</td>
<td>Gregg</td>
<td>MCDONALD</td>
<td>3485 0312</td>
<td><a href="mailto:shelterhaiti2010@gmail.com">shelterhaiti2010@gmail.com</a></td>
</tr>
<tr>
<td>WASH</td>
<td>UNICEF</td>
<td>Jean</td>
<td>McCluskey</td>
<td>3905 3590</td>
<td><a href="mailto:jmccluskey@unicef.org">jmccluskey@unicef.org</a></td>
</tr>
</tbody>
</table>

Updated 17 Apr 2010 — 14h23, MHewett, ocha.haiti.im@gmail.com

The mission of the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) is to mobilize and coordinate effective and principled humanitarian action in partnership with national and international actors.
**Haiti Earthquake Humanitarian Relief Cluster Meeting Schedule**

19 April – 24 April, 2010

This schedule is posted on [http://haiti.oneresponse.info](http://haiti.oneresponse.info). For modifications or updates, contact: ocha.haiti.1m@gmail.com.

Check with your cluster coordinators to confirm meeting times and locations as they change frequently.

*Yellow Highlights* indicate changes from the previous schedule.

<table>
<thead>
<tr>
<th>DATE / TIME</th>
<th>MEETING</th>
<th>LOCATION</th>
<th>CHAIR(S)</th>
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<tr>
<td><strong>MONDAY 19 APRIL 2010</strong></td>
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</table>
| 9:00 - 10:45  | Nutrition                         | JOTC Meeting Room | UNICEF        | Erin Boyd
nutritionclusterhaiti@gmail.com
3381 2345  |
| 10:30         | Food                              | OCHA Meeting Tent | WFP           | Catherine Feeney
foodcluster@wfp.org
catherine.feeney@wfp.org
george.aelion@wfp.org
3882 0444
005073711657 |
| 15:00         | Reproductive Health               | UNFPA Tent      | UNFPA         | Michel Brun
brun@unfpa.org
3724 4263  |
| 15:00         | Inter-Cluster Meeting (Cluster Coordinators / invitation only) | OCHA Meeting Room 62b | OCHA         | Patrick Lavand’Homme
interclusterhaiti@gmail.com
3491 7274  |

| **TUESDAY 20 April 2010**                                           |                |                |                                             |
| 8:00          | Protection                        | MINUSTAH Roof Deck meeting Room | HRS | Ben Majekodummi
majekodummi-minustah@un.org
3747 7448  |
| 9:30          | Emergency Telecoms                | WFP Meeting Tent | WFP | John Bursa
John.bursa@wfp.org
3715 7133  |
| 9:30 - 11:00  | GBV meeting                       | UNFPA Tent      | UNFPA         | Lina Abirafel
safarлина@gmail.com
3786 6240  |
| 9:30          | Logistics                         | OCHA Meeting Tent | WFP | Martin Betterley
Haii@logcluster.org
3778 1936  |
| 10:00         | CCCM                              | IOM Tent        | IOM           | Giovanni Cassani
gcassani@iom.int
3487 6951  |
| 11:30         | Humanitarian Country Team (Closed) | OCHA Meeting Room 62b | OCHA       | Patrick Lavand’Homme
interclusterhaiti@gmail.com
3491 7274  |
| 14:00         | Early Recovery                    | UNDP-Tent Area 5 (near the big blue truck) | UNDP | Robert Przedpelski
Robert.Przedpelski@undp.org
3791 9481  |
| 15:00         | Agriculture                       | OCHA Meeting Tent | FAO           | James Terjanian
agricluster.haiti@gmail.com
3436 0292  |
| 15:00         | Health Cluster – General Meeting  | Health Cluster Office | WHO   | Anshu Banerjee
hai.clustersante@paho.org
3612 5351  |
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<td>WEDNESDAY 21 April 2010</td>
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<tr>
<td>8:00</td>
<td>Solid Waste</td>
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<td>MHPSS Working Group</td>
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<td>9:00</td>
<td>Hygiene Promotion Working Group (WASH Cluster)</td>
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<td>10:00</td>
<td>General WASH Cluster Meeting</td>
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<tr>
<td>14:00</td>
<td>Humanitarian Forum</td>
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<tr>
<td>14:00</td>
<td>Disability Working Group (Rehabilitation)</td>
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<td>17:00</td>
<td>MHPSS</td>
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<td>THURSDAY 22 APRIL 2010</td>
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<tr>
<td>9:00</td>
<td>Press Briefing</td>
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<td>09:00</td>
<td>Earl Recovery Sous Groupe de travail Logement – Quartier</td>
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<tr>
<td>10:00</td>
<td>Disability Working Group (Advocacy and Inclusion)</td>
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<td>10:00</td>
<td>Environmental Health, Protection and Management Workgroup</td>
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<td>11:30</td>
<td>Info Management</td>
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<td>15:00</td>
<td>Inter-Cluster Meeting (Cluster Coordinators only) (Closed)</td>
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<td>FRIDAY 23 APRIL 2010</td>
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<tr>
<td>9:00</td>
<td>Child Protection Sub</td>
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<td>SATURDAY 24 APRIL 2010</td>
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<td>9:30</td>
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PAHO/WHO continues health actions including mass vaccinations, provisions of medical supplies, sentinel site disease surveillance, and distribution of long-lasting insecticide-treated bed nets, while also increasing capacity building initiatives for health services such as rehabilitation, mental health, and nutrition.

The Health Cluster and sub-Clusters have been engaged in contingency planning for the rainy season, and a national plan is being formulated that accounts for available services and stocks from NGOs in all Departments throughout the country.

Short-term actions related to rainy season contingency plans in Léogâne, Gressier, Petit Goave, and Grand Goave have been identified by PAHO/WHO and Health Cluster partners. Objectives include creation of communication networks, health transportation links, and restoration of main health centers.

In Jacmel, the Cluster is engaged in long-term strategic planning that emphasizes sustainability as the cornerstone of recovery. A contingency plan for the hurricane season was developed and the priority objective is to deliver health care services should a department become isolated from other communes due to road flooding. Département Sanitaire du Sud-Est (DSSE) is investigating strategic locations to preposition supplies in each commune.

Addressing psychosocial needs in Haiti remains a top priority. PAHO/WHO, UNICEF, and IOM have been working with MSPP to finalize the national plan for mental health and psychosocial support.
The combination of overcrowded camps and increasing rain poses a serious health threat. Many camps have been set up in places where drainage is insufficient, and the top soil on these settlements is now contaminated with bacteria. Flooding, on top of this situation, could create a public health disaster.

Too much standing water, collapsed shelters, flooded latrines, and mounting garbage piles pose extreme health threats. Even the most shallow puddles are breeding areas for mosquitoes which could result in an increase of malaria and dengue.

While hand washing with soap is one of the most cost-effective measures in reducing the incidence of diarrhea, hand washing stations and personal hygiene education is not sufficiently provided in Haiti and remains a significant cultural hurdle. Reportedly, rates of hand washing with soap at critical times are very low among the affected population.

The stress of displacement combined with lack of proper shelter, safe water and adequate nutrition, and close proximity of persons in overcrowded shelters have increased children’s susceptibility to acute respiratory infections and deadly childhood diseases such as measles and diarrhea. Fortunately, there are no reports of increased childhood diseases as yet.

The most common illness reported to date is acute respiratory infection.

Health partners are reporting an increase in suspected malaria. In view of the rainy season, long lasting bed nets are required for 1.4 million people. An estimated 937,000 have been ordered and distribution is ongoing. About 91 medical kits, each with provisions to cover 1,000 people, have been distributed to NGOs.

World vision clinics are reporting a high incidence of sexually transmitted infections in girls and women. Whether forced, transactional or consensual, World Vision concludes that unprotected sex adds a further risk to camp life.

NOTES:

- With increasing rains, priority must be placed on source reduction, rubble removal, de-sludging and implementation of flood-proof latrines to prevent high incidence of infectious diseases.
- Use of latrines as garbage disposal sites should be prevented to reduce overflow through communication campaigns including signs on latrines in Creole discouraging the practice.
- Hand-washing should be aggressively encouraged through education campaigns as well as an increase in hand-washing stations.
- Condoms and educational materials on safe sex and protecting oneself from aggressors should be widely distributed in camps.
• Health gaps exist in mental health, psychosocial support, maternal and child health, HIV/AIDS, and rehabilitation.

• Health service coverage needs to be provided to populations who have settled near their homes and away from large spontaneous settlement sites.

• The re-establishment of preventing mother-to-child transmission services (PMTCT), including infant feeding support in at least 10 level-2 health facilities has not yet started. Partners continue to discuss strategies to restore treatment to HIV positive children and pregnant women who were under treatment prior to the earthquake.

• Support is needed for the re-establishment of routine health services, including HIV/AIDS. There is a crucial need to reinforce the institutional capacity of the Ministry of Health at central and decentralized levels.

• UNICEF is supporting the Ministry of Health in expanding decentralized public health system for maternal, neonatal and child health services. Over 134 Emergency Health Kits and health basic units have been supplied to provide the minimum package of health services to approximately 134,000 people for three months.

• The Haitian Internally Displaced Persons Surveillance System (IDPSS) is collecting daily reports from mobile clinics serving IDP settlements.

• The ongoing Emergency Vaccination campaign is targeting infants between 6 weeks and 8 months for Diphteria, Tetanus, Pertussis (DPT) vaccines, children aged 9 months to 7 years for DPT/measles and Rubella vaccines and children more than 8 months with adults for DT vac-cines. Vaccination is associated with Vitamin A and Alben-dazole distribution.

• Budget support to Government including the Ministry of Health is becoming a priority in order to maintain public and private services.

• The Ministry of Health has extended free health care for another three months. While a re-introduction of user fees could limit the majority of the population from accessing health care, free health care services has not covered the cost of salaries to personnel otherwise covered by the user fees, resulting in the majority of staff not coming to work, and thus hospitals cannot be fully operational. Some health institutions such as le Centre de diagnostique et traitement (CDTI), have been obliged to shut down because of their inability to pay staff.

• A strategy to pay and in turn retain national health professionals needs to be developed and implemented immediately.
The Ministry of Public Health and Population (MSPP) has extended free access to medicines until 12 July.

A general study on neonatal care in various health facilities is underway. The objective is to develop a national strategy for care of newborn babies at risks of acute health threats such as malnutrition and disease. The study will take into consideration the health needs of pregnant women.

A mapping of referral centers for pregnant women, including those in settlements is underway to identify needs and gaps.

The provision of sufficient health care services to settlements for displaced people remains challenging as the population figures change and new gaps emerge.

According to the Haitian National Red Cross Society (HNRCS), the German-Finnish Red Cross hospital established during the days following the earthquake in a sports field in Carrefour, is the most modern hospital in Haiti. Due to imported equipment such as ultrasounds, hundreds of women have come to the hospital seeking mother-child health care services. The complex of tents includes facilities such as an outpatient department, laboratory, x-ray room, delivery room, and surgery.

NOTE:
Changing this data will allow the majority of the population to access health care and continue services for those injured by the earthquake. However, free health care services has not covered the cost of salaries to personnel which would otherwise be covered by user fees, resulting in the majority of staff not coming to work and diminishing hospital capacity. It will be necessary to somehow negotiate an agreement among hospital employees in order for them to want to return to work.
• **PAHO/WHO** satellite sites in Léogâne and Jacmel have increased their visibility and added new partners over the last two weeks. Both sub-clusters are actively preparing contingency plans for the rainy season.

• **Léogâne**
  - Health services in Léogâne, Gressier, Grand Goave, and Petit Goave are being rebuilt after catastrophic devastation.
  - Médecins Sans Frontières (MSF) Suisse has established a temporary field hospital with 110 beds.
  - Reconstruction of a semi-private hospital (Cardinal Leger & Sanatorium de Siguenau) with 186 beds is being planned.
  - Luxemburg Red Cross is constructing a new hospital in Gressier, and several NGOs are providing health coverage in the interim.
  - The Haitian-Cuban-Venezuelan hospital in Grand Goave was damaged, but remains operational.
  - Notre Dame Hospital in Petit Goave is functional again with help from NGOs.

• **Jacmel**
  - The first two weeks of April were focused on developing a contingency plan for the hurricane season.
  - In the plan, the priority objective is to deliver health care services should a department become isolated from other communes due to road flooding. Strategic locations are being investigated to preposition supplies in each commune.
• On 14 April, AmeriCare delivered portable X-ray equipment to Adventist Hospital in Carrefour.

• Many of the ERU (Emergency Response Unit) health facilities need to replenish their medical stock and are now running low on key drugs for basic treatments. This is of concern as a period is now approaching where consumption is anticipated to increase. As a result of the relatively long delivery time for medical materials and medicine (up to 8 weeks), problems may arise unless an alternative solution is found to cover the potential gap in medical stocks. The IFRC medical logistician is working on finding solutions to assist the health ERUs where needed.

• Health cluster partners are providing ambulance support for the relocation of displaced people from the Petionville Golf Club to Corail Cesselesse.

• Maternal health facilities need qualified health professionals and appropriate equipment.

• On 1 April, PAHO/WHO launched a website for PROMESS highlighting its role as distributor of essential medicines in Haiti. The site provides procedures for acquiring medicines and offers helpful links and multimedia.
LOGISTICS

CUSTOMS/BORDER CROSSING

• Cargo clearance procedures are back to normal: pre-earthquake standard operating procedures.
• All partners should have customs agent/freight forwarders in PAP doing clearances.

SEA TRANSPORT

• As a part of LC/WFP preparedness, a barge with 2500mt is being contracted for servicing around the primary and secondary ports within Haiti ex PAP. The current plan is that the barge will alternate on a weekly / fortnightly basis.
• Ports/sea access is better than expected despite issues associated with poor maintenance.

SURFACE TRANSPORT

• If declaration form is not accompanied by all necessary customs clearance documents it will be considered pending. Only when all documents are completed is the cargo dispatched/loaded onto trucks.
• There is a current shortage of fuel – diesel and petrol- in Haiti. This is impacting upon LC, partners and commercial activity in the country.

AIR OPERATIONS

• The UNHAS pax service between SANTO DOMINGO to PAP, PAP to SANTO DOMINGO has reverted to a single/twice daily run using one of two Caravan (8-12 seat capacity) - meaning that all organisations need to submit requests early. There is a morning flight and a late afternoon flight.
• UNHAS PAP continues to have one Bell (pax 9- 1mt lift capacity), 2 Mi171 and one Mi8 (3 mt lift capacity): these helicopters can provide scheduled passenger flights ex PAP to field offices in Haiti.

WAREHOUSING

• LC is mobilising 25 MSU’s / wiikhalls for deployment to the field offices in JACMEL, PORT-AU-PAIX, LES CAYES, CAP HAITIEN, FORT LIBERTE, HINCHE, MIRAOGONE, MIREBALAIS, SANT MARC, JEREMIE, GONAIVES and LEOGANE for inter-agency use. This should be complete by mid-May.

RESOURCES:

• LogCluster contact list.
• Vehicle registration brief.
• List of local transporters in PaP.
• Updated Customs procedures are found here.
• Standard Logistics operating procedures here.
• Cargo Movement Request (CMR), Temporary Storage Request (TSR), Request for using other LogCluster resources, and Release Order Form.
• UNHAS flight schedule and booking form.
LOGISTIC CORRIDORS AND WAREHOUSE ASSETS

- Warehouse Capacity - Port au Prince
  - Correspondence: Offices for all Warehouses in PaP:
    - Leogane (FO)
    - Maitresse (FO)
- Tabarre 1 Warehouse Capacity: 7,100m²
- Tabarre 2 Warehouse Capacity: 7,500m²
- Defus Warehouse Capacity: 8,000m²
- St. Joseph Warehouse Capacity: 2,600m² (Closing of April)
- Cluster 1 Warehouse Capacity: 2,600m²
- Cluster 2 Warehouse Capacity: 2,600m²
- Cluster 3 Warehouse Capacity: 2,600m²
- AP Staging Area Capacity: 40,000m²

- Warehouse Capacity - Port Office
  - Status: Operational
  - Correspondence: Office: Port de Paix (FO)
  - Saint-Marc (FO)
- Warehouse Capacity - Port-au-Prince (SO)
  - Status: Operational
  - Correspondence: Office: Port Louis (SO)

- Warehouse Capacity - Ceramic (Fo)
  - Status: Operational
  - Correspondence: Office: Fort Liberte (FO)
- Warehouse Capacity - Bonnay-Dugay
  - Status: Operational
  - Correspondence: Office: Fort Liberte (FO)

- Primary Road Entry Point from Santo Domingo
- Primary Sea Port
- Primary Air Port
- Distribution Hub to surrounding areas by Air, Road and Sea.
  - Max Cargo per Vessel: 400 TEUS
  - 15,000MT bulk/break-bulk
Since the beginning of the crisis, the WASH cluster has distributed over 4 million litres of drinking water daily across more than 200 sites and 450 kiosks. In spontaneous settlement sites sanitation remains inadequate. Sanitation partners are accelerating their activities under a two-pronged strategy that aims to set up 11,000 latrines in the short term (until mid-April) and an additional 21,000 latrines in the mid term (before the end of June). To date, over 5,347 latrines have been installed in the earthquake-affected areas.

In Leogane, some WASH partners have mentioned a possible scaling down of their operations, implying that an exit strategy needs to be established in order to maintain water provision services in the areas concerned.

The WASH Cluster is examining how water trucking operations can be replaced by sustainable medium term options such as borehole drilling. The Cluster has also supported repair of the water network, but because its extensions reach primarily into more affluent neighborhoods, extension of the network is also required.

UNICEF has prioritized the sustainable provision of water by supporting local authorities in identifying sustainable solutions for water provision through the rehabilitation of existing water networks, drilling of boreholes and recovery of the pre-existing local water market.

UNICEF is procuring contingency supplies and reviewing stand-by agreements with partners to restore its rapid response capacity in all the Haitian territory in preparation for the hurricane season.

Support to displaced families and host communities in areas not directly affected by the earthquake, including the poor border area with the Dominican Republic, needs to be strengthened. For this, Partnership Cooperation Agreements (PCAs) with several partners are being finalized.

The Hygiene Promotion Working Group is working together in coordination with the Health Cluster to put in place preparedness and response activities in the event of disease outbreak.

The WASH Cluster coordination team is involved in the multi-actor planning including the assessment of sites for relocation and provision of immediate and medium-term services.

Women, adolescent girls and children often endure uncomfortable circumstances, lack of privacy, and the risk of violence and abuse due to a number of aspects:
- Latrine doors cannot be locked
- The lack of lighting in sites is an issue
- There is a lack of safely located women-only-toilets
- Long walking distances to latrines
- Menstruation adds considerably to the need for sanitary facilities.

Under-reporting of agencies continues to be a significant challenge in getting a clear picture of the actual and planned efforts, with only 13 reporting this week out of some 67 organizations involved.
NOTES:

• Hand washing and bathing facilities are an excellent and cost-effective way to prevent the spread of disease. Establishing adequate facilities and overcoming cultural barriers to use will be the primary challenges in making these facilities useful.

• Sexual harassment is a risk in camps, where women and girls often seek privacy in the darkness. These realities absorb women’s and girls’ time and threaten their wellbeing.

• Exit strategies for the trucking in of water are beginning to be considered, although, water still remains a concern for most. The infrastructure needs to be repaired and increased. Existing networks and bore holes must be identified to aid in this concern.
• An additional challenge in the relief sector which occurred over the reporting period is the request from the government to stop all general food distributions. This request has put a hold on food distributions carried out by the Mexican and Colombian Red Cross Societies. The parameters of this request are still being defined as provisions may be made for targeted food distributions (to hospitals, orphanages etc.).

• Health partners continue to work throughout Haiti to address malnutrition. PAHO/WHO, UNICEF, and the MSPP partnered for a two part train-the-trainer program designed to address severe acute malnutrition in hospital settings. The program took place on 6-10 April and trained a total of 23 department and national MSPP staff, as well as one nutrition partner. Training certificates, signed by the Minister of Health and the heads of agencies for UNICEF and PAHO/WHO, were distributed by the Director General of MSPP. Training outcomes involve increased capacity throughout Port-au-Prince and regional departments to identify and treat malnutrition among children, pregnant women, and adults.

• The majority of farmers are reliant on markets to meet their food needs. Programs should support multiple agricultural value chains to diversify farmers’ livelihoods and meet market demands. Support should take into account implicit gender divisions of labor in agricultural value chains.

• As of 5 April, 1,857,372 beneficiaries have received assistance by WFP through the general food distribution (GFD) since 6 March, reaching a total of 16,345 MT. FAO and partners has distributed seeds and tools to over 9,000 farming families in the earthquake affected communes of Leogane, Petit Goave, Grand Goave, Gressier, Jacmel, Cayes Jacmel and Marigot.
World Vision response:
World Vision has partnered to assess camps and deliver food distribution with WFP (12,000 tonnes) and USAID (1660 tonnes). In total, these distributions have helped around 1.5 million people.

Next steps:
- World vision, with WFP, will continue forms of food distribution for as long as it is needed. With more targeted to female-headed or child-headed households
- Further develop a school feeding programme
- Employment of local labor, whenever possible, to relieve the reliance on food aid and make it possible for families in camps or transitional communities to meet their own needs.
- Continues work on agriculture in rural communities to break their dependence on expensive imported foods and encourage food cultivation to feed Haiti’s citizens.

NOTES:
- World vision, in its report, stated that regular supply of food remains beyond the reach of most of the internally displaced in and around Port-au-Prince. Especially for families living in camps, it is difficult to reach markets, adding the cost of transport to areas where food is available.
- The regular supply of food year-round was an existing challenge for Haiti even before the quake. The government’s decision to cease WFP food distributions less than three months on is too early. Single-woman families, widows or grandparents will struggle without additional support.
UNICEF is co-chairing the Nutrition Cluster with the Ministry of Health and coordination unit of the national program of food and nutrition.

There are now 65 nutrition cluster partners in country (approximately 25 are active and reporting) and 33 global nutrition cluster partners. Nutrition Cluster coordination structures are also active in Leogane and Jacmel.

There are currently 29 – up from 23 just over a week ago - Infant and Young Child Feeding programmes (PCNBs) functioning in Port-au-Prince sites, Leogane, Petit Goave and Grande Goave.

The cluster conducted a monitoring visit to Jacmel to focus on the coordination for treatment of severe and moderate acute malnutrition, and the use of ready-to-use infant formula (RUIF) in displaced sites and host families in the South-East Department.

Blanket feeding for children under five years and pregnant and lactating women is ongoing (Round II in Port-au-Prince and Round I in Leogane).

Nutrition supplies for an amount of $21,607 were released over the past two weeks to NGOs by UNICEF, including: 30 cartons of therapeutic milk, 190 sachets of therapeutic spread among other items.

UNICEF is supporting 19 baby tents and eight sites for community-based management of acute malnutrition targeting 20,000 infants under-1 year; 6,500 children with Severe Acute Malnutrition (SAM); 50,000 pregnant and lactating women; 166,000 children under-5 years.

A cooperation agreement was signed with the NGO "Les Centres Gheskioll for community-base management of acute malnutrition and breastfeeding promotion and sup-port.

A WHO and UNICEF-supported training on Inpatient Therapeutic Feeding Program of 24 people from Government (Nutrition Focal Point and IMCI focal point for each department) was held on 6-10 April.
• The cluster is on target to deliver 2 tarpaulins per family by 1 May through the continuing surge of activity by cluster agencies.

• Mountainous areas are proving to be a gap in the response due to inaccessibility.

• According to USAID/DART staff, NGO reports suggest that people want to return to houses or move to other parts of Haiti but require assistance, such as materials to repair houses, transportation, and cash, to do so.

• It is becoming increasingly evident that most tents distributed do not provide waterproof protection coverage. Plastic sheeting is therefore being distributed as an additional measure hence, increasing the need for more plastic sheeting in this emergency phase.

• 13,000 additional emergency shelter kits are being given out. The kits, containing tools and tarps to help families make immediate repairs or build temporary shelters in Haiti, are being assembled this week near Atlanta. They will be shipped and distributed in the Port-au-Prince area ahead of the peak of the rainy season in May.

• The continuing increase in both number of camps and the size of existing camps is providing challenges to implementing agencies. Anecdotal evidence suggests that new arrivals may be persons not directly affected by the earthquake; but seeing to benefit from the assistance being provided.

• Lack of certainty regarding land tenure, potential length of stay and ultimate ownership continues to be of concern in affected areas; both for relocation of priority sites and for planning of Transitional Shelters.

NOTES:
• If many house are safe to occupy, having people move back home would be ideal. Working to get people back into their homes would be lessen the need for transitional housing.

• The hurricane season is starting in May or June and people will only have emergency shelter. Getting a more secure and weather proof form of shelter out to the affected people is vital.
SHELTERS & NON FOOD ITEMS

- Figures from the latest camp management mobile monitoring (Displacement Tracking Matrix or DTM) identifies 1,325 sites (excluding sub-sites) in Port-au-Prince, Jacmel, Leogane, Petit and Grande Goave. This makes a total displaced population of 401,688 households and 2,088,107 individuals. Of these identified sites, only 273 have Camp Management agencies registering an overall coverage rate of 21%.

- The Christian Reformed World Relief Committee (CRWRC) has begun construction on 900 transitional shelters for Haiti earthquake survivors. Work will soon begin on an additional 720 permanent home.

- As of April 13, Shelter Cluster partners had completed more than 150 transitional shelters in earthquake-affected areas. In the coming months, Shelter Cluster partners plan to provide nearly 120,000 transitional shelters to earthquake-affected families.

- According to the U.N. Office for Project Services (UNOPS), GoH Ministry of Public Works (MoPW) engineers had conducted habitability assessments of more than 32,000 structures as of April 13. Of the total, the MoPW engineers determined that 44 percent of assessed structures are safe for habitation, more than 32 percent could be made safe with repairs, and nearly 24 percent are unsafe and require demolition.
PROTECTION

• According to UNICEFF the most critical and appropriate intervention providing stability, structure and a range of opportunities for support and refer-al is the resumption and expansion of schooling.

• There are increased reports of cases of trafficking and of gender-based violence affecting mainly girls, but also women and boys. It is essential to increase overall capacity to prevent and respond.

• Over 55,000 children per week benefit from 78 child friendly spaces set up. Each CFS benefits around 50-100 children/day through several shifts.

• A call centre is receiving calls from frontline workers working with separated children. So far, over 767 separated children have been registered.

• The 5th of April marked the reopening of schools in a phased approach throughout the most earthquake affected areas of Haiti.

• The lack of light and location of latrines in camps for example, remains a severe concern regarding women’s and children’s security.

• Women, adolescent girls and children often endure uncomfortable circumstances, lack of privacy, and the risk of violence and abuse due to a number of aspects:
  - Latrine doors can’t be locked
  - Lack of lighting
  - Lack of safely located women’s toilets
  - Long walking distance to latrines.

• During an 15 April visit to Tabarre ISSA resettlement site, USAID/DART staff noted a number of solar-powered lights installed throughout the settlement and ongoing preparations for the arrival of residents, including installation of tents, water bladders, and latrines. Settlement management staff noted that men and women’s latrines at the site will be placed 1 to 1.5 meters apart and will colored differently to distinguish them. Relief agencies also noted that five latrines will be accessible to persons with disabilities. USAID/DART protection officers noted that the latrines at the site were placed in a central area that will be lit by solar-powered lights.

NOTES:
• Officials should work to ensure that the latrines are as safe as possible to limit gender based violence. The systems set up in Tabarre would be beneficial to all camps.
• Many of the schools have reopened, and working to ensure that children are safe when they are traveling to and from schools should be a priority.
SAFETY AND SECURITY

• Between 11-13 April, UN Deputy Secretary-General Asha-Rose Migiro held informal talks with residents and formal meetings with women’s groups, who complained of sexual abuse in the camps.

• As of 14 April, humanitarian agencies had installed nine USAID/OFDA-provided mobile light towers in three priority spontaneous settlement sites in Port-au-Prince, including five lights in Ancien Aéroport, three lights in Corail Cesselesse, and one light in Terrain Accra. An additional six mobile light towers are planned for installation in the Pétion-Ville Club/Golf Delmas 48 spontaneous settlement.

• During an 15 April visit to Tabarre ISSA resettlement site, USAID/DART staff noted a number of solar-powered lights installed throughout the settlement. Five latrines will be accessible to persons with disabilities, in a central area that will be lit by solar-powered lights.

• In the Dominican Republic, ACNUR distributed 20 solar torches in 4 isolated communities: Marre-Roseau, Pays-Pourri, Balan and Galette-Chambon. 10 solar torches were each distributed in the Love a Child Foundation and in the American Refugee Committee Camp where patients are being treated.

• The Child Protection sub-cluster is engaged in the planning and design process of the relocation of displaced people to ensure that child protection services are integrated into the new camps. The cluster is providing child protection monitors and mobile child protection teams during relocations. The cluster currently reaches 120,000 people in the border areas with prevention and awareness-raising programs on trafficking issues. Over 80 people from the national Haitian police (Child Brigades) have received training on how to address trafficking issues.
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<th>NEWS AGENCY WITH LINKS</th>
<th>STORY DESCRIPTION</th>
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<tr>
<td>CNN</td>
<td>Haiti denies charges dropped against American missionaries - Haiti’s top prosecutor Attorney General Joseph Manes denied reports on 16 April that charges have been dropped against nine of the 10 American missionaries accused of kidnapping children the January disaster. He was responding to news from the office of U.S. Sen Jim Risch, R-Idaho, whose staff on 15 April said the charges had been dropped nine of the Baptist missionaries. Group leader Laura Silsby remains in a Haitian jail. However, Manes said that information was &quot;absolutely incorrect,&quot; and that under Haitian law, all charges against the 10 Americans stand until the examining judge, Bernard Saint-Vil, renders his final decision on whether to proceed to trial.</td>
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<td>The Miami Herald</td>
<td>Trade preferences urged for Haiti - Former Presidents Bill Clinton and George W. Bush are urging members of Congress to allow a quake-ravaged Haiti to triple the amount of knit and woven fabrics it currently exports to the U.S. under a duty-free access trade legislation. Bush and Clinton are also seeking an extension from eight to 15 years of the trade preferences in the Haitian Hemispheric Opportunity through Partnership Encouragement Act (HOPE II) legislation. Under HOPE II, Haiti can export 70 million square meters of fabric duty free. The 250 million square meters that it is now seeking would represent just 1 percent of all U.S. textile imports.</td>
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<td>Reuters</td>
<td>Haiti approves key post-quake reconstruction body - Haiti’s parliament has approved the creation of a commission that will allow foreign donors to participate in deciding how to rebuild the country. The joint commission, to be co-chaired by former U.S. President Bill Clinton, the U.N. special envoy for Haiti, and by Haitian Prime Minister Jean-Max Bellerive, will determine which reconstruction projects will receive backing from multibillion-dollar funding pledged by foreign donors.</td>
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<td>Washington Post</td>
<td>Haiti able to hold poll by year-end: Bill Clinton - The former U.S. president said Haiti would need help to stage its presidential election and already-delayed legislative elections as it rebuilds. The earthquake destroyed the offices of the Electoral Council, members of the U.N. mission working with the commission were killed and election materials were buried. Ninety-eight of the 99 seats in the legislature’s Chamber of Deputies were to be at stake in the February election prior to the disaster, along with one-third of the 30-member Senate. The vote for the remaining lower house seat had been set for a later date. Presidential elections had been set for November, but it is unclear whether that will happen on schedule.</td>
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**COORDINATION LINKS**

**All Partners Network (APAN)** - was developed to foster communication, collaboration and situational awareness across the global community. **Note**: Site requires login.

**Global Disaster Alerts Coordination System (GDACS)** - Provides near real-time alerts about natural disasters around the world and tools to facilitate response coordination, including media monitoring, map catalogues and Virtual On-Site Operations Coordination Centre (OSOCC). **Note**: Must have an account to get alerts.

**HARMONIEWeb** provides an unclassified internet accessible environment for the exchange of information across the civil-government boundary associated with Stability, Security, Transition and Reconstruction Operations or Humanitarian Assistance and Disaster Relief.

**One Response** – A collaborative inter-agency website designed to enhance humanitarian coordination within the cluster approach, and support the predictable exchange of information in emergencies at the country level. The website will support Clusters and OCHA fulfill their information management responsibilities as per existing IASC guidance.

**ReliefWeb** – Premier site from humanitarian information, it is a UN Office for the Coordination of Humanitarian Affairs (OCHA) sponsored website that provides information to humanitarian relief organizations.

**The Civil Military Fusion Center** is an information knowledge management organization focused o improving civil –military interaction, facilitating information sharing and enhancing situational awareness through the web portal.