HIGHLIGHTS

• In Haiti, confirmed cholera cases are reported in new areas of the capital and in additional departments in the country. As of 21 November 2022, the Department of Epidemiology, Laboratories, and Research (DELR) confirmed 961 cases of cholera across six departments compared to four departments in the previous epidemiological week. 85.7% (825) of confirmed cases were reported in the Ouest department.

• In the Dominican Republic, a second imported cholera case was confirmed on 21 November by the Ministry of Health: a 4-year-old boy coming from Port-au-Prince who entered the country from Haiti through the Dajabon border on 18 November.

• In Haiti, PAHO/WHO continues to support the Ministry of Health (Ministère de la Santé Publique et de la Population – MSPP) and partners, including:
  ✓ Dissemination of over 90,000 printed brochures and posters with messages on cholera prevention in the Ouest Department, and broadcasting of radio spots with preventive messages across all 10 departments in the country.
  ✓ Technical and logistic support to field investigations of alerts in all departments to identify suspected cases and collect samples for laboratory analysis.
  ✓ Transporting samples from the departments to the national reference laboratory.

• In the Dominican Republic, PAHO/WHO continues to support the Ministry of Health in monitoring and investigating alerts as well as in implementing prevention activities through risk communication and community engagement.

Reported cholera cases in Haiti by department. As of 21 November 2022.
As of 21 November, a total of **12,016 suspected cholera cases** were reported in eight of the ten departments in Haiti, including cases reported in the Civil Prison in Port-au-Prince. Out of these, **963 were confirmed** by the national laboratory, including **216 deaths**. To date, **six out of the eight departments that reported suspected cases have confirmed cases** (25 in Artibonite, 78 in Centre, 6 in Grand’Anse, and 826 in Ouest). We note an increase of 24% in overall suspected cases and a 17% increase in confirmed cases from the previous sitrep #6 – 17 November (figure 1).

- As of November 20th, the case fatality rate among suspected cases is 2%.
- The most affected communes in the Ouest department continue to be Port-au-Prince, Delmas, Cité Soleil and Carrefour.
- Based on the MSPP report from 21 November, 58.9% of reported suspected cases are male, 41.9% female and 57.6% are aged 29 years or younger (figure 2).
- Among confirmed cases, age groups 1-4 and 30-39 are the most affected.
- At the Civil Prison in Port-au-Prince, MSPP still reports 368 suspected and 14 confirmed cases and 14 deaths.

**Figure 1.** Summary of percent difference compared to previous Sitrep #6 (17 November 2022)

<table>
<thead>
<tr>
<th>Department</th>
<th>Suspected Cases 21.11.22</th>
<th>% Difference N6 Sitrep 17.11.22</th>
<th>Confirmed Cases 21.11.22</th>
<th>% Difference N6 Sitrep 17.11.22</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ouest</td>
<td>10774</td>
<td>19.50%</td>
<td>826</td>
<td>13.01%</td>
</tr>
<tr>
<td>Artibonite</td>
<td>289</td>
<td>12.02%</td>
<td>25</td>
<td>38.89%</td>
</tr>
<tr>
<td>Centre</td>
<td>401</td>
<td>47.43%</td>
<td>78</td>
<td>17.91%</td>
</tr>
<tr>
<td>Nord</td>
<td>7</td>
<td>600.00%</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Sud</td>
<td>13</td>
<td>62.50%</td>
<td>5</td>
<td>0.00%</td>
</tr>
<tr>
<td>Nord-Est</td>
<td>7</td>
<td>0.00%</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Nord-Ouest</td>
<td>1</td>
<td>100.00%</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Grand’Anse</td>
<td>24</td>
<td>0.00%</td>
<td>6</td>
<td>0.00%</td>
</tr>
<tr>
<td>Sud-Est</td>
<td>46</td>
<td>84.00%</td>
<td>9</td>
<td>0.00%</td>
</tr>
<tr>
<td>Nippes</td>
<td>86</td>
<td>16.22%</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Civil Prison</td>
<td>368</td>
<td>0.00%</td>
<td>14</td>
<td>0.00%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>12016</strong></td>
<td><strong>24.07%</strong></td>
<td><strong>963</strong></td>
<td><strong>17.30%</strong></td>
</tr>
</tbody>
</table>

**Figure 2.** Distribution of suspected and confirmed cases of cholera by age group and gender in Haiti as of 21 November 2022

Source: Haiti Ministère de la Santé Publique et de la Population
Figure 3. Daily distribution of suspected cases of cholera in Haiti as of 21 November 2022

RISK ASSESSMENT AND CHALLENGES

- Simultaneous global Cholera outbreaks generate a high demand for medical and non-medical essential supplies, including the oral vaccine, resulting in limited supply for immediate distribution among all cholera affected countries.
- In Haiti, lack of access to affected areas due to insecurity, on-going demonstrations and civil unrest, continue to hinder epidemiological surveillance, the installation of Oral Rehydration Points (ORP) and Cholera Treatment Centers (CTCs), the transport of patients to CTCs and health promotion, as well as water, hygiene and sanitation activities at the community level.

HEALTH NEEDS

In coordination with health authorities, the following **priority needs** have been identified to reduce morbidity and mortality:

- Medical and non-medical supplies for case management, including Oral Rehydration Salts (ORS), Ringer Lactate, cholera beds and WASH supplies.
- Human resources, whose availability is limited in the country due to the security situation.
- Laboratory reagents and rapid diagnostic tests for the investigation and confirmation of cholera cases.
- Access to safe drinking water and improved hygiene and sanitation.
In line with the 5 pillars defined by the MSPP for the cholera outbreak response, PAHO/WHO continues to support the scale up of the MSPP response in Port-au-Prince and in the departments as follows:

**Epidemiological and laboratory Surveillance**
- In Haiti, PAHO/WHO supporting the DELR in strengthening of laboratory surveillance by training labo-moto nurses and sampling teams to run rapid diagnostic tests in the Centre and Ouest Departments.
- PAHO/WHO continues to support Haitian public health authorities in conducting field investigations of alerts in all departments to identify suspected cases and collect samples for laboratory analysis. Given the complexity of ground transportation, PAHO/WHO is facilitating sample transportation to the national reference laboratory (LNSP) through UN Humanitarian Air Service (UNHAS) flights. Samples from the Nord-Ouest departments were transported to the LNSP.

**Case management**
- PAHO/WHO supported the Health Decentralization Support Unit (UADS/MSPP) and the Directorate for the Organization of Health Services (DOSS/MSPP) in conducting a field mission to the Artibonite and Centre Departments to assess the quality of services being provided in CTCs, capacity for scaling up case management, and determine needs and gaps for the cholera response.

**WASH**
- PAHO/WHO trained departmental health officers on cholera response at the community level, investigated WASH conditions in cholera hotspots, and provided assistance to Health Directorates to estimate their current WASH needs for the cholera response.

**Risk communications and community engagement**
- In Haiti, PAHO/WHO produced and distributed over 90,000 printed brochures and posters with messages on cholera prevention in the Ouest Department, with the support of partner agencies and NGO’s.
- In Haiti, PAHO/WHO, in coordination with UNICEF and the Communications Unit of the Ministry of Health (MSPP), developed a communication strategy to support the cholera vaccination campaign.

**Vaccination**
- The Ministry of Health (Ministère de la Santé Publique et de la Population – MSPP) authorized an emergency vaccination campaign against the cholera epidemic and with the support of PAHO/WHO a request for vaccines was sent to the International Crisis Group on 15 November.