HIGHLIGHTS

• In Haiti, as 18 December 2023, the Department of Epidemiology, Laboratories, and Research (DELR) have reported 76,675 suspected cases and 4,383 confirmed cases in all 10 departments of the country, which represent a 1% increase in confirmed cases and a 0.47% increase in suspected cases in the last 7 days.

• In Haiti, PAHO/WHO continues to support the MSPP and partners, including in:
  • Strengthening surveillance by supporting epidemiological surveillance missions in Nord-Ouest, Nord, Artibonite, Ouest, and Sud Este departments.
  • Enhancing epidemiological and laboratory surveillance at the department level to improve the quality of data and reporting, as well as to strengthen the capacity of the regional laboratories for the rapid detection and diagnosis of cholera, including providing weekly transport of specimens from the Nord-Ouest and Artibonite department in partnership with United Nations Humanitarian Air Service (UNHAS).
  • Improving case management in Cholera Treatment Centers (CTC) by supporting Health Directorates in clinical care, water, hygiene, sanitation and infection prevention and control, including training service providers in institutional management of cholera.

• In the Dominican Republic, the total number of confirmed cases is 149 and 1 death. Last cases were registered in La Cienaga municipality, province of Baraona.

Figure 1: Reported Suspected Cholera Cases in Haiti by Department as of 18 December 2023

Source: Haiti Ministère de la Santé Publique et de la Population (MSPP). Data generated by PAHO/WHO
**CONTEXT AND CHALLENGES**

- In Haiti, the complex humanitarian and socio-political crisis, with high levels of insecurity, fuel shortages and economic instability, continue to be major challenges in the response to the cholera outbreak, limiting access to health and basic water, hygiene and sanitation services, as well supplies:
  - Lack of access to affected areas continue to hamper 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 community level water, hygiene, and sanitation activities.
  - Insufficient resources to conduct effective response activities in hot spots.
- The global cholera crisis generates a high demand for medical and non-medical supplies, including for the oral vaccine, resulting in limited cholera commodities for immediate distribution in all affected countries.

**EPIDEMIOLOGICAL UPDATE**

- In Haiti, as of 18 December 2023, a total of 76,675 suspected cholera cases have been reported, of which 4,383 were confirmed by the national laboratory, including 1,156 deaths, in 10 departments.
- To date, all ten departments have reported confirmed cases, with the majority reported in Ouest (n=27,663), followed by Centre (n=15,258), Artibonite (n=10,601), and Nord (n=7,490). The most affected municipalities in the Ouest Department are Port-au-Prince, Carrefour, Cité-Soleil, Delmas, Petit-Goave, Cabaret, and Croix-des-Bouquets.
- Cases continue to be confirmed by culture in all departments of the country, indicating active circulation of Vibrio cholerae O:1.
- Based on the MSPP report from 18 December, 53% of reported suspected cases are male, 46.9% female and 61% are aged 29 years of younger (figure 1).
- The case fatality rate among suspected and hospitalized cases is 1.5% and 1.2% respectively.
- Age groups 1-4 (18.2%) and 5-9 (14.6%) are the most affected among the 4,383 confirmed cases.

**Figure 2. Distribution of suspected cases of cholera by age group in Haiti as of 18 December 2023**

![Distribution of suspected cases of cholera by age group in Haiti as of 18 December 2023](image-url)

**Source:** Haiti Ministère de la Santé Publique et de la Population
In the Dominican Republic, up to epidemiological week (EW) 49, a total of 1,472 suspected cholera cases have been reported, with 149 of them confirmed. Additionally, a fatal case involving a foreigner was recorded. Santo Domingo Norte Municipality in the Santo Domingo Province accounted for the highest percentage of cases at 22.1%, followed by La Cienaga Municipality in Barahona with 15.4%, and Santo Domingo Municipality in the Distrito Nacional with 12.8%.

**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 solution, cholera beds and WASH supplies.
- Human resources at CTC and Department Levels.
- Laboratory reagents and specimen transportation for the investigation and confirmation of cholera cases.
- Access to safe drinking water and improved hygiene and sanitation.
- Ensure early detection and rapid, comprehensive investigations.
- Access to a community response with good multidisciplinary teams to break the transmission chain.
- Access to sufficient fuel and transportation services (air and land) for the timely and effective distribution of essential cholera supplies.

**PAHO/WHO RESPONSE**

PAHO/WHO continues to support national health authorities and operational partners in prioritizing the cholera response in the departments and municipalities most affected based on the epidemiological situation as follows:
Coordination and leadership

- A weekly internal coordination meeting is held every Thursday to discuss and strategize the cholera response.

- PAHO participates in health cluster meetings at the central level and health sub-cluster meetings at the departmental level (Centre and Artibonite) to maintain open communication and collaboration with all partners involved in the response.

- A coordination meeting was held with UNICEF and MSF to streamline the management and distribution of departmental supplies for the cholera response. The objective of this collaboration is to ensure efficient and timely delivery of supplies to the departments while avoiding duplication of efforts.

- While regular coordination meetings are held in the Ouest department, there is a need to enhance and regularize coordination meetings at the departmental level across Haiti. This will facilitate a more cohesive and effective response to the cholera outbreak.

- Presentation of the disease's epidemiological situation at coordination meetings at central, departmental, and WaSH cluster meetings

Epidemiological and laboratory surveillance

- PAHO/WHO continues to support the MSPP to strengthen the capacity of regional laboratories for the rapid detection and diagnosis of cholera, including in procuring equipment, laboratory materials and reagents. Additionally, PAHO/WHO has supported the weekly transport of specimens from the Nord Ouest and Artibonite departments by United Nations Humanitarian Air Service (UNHAS).

- In addition, PAHO/WHO continues to monitor and support the rapid investigation of cholera alerts and response activities including hiring of 10 PAHO assistant epidemiologists to support surveillance and alert investigation activities. Assistant epidemiologists also support departmental situation rooms, prepare weekly bulletins, and manage data validation at the health directorate level.

- Investigation and response missions were carried out in all departments. 100% of alerts were investigated within 48 hours by the surveillance teams of each department.

- The Labo-Moto, the motorbike laboratory team in Haiti, supported the collection and transportation of samples, trained institutional staff on sampling techniques, and participated in the rapid investigation of new cases as a part of the Ministry of Health and Population (MSPP) departmental rapid mobile teams.

- Dominican Republic, with support from PAHO/WHO, continues to monitor entry points in the provinces bordering Haiti as well as to implement prevention activities through risk communication and community engagement.

Case management

To ensure quality of care in treatment centers, the following activities were carried out in the first quarter of 2023:

Training:

- A trainer of trainers was held benefiting 20 healthcare professionals (two per department) on cholera case management. These trainers are now able to replicate the training in their respective departments.
A total of 294 healthcare providers have been trained, including 62 doctors, 194 nurses, and 38 auxiliary nurses.

**CTDA evaluation and upgrade:**
- A total of 113 out of 167 CTDA were evaluated in 9 departments. Due to the security situation, only 9 out of 30 CTDA were evaluated in the Ouest department; and CTDA in the Artibonite department have not been evaluated yet.
- A total of 38 CTDA were upgraded to meet care standards (Centre: 10; Nord-Est: 12; Nord: 16). These 38 CTDA were reevaluated, and among the ones still operational, 100% improved their initial scores.

**Formative monitoring and information management:**
- A total of 48 CTDA were visited jointly with the Directorate for the Organization of Health Services (DOSS, per its acronym in French) in 6 departments: Sud-Est, Nord-Ouest, Nord-Est, Grande Anse, Sud, and Nippes.
- Surge capacity was provided to Health Directorates to monitor the quality of care in CTDA and ensure data management.

**WASH**
- 17 WaSH personnel (8 WaSH technicians and 9 departmental WaSH focal points) were trained on the implementation of IPC measures in CTDA to reduce nosocomial infections.
- 23 hygienists from 12 CTDA in the Artibonite department were supervised.
- Training on 34 is ongoing for CTDA hygienists in the Centre, Nippes, Grande Anse, and Nord-Est departments. This training will benefit all the population.
- The procurement of WaSH supplies is ongoing (including HTH) to avoid a shortage of this essential supply.
- A purified water distribution machine will be transferred and installed in Hinche (Center department) with the support of CERF funds, to ensure CTDA are provided with safe water. The machine is scheduled to be operational in January 2024. The ongoing procurement of WaSH equipment through this CERF also includes water tanks, bacteriological analysis kits, and water quality monitoring kits.

**Risk communications and community engagement**
- Cholera awareness brochures in Creole were printed to be distributed by community health workers (ASCP).
- Planning is ongoing with the Health Directorate of the Center department to roll out risk communication and community engagement activities in the department.
- Cholera awareness messages will be broadcasted through community radio stations throughout the country in partnership with the Haitian Network of Health Journalists (RHJS).
Vaccination

- MSPP, with the support of PAHO, has completed the vaccination of 3,337 prisoners (3,203 men and 34 women) in penitentiary centers in 6 departments (Nippes, Sud, Sud-Est, Grand’ Anse, Nord and Nord-Est).

- Vaccination in IDP camps completed Final data to be shared later.

Supplies and Logistics

- PAHO/WHO continues to support the cholera response by distributing cholera medical and WASH supplies in the Nord-Est, Nord Ouest, Sud-Este, Centre, Artibonite, Grand Anse, Nippes, and Ouest departments.

Mental health

- Ongoing support is being provided to the MSPP to strengthen the coordination mechanism for the mental health component of the response, via the mental health and psychosocial support sector table, with the lead of the MSPP and support from PAHO.

- From December 4 to 10, a formative supervision mission for the mental health promotion campaign in the South and Grand Anse, with psycho-educational messages to support psychosocial well-being in this period of crisis and combat the stigma associated with illness.

- Data collection on the campaign in the 2 departments. The results will be analyzed to make recommendations.

Surveillance in IDP’s camps

- PAHO is supporting the Health Department for Health (DSO) in the IDP’s camps through guardians (64); hygienists (40), Multipurpose Community health workers (MCHW) (115), and Nurses (23) in 23 camps. The main purpose is to implement an early detection system of epidemic. So far almost 25,000 IDP’s are supported.