REPUBLIC OF HAITI
Health Cluster Bulletin #2

RÉPUBLIQUE D'HAITI
Ministère de la Santé Publique et de la Population

HEALTH CLUSTER HAITI

Highlights

- During the second quarter of 2026, ten major incidents involving armed violence led to the displacement of 50,867 people, a 19% increase compared to the previous quarter. After several months of severe deterioration in the Artibonite and Centre departments, the West department once again became the epicenter of new displacements, accounting for 64% of all movements recorded during the period—primarily due to armed violence in the commune of Cité Soleil.

- A decline in suspected diphtheria cases has been observed starting from the 21st epidemiological week. A total of 42 suspected cases have been reported across 15 sites for internally displaced persons (IDPs) in the West Department (Cité Soleil, Delmas, Pétion-Ville, Port-au-Prince) since January 2026.

- The cholera outbreak has been steadily declining since its resurgence in October 2022. Following a peak of 3,683 suspected weekly cases in 2023, transmission dropped by nearly 80% in 2024. This downward trend continued into 2025 (with 85 cumulative cases recorded during the same period) and into 2026, with 44 suspected cases reported as of July 18 (a 48% decrease). Transmission levels currently remain low and stable, reflecting successful control efforts. Maintaining surveillance and response capabilities remains crucial to preventing a resurgence, given the active circulation of Vibrio and the persistence of risk factors for transmission.



Picture 1. A health professional, as deployed through mobile clinic approach, measuring the blood pressure of an elderly woman in MEDIC IDP site, Delmas, Metropolitan Area of Port-au-Prince, OIM, June 2026.

People in need	Target	People assisted	Required bduget	Received funding
4.9 M	1.8 M*	780 927 (43.4%)	69.3 M	19.4 M(28%)

Key figures, Jan-June 2026

592 042	People received basic healthcare.
354	Suspected and confirmed cases of cholera admitted to Acute Diarrhea Treatment Centers
2 917	GBV survivors received health care
35 625	People received mental healthcare and psycho-social support
76 567	Births attended by skilled health personnel (normal deliveries and c-sections)
256	Cases of severe acute malnutrition with complications admitted to stabilization centers
74 871	PENTA 3-vaccinated children
2	Attacks on health
125 306	People sensitized on key topics (cholera prevention)
865	Deployed mobile clinics in different hotpots across the country
108 715	Drugs, supplies and equipment distributed in metric tons.
7 576**	Cases of trauma/injuries admitted to health facilities

I. Humanitarian and health overview

The situation in Haiti remains critical: rampant violence by armed gangs, disease outbreaks, and forced repatriations continue to affect vulnerable populations. A total of 141,720 people were forcibly repatriated during the first semester of 2026, the vast majority (98.8%) from the Dominican Republic.

In May 2026, the number of internally displaced persons (IDPs) nationwide was estimated at 1,466,862—a 1% increase compared to December 2025—reflecting the persistence of the displacement crisis. At the same time, the number of people leaving displacement to return to their previous areas of residence rose significantly, increasing by 89% compared to December 2025. This trend was particularly pronounced in the Port-au-Prince metropolitan area (+41%), other communes in the West Department (+1,366%), and the Centre Department (+125%). Although these returns remain fragile and often face major reintegration challenges, they represent a positive sign in certain areas, requiring sustained support to foster more durable solutions for the affected populations.

The recent termination of Temporary Protected Status (TPS) by the Trump administration could lead to the forced repatriation of many Haitians from the United States, carrying a major risk of importing diseases—specifically measles, which is currently prevalent in several countries across the Americas, including the United States.

The current hurricane season, which began on June 1, 2026, remains relatively quiet compared to 2025. However, according to the Directorate of Civil Protection, the risks associated with climate hazards—particularly cyclones and flooding—remain significant.

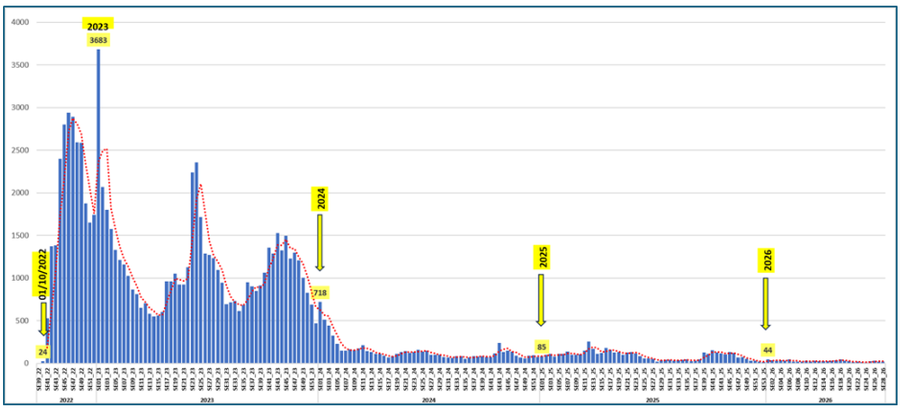
** The initial prioritization target 2.7 million. However, only 1.8 M were targeted as hyperprioritized due to the global reduction of funding.*

** * Only data available, particularly from Hopital Universitaire la Paix*

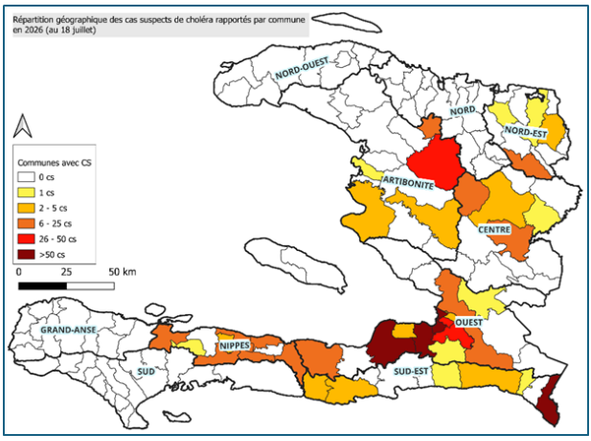
II. Brief overview of epidemiological profile

1. Cholera

Graph 1: Trend of cholera during the last three years



Graph 2 : Geographical distribution of suspected cholera cases by communes in 2026



2. Diphteria

Graph 3 : Geographic distribution of suspected diphteria, July 18th 2026

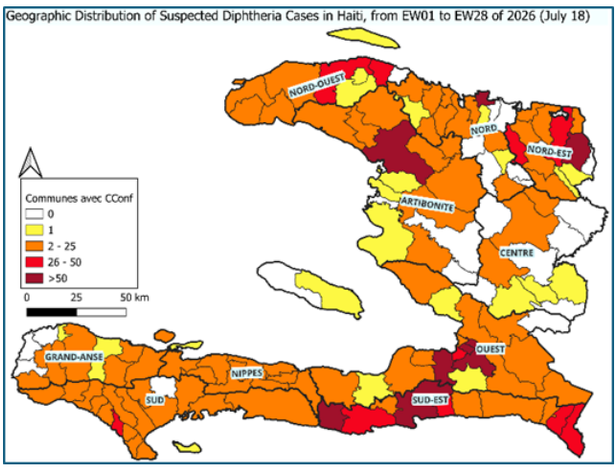


Table 1 : Geographic distribution of suspected and confirmed diphteria by department, July 2026

Departments	Suspected	Confirmed	Death
Artibonite	201	6	1
Centre	43	2	1
Grand'Anse	30	5	0
Nippes	37	2	0
Nord	167	8	2
Nord-Est	232	29	3
Nord-Ouest	101	10	2
Ouest	810	65	9
Sud	144	6	0
Sud-Ouest	522	36	2
	2287	**169**	**20**

The 10 departments across the country are affected by diphtheria. The West, Southeast, Northeast, Artibonite, and North departments are the five most affected. The overall case fatality rate is 7.4%.

Source : MSPP/DELR

DELR : Direction dÉpidémiologie, Laboratoire et Recherche.
MSPP: Ministère de la Santé Publique et de la Population.
DTM : Displacement Tracking Matrix

III. Health Cluster Actions

1. Leadership and Coordination

- Completed cluster coordination performance monitoring, CCPM 2025
- Completed the training of UNGUS staff on data management and the GIS (Geographic Information System)
- Updated the partner presence mapping, particularly in Cite Soleil and Kenskoff.
- Participated and facilitated different health and humanitarian coordination meetings (Health Cluster, GT santé PDI, GT DMU/SSR, GT Santé mentale et appui psychosocial, GT Protection des migrants, Cluster WASH, Cluster Nutrition, différentes salles de situation nationale et infranationales, ICCG, etc.)

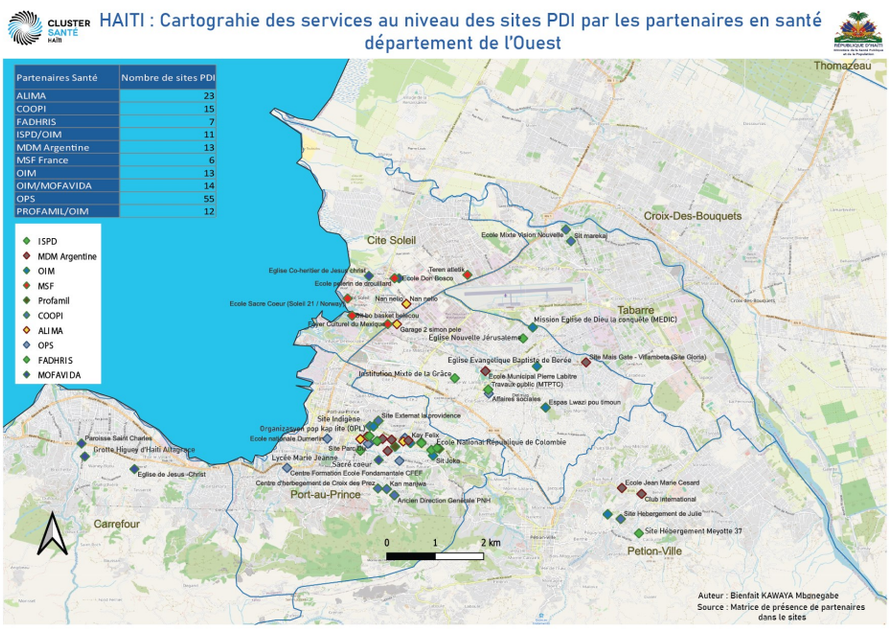
2. Major gaps and challenges

- Insecurity and mobility constraints: Persistent insecurity in the Port-au-Prince metropolitan area and the impassable condition of departmental roads hinder emergency medical referral systems and disrupt regular access by mobile clinics to displacement sites
- The demand for mental health and psychosocial support (MHPSS) exceeds current response capacity due to an insufficient number of professionals on the ground and limited funding. This situation reduces service coverage and underscores the need to increase investment in MHPSS in order to meet the growing needs of displaced populations.
- The ongoing increase in the number of internally displaced persons (IDPs), their needs, and the number of IDP sites stands in contrast to the low level of funding received—only 28% of the required funds.
- Temporary suspension of activities in certain neighborhoods of the Cité Soleil municipality (Chancerelles, Bélécourt, Wharf Jérémie, La Saline, Village Rapatriés) due to the security situation, particularly at the Chancerelles maternity ward during the last two weeks of June following the clashes between gangs.
- A lack of flexible and predictable funding that would enable local organizations to provide humanitarian assistance while ensuring the safety of their staff and beneficiaries and upholding humanitarian principles.
- Severe shortage of qualified personnel: The lack of professional midwives, obstetrician-gynecologists, and anesthesiologists is placing a heavy burden on 24-hour staffing in maternity wards and leading to recurring gaps in the documentation of clinical records.
- Lack of dedicated transportation (in Ouanaminthe and Belladère) to ensure the rapid referral of urgent medical cases to the appropriate health facilities.

3. Perspectives and key asks

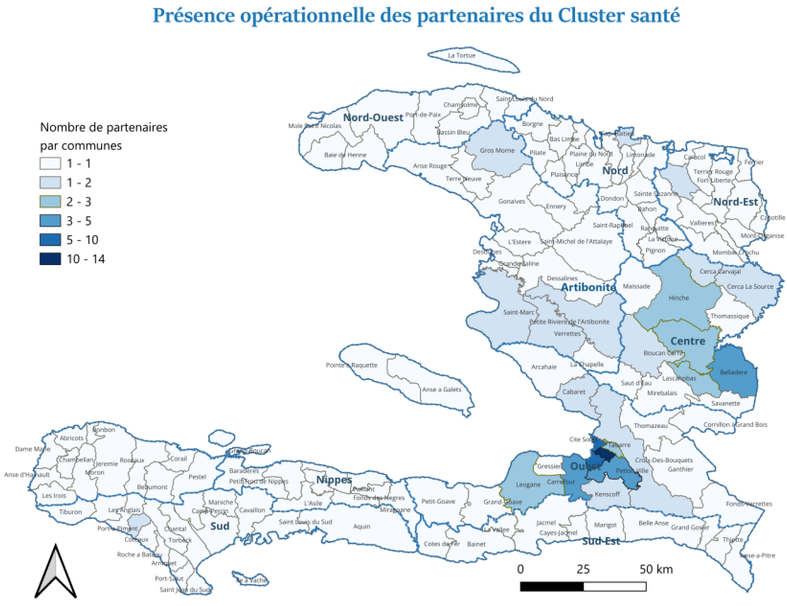
- Increasing humanitarian funding in a manner that is adequate, predictable, flexible, and complementary.
- Renovation of the Croix-de-Bouquet Maternity Ward to improve access to sexual and reproductive health in the town of Croix-de-Bouquet.
- Launch of blood transfusion services at AAP Hospital (training, blood collection, establishment of the hemovigilance committee)
- Improving the availability of emergency obstetric and neonatal services, particularly for displaced women and girls and migrants upon arrival at borders, in order to reduce maternal and neonatal mortality (availability of medical personnel, supplies, referrals and counter-referrals, information, education, and empowerment).
- Logistical Security for Tracer Medications: Implement rigorous inventory management protocols to address repeated shortages of key tracer supplies (DMPA, contraceptive implants, RPR tests for syphilis, oxytocin, and hydralazine) and improve the cold chain.

4. Partners presence in IDP sites, West department



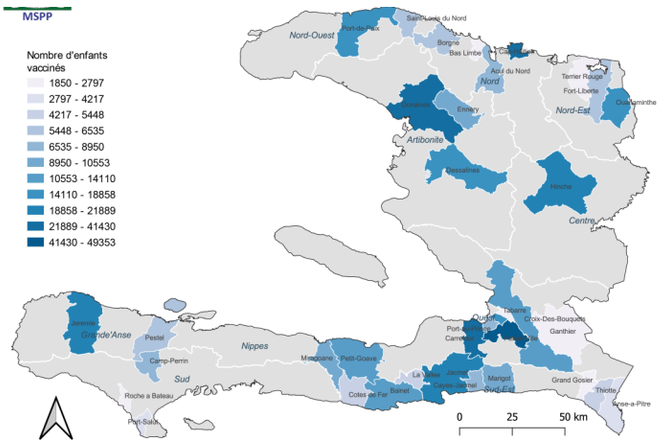
A total of eleven (11) partners in the Health Cluster (IOM, PAHO/WHO, COOPI, MSF, ALIMA, FADHRIS, MOFAVIDA, ISPD, PROFAMIL, World Relief, Douleurs Sans Frontières) are currently operating in the Port-au-Prince Metropolitan Area (ZMPP), the area most affected by violence in the country. Of these, five are local or national NGOs.

5. Partners presence across the country



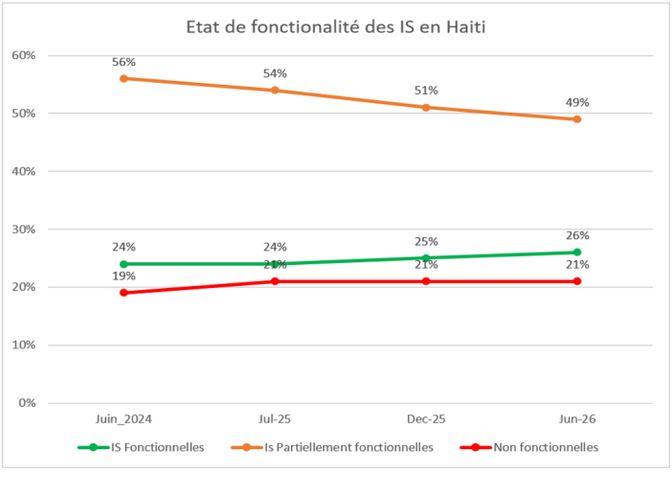
5. Vaccination campaign againt diphteria in the hotspot communes

A total of 448,449 children aged 6–15 were vaccinated with the dT vaccine June 7–12, 2026 in 2,249 schools as part of the vaccination response to the diphtheria outbreak from

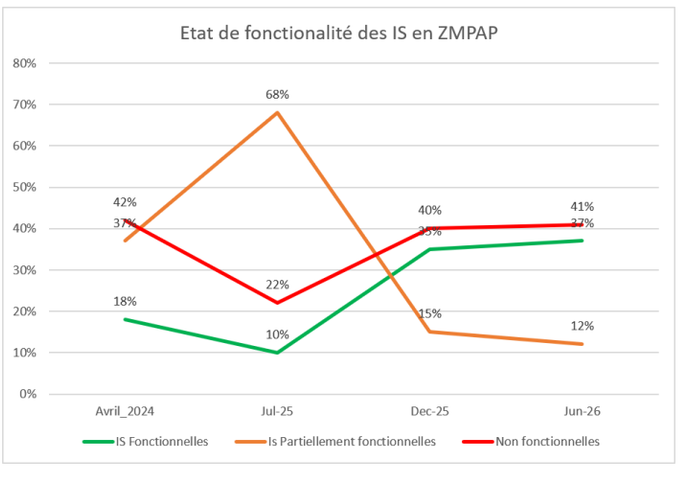


6. Fonctionality of health facilities

Fonctionality of health facilities across the country

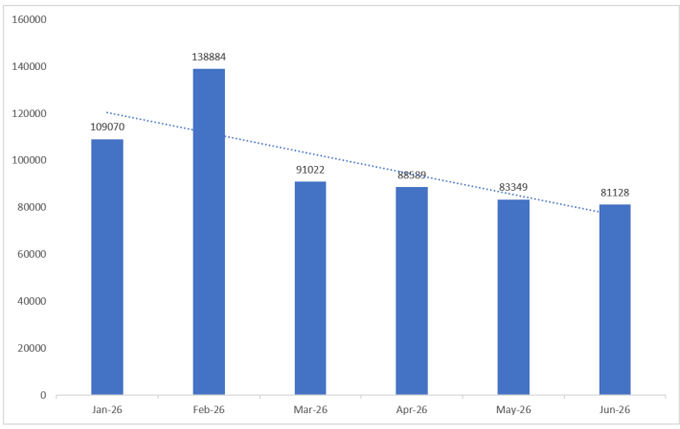


Functionality of health facilities in the metropolitan area of Port-au-Prince

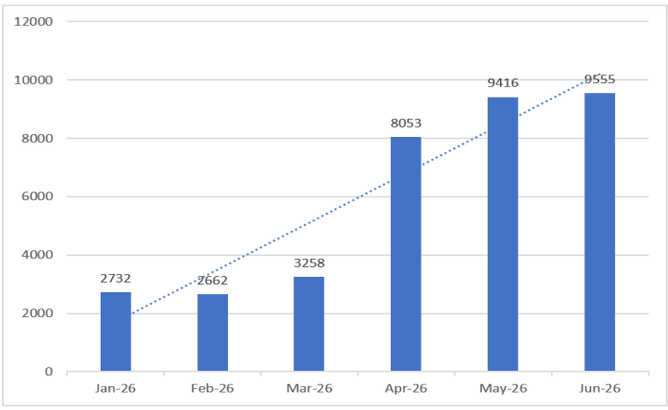


7. Monitoring Key Indicators of the Humanitarian Response

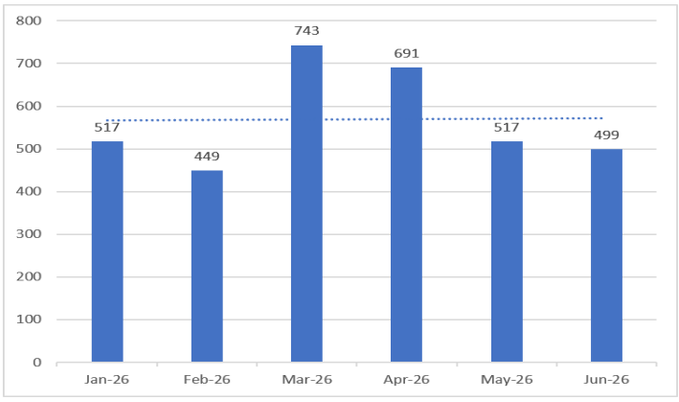
Number of people with access to basic health care (number of consultations conducted)



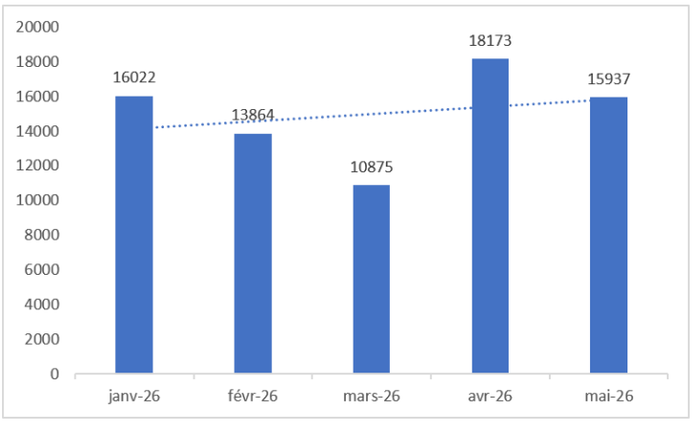
Internally Displaced Persons with Access to Mental Health Care and Psychosocial Support



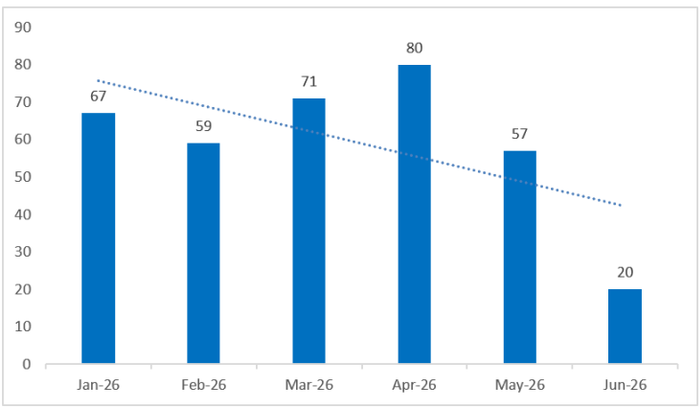
Survivors of gender-based violence who have access to health care



PENTA 3-vaccinated children



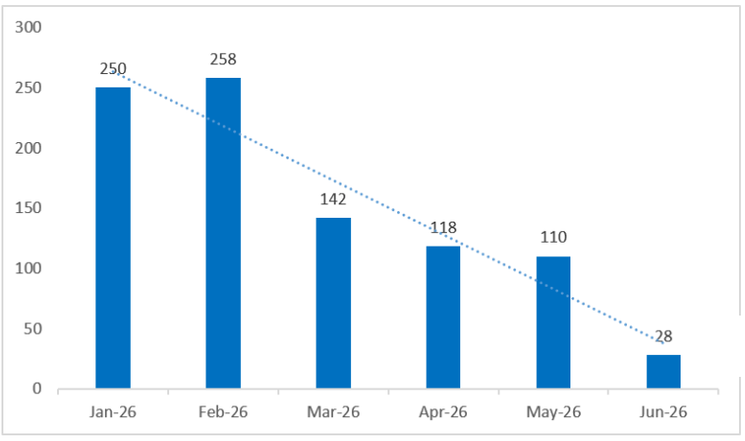
Suspected and confirmed cases of cholera admitted to Acute Diarrhoea Treatment Centers



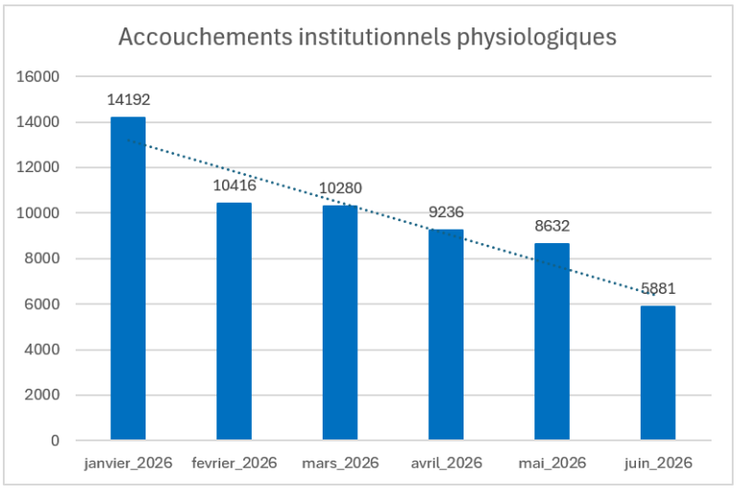
Number of cases of severe acute malnutrition with complications admitted to stabilization centers

Note:

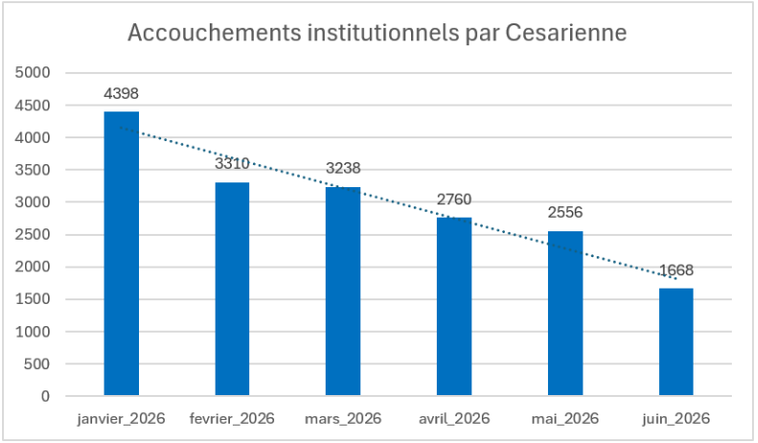
- ***The current data covers only the period up to June 13, 2026. However, there has been a decrease in reported cases during the first semester of the year due to several factors, primarily related to reporting. A thorough analysis will provide a better understanding of the situation.***



Births attended by skilled health personnel (normal deliveries and c-sections)



Number of Cesarean sections performed



8. Key Achievements by health cluster partners

A total of 17 health cluster partners submitted their achievements as follows:

ALIMA

Major achievements:

- Support for the renovation of the Santo 17 Health Center
- Support for curative care services at the Corail Cesselsse Center
- Emergency response through the deployment of mobile clinics in new sites following the population displacement to Cité Soleil in May.
- Opening of the stabilization center at the CHAPI Hospital
- Launch of pediatric and IMCI outpatient clinics at the Thomassin 25 Health Center
- Donation of a 3-month supply of medical supplies to the Mapou and Belle Anse Health Centers following the suspension of activities in these two centers;
- Conducting the endline satisfaction survey of HIP 25 beneficiaries;
- Receipt and qualification of the blood bank refrigerator at the AAP Hospital;
- Assessment of the temporary shelter site for deportees in AAP;
- Training on waste management and establishment of a hygiene/PCI committee at the AAP Hospital; Training/briefing for staff and ASCPs on Psychological First Aid at the AAP Hospital;



Mobile clinic in Sarthe.

Douleurs sans frontières

Major achievements:

- Improved access to primary health care for internally displaced persons (IDPs) within IDP sites
- Implemented a mental health and psychosocial support (MHPSS) program for displaced populations at IDP sites
  Strengthened access to and the quality of health care for pregnant women and postnatal women in health facilities supported by partners
- Distributed essential medicines and medical supplies to partner health facilities



Patients waiting for the medications prescribed by the doctor following a medical consultation through a mobile clinic held at the Villambetta site.

Aide aux Bénéficiaires Vulnérables

Major achievements:

- Mobile Clinic deployment
- Malnutrition screening with Referral (PTA / USN)
- Diphtheria Awareness Campaign (Host Community)



A child diagnosed with complicated MAS in Shalom site, Delmas 33, was referred to the stabilization center, Hopital Universitaire La Paix, June 2026.

Haitian Health Foundation

Major achievements:

- Distribution of 15,000 food kits and hygiene kits.
- Completion of the nine-month Youth Leadership Center program.
- Continuation of all essential HHF services, without interruption or reduction.



Protecting Babies' Health: A Baby in Our Care Receives a Vaccine

World Dynamic Action

Major achievements:

- Mobile Clinics and Vaccination (Relocated Sites)
- Vaccination and Family Planning / Vaccination Assembly Points (institutional and host community)
- Management of uncomplicated MAM/MAS at the institutional level (WDA Health Center), where we are implementing the IFSAN International Solidarity Project in collaboration with the DSO and UCEPNAnu (MSPP)
- Awareness-raising activities on diphtheria (behavior change) at the institutional/community level and IDP sites (with our ASCPs and community liaisons)



Free medical care provided to one of the patients during a mobile clinic, followed by nutritional support at the WDA Health Center (Pétion-Ville)

MSF Hollande

Major achievements:

- MSF-Hollande teams provided more than 14,500 medical and psychosocial consultations and treatments through fixed facilities and mobile clinics to maintain access to care in the affected areas.
- Activities included primary health care, sexual and reproductive health, deliveries assisted by qualified personnel, and community health services.
- Special attention was given to the medical and psychosocial care of survivors of gender-based violence.
- Mental health and psychosocial support activities were also strengthened to meet the needs of populations affected by the crisis.



First delivery took place in February 2026 at the Thomassin 25 maternity ward with support from ALIMA, funded by ECHO

PROFAMIL

Major achievements:

- Providing sexual and reproductive health consultations at our three permanent clinics and in displacement camps in the Port-au-Prince metropolitan area through mobile clinics.
- Screening for and management of precancerous lesions.
- Promoting and providing various family planning methods (birth control pills, implants, injections, intrauterine devices, etc.)
- Conducting two free vasectomy campaigns in the West and Southeast in June and November
- Community outreach and training on sexual and reproductive health
- Training in comprehensive sexuality education and other priority topics for young people in our clubs



Antenatal consultation for a patient seen at a mobile clinic in June 2026.

OIM

Major achievements:

- During the three-month reporting period, IOM conducted 29 mobile clinics at various sites, enabling 1,379 internally displaced persons (IDPs) to receive medical consultations.
- Awareness-raising activities on cholera prevention were carried out at the sites in partnership with the Western Health Directorate (DSO). In total, 4,718 IDPs were educated on measures to prevent and control this disease.
- To ensure access to specialized care, IOM facilitated medical referrals for 32 cases requiring specific treatment to appropriate hospital facilities during the month of June. IOM also covered the full cost of medical care for these referred patients, thereby facilitating their access to specialized care and improving their medical treatment.
- Following the displacement of the population of Cité Soleil and in response to ETT alerts 93, 93.1, 93.2, and 93.3, IOM, in collaboration with its implementing partner MOFAVIDA, provided medical assistance and psychosocial support to 1,428 internally displaced persons (IDPs).
- In response to ETT 96 regarding new displacements in Port-au-Prince, IOM, in coordination with its implementing partner MOFAVIDA, launched an intervention at the Larochelle Marché Poisson site, where 270 IDPs received medical consultations.
- Following ETT 92 regarding displacement in the Artibonite department, IOM, through its implementing partner MDMA, launched an emergency response to provide assistance to newly displaced populations.
- Strengthening health coordination with the MSPP at the Ouanaminthe border, including the establishment of a medical referral system and the presence of a nurse at the Border Resource Center to provide first aid and triage cases.
- Recent construction of a safe space within PGNE's premises, designed to improve the care, protection, and support provided to survivors of gender-based violence.
- Strengthening of referral mechanisms to specialized civil society organizations, notably PGNE, RFEO, and RFJS, to ensure psychosocial follow-up and appropriate protection.
- Launch of the recruitment process for a health focal point physician, in accordance with the health coordination protocol established by the MSPP, to improve the quality of interventions and coordination with health services.
- Strengthening of psychosocial and mental health support through individual, group, and community activities at the Belladère border.



Patient seen during a mobile clinic deployment, MEDIC IDP site, Delmas, Ouest department

OPS

Major achievements:

- Strengthening the capacity of two priority hospitals to provide high-quality emergency obstetric and neonatal care (BEmONC) by training obstetricians and obstetric nurses in the clinical management of maternal and neonatal emergencies. This initiative will help improve the quality and timeliness of life-saving care for mothers and newborns and will be complemented by the provision of essential equipment, medications, and supplies.

- Strengthening the psychosocial well-being and resilience of internally displaced persons living in sites through increased access to psychosocial support services provided by psychologists and social workers

- 89 staff members from the Justinien University Hospital in Cap-Haïtien (North), the Saint-Antoine University Hospital in Jérémie (Grand'Anse), and the Immaculée Conception University Hospital in Les Cayes (South) received training in emergency care.

- As part of preparations for an Ebola virus disease outbreak, PAHO/WHO has raised awareness among the Ministry of Public Health and Population (MSPP) regarding the importance of strengthening national preparedness capacities and has provided technical support for the development of guidance documents intended for various stakeholders, including United Nations agencies, NGOs, airlines, health facilities, and diplomatic missions.



Group psychosocial support session led by a psychologist for internally displaced persons



Training for Healthcare Providers Certified in the HEARTS-MNT Program

- 155 healthcare providers were trained in the HEARTS-MNT program across 25 healthcare facilities in the West, Artibonite, and Central departments, far exceeding the initial target of 60 people.

- Four training sessions organized according to the WHO HEARTS approach (West—2 sessions in Port-au-Prince; Artibonite—in Gonaïves; Central—in Hinche), covering screening, diagnosis, and management of hypertension, diabetes, cardiovascular diseases, and chronic respiratory diseases.

- Provided technical support to the Haitian Foundation for Diabetes and Cardiovascular Diseases (FHADIMAC) particularly for the diabetes module, enhancing the educational quality of the training programs and participant satisfaction.

- Strengthening epidemiological surveillance:

  ⇒ 1,243 epidemiological investigation missions conducted,
  ⇒ 419 active case-finding missions (306 in institutional settings and 113 in the community),
  ⇒ 305 community awareness and prevention activities,
  ⇒ 343 supervisory and support visits, particularly to health facilities,
  ⇒ 235 additional operational missions related to specimen transport, vaccination campaigns, and maternal mortality audits)

- Strengthening specimen management through Labomotos:

  ⇒ Collection and transport of 258 samples from suspected cholera cases;
  ⇒ Collection and transport of 137 samples from suspected COVID-19 cases;
  ⇒ Collection and transport of 858 samples from suspected cases of vaccine-preventable diseases (VPDs);
  ⇒ Collection of 40 samples from suspected malaria cases;
  ⇒ Training of 229 healthcare providers on the management of biological specimens;
  ⇒ 2,500 gallons of fuel were provided to the National Public Health Laboratory (LNSP) to support diagnostic and confirmatory testing for diseases under surveillance.

- WASH and Infection Prevention and Control (IPC) Interventions:

  ⇒ 152 deployments for decontamination activities;
  ⇒ 550 households decontaminated;
  ⇒ 105,771 people educated on good hygiene and prevention practices;
  ⇒ 898 community leaders and kiosk owners trained on hygiene, sanitation, and the safe treatment and storage of water;
  ⇒ 49 technical assessments, the results of which were shared with the MSPP as well as with the Health and WASH Clusters;
  ⇒ 61 handwashing stations installed;
  ⇒ 132 water kiosks identified in Port-au-Prince, Delmas, and Pétion-Ville for water quality monitoring; 111 supervision missions carried out;
  ⇒ 93 healthcare providers trained on the prevention and control of infections related to diphtheria and cholera, as well as on the management of biomedical waste;
  ⇒ 446 physicochemical tests and 12 microbiological analyses of water quality

Òganizasyon Fanm Kap Konbat Pou Lavil Miyò (OFAKOLAM)

Major achievements:

- Awareness-raising in displacement sites on hygiene principles and distribution of Aquatables and SRO.
- Training through Carrefour schools on preventing early pregnancy in schools.
- Awareness-raising on PEAS in displacement sites and private and public institutions to protect people in vulnerable situations.



Training on preventing early pregnancy in schools, Carrefour

ZANMI LASANTE

Major achievements:

- Renovation of a pharmacy warehouse at the Baptiste Health Center to improve drugs storage conditions and ensure better availability of essential pharmaceutical products.
- Donation of two vehicles to support the operations of the Baptiste Health Center and the Tilory Health Center, particularly for transporting staff and equipment, thereby contributing to improved quality and efficiency of health services.



Visit to Zanmi Lasante's Nourimamba Production Center

MDM Argentine

Major achievements:

- General, gynecological, and pediatric medical consultations
- Screening of children aged 6 to 59 months who visit mobile clinics.
- Community vaccination.
- Distribution of Plumpy Doz to children aged 6 to 23 months enrolled in the program.
- Distribution of nutritional supplements to pregnant and lactating women
- Providing care for these children based on their needs, including cases of acute malnutrition, and referring cases with complications.
- Community outreach on nutritional hygiene and the PSEA.



Nutritional screening combined with routine vaccination.

UNFPA

UNFPA has collaborated with the Center for Health Development (CDS) and World Relief (WR) to carry out reproductive health (RH) interventions, family planning (FP), and responses to gender-based violence (GBV) aimed at improving maternal health, ensuring the availability of emergency obstetric and neonatal care (EMONC), and providing the necessary protection to internally displaced persons (IDPs) as well as border populations, particularly vulnerable women.

WORLD RELIEF

Major achievements:

- UNFPA, in partnership with World Relief and in response to the violent clashes in Cité Soleil, stepped up its humanitarian response in June in the Port-au-Prince Metropolitan Area (ZMPAP) by deploying 16 mobile clinics, prioritizing the internally displaced persons (IDP) sites of Équateur, MTPTC, Jean-Marie César, and Labitrie. In addition, 11 mobile clinics were deployed to the Timounette and Ticitron sites in Saint Marc.
- Overall reach: 7,610 people accessed emergency SRH/GBV services, including 4,670 women, 686 girls, and 126 people living with disabilities.
- GBV Care and Protection: 101 survivors of GBV (25 cases of rape, 47 cases of sexual assault, and 29 cases of harassment) received care:
  - ⇒ 13 rape survivors received emergency medical care (Clinical Management of Rape—CMR).
  - ⇒ 24 survivors received case management, and 3 complex cases were referred to specialized services.
- 353 psychosocial support sessions were provided during this quarter, including 61 instances of psychological first aid (PFA) as part of the mobile clinics in PAP.
- 380 vulnerable women and girls each received a dignity kit containing feminine hygiene products, as well as clothing and essential protective items. The distribution of these kits is accompanied by the referral of survivors of gender-based violence to specialized care services.
- Mobile clinic deployments in PAP reached 5,775 people, including 3,922 women and girls and 120 people with disabilities. In Artibonite, mobile clinics provided SRH services to 1,835 people, including 1,434 women and girls.
- 381 people received consultations for sexually transmitted infections (STIs) and gynecological conditions.
- 257 women received obstetric consultations (215 prenatal and 42 postnatal) and 77 family planning services.
- Group Sessions: 3,848 people were informed and educated during group sessions on the importance of family planning and contraceptive methods, as well as the importance of attending prenatal and postnatal checkups, vaccinations, and the various forms of violence and how to access specialized assistance.
- Individual education (1,093 patients supported): Individual education was based on a personalized approach strictly tailored to each patient's clinical diagnosis in the area of sexual and reproductive health.

Centre pour le Développement et la Santé

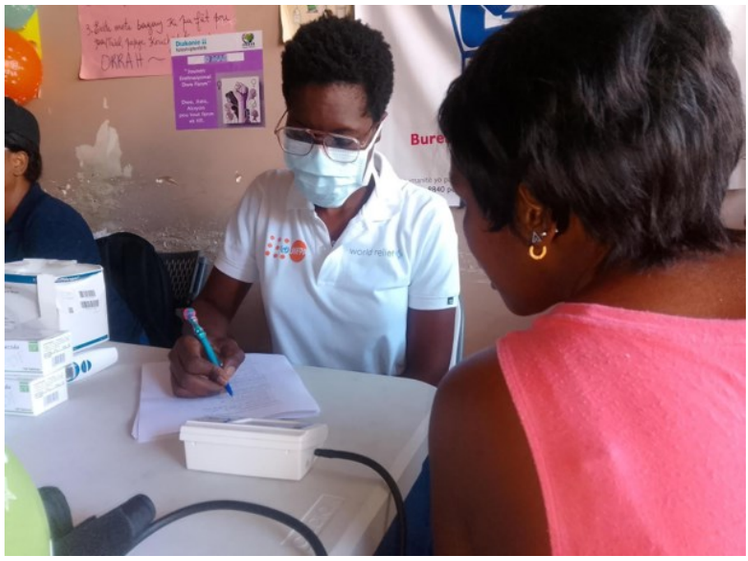
Major achievements:

UNFPA, in partnership with CDS, continues to support hospital clinical management and the deployment of mobile clinics in Port-au-Prince, the Central Plateau, and Artibonite:

- High-quality hospital-based maternal care: 2,063 institutional deliveries were attended by qualified staff in the supported facilities, including 78 deliveries in the border maternity wards of Savanette, Belladère, and Maïssade. In addition, the deployed medical staff conducted more than 4,126 prenatal consultations (CPN) and referred 75 complex obstetric emergencies.
- Family Planning (FP) Enrollment: 1,250 new women were enrolled in modern contraceptive methods, including 168 women who adopted a long-acting method (implant/Jadelle or IUD).
- Mobile and Psychosocial Response: Deployment of 19 mobile clinics (in partnership with FADHRIS, the Central Health Directorate, and La Fontaine Hospital) to provide basic care to 2,724 people (including 1,612 women and girls) and initial psychological support to dozens of displaced persons.

- In addition, a total of 71 survivors of gender-based violence received holistic care (medical and psychosocial) at facilities supported by the CDS.

- UNFPA also distributed 2 vaginal delivery kits, 3 rape care kits, 1 contraceptive kit, 1 STI treatment kit, 2 neonatal incubators, 1 Doppler ultrasound machine, 1 anesthesia machine with two tanks, 1 floor-standing surgical light, one examination table, three gynecological tables, six intensive care unit (ICU) beds, ten hospital mattresses, five screens, four heated tables, eight maternity cribs, ten pulse oximeters, thermometers, stethoscopes, bedpans, suction bulbs, suction cups, and boxes of Ambu bags to partner healthcare facilities and organizations, namely La Paix University Hospital (HUP), Eliazar Germain Hospital, the Léogâne Maternal and Child Health Center, etc.



Mobile Clinic in Port-au-Prince, World Relief, 2026.

MSF Belgique

Réalisations majeures:

- Approximately 6,000 patients were seen at mobile clinics at displacement sites in Solino, Argentine Bellegarde, CRUO Delmas 33, and Externat la Providence.

- Completed rehabilitation of the Solino Health Center.

- WASH support at six displacement sites (construction of latrines, sewage disposal, drinking water supply, etc.)
  Continuation of SRH care in Port-à-Piment; medical and psychological assistance for survivors of gender-based violence (GBV)



Mobile clinic deployed in IDP sites in Delmas and Solino.

Fondation Voix des Communautés de Base

Major achievements:

The Dignity Hubs project represents a paradigm shift from conventional humanitarian aid

- The project, funded by Global Ministries/UMCOR and the Church of the Resurrection, runs from February 2026 to January 2027 and covers four municipalities: Léogâne and Petit-Goâve (West), La Vallée de Jacmel and Belle-Anse (Southeast). It comprises four complementary components:

- Mobile Dignity Clinics in the four Hubs (project funded by Global Ministries/UMCOR and the Church of the Resurrection, February 2026–January 2027)

- Baseline assessment of beneficiaries using the Harmonized Dignity Index Calculator (Neuronal Economy of Dignity—NED framework) and the process for selecting priority beneficiaries;

Major achievements:

- Community vaccination sites supported by the FVCB in the Goâvienne region, in partnership with the Petit-Goâve/Grand-Goâve UCS (MSPP/DSO);
- Vaccination activities at the Tombe-Gâteau Hub (Léogâne), reported to the UAS-Anacaona.
- In addition, as part of efforts to strengthen community-based activities in the Goâvienne region, the FVCB supports the Petit-Goâve/Grand-Goâve UCS by funding vaccination sites in both municipalities, with a focus on “zero-dose” children and those who are under-immunized under the Expanded Program on Immunization (EPI). The Tombe-Gâteau Hub (Léogâne) also conducts vaccination activities, the results of which are reported monthly to the UAS-Anacaona (MSPP/DSO).

Three key takeaways emerge from this phase.

- First, the mobile dignity clinics program significantly exceeded its consultation target (1,353 patients) while generating a community surplus of 198,110 HTG, which lends credibility to the Hubs' sustainability model.

- Second, the project’s scientific baseline is now operational: 444 beneficiaries were assessed on dignity indices using the harmonized calculator, following a rigorous data quality audit, and 111 “deregulated” beneficiaries were transparently identified as priorities for interventions—an objective, traceable, and reproducible selection process detailed in Section 4.

- Third, the priorities for the next quarter are clearly established: catching up on vaccinations for children aged 12–23 months and pregnant women in the Goâvienne region, managing cases of detected malnutrition, and launching the biosand WASH program in August in partnership with the Communal Dignity Councils.



Community awareness Session on Health, Hygiene, and Sanitation (WASH).

IV. Acknowledgments

The Ministry of Public Health and Population (MSPP), through the National Health Emergency Management Unit (UNGUS), thanks the various communities affected by the crises and its partners—including the UN Agency Cluster Lead and donors—for their respective commitments.

Donors

The Cluster Lead Agency within the United Nations system:

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