Humanitarian Action for Children

unicef

Haiti

Haiti continues to face multiple ongoing crises, including cholera outbreaks, food insecurity and malnutrition, as well as the Haitian-Dominican migration situation.[1] The country remains vulnerable to natural disasters, and in October 2018, was hit with an earthquake in the North West department. The cholera response progressed well in 2018, reaching the last mile towards complete elimination, with a 70 per cent decrease in suspected cases since 2017.[2] The risk of an upsurge in cholera cases remains high, however, as evidenced by the localized outbreaks in Artibonite, Centre and West departments in 2018. An estimated 982,000 people are still facing severe food insecurity;[3] 39,000 children under 5 years will be affected by acute malnutrition in 2019; and over 640,000 people will require access to primary health care, including maternal and child health services.[4] The Haitian-Dominican migration situation remains a concern, as most of the deportees arrive in Haiti under very precarious conditions, without resources and separated from their families. On average, 10,000 Haitians are expelled from the Dominican Republic every month.[5] This has created a significant protection challenge, with some deportations failing to meet due process requirements and children requiring specific attention not systematically referred to appropriate services.

Humanitarian strategy

In 2019, UNICEF will continue to support to the implementation of the National Plan for the Elimination of Cholera (2013-2022) through surveillance and coordination, rapid response in communities, hygiene awareness activities, and engagement with local authorities and communities. Rapid response activities will be reinforced through the chlorination of water supply systems, the emptying and safe disposal of septic tanks, hygiene promotion and the distribution of household water treatment supplies. UNICEF will strengthen national capacities for the management of acute malnutrition, infant and young child feeding and the prevention of micronutrient deficiencies. Protection assistance will be provided to children suffering from abuse, exploitation and family separation due to natural disasters and migration. Schools will be adequately equipped and alternative learning programmes will target migrant children returning to Haiti to ensure their reintegration into the education system. UNICEF will maintain contingency agreements with partners and stocks of pre-positioned supplies to respond to humanitarian situations as they arise. The Government will be supported to strengthen humanitarian coordination and response and disaster preparedness, focusing on mainstreaming climate change adaptation into UNICEF programmes. To enhance efforts to prevent sexual exploitation and abuse, UNICEF will strengthen systems for reporting, survivor assistance and accountability to affected populations.

Results from 2018

As of 31 October 2018, UNICEF had US$12.1 million available against the US$30 million appeal (40 per cent funded).[6] In line with the cholera elimination plan, UNICEF provided technical and financial support to rapid response teams and community-level awareness raising, benefiting over 514,000 people. Over 240,000 persons affected by cholera and the October earthquake accessed safe water through water treatment/trucking and/or chlorination. The cold chain was partially restored and strengthened, facilitating the vaccination of over 33,400 children under 1 year in the south. In the absence of a domestic budget for nutrition, UNICEF covered 90 per cent of the country's therapeutic nutrition commodity needs, reaching over 14,500 children under 5 years suffering from acute malnutrition and 26,100 children aged 6 to 23 months with micronutrient powder. UNICEF reached 155 unaccompanied and separated children with interim care and family reunification support, and over 1,800 individuals received messages on preventing family separation. Over 37,000 children aged 5 to 14 years received learning materials, and 3,700 children affected by natural disasters resumed school. Lack of funding hampered the delivery of protection services for children affected by migration, as well as community management of acute malnutrition and water, sanitation and hygiene (WASH) shield activities.[7]

Total people in need: 1.5 million[8]
Total children (<18) in need: 681,500[9]
Total people to be reached: 350,000[10]
Total children to be reached: 143,500[11]

2019 programme targets:

Nutrition
- 6,500 children aged 6 to 59 months treated for severe acute malnutrition (SAM)
- 13,000 children aged 6 to 59 months treated for moderate acute malnutrition

Health
- 35,400 children under 1 year receiving routine vaccination[12]
- 37,000 pregnant women attending at least two prenatal visits

WASH
- 350,000 people provided with safe water for drinking, cooking and personal hygiene
- 150,000 people reached with key hygiene behaviour messages, including handwashing, to prevent diseases related to poor hygiene
- 40,000 people accessing safe sanitation

Child protection
- 800 unaccompanied and separated children assisted with interim care and family reunification support
- 3,300 children at risk/survivors of exploitation, violence and abuse, including gender-based violence, receiving case management services
- 5,000 people in four at-risk communities reached with key messages on child protection

Education
- 30,000 children aged 5 to 14 years, including children deported from the Dominican Republic, received learning materials to access education
- 5,000 children supported to access education by equipping schools / establishing temporary learning spaces

Cholera
- 333,000 people reached by rapid response teams and benefiting from the cordon sanitaire[13]

	Sector 2018 targets	Sector[i] results	UNICEF 2018 targets	UNICEF results
NUTRITION				
Children aged 6 to 59 months treated for SAM	11,000	7,751	11,000	7,751
Children aged 6 to 59 months treated for moderate acute malnutrition	8,000	6,838	8,000	6,838
Children aged 6 to 23 months receiving micronutrient powders	38,000	26,104	38,000	26,104
HEALTH				
Children under 1 year who receive emergency vaccinations			35,000	33,421
Pregnant women who attend at least two prenatal visits			37,000	12,200[ii]
CHOLERA				
People reached by rapid response teams and benefiting from the cordon sanitaire	720,000	514,015	720,000	514,015
People reached by the oral cholera vaccine campaign	1,300,000	64,000	1,300,000	64,000[iii]
WATER, SANITATION AND HYGIENE				
People provided with safe water for drinking, cooking and personal hygiene	896,144	240,227[iv]	450,000	240,227
People reached with key hygiene behaviour messages, including on handwashing	547,822	92,815	200,000	59,150
People having access to safe sanitation	69,664	18,550	40,000	18,550
CHILD PROTECTION				
Unaccompanied and separated children assisted with interim care and family reunification support	4,000	568	3,500	155[v]
People accessing social work to prevent family separation	3,000	10,425	3,500	3,915[vi]
Children accessing recreational and psychosocial support activities	30,000	7,014	30,000	1,838[vii]
EDUCATION				
Children aged 5 to 14, including children repatriated from the Dominican Republic, received learning materials to access education	95,000	37,346	30,000	37,346
Children's access to education supported by equipping schools	30,000	3,747	5,000	3,747

Results are through 31 October 2018.

[i] *The sector targets and results for nutrition, WASH and cholera are the same as the UNICEF as it is the only agency supporting response for acute malnutrition, micro-nutrient deficiencies and cholera rapid response in support of the Government.*

[ii] *This is the number of institutional visits only as mobile clinics have stopped since the end of 2017 (Hurricane Matthew).*

[iii] *UNICEF is facilitating procurement of oral vaccines and complementary chlorination and hygiene promotion in support of Government led oral vaccination campaign. Delays in the delivery of vaccines limited the availability of vaccines for the campaigns planned in Centre and Artibonite departments. The Ministry of Health is expecting 3.6 million doses to be delivered in time to reach its targets for 2018.*

[iv] *The sector results for WASH are the same as the UNICEF targets as UNICEF is the only agency providing emergency WASH assistance in support of the Government.*

[v] *Other than the earthquake in the North West in October 2018, there were no large scale natural disasters and the need for robust emergency assistance for unaccompanied and separated children was limited.*

[vi] *A total of 3,915 individuals were reached with key messaging on prevention of family separation as part of emergency preparedness activities.*

[vii] *Funding constraints limited psychosocial support border activities. New partnership agreements for psychosocial training to local protection actors following the October earthquake will help to reach more children through psychosocial and recreational activities.*

Funding requirements

In line with the 2019-2020 Humanitarian Response Plan (HRP), UNICEF is requesting US$24 million to meet the humanitarian needs of children in Haiti in 2019. Without additional funding, UNICEF will be unable to continue supporting the national response to the cholera crisis under the Government's 2022 elimination plan. Funding is also urgently needed to treat children suffering from acute malnutrition, strengthen routine vaccination and antenatal care, carry out essential WASH emergency and resilience work, provide protection and assistance to children being repatriated or deported from the Dominican Republic, and strengthen emergency preparedness in all sectors.

Sector	2019 requirements (US$)	2020[14] requirements (US$)
Cholera[15]	11,600,000	8,500,000
Water, sanitation and hygiene	3,500,000	4,000,000
Health	3,000,000	4,000,000
Child protection	2,000,000	2,000,000
Education	2,000,000	2,000,000
Nutrition	1,850,000	2,000,000
Total	**23,950,000**	**22,500,000**

[1] *Dominican Constitutional Court TC168/13 (2013) indicates that those born in the Dominican Republic between 1929 and 2007 to migrant parents in irregular conditions are no longer considered Dominicans and are at risk of statelessness.*

[2] *Ministry of Health, 'Report of the National Surveillance Network - Cholera: 46th epidemiological week 2018, 11-17 November 2018', 2018; and Ministry of Health, 'Report of the National Surveillance Network - Cholera: 46th epidemiological week 2017', 2017.*

[3] *Integrated Food Security Phase Classification analysis, 2018.*

[4] *Office for the Coordination of Humanitarian Affairs, 'Haiti: 2019-2020 Humanitarian Response Plan' (draft), OCHA, 2018. The HRP document was not finalized/published at the time of writing this appeal. This appeal will be updated to be aligned with the published HRP, once finalized.*

[5] *Office for the Protection of Civilians/Haiti Protection Group, 'National Protection Strategy', November 2018.*

[6] *Available funds include US$7.3 million received against the current appeal and US$4.8 million carried forward from the previous year.*

[7] *WASH 'shield' activities complement the 'sword' (rapid response) through chlorination of water supply systems, emptying and safe disposal of septic tanks, hygiene promotion activities and the distribution of household water treatment supplies.*

[8] *Office for the Coordination of Humanitarian Affairs, 'Haiti: 2019 Humanitarian Needs Overview' (draft), OCHA, 2018. The Humanitarian Needs Overview (HNO) document was not finalized/published at the time of writing this appeal. The appeal will be updated to be aligned with the published HNO, once finalized.*

[9] *Ibid.*

[10] *This is based on the target for safe water in order to prevent any possibility of double counting. However it is likely to underestimate the total number of people to be reached across different geographic areas.*

[11] *Based on the target for safe water, children make up 41 per cent of the total population to be reached, as per the Haitian Institute for Statistics.*

[12] *Vaccination includes bacillus calmette-guérin, diphtheria, tetanus and pertussis, poliomyelitis, haemophilus influenza, polio and measles and rubella.*

[13] *The 2019 target decreased because achievements in 2018 (reduction in the number of suspected cases) placed the country in its 'last mile' phase for cholera elimination. This is the most challenging phase requiring the same number of rapid response teams for case identification and immediate response to ensure maximum effectiveness in cutting transmission and controlling and reducing epidemic incidence.*

[14] *Estimation based on current needs that will be reviewed by 2020. The 2019-2020 HRP does not include a 2020 budget.*

[15] *The cholera budget is under review based on the 2019-2020 HRP (draft) and ongoing discussion with PAHO/the World Health Organization (WHO) on the cost sharing.*

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