



**UN Haiti Cholera Response Multi-Partner Trust Fund  
PROJECT MONTHLY PROGRESS REPORT  
Period: October - 2017**

<b>Project Number and Title:</b> #3- Preventing and cutting cholera transmission on the four persistent departments	<b>PROJECT START DATE:</b> 01-Jun-2017	<b>AMOUNT ALLOCATED by MPTF</b> <b>\$500,000</b>	<b>RECIPIENT ORGANIZATION</b>  UNICEF																
<b>Project ID:</b> 00105774 (Gateway ID)		<b>Other Sources:</b> <ul style="list-style-type: none"> <li>Government of Japan <b>\$2,600,000</b></li> <li>CERF LOAN <b>\$8,000,000</b></li> <li>Government of Canada <b>\$1,500,000</b></li> </ul>	<b>IMPLEMENTING PARTNER(S):</b>  MSPP (Government) DINEPA (Government) ACF, ACTED, OXFAM, Solidarites International, IFRC, CRF. CEDUCC, Zanmi Timoun (NGOs)																
<b>Project Focal Point:</b> Name: Gregory BULIT E-mail: <a href="mailto:gbulit@unicef.org">gbulit@unicef.org</a> Telephone : (509) 4893 7064	<b>EXTENSION DATE:</b> n/a	<b>Government Input:</b> <b>National coordination salary</b>																	
<b>Proposal Location (Departments):</b> Haiti (whole country)	<b>PROJECTED END DATE:</b> 31-Dec-2017	<table border="1"> <thead> <tr> <th colspan="5">Expenditures as 06/11/2017 (US \$)</th> </tr> <tr> <th>Global budget</th> <th>Indirect Support Costs (7%)</th> <th>Expenditures</th> <th>Committed funds</th> <th>Balance available</th> </tr> </thead> <tbody> <tr> <td align="right"><b>500,000</b></td> <td align="right"><b>32,710</b></td> <td align="right"><b>407,912</b></td> <td align="right"><b>50,504</b></td> <td align="right"><b>8,874</b></td> </tr> </tbody> </table>			Expenditures as 06/11/2017 (US \$)					Global budget	Indirect Support Costs (7%)	Expenditures	Committed funds	Balance available	<b>500,000</b>	<b>32,710</b>	<b>407,912</b>	<b>50,504</b>	<b>8,874</b>
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**Strategic Objective TRACKS**

<input checked="" type="checkbox"/>	<b>TRACK 1a:</b> Intensifying efforts to cut transmission of cholera and improve access to care and treatment
<input type="checkbox"/>	<b>TRACK 1b:</b> Addressing the medium/longer term issues of water, sanitation and health systems
<input type="checkbox"/>	<b>TRACK 2:</b> Assistance and Support

**Beneficiaries:** Please, indicate the number of beneficiaries and provide disaggregated data, if available

No. of Beneficiaries	
Communities	
<b>Total</b>	

No. of Beneficiaries	
Women	278,300
Girls	238,728
Men	268,517
Boys	183,994
<b>Total expected</b>	<b>969,539</b>

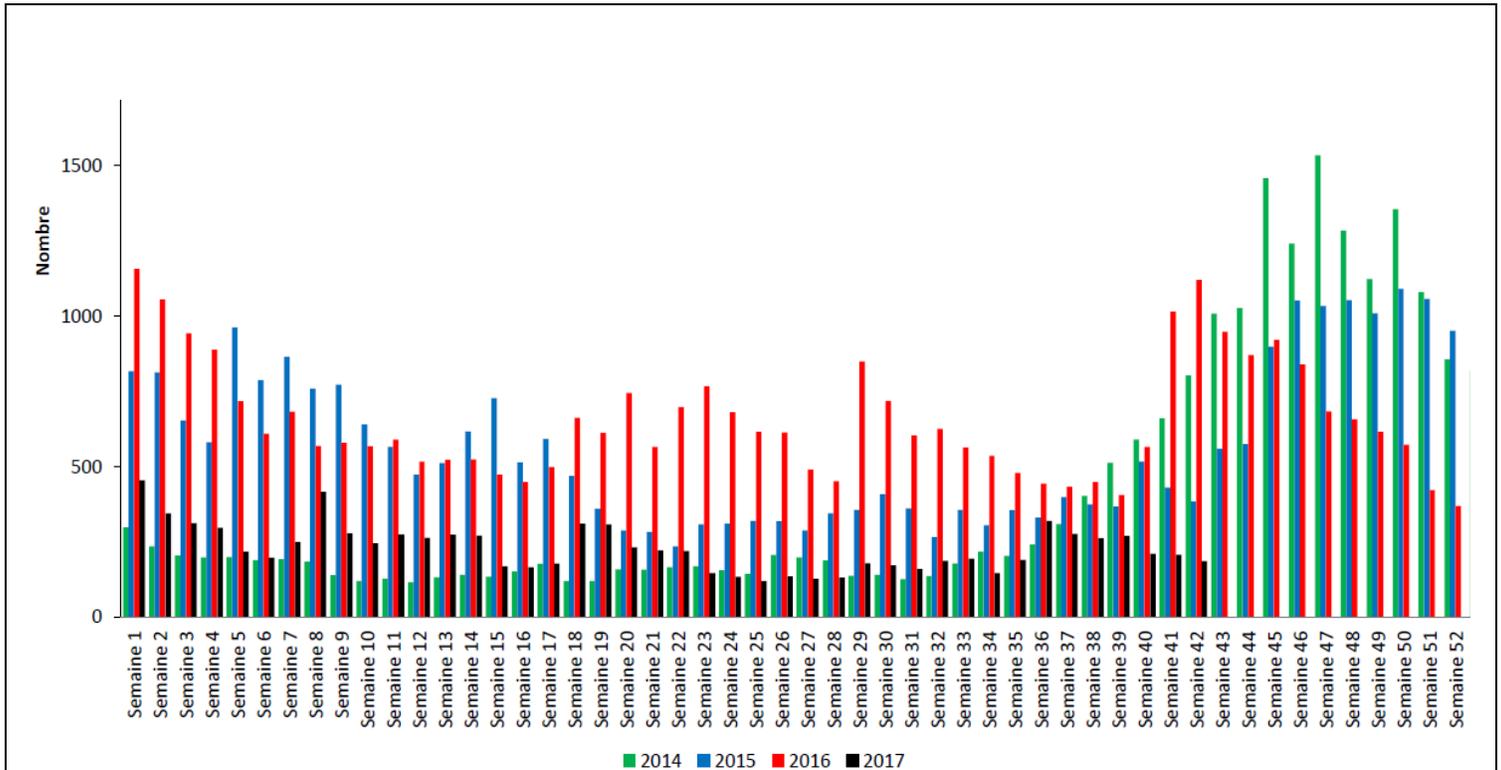
**Epidemiological situation:**

The epidemiological trend continues to show positive signs despite a localized outbreak in lower Artibonite, which accounted for the vast majority of 70 per cent of all cases in the country. As of end of October 2017, the total number of cases was 11,676, equivalent to a third of that of 33,598 for the same period in 2016. Confirmed cholera cases accounted for an estimated 30-40 per cent of reported cases tested by the national laboratory. Despite the significant decrease in number of cases compared to the previous year, the Artibonite department still reports 100-150 suspected cases per week, and while the outbreak has not diffused in nearby departments, the situation remains fragile as Haiti remains in the middle of the high transmission risk period. However, the incidence rate is at its lowest for the first time since the beginning of the epidemic, and the month of October 2017 has reported even less cases than September 2017, demonstrating that the efforts made to control the disease have been effective.

<sup>1</sup> The date project funds were first transferred.



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*Weekly number of suspected cases (2014-2017), as of 21 October - Source: MSPP/DELR.*

**Key achievements:**

*Reinforced National and departmental coordination*

In order to strengthen coordination at national and departmental level, UNICEF and WHO/PAHO have constituted a joined coordination supporting the Ministry of Public Health and Population (MSPP). Although already in place, this remains to be strengthened to increase the capacity of surveillance and decision-making of the National Technical Committee Against Cholera (MSPP and DINEPA). Coordination meetings take place every Monday. In addition, upon the proposition of UNICEF, a separate coordination meeting between UNICEF and WHO/PAHO will take place every Monday to better articulate each organizations’ activities.

During two weeks in October 2017, in order to support MSPP in the coordination of the response in Artibonite, UNICEF deployed a cholera expert based in Port au Prince. The role of the expert was to assist the Infectious Diseases Coordinator of the MSPP in the coordination and monitoring of the 25 response teams now activated in the department, especially with the reorientation of 1/3 of the teams into community engagement and hygiene awareness teams.

*Improved rapid response*

Financial resources for the Alert-Response Strategy increased immediately following hurricane Matthew and were maintained throughout 2017 for the first time since 2014, thus enabling to activate more rapid response teams, as well as to increase their scope of activity to reinforce sensitization and community engagement. This resulted in better control of outbreaks and progress towards the goal of eliminating cholera in Haiti.

Hence, from January 1 to October 31, 2017, 94 per cent of suspected cases nationwide (10,690 out of 11,420) declared by the MSPP received rapid responses, 90 per cent of them within 48 hours. Thanks to these interventions within communities, 92,537 households received at least one water treatment product at home through the ‘cordon sanitaire’. Furthermore, about 1,300,000 persons have been sensitized, during the response interventions or specific prevention activities in the main cholera hotspot, with a higher number of persons sensitized since the launching of the high impact operation in July 2017 in the West department.

Indeed, to accelerate the progress to attain the lowest number of incidence possible during the high transmission season from September to December 2017, UNICEF together with the MSPP developed since July 2017, a response and communication campaign in the West Metropolitan areas – and a specific communication plan in the Centre and



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Artibonite department. This strategy yielded positive results, as transmission is currently at its lowest level in the West department since the beginning of the epidemic in Haiti.

There has been no significant increase in the number of suspected cases of cholera in the areas exposed to hurricane Irma and Maria, as a result of reinforced surveillance system in the five departments of the North of Haiti. Moreover, responses were strengthened with UNICEF partners in order to limit the risk of disease upsurge. At the same time, while the outbreak in Artibonite is still ongoing, the number of cases has more than halved from 250 cases a week in mid-September to 117 in week 42 (15-21 October) without expanding to others departments. To reach this level of control, UNICEF had deployed five teams from the West department to increase the level of response in Artibonite and had asked a partner to activate five additional teams locally.

Despite the significant results achieved to date, cholera efforts are at stake as funds to maintain this strategy in 2018 are insufficient with a mere 20 per cent of necessary funds available to date and a very serious possibility that response will stop by February/March 2018. Strong financial support is essential to maintain the current levels and further lower the number of cases to reach the national goal of cholera elimination by 2022.

COMMUNITY RESPONSE AT A GLANCE – Summary of activities from January to 31 October 2017	
Suspected cases reported by MSPP	<b>11,420</b>
Number of interventions by NGO's (rapid responses and preventions activities)	<b>11,820</b>
Number of response done (rapid responses only)	<b>8,846</b>
Responded cases by NGOs teams	<b>10,690</b>
% of response < 48 h	<b>90%</b>
% of responded cases	<b>94%</b>
Number of joint responses EMIRA (MoH) + NGO	<b>2,725</b>
% of joint responses	<b>31%</b>
Average of households per response (i.e "cordon sanitaire" size)	<b>12.2</b>
Number of persons treated with chimioprophylaxy	<b>51,221</b>
Number of households having received at least one water treatment product	<b>92,537</b>
Number of persons sensitized (rapid responses* only)	<b>354,157</b>
Number of persons sensitized (rapid responses and prevention**)	<b>896,994</b>
Number of disinfected houses	<b>73,473</b>
Average of disinfected houses per response	<b>8.3</b>
Number of emergency water chlorination points activated	<b>960</b>

\* Rapid responses= one response for one cholera suspected case

\*\* Preventions activities= mobilisation and sensitisation activities but not attached directly to one suspected case

Improved control of water systems chlorination in the West department

Another key element for controlling cholera is ensuring drinking water chlorination in the West department. This department represents the main risk of national outbreak due to the dense population living in poor sanitary conditions. In addition to strengthening the regional office of DINEPA of the West department to ensure water systems chlorination control in key areas, UNICEF also increased the monitoring of private water tanks chlorination through four DINEPA agents (the initial 10 planned agents will not be recruited due to internal DINEPA constraints, however, complementary agents from others DINEPA projects contribute to chlorination monitoring) supported by NGO partners for the training of reservoir owners. Additional teams and DINEPA agents have trained 230 private reservoirs owners on chlorination methods.

UNICEF continues its support to the DINEPA cholera cell composed of three agents through salary payment and logistic support until the end of 2017.

Increased communication to the public

Three communication plans are being implemented for the departments of Artibonite, Center and West. These plans aim to involve communities through the empowerment of local authorities and community networks/associations. The strategy consists of strengthening social communication through action oriented messages. New messages and tools were developed. In addition, these plans also aim to strengthen communication at the CTC/CTDA level between patients and health workers.

To reinforce the messages during interventions, additional sensitization leaflets with harmonized messages are being produced and will delivered to MSPP, DINEPA and NGO partners.

In the West department, the two following strategies are implemented via the High Impact Operation:

- 1) Encourage authorities' engagement in the fight against cholera in the most persistent communes  
 Mayors of the 9 communes have been involved since the beginning of the activities to inventory and define priority places (essentially markets, main civil society organization, morgues) and have deployed municipal agents to be trained on cholera transmission and implement prevention activities.
- 2) Strengthening of social mobilization via community engagement



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Two local NGOs (CEDUCC et Zamni Timoun) have been supported for the implementation of prevention and sensitization activities in religious communities (churches and voodoo) and in public places, especially bus stations, in six communes of the Port-au-Prince metropolitan area.

Attached a snapshot on the first phase of the High Impact Operation implemented in the West Department.



UNICEF\_Snapshot  
cholera High Impact C

**MONTHLY PROGRESS REPORT RESULTS MATRIX**

**OUTPUT INDICATORS**

<b>Indicator</b>	<b>Geographic Area</b>	<b>Projected Target (as per results matrix)</b>	<b>Quantitative results for this current reporting period</b>	<b>Cumulative results since project commencement (quantitative)</b>	<b>Delivery Rate (cumulative % of projected total) as of date</b>
<i>Description of the quantifiable indicator as set out in the approved project proposal</i>					
# department where coordination of the alert-response is reinforced	West, Centre, Artibonite, North	4	3	3	75%
# MoH Rapid Response Teams supported in the four Departments	West, Centre, Artibonite, North	4	4	4	100%
# DINEPA chlorination agents supported in the West departments	West, Centre, Artibonite, North	10	4	4	40%
# of communication plans implemented before July 2017	West, Centre, Artibonite, North	4	3	3	75%