



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

Project Number and Title: #3- Preventing and cutting cholera transmission in four persistent departments	PROJECT START DATE¹: 01-Jun-2017	AMOUNT ALLOCATED by MPTF \$500,000	RECIPIENT ORGANIZATION UNICEF
Project ID: 00105774 (Gateway ID)		Other Sources: <ul style="list-style-type: none"> Government of Japan \$2,600,000 CERF LOAN \$8,000,000 Government of Canada \$1,500,000 	IMPLEMENTING PARTNER(S): MSPP (Government) DINEPA (Government) ACF, ACTED, OXFAM, Solidarites International, IFRC, CRF. CEDUCC, Zanmi Timoun (NGOs)
Project Focal Point: Name: Gregory BULIT E-mail: gbulit@unicef.org Telephone: (509) 4893 7064	EXTENSION DATE: n/a	Government Input: National coordination salary	

Proposal Location (Departments): Haiti (whole country)	PROJECTED END DATE: 31-Dec-2017	<table border="1"> <thead> <tr> <th colspan="5">Expenditures as 08/12/2017 (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">500,000</td> <td align="right">32,710</td> <td align="right">449,797</td> <td align="right">15,089</td> <td align="right">2,404</td> </tr> </tbody> </table>					Expenditures as 08/12/2017 (US \$)					Global budget	Indirect Support Costs (7%)	Expenditures	Committed funds	Balance available	500,000	32,710	449,797	15,089	2,404
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Strategic Objective TRACKS		Beneficiaries: <i>Please, indicate the number of beneficiaries and provide disaggregated data, if available</i>														
<input checked="" type="checkbox"/>	TRACK 1a: Intensifying efforts to cut transmission of cholera and improve access to care and treatment	<table border="1"> <thead> <tr> <th colspan="2">No. of Beneficiaries</th> </tr> </thead> <tbody> <tr> <td>Communities</td> <td></td> </tr> <tr> <td>Total</td> <td></td> </tr> </tbody> </table>			No. of Beneficiaries		Communities		Total							
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<input type="checkbox"/>	TRACK 1b: Addressing the medium/longer term issues of water, sanitation and health systems															
<input type="checkbox"/>	TRACK 2: Assistance and Support															
		<table border="1"> <thead> <tr> <th colspan="2">No. of Beneficiaries</th> </tr> </thead> <tbody> <tr> <td>Women</td> <td align="right">278,300</td> </tr> <tr> <td>Girls</td> <td align="right">238,728</td> </tr> <tr> <td>Men</td> <td align="right">268,517</td> </tr> <tr> <td>Boys</td> <td align="right">183,994</td> </tr> <tr> <td>Total expected</td> <td align="right">969,539</td> </tr> </tbody> </table>			No. of Beneficiaries		Women	278,300	Girls	238,728	Men	268,517	Boys	183,994	Total expected	969,539
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Epidemiological situation:

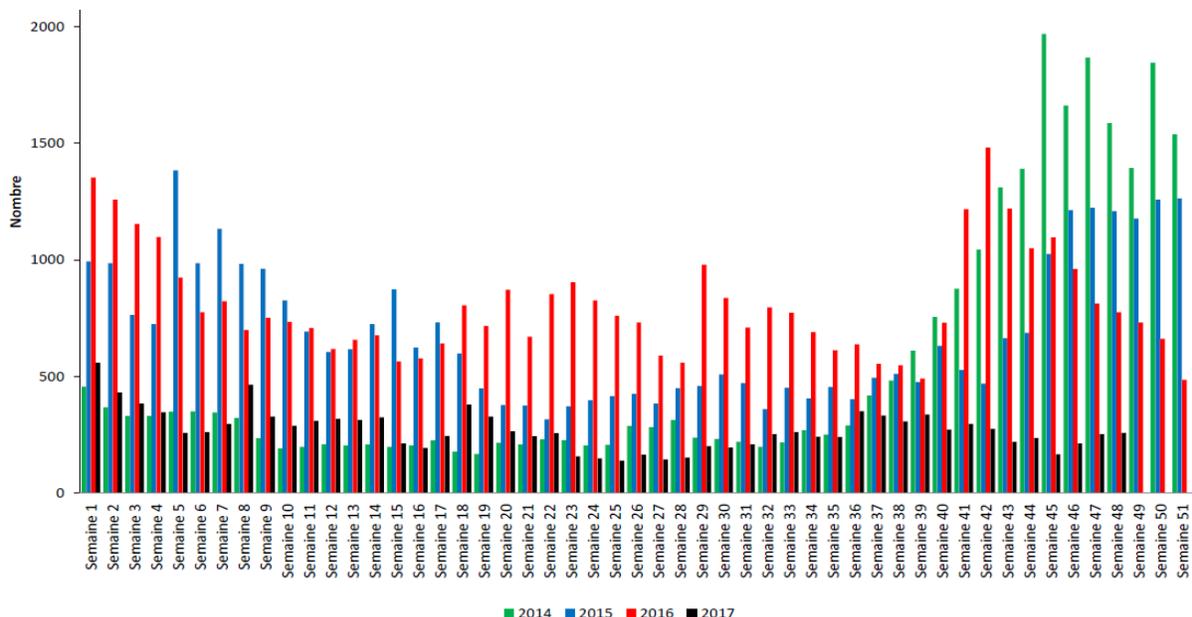
As of December 2, four weeks prior to the end of 2017, the total number of suspected cases was 13,059, representing an incidence of 0.107 per cent, only slightly superior to the objective to reach an incidence of 0.1 per cent, targeted for 2018. The epidemiological trend continues to show positive signs, demonstrating that efforts made to control the disease have been effective. However, there remains persistence of around 50 cases per week in the Centre department, and localized outbreaks in upper Artibonite, North and North-West departments as of end of November 2017 (accounting for 70 per cent of cases in the last two weeks), which indicate to a geographical “migration” of the epidemic to the North. The situation remains fragile.

¹ The date project funds were first transferred.



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Weekly number of suspected cases (2014-2017), as of December 2, 2017 - Source: MSPP/DEL.R.



Key achievements:

Reinforced National and departmental coordination

In order to strengthen coordination at national and departmental level, UNICEF together with PAHO/WHO, supported throughout the year, the national coordination led by the Ministry of Public Health and Population (MSPP) and National Directorate for Water and Sanitation (DINEPA). In 2017, at least one staff of the UNICEF cholera team participated at all of the weekly technical meetings. UNICEF also provided financial support to the DINEPA’s cholera cell at Central level, ensuring its operationalization. Two complementary mechanisms to support coordination at departmental level exist: On the one hand, three UNICEF national officers have been deployed to ensure direct support to the departmental health Directorate of West, Centre and North departments; on the other hand, UNICEF’s NGO partners are working in all departments.

Special attention has been given to the most at risk departments to strengthen surveillance and adapt response through the deployment of the three national officers that provide direct support to the departmental health Directorate of West, Centre and North departments; and « *Operation Coup de Poing* », a high-impact initiative has been implemented from July to October 2017 in the West department, with daily situation update reviews, involving all stakeholders. Following the analysis of positive results reaped, it was decided to maintain efforts until the end of 2017. In the Centre department, a weekly planning meeting has been implemented since mid-July 2017 to deal with an increase in cases. These meetings take place alternatively in Hinche and Mirebalais. In Artibonite, two meetings per week take place now to adapt the response to the epidemic dynamic.

Improved rapid response

Much of the results achieved were possible due to predictable long-term funding that enabled to strengthen rapid response teams and ensure their continuity. 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 improved control of outbreaks and progress towards the goal of eliminating cholera in Haiti.

On average in 2017, 94 per cent of cases were responded to, of which 90 per cent in less than 48 hours, and the average size of the cordon sanitaire was of 12 households, in line with the objectives set for the teams. Maintaining the right number of response teams has been essential to achieve these results, both in terms of quantitative improvement, but also qualitative improvement of responses.

However, despite such significant results achieved to date, with the lowest rate of incidence achieved since the epidemic began, cholera efforts are at stake as funds to maintain this strategy in 2018 remain insufficient with a mere 20 per cent of necessary funds secured to date, putting at peril mechanisms put in place, and risking the



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dismantling of the response capacity by February/March 2018. Strong financial support is critical to maintain the current capacity and further lower the number of cases to reach the national goal of cholera elimination by 2022.

Improved control of water systems chlorination in the most at risk departments

Following an analysis of the epidemic trend, special attention has been given to strengthen water quality in areas most impacted by cholera. In November 2017, UNICEF worked in close collaboration with DINEPA to ensure the chlorination of water systems in Artibonite department's communes of Verrettes, Petite Riviere de l'Artibonite, Dessalines and Saint Michel de l'Attalaye.

Through UNICEF's support, four DINEPAs Emergency officers (ACEPA) remain deployed and work closely with the NGO responses teams in the West Department. They will be maintained until at least mid-January 2018.

Increased communication to the public

Lessons learned on communication during the « Operation Coup de Poing »/ High Impact Operation in the West department have been instrumental for adapting and developing communication tools and plans in proximity departments.

In the West department, the communication strategy of the High Impact Operation emphasized two aspects:

- Encouraging authorities' engagement in the fight against cholera in the most persistent communes; and
- Strengthening of social mobilization via community engagement: prevention and sensitization activities in religious communities (churches and voodoo) and in public places, especially bus stations.

In Artibonite department, operation *Koukourouj*, the local version of the « Operation Coup de Poing », was initiated in November 2017. Communication activities planned in mid-2017 were redirected to the most affected areas, contributing to the control of the epidemic in lower Artibonite. A plan is currently being developed with a special focus on the city of Saint Michel de l'Attalaye, one of the main residual hotspots of cholera that persisted throughout the year, and in which a recent increase in the number of cases was witnessed.

UNICEF's Communication for Development expert supports the Centre Department's Health Directorate for the adaptation and strengthening of communication capacities of governmental and NGO staffs. Based on an analysis of strengths and weaknesses of actual sessions made by sensitization agents, training modules have been developed to further improve communication method, further focusing on demonstration, and distribution of leaflets to serve as reminders for families.

MONTHLY PROGRESS REPORT RESULTS MATRIX

OUTPUT INDICATORS

Indicator	Geographic Area	Projected Target (as per results matrix)	Quantitative results for this current reporting period	Cumulative results since project commencement (quantitative)	Delivery Rate (cumulative % of projected total) as of date
<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%