

This report was produced by OCHA Haiti with contributions from United Nations Agencies, Funds and Programmes, nongovernmental organizations and humanitarian partners.

## HIGHLIGHTS

- Getting assistance to the hardest-to-reach rural areas remains a critical response gap as severe access constraints prevent Government and humanitarian actors from reaching affected people outside urban centers.
- National authorities plan to rollout a 6-week Post-Disaster Needs Assessment (PDNA) with the support of the UN system, the European Union, World Bank and the Inter-American Development Bank.
- UN Women and CARE will conduct a rapid gender analysis of the earthquake's impact with the support of national authorities, local women's organizations and UN agencies.
- USAID announced US\$32 million in financing for humanitarian partners delivering life-saving multi-sectoral assistance in health, emergency shelter and food, WASH and protection services in quake-affected areas.
- COVID-19-related health risks are mounting as preventative measures, including mask wearing and physical distancing, are compromised by the realities of the operational context.



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 Creation date: 15 Aug 2021 Sources: CNIGS Feedback: ocha.haiti.im@gmail.com | www.unocha.org www.reliefweb.int | www.reliefweb.int

- Localization, Accountability to Affected Populations (AAP) and effective two-way Communication with Communities (CwC), including women's organizations, are key priorities of the humanitarian community's response strategy, with a view to ensure local capacities, knowledge and expertise are at the core of these efforts.
- Access to GBV services has been significantly reduced in the aftermath of the earthquake due to access, logistics and security challenges negatively affecting GBV case management, particularly affecting women and girls.

**800K**

affected people

(Source: UN System in Haiti)

**650K**

in need of emergency humanitarian assistance

(Source: UN System in Haiti)

**\$187.3M**

in humanitarian financing required to reach 500,000 affected people

(Source: Haiti Earthquake Flash Appeal – August 2021)

**2.2K+**

people dead, with more expected

(Source: DGPC)

**320**

people still missing

(Source: DGPC)

**130K**

damaged and destroyed homes

(Source: DGPC)

## SITUATION OVERVIEW

More than two weeks after the devastating 14 August earthquake, humanitarian assistance is now beginning to reach those most in need faster, facilitated by enhanced Government-led coordination and robust efforts to negotiate increased humanitarian access into hard-to-reach areas. Affected communities struggling to cope with quake's multi-faceted impact continue to receive assistance to address growing needs in emergency shelter, food, safe water and sanitation, and protection services, including measures to prevent sexual exploitation and abuse (SEA) and services for victims of sexual and gender-based violence (SGBV), amid aggravated vulnerabilities and increasing risks to their physical and psychological well-being.

Preliminary rapid damage and needs assessments (EDAB) indicate that in Grand'Anse and Nippes 20.9 per cent and 76 per cent, respectively, more women than men were left without a place to live following the earthquake. This has important implications on women's exposure to SGBV, SEA, health risks and child welfare. The collection of further sex, age and vulnerability disaggregated figures remains crucial to better understand the crisis and adapt the humanitarian response accordingly.



Photo credit: UN OCHA/Matteo Minasi

Despite successful access negotiations with armed groups, which permitted the passage of 13 humanitarian convoys over the past 12 days, safe and secure humanitarian access will need to be sustained in the long-term. The persistent presence of armed gangs, damaged bridges and roads rendered impassable by the quake continue to pose significant access and security constraints for Government and humanitarian actors attempting to reach those most in need. The operational context continues to hinder the delivery of life-saving assistance to affected communities, especially in rural areas close to the epicentre which have been completely cut off by the earthquake. With support from various international governments, aerial and maritime support is being provided for the delivery of relief supplies to remote and hard-to-reach areas inaccessible by land.

The combined impact of the earthquake and Tropical Depression Grace have left 650,000 thousand people in need of emergency humanitarian assistance, of which 500,000 are being targeted by UN agencies and humanitarian partners through the activities planned under the recently launched \$187.3 million [Flash Appeal](#). Based on an initial impact assessment, the Government estimates that damages from the powerful 7.2-magnitude quake exceed US\$1 billion, as national authorities plan a more detailed assessment of damages, losses and post-earthquake needs in collaboration with the tripartite partnership comprised of the UN, the European Union and the World Bank as well as the Inter-American Development Bank.

As of the latest update issued on 25 August, the Haitian Civil Protection General Directorate (DGPC) reported 2,207 deaths, 12,268 injured and 320 missing. At least 52,953 homes have been completely destroyed while 77,006 others have suffered varying degrees of damage. Further compounding the problem is the fact that many shelters in affected areas have been destroyed or damaged, forcing displaced people to shelter at assembly points which lack basic WASH and protection services. In some of remote areas, families are constructing makeshift shelters out of salvaged materials built directly on the ground without any kind of foundation or platform, making them vulnerable to collapse due to high winds and increased rainfall, a series of risks that will only increase as the peak of the hurricane season approaches.

Damage assessments for homes and shelters must continue to be fast-tracked in order to enable the movement of families currently sheltering outside into safer temporary accommodations or back into their homes if possible, as many families whose homes are still standing are choosing to shelter elsewhere as persistent aftershocks leave them in fear of a sudden collapse. Schools are currently being assessed as alternative emergency shelter solutions for displaced people, generating concerns regarding implications related to the eventual return to school, originally set to re-open on 7 September.

Heightened insecurity and the COVID-19 pandemic have kept around 4 million children out of school for months over the last two years, with the quake damaging more than 300 school infrastructures in the three most affected areas, affecting

an estimated 100,000 children and teachers. Safe temporary learning spaces are urgently needed to ensure affected boys and girls can continue their education and to mitigate the risks associated with children being out of school, including forced recruitment into gangs, child trafficking, sexual exploitation and abuse and early pregnancy in adolescents.

According to UNICEF, more than 119,000 people in affected areas are in urgent need of safe water, while longer-term reconstruction and rehabilitation of critical WASH infrastructure and systems, already weak and lacking coverage before the quake, remain a priority to prevent disease outbreaks, including COVID-19, and worsening malnutrition, especially among vulnerable groups such as children and pregnant and breastfeeding women.

In health facilities, pre-existing WASH deficits have only been exacerbated by the various impacts of the earthquake, as just 60 per cent of health facilities in the Sud Department had access to basic water services prior to the quake, 59 per cent in Nippes and 52 per cent in Grand'Anse, while 33 per cent of health facilities in Nippes and 15 per cent in Sud had no water services at all. In this context, post-earthquake WASH interventions in health facilities will be critical to prevent infections among injured people and prevent disease outbreaks, including COVID-19. The preliminary EDAB found that women are substantially more represented among health personnel in Nippes and Grand'Anse, making them disproportionately vulnerable to COVID-19 infections. This will need to be considered in COVID-19-related prevention and response campaigns.

As increasing numbers of response personnel arrive on the ground, COVID-19-related health risks continue to rise, requiring humanitarian actors to be proactive in implementing measures to ensure the protection of an extremely vulnerable population. With less than 1 per cent of Haiti's 11 million inhabitants vaccinated against COVID-19, the population remains at high risk of COVID-19 transmission, especially considering the lack of vaccines procured – Haiti has only received 500,000 COVID-19 vaccine doses – and personal protection equipment (PPE) available, as affected people increasingly gather in close quarters seeking food assistance and shelter in the aftermath of the quake.

The potential introduction of more contagious and dangerous new variants yet to reach the island is of particular concern during the weeks and months following the quake, as the country's health system lacks the capacity to respond a COVID-19 outbreak. Hospitals are overwhelmed by the large influx of injured patients and health infrastructure has suffered considerable damage, making the mainstreaming of COVID-19 considerations across response activities vital to ensuring that humanitarian action does not have unintended negative consequences on the people it seeks to help.

In such a complex response environment, characterized by access and security constraints and multiple simultaneous crises amid a global pandemic, an accountable, well-coordinated, transparent and gender-sensitive response effort must be grounded in national leadership and capitalize on local capacities, knowledge and expertise which is complimented by regional and international assistance. Humanitarian actors must aim to harness and strengthen the efforts of long-standing local response actors on the ground, especially local nongovernmental organizations, civil society organizations, including women's organizations, and community leaders, and support the recovery of local economies and livelihoods through local procurement of relief supplies and gender-responsive cash-based assistance, both of which will have important multiplier effects across the economy.

An increased focus on localization in response efforts goes hand in hand with the mainstreaming of Accountability to Affected Populations (AAP) and effective two-way Communication with Communities (CwC), including women's organizations, into all response and early recovery efforts. This entails meaningful community engagement and trust-building channelled through a transparent ongoing dialogue with affected communities, including women, youth, religious and other diverse leaders. Participatory and inclusive assessments and spaces for dialogue must be rolled out with the leadership of local organizations, including women and youth-led groups, to enable community participation in programme design, provide information on available services and how to access them, and transparently communicate the limitations of humanitarian assistance. Equally important is the establishment of system-wide collective community feedback and gender-sensitive complaint mechanisms that operate with harmonized standardized operating procedures to avoid scattered and disconnected efforts which are less efficient and therefore, place accountability and protection for affected people at risk.

### **Responding to sexual exploitation and abuse and gender-based violence**

Increased insecurity, desperation and massive needs after the earthquake have increased risks of SEA for women and girls in an already precarious protection environment. In Grand'Anse, partners of the GBV Working Group have reported recent incidents of GBV, including cases involving minors, particularly in the Chambellan area. In Les Cayes, a recently conducted UNFPA security assessment identified risks that can increase incidents of GBV, including the lack of electricity, showers and toilets as well as health infrastructure at displacement sites. The assessment found that women and girls limit their movement especially at night due to perceptions of insecurity and risks of violence.

The Haitian Federation of Associations and Institutions of People with Disabilities estimates that 3,500 people living with disabilities have been identified in these 3 departments. An initial rapid assessment of health facilities carried out by UNFPA found that health centers and hospitals providing care services to GBV survivors have been severely damaged by the earthquake, with key centers in Coteaux and Bonnefin no longer operational. The remaining functional facilities are ill-equipped, lacking critical materials and equipment. The facilities are also overwhelmed and are forced to give priority to medical emergencies caused by the earthquake.

Compounding the impact of damaged facilities, limited human resources and presence of implementing partners in the affected departments, GBV activities are slowing down. In response, distribution of dignity kits to address the basic hygiene needs of women and girls, post-rape kits and medical inputs for health institutions in the Sud and Nippes departments, and soon Grand'Anse, for the medical management of sexual violence is now underway. However, as the response stabilizes, it will be vital to ensure that women and girls, including survivors of GBV, have access to response services. Streamlining of GBV/PSEA prevention activities with a focus on raising public awareness in neighbourhoods and assembly points is urgently needed. Additionally, capacity building for the rapid implementation of GBV case management programmes will be vital.

## GENERAL COORDINATION

DGPC continues to lead national relief and response efforts, together with line ministries and humanitarian partners, through the National Emergency Operations Centre (COUN). At the departmental level, Prime Minister Ariel Henry designated the Minister of the Status of Women and Women's Rights (Sud Department), the Minister of Tourism (Nippes) and the Minister of Environment (Grand'Anse) to oversee relief operations and the distribution of supplies to the most affected areas. The Government's Health Crisis Cell (UNGUS) continues to coordinate rapid health assessments, the deployment of medical teams and provision of essential medical equipment and supplies, as well as the treatment and transfer of seriously injured patients.



Photo credit: UN OCHA/Matteo Minasi

Local civil society and community-based organizations, churches and the national private sector – many of whom have been impacted by the earthquake themselves – continue to play a key role in response efforts, reaffirming the need for international humanitarian partners to support these local actors and integrate them into coordination structures and financing mechanisms, as well as involving them in the strategic design and implementation of sector-based response activities, effectively leveraging local capacities to deliver a more efficient and well-targeted humanitarian response.

Under the coordination of the Alliance for Disaster Management and Business Continuity (AGERCA), national private sector member companies and partners are also supporting the response, with a permanent presence at the COUN and in Les Cayes. As of 24 August, AGERCA had distributed 8,500 5-gallon bottles of water, 1,500 20oz bottles of water, 1,000 packages of 60 water sachets, 1,500 gallons of fuel to MTPTC and COUN, monetary donations and other relief items equivalent to more than \$200,000. In addition, support is also being provided to national coordination structures, including through the provision of unlimited monthly phone plans for 65 of the COUN and COUD actors, and health care and food support to prisoners in all affected areas.

At the regional level, the Caribbean Community (CARICOM) Heads of Government convened a special meeting on Haiti, reiterating its support to national response efforts channelled mainly through the Caribbean Disaster Emergency Management Agency (CDEMA) and bilaterally through Member States providing in-kind relief supplies and financial donations to help the country recover from the devastating quake.

With the aim of strengthening regional coordination, the Executive Director of CDEMA and the UN Humanitarian/Resident Coordinator for Haiti continue to co-chair regular meetings of the Caribbean Development Partner Group (CDPG),

bringing together donors, regional institutions and humanitarian partners to optimize the support being provided to Government-led response efforts, receiving regular briefings from DGPC and the CARICOM Operational Support Team (COST) on the ground. Similarly, OCHA Regional Office (ROLAC) continues to lead ad hoc meetings of the Regional Group on Risks, Emergencies and Disasters for Latin America and the Caribbean (REDLAC) to collectively identify needs across sectors, gaps in response efforts and areas for greater collaboration among sector lead agencies and humanitarian partners.

With more than 300 response actors on the ground, efficient and effective humanitarian action in such a complex response environment requires a timely identification of which humanitarian actors are operating in the most affected areas, what activities they are rolling out, where they are taking place and who they are targeting for assistance, helping to develop a common operational understanding among the diverse range of response actors. To do so, OCHA Haiti and DGPC continue to develop the [Who does What, Where \(3W\)](#) tool to strengthen coordination and identify response gaps, focusing more on when and for whom humanitarian activities are being implemented as partners continue to scaleup response efforts as access to affected areas improves.

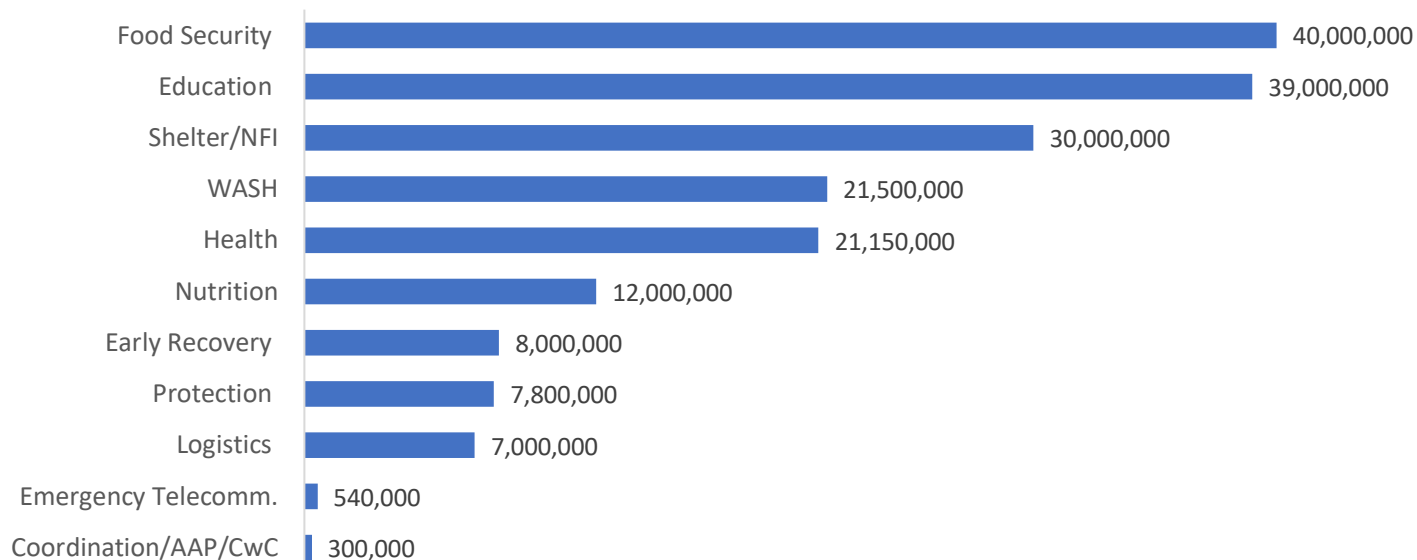


Photo credit: DGPC/UN OCHA

## FUNDING

On 25 August, UN agencies and humanitarian partners launched a \$187.3 million [Flash Appeal](#) to reach 500,000 of the most vulnerable people affected by the earthquake, including pregnant and lactating women, people living with disabilities, women at risk of SGBV, and children of school age and younger, among others, from August 2021 to February 2022. The Central Emergency Response Fund (CERF) has already contributed \$8 million to provide life-saving assistance in health, WASH, shelter, protection, logistics and food security. Additionally, many UN Agencies, Funds and Programmes (AFPs) have launched their own financing appeals, including WFP, IOM and UNICEF, to secure additional donor funding to meet growing needs.

### Flash Appeal - Financial requirements by sector (US\$)



On 26 August, USAID Administrator Samantha Power visited Haiti where she met with Prime Minister Ariel Henry and other high-ranking Government officials as well as those contributing to US response efforts on the ground, including the USAID Disaster Assistance Response Team (DART). She announced that USAID will provide \$32 million in humanitarian assistance to support ongoing relief efforts. These funds will support humanitarian partners on the ground delivering life-saving multi-sectoral assistance, including health care services, emergency shelter and food, WASH interventions and protection services, to those most in need in the hardest-hit areas.

Despite the continued support of donors, UN agencies and humanitarian partners find themselves in need of additional financing to quickly scale up earthquake response efforts while still ensuring that accumulated needs from overlapping crises continue to be prioritized. Over the past two years, humanitarian organizations have been sustaining expanded response efforts to deal with the multi-faceted health and socio-economic consequences of the COVID-19 pandemic, increasing gang-related internal displacement and worsening food insecurity, leaving them stretched to the brink.

The various impacts of the earthquake have only exacerbated existing needs which UN agencies and humanitarian partners will need significant financing support to effectively address in an efficient and timely manner. UN AFPs have already redirected internal funds for the earthquake response which were originally earmarked to respond to other crises, creating the risk that millions of people in need of humanitarian assistance beyond those affected by the quake will not receive the assistance they desperately need quick enough.

## HUMANITARIAN RESPONSE



### Camp Coordination and Camp Management

#### Needs:

- Shelter and safe drinking water for displaced people.
- Improved communication with affected populations, including women's organizations.
- Reinforce protection activities in displacement sites and affected communities, creating linkages with mental health and psychological support.
- As of 27 August, Displacement Tracking Matrix (DTM) teams have identified 58 displacement sites with 24,400 people (33 sites in the Sud Department with 16,900 people, 15 sites in Nippes with 6,000 people and 10 sites in Grand'Anse with 1,500). Latest DTM reports will be made available at: [IOM-DTM Haiti](#).
- Improve gathering of sex, age and vulnerability-disaggregated data to facilitate adapted response.

# 24.4K

displaced people  
identified in 58 sites  
through the Displacement  
Tracking Matrix

#### Response:

- IOM has pre-positioned stocks in Port-au-Prince with capacity to cover the needs of approximately 70,000 families.
- IOM has deployed teams to the three most affected departments to support the distribution of relief items. Additionally, the DTM is being rolled out by teams in affected areas to gather and analyze data on the needs of displaced populations.

#### Gaps & Constraints:

- Fragmented and insufficient sex, age and vulnerability-disaggregated data and information about displaced people on the move, their needs and access to appropriate assistance.



### Early Recovery

#### Needs:

- Support to kickstart economic recovery through access to markets, local entrepreneurship and livelihoods intervention, including financing rapid income-generating activities, such as cash-for-work programmes, in affected communities.
- Technical and financial assistance to local authorities, including departmental technical agencies (ATLD), to promote a sustainable and environmentally responsible debris management effort.
- Assessments of affected structures and demolition of severely damaged homes.
- Rebuilding of homes and other community structures affected by the earthquake.
- Removal of debris and waste to clear roads and increase access to affected communities.

- The Women's Movement for the Development of Grand'Anse reports that the already precarious economic situation of women has worsened due major damages and losses in housing and livelihoods. The livelihoods of many depend on the commercial sector, which has been hard hit by the various impacts of the earthquake, leaving women without a source of income at a time when they need to replace lost household items and make payments toward credit loans received from solidarity lenders and banks.

#### Response:

- Under the leadership of the DGPC, with support from the UN, European Union, World Bank and Inter-American Development Bank, a Post-Disaster Needs Assessment (PDNA) is being planned with technical assistance provided by UNDP on behalf of the Humanitarian/Resident Coordinator's Office in Haiti. Coordination with the UNDAC team and sector lead agencies will be important to accelerate the process of estimating post-earthquake recovery needs.

## Education

#### Needs:

- Rehabilitation of schools, including for WASH, provision of school kits, school desks and furniture, hygiene kits, catch up classes, adapted psychosocial support for girls and boys at school and safe temporary learning spaces.
- Provision of COVID-19 prevention and hygiene kits to protect the health of children and their families.
- Improve gathering of sex, age and vulnerability-disaggregated data to facilitate adapted response.

# 100K

children and teachers affected by damaged and destroyed school infrastructure

#### Response:

- UNICEF, WFP, UNOPS and the World Bank are working together to carry out assessments to estimate the needs for the reconstruction of schools damaged by the earthquake.

#### Gaps & Constraints:

- Challenges have been identified in institutional coordination at the local level.
- Significant lack of funding for education partners to support response activities and limited prioritization of the Education Sector in resource mobilization efforts.

## Food Security

#### Needs:

- Emergency food assistance, inputs for rapid reactivation of agricultural production, and rehabilitation of irrigation systems and other agricultural infrastructure as well as livestock protection.
- According to the Flash Appeal (August 2021), some 300,000 people in the hardest-hit areas are in urgent need of food assistance.
- FAO estimates that 32,000 rural households (160,000 people) hard hit by the combined impacts of the earthquake and Tropical Depression Grace require rapid support to restore production, protect their livelihoods, rehabilitate agricultural infrastructure and protect livestock.
- Improve gathering of sex, age and vulnerability-disaggregated data to facilitate adapted response.

# 32K

rural households require support to restore production and livelihoods

#### Response:

- The Ministry of Agriculture has launched a sectoral damage assessment and needs analysis. FAO is providing technical and financial support for assessment efforts.
- Since 14 August, WFP has reached 48,000 people and distributed more than 15,000 hot meals mainly in hospitals.
- WFP provided food to 13,000 people in the remote areas of Maniche and Camp-Perrin in the Sud Department.
- WFP plans to reach 215,000 people in urgent need of emergency food assistance in Beaumont, Baradères, Cavaillon, Camp-Perrin, Maniche, Plaisance-du-Sud, Petit-Trou-de-Nippes and surrounding areas.
- WFP and World Central Kitchen are partnering to provide 7,000 hot meals per day to patients, their families and staff in health centers in Beaumont, Duchity, Jérémie and Les Cayes.
- Preliminary results of the Emergency Food Security Assessment being carried out by WFP, the National Coordination for Food Security (CNSA) and DGPC are expected on 3 September.

- The Buddhist Tzu Chi Foundation delivered food packages to support 5,000 households for one month in Les Cayes and Jérémie.
- The Economic and Social Assistance Fund (FAES) delivered 3,450 food kits to affected people Jérémie, Roseaux, Cayemites, Corail, and Marfranc and in the Sud Department, FAES distributed 2,550 food kits in Chantal, Ducis and Torbeck.
- ADRA is distributing 1,000 food kits to affected people in Les Cayes, Camp-Perrin and Sant-Louis-du-Sud in the Sud Department.
- FAO continues to focus on protecting and restoring the livelihoods of 32,000 rural households (approximately 160,000 people) and rehabilitating damaged community-based agricultural infrastructure, while mitigating the negative impacts of COVID-19 and preventing the African swine fever in the departments of Grand'Anse, Nippes, Sud and Sud-Est.
- In the communes of Corail, Jérémie and Pestel, FOA will provide a variety of climate-resilient vegetable seeds, agricultural inputs and technical support for 1,500 vulnerable households living in isolated mountainous areas and an allocation of goats to 500 affected households. Additionally, FAO will support the training of veterinary officers and the organization of mobile veterinary clinics for the treatment of about 4,000 animals belonging to at least 1,000 agro-pastoralists.

### Gaps & Constraints:

- Tropical Depression Grace triggered floods and landslides that affected many crop fields. Additionally, these hazards have rendered numerous roads impassable, destroying bridges on critical supply lines and disrupting private sector food and agricultural inputs supply chains.
- A significant number of domestic animals have been lost due to the earthquake and families whose homes have been damaged or destroyed have lost their agricultural tools and inputs, all of which will have negative consequences for agricultural-based livelihoods and food security.
- Initial rapid assessments have shown that markets and agricultural infrastructure (storage and processing facilities, dairies, irrigation canals, rural roads, etc.) have been affected by multiple hazards.
- The proximity of the planting season requires quick action to avoid a further deterioration in food security, with declines in crop production already projected before the quake amid below-average rainfall compounded by rising prices in basic foodstuffs and the effects of the COVID-19 pandemic.
- African swine fever cases have been confirmed on La Española by Dominican authorities. While there are currently no confirmed cases in the Haiti, its most vulnerable population in rural, peri-urban and urban areas rely extensively on pork farming, commercialization and consumption for their livelihoods and food security. A possible spread of the disease, accelerated by the movement of people and cattle due to the earthquake and floods, could have a severe impact on the local economy and livelihoods.

## Health

### Needs:

- Medical personnel, essential medicines and medical supplies, effective stock management, mental health and psychosocial support (MHPSS) activities, implementation of preventive and control measures for communicable diseases, and WASH interventions in health facilities and shelters.
- Ensure proximity and access of emergency care services to victims in remote communities, as access to hospitals in major cities remains cut off for these populations.
- Specialized surgical care, preferably with a capacity for post-surgical hospitalization management (surgical cell, orthopedic surgery cell and/or Type 2 EMT) and comprehensive trauma care to support the surgical capacities of health facilities (EMT T1 Fixed with high capacity for orthopedic trauma care). Partners have also expressed the need to support post-trauma and post-surgery.
- Strengthen obstetric capacities of health facilities (basic and comprehensive emergency obstetric care) in affected areas.
- Support primary health centers to provide family planning, sexually transmitted infection (STI) services and obstetric referrals.
- Strengthen capacities in hospitals/health facilities to provide services for the clinical management of rape.
- Establish and equip medical and community mobile teams to provide essential health services.
- Strengthen access for adolescents and youth to life-saving sexual and reproductive health (SRH) services and GBV information along with streamlined referrals to child protection services.
- Need for 2 mobile clinic teams for Saint-Louis-du-Sud, and stocks of essential medicines, medical supplies and hygiene kits for 6,000 people (Médicos del Mundo Argentina).

# 91T

of critical medical supplies delivered by Américas and Direct Relief

- Strengthen maternal health care at assembly points and for displaced families.
- Improve gathering of sex, age and vulnerability-disaggregated data to facilitate adapted response.

### Response:

- On 27 August, an Americares airlift carrying 12 tons of critical medical relief items, including wound care supplies, PPE, critical medicines and medical supplies. Americares longtime partner, Hope for Haiti, is transporting supplies to health care providers across south-western Haiti, including through its mobile medical teams providing assistance in hard-to-reach rural communities and more than 30 partner health facilities caring for injured people in quake-affected areas.
- With support from a FedEx charter flight, Direct Relief delivered 79 tons of critical medical supplies, including prescription medications, intravenous solutions and emergency medical backpacks, among other relief items.
- In four communes in the Sud Department, Médicos del Mundo Argentina began the delivery of hygiene kits for 2,000 families, medical care in Mobile Clinic Teams and sensitization campaigns with community networks at assembly points on the prevention of epidemic diseases and the promotion of protection and environmental health.
- UNFPA will provide critical health equipment and supplies to hospitals in the Sud, Grand'Anse, Nippes and Ouest departments to ensure the continuity of critical sexual and reproductive health services. Inter-Agency Reproductive Health Kits, including 8 kits for clean delivery and 8 post-rape kits, will be distributed with each kit covering up to 10,000 people. Additionally, UNFPA will distribute 8 kits for the treatment of STIs, 16 kits for clinical delivery assistance (8 midwifery supplies – reusable equipment and 8 midwifery supplies – drugs and disposable equipment), and 8 kits to repair cervical and vaginal tears, with each kit covering up to 30,000 people.
- The Nippes Health Departmental Directorate will receive medical supplies from UNFPA this week, while Grand'Anse is scheduled to receive their shipment of medical supplies next week. Medical supplies have already been shipped to the Sud Department.

### Gaps & Constraints:

- Some affected hospitals are functioning on generator power and have limited fuel supplies.
- Increased risk of maternal and newborn deaths, as maternity and surgical wards are not functional for safe deliveries and caesarean section, requiring temporary measures to be established in order to reduce the risks faced by pregnant women.
- Interrupted access to essential health services could potentially lead to an increase in maternal and child deaths, vaccine-preventable diseases and chronic disease-related deaths.
- Youth and adolescents do not have sufficient access to reproductive health information and services adapted to their needs, which increases the risk of unwanted pregnancies and STIs.
- Flooding brought on by the heavy rains associated with Tropical Depression Grace, combined with a lack of adequate shelter and access to safe water and sanitation, is increasing the risk of infectious respiratory diseases (including COVID-19), diarrheal diseases and vector-borne disease, such as malaria and dengue, among other disease outbreaks.

## Nutrition

### Needs:

- Conduct Rapid Nutrition Needs Assessment.
- Training of functional community workers (ASCP) in affected departments to provide nutrition support and counseling to mothers/caregivers of infants and young children.
- Training of health workers to provide nutrition support to non-breastfed children, including relactation and the use of breast-milk substitute as a last resort.
- Set up spaces to provide skilled breastfeeding counseling and separate spaces to support non-breastfed children, focusing on children 6-11 months.
- Nutrition supplementation to prevent acute malnutrition in children 6-59 months.
- Purchase of critical supplies including ready-to-use infant formula for non-breastfed infants less than 6 months old, ultra-high temperature milk for non-breastfed infants 6-11 months, lipid-based nutrient supplements (PlumpyDoz) and associated supplies needed (tents, feeding cups, spoons, etc.).
- Improve gathering of sex, age and vulnerability-disaggregated data to facilitate adapted response.

# 60MT

of CSB donated by WFP in the Sud, Grand'Anse and Nippes departments to be distributed to pregnant and lactating women

**Response:**

- UNICEF supported the Ministry of Health (MSPP) with the coordination of sector meetings and the creation of working groups within the sector to focus on specific work areas, including infant and young child feeding (IYCF), communications, supply procurement, human resources, rapid evaluations and mapping. These working groups are expected to accelerate the planning and implementation of the Nutrition Sector's response.
- The Nutrition Sector has met twice to review the methodology and questionnaires for the rapid assessment, now pending approval from relevant Government entities before being rolled out. The assessment is expected to start next week.
- The Sector has already conducted the mapping of ASCP available at the community level to conduct the rapid needs assessment and UNICEF, Action Against Hunger and AVSI are on the ground ready to carry out the rapid assessment.
- The joint statement for the need to protect IYCF and prevent infant formula donations has been reviewed and approved by the sector. The statement has been submitted to the COUN and senior management of the MSPP and UNGUS for approval.
- In support to the nutrition response, UNICEF has identified an adviser on IYCF in emergencies to be deployed for several weeks starting the first or second week of September. UNICEF has also mobilized support for the Nutrition Sector in information management through the Global Nutrition Cluster, with an Information Management Officer expected to be deployed as soon as possible.
- UNICEF is in the process of purchasing supplies for the Nutrition Sector, including ready-to-use infant formula (RUIF) for non-breastfed infants under 6 months old, ultra-heat treated (UHT) milk for non-breastfed infants 6-11 months, lipid based-nutrient supplements for children under 5 years old and possibly pregnant and lactating women, as well as other associated supplies needed (tents, feeding cups, spoons, etc.).
- Meds and Food for Kids (MFK) donated 500 boxes of Plumpy'Doz to the MSPP to cover the three affected departments.
- WFP donated 60 mt of corn soy blend (CSB) in the Sud, Grand'Anse and Nippes departments to be distributed to pregnant and lactating women. Additionally, WFP donated Plumpy'Doz to be distributed to 800 children between 6 and 23 months in the three affected departments.

**Gaps & Constraints:**

- The Nutrition Sector needs funds to conduct rapid needs assessments.
- Funding is urgently needed to allow Nutrition Sector partners to implement an initial nutrition response focused on preventing malnutrition through support and counseling on IYCF and nutrition supplementation.
- Limited prioritization of the Nutrition Sector in resource mobilization efforts.
- Potential donations of breast-milk substitutes and untargeted distribution to infants and young children affected by the earthquake, putting them at risk of malnutrition, disease and death.


**Protection**
**Needs:**

- Establish and maintain effective feedback systems (including comments, suggestions and complaints), using a variety of communication channels that are accessible to all affected people and that are appropriate for both sensitive and non-sensitive feedback.
- Promote and strengthen inclusive and accessible accountability mechanisms, with a special focus on protection against sexual exploitation and abuse (PSEA).
- Establish safe spaces for children and adolescents, women and other vulnerable groups, including people with disabilities.
- Assistance is needed for women and girls, including pregnant minors, affected by the earthquake and exposed to increasing GBV risks in the affected areas, especially in the face of limited access to emergency shelter.
- MHPSS services for children, adults, service providers and other vulnerable groups are required.
- Support to BSEIPH to continue assessments at the municipal level.
- Carry out massive distributions of humanitarian relief supplies to people with disabilities in a highly secure and coordinated fashion involving those living with disabilities.
- Assessment to address child protection needs and identification of the most vulnerable children, including separated children, orphans and injured children and their families, for referral to services and relevant support, such as the provision of blankets, children's clothing and recreation kits.

**3.5K+**

people living with disabilities have been affected in the Sud, Grand'Anse and Nippes departments

- Support to vulnerable families and capacity building for implementing partners on child protection in emergency situations.
- Improve gathering of sex, age and vulnerability-disaggregated data to facilitate adapted response.

#### Response:

- In collaboration with Terre des Hommes, IOM is providing shelter assistance to particularly vulnerable families in the Sud Department.
- IOM protection staff have been providing psychological support and other forms of assistance to vulnerable people, including the elderly and people with disabilities.
- A rapid gender assessment of the earthquake's impact will be launched this week by the Gender Taskforce under the leadership of UN Woman and CARE in collaboration with UNFPA and civil society organizations in the Sud Department. The objective is to assess the earthquake's impact on women, men, girls and boys to inform the immediate humanitarian response, as well as medium and long-term recovery efforts, help identify and respond to the diverse needs, capacities and strategies of the population, and provide concrete recommendations on how to respond to differentiated needs.
- The Minister of the Status of Women and Women's Rights (MCFDF) and humanitarian partners will carry out GBV safety audits at assembly points in the Nippes and Grand'Anse departments between 31 August and 7 September.
- On 28 August, UNFPA received 3,000 dignity kits that will be delivered to the three affected departments this week by the Ministry of Women's Affairs and civil protection authorities at the departmental level.
- Haitian Federation of Associations and Institutions for People with Disabilities (FHAIPH) carried out assessments in affected departments. They estimate that at least 3,500 people living with disabilities have been affected.
- The joint office of Diakonie Katastrophenhilfe et Norwegian Church Aid / Aide de l'Eglise Norvégienne / la Fédération Luthérienne (DKH-FLM-NCA) has teams on the ground in the Sud and Grand'Anse departments carrying out assessments in WASH, economic empowerment and gender issues. They have an ongoing GBV awareness campaign in Haute Voldroque (Grand'Anse) and in the coming weeks, will provide dignity kits to vulnerable women and girls in the municipality.
- In Les Cayes, Concern Worldwide is coordinating the distribution of 2,000 hygiene kits this week together with civil protection authorities.
- Concern Worldwide is working with Habitat for Humanity on a project in the Sud (Cavaillon, Saint-Jean, Torbeck and Camp Perrin) and Grand'Anse (Beaumont and Pestel) departments which include activities such as: cash assistance, hygiene kits, shelter/NFI, psychosocial support, protection interventions, GBV risk assessments jointly carried out with Christian Aid and UNFPA in targeted communes, as well as the analysis and mapping of services to strengthen GBV services referral pathways.
- Christian Aid is working with Concern Worldwide and UNFPA on the identification of GBV service providers, protection risks and mitigation measures in the Sud and Grand'Anse departments.
- UNICEF and IBESR carried out joint visits to four health centers (HIC, OFATMA, City-Med and Caramed), where 53 children (32 girls and 21 boys) are receiving medical care. During the visit, an unaccompanied child was found and reunited with her family.
- UNICEF is supporting IBESR to closely monitor the situation of separated children receiving care for injuries in health facilities in order to mitigate trafficking risks. IBESR staff are present at the Hospital Immaculée Conception. Ongoing psychosocial support activities are being carried out in the Sud Department. A total of 78 people (45 girls and 23 boys) received psychosocial support in recreational areas. In addition, 58 people (25 men and 33 women) living in shelters have received training related to the risks associated with family separation and how to avoid it.
- Home visits were conducted in response to 14 identified unaccompanied children in the commune of Camp-Perrin by OHCHR/FTB and IOM. Tracing processes identified the parents of the unaccompanied children and the reunification process is underway.

#### Gaps & Constraints:

- Affected people continue to shelter outdoors due to concerns surrounding the structural integrity and possible collapse of their homes, regularly carrying out hygiene and other activities in the absence of privacy or adequate security, which increases their exposure to a wide range of protection risks.
- In the Nippes Department, there have been no interventions targeting women and girls since the earthquake. Based on the MCFDF initial assessment, several areas remain inaccessible while their office is facing logistical challenges to cover these areas and ensure GBV case management. The lack of electricity at assembly points is key concern which could increase the risk of GBV incidents.
- Initial assessments carried out by UNFPA and MCFDF indicate that access to GBV services and case management have been significantly reduced.
- The effect of the earthquake on the health system will have negative consequences for the clinical management of rape.

- Assembly points do not have adequate safety and protection measures that meet established standards (electricity and proper lighting, sex-segregated toilets and showers, etc.). Women and girls do not participate in the management committees at assembly points. This creates greater risks of exploitation and abuse and sexual violence.
- Growing risks of separation and child trafficking.
- Women's organizations reported that women are exposed with their children and living in the streets without a tent or even a tarp and the lack of communication, including difficulty with telephone and internet communication, hampers women's efforts to locate family members or access services. This limits access to life-saving information for early preparedness as well as emergency and other services.
- FHAIPH and the Association of Handicapped Women in the Sud Department are advocating for the integration of organizations working with people with disabilities into coordination mechanisms to ensure the inclusion of this vulnerable group and cover their needs during the emergency response to the earthquake.
- The needs of vulnerable people in Grand'Anse are not being sufficiently prioritized. The main entrance road to Jérémie continues remains impassable following damages to a key bridge. Only people on foot and motorcycles can pass through this road for now, creating logistics and transportation challenges.

## Shelter

### Needs:

- Damage assessments in the housing sector must be carried out to allow families currently sheltering outside to quickly return to their homes which have been damaged but not destroyed.
- Emergency shelter solutions and essential household items are urgently needed.
- The Government has requested tarpaulin be distributed to the affected population, adding that tents should only be used for hospitals. The Government has preliminarily requested 60,000 tarpaulins to support families with emergency shelter needs.
- Plastic sheeting, blankets, tarpaulin, waste bins, food, water, medicine and hygiene kits needed in temporary shelters.
- Improve gathering of sex, age and vulnerability-disaggregated data to facilitate adapted response.

# 6.6K

families received  
shelter/NFI kits from IOM

### Response:

- The Swiss Embassy distributed 2,500 shelter kits to affected people in the Sud Department.
- ADRA is distributing 1,000 shelter kits to affected people in Les Cayes, Camp-Perrin and Sant-Louis-du-Sud in the Sud Department.
- As of 28 August, IOM has distributed Shelter/NFI kits, including tarpaulins and fixing kits, among other items, to around 6,600 families (approximately 33,000 people).
- IOM is co-leading the Haiti Shelter/NFI/CCCM Working Group in support of the Government, specifically DGPC and UCLBP, through the provision of technical and strategic guidance for shelter partners and coordination support.
- IOM, together with DGPC, is leading the NFI Pipeline to facilitate the management of shelter/NFI partners to organize a coordinated response in the three affected departments.
- IOM facilitated a refresher training and deployment of 12 engineers from the Ministry of Public Transport and Telecommunications (MTPTC). These engineers are deployed in the Sud, Nippes and Grand'Anse departments to conduct rapid assessments of critical buildings.
- Habitat for Humanity Haiti conducted an assessment of expandable core houses in the Department of Grand'Anse that were built in previous years, with 90 per cent of the core houses assessed having withstood the impact of the earthquake.
- Save the Children has distributed 173 WASH kits and 51 baby kits in Les Cayes, Camp-Perrin, Torbeck/Ducis and Chantal. Today, 31 August, a shipment of NFIs (household, gender-sensitive hygiene, recreational kits, etc.) arrived from Panama to be distributed to up to 600 families.
- The UK Government provided shelter kits and solar lanterns for 2,600 vulnerable families which are being distributed by IOM.

### Gaps & Constraints:

- First-hand observations from personnel on the ground and satellite imagery highlight that many shelters in affected areas have suffered varying degrees of damage, forcing displaced people unable to stay with family and friends to set up makeshift tents constructed of wood and tarpaulin, many of which were subsequently brought down by Tropical Depression Grace's strong winds.

- In rural areas, some families are constructing makeshift shelters that are built directly on the ground and lack any kind of foundation or platform, making them vulnerable to collapse due to high winds and heavy rains.

## Water, Sanitation and Hygiene

### Needs:

- Provision of safe drinking water and hygiene kits for those whose homes have collapsed.
- Improve water storage capacities and construction or rehabilitation of sanitation facilities in affected health centers receiving injured people.
- Rehabilitation of damaged water supply systems and provision of chlorine (HTH).
- Handwashing facilities, soap and critical hygiene supplies in health centers to prevent the COVID-19 risk as well as water-borne diseases, such as cholera.

# 119K+

people in urgent need of safe water

### Response:

- Spanish Agency for International Development Cooperation (AECID) sent a simplified water system (SSA) along with other necessary equipment to facilitate the purification and distribution of safe drinking water in the rural commune of Cavaillon, constituting a distribution point for clean water to be transported to nearby towns. The SSA has the capacity to produce 4,000 liters of drinking water per hour, providing at least 2,650 with safe drinking water.
- A team deployed by the AECID Humanitarian Action Office will support the National Directorate of Drinking Water and Sanitation (DINEPA) to install at least four additional water treatment systems in quake-affected areas.
- With transportation support from the UPS Foundation, The Salvation Army received 22,500 face masks, more than 100,000 disinfectant wipes and 7,200 heavy-duty trash bags to be distributed in affected areas.
- ADRA is distributing 1,000 hygiene kits to affected people in Les Cayes, Camp-Perrin and Sant-Louis-du-Sud in the Sud Department.
- Save the Children is distributing aquatabs to 1,300 households.
- The WASH Sector response monitoring dashboard can be found on the Haiti WASH Sector website: <https://www.washlac.com/fra/cluster-sectoriel/caraibes/haiti>, where partners are required to report their activities.

## Logistics

### Response:

- EU Air Bridge operation delivered more than 135 tons of life-saving relief supplies to humanitarian organizations on the ground, including medical supplies and equipment as well as WASH items, among others, supplied by EU humanitarian partners.
- Via the EU Civil Protection Mechanism, the EU continues to coordinate the delivery of humanitarian assistance provided by EU Member States.
- The UK Ministry of Defense's Royal Fleet Auxiliary vessel, Wave Knight, continues to support international humanitarian response efforts, providing a landing pad for US military helicopters that allows for them to refuel, expanding their range and time available to support relief efforts.
- As of 26 August, the Joint Task Force-Haiti, including the US Coast Guard, has carried out more than 400 missions, assisted or rescued more than 450 people and delivered over 250,000 pounds of relief assistance.
- The Logistic Cluster and Logistics Working Group are mapping data and information on logistics capacity, physical access constraints as well as situation and weather monitoring to facilitate logistics efforts on the ground. This information can be accessed at: <https://logie.logcluster.org/?op=hti-21-a>.

# 135T+

of life-saving relief supplies delivered via EU Air Bridge operation

## Emergency Telecommunications

### Response:

- Télécoms Sans Frontières (TSF) installed broadband satellite connectivity at the humanitarian coordination center set up in Les Cayes. The TSF team is also providing telecommunications support to UNDAC assessment operations being carried out in Jérémie and Les Cayes.
- The Finnish and Austrian Red Cross sent two telecommunications experts to Haiti in order to help secure telecoms connections to facilitate aid operations.



## Accountability to Affected Populations and Communication with Communities

### Needs:

- Provide relevant, transparent and well-coordinated humanitarian action, securing safe access to communities and timely access to the most vulnerable.
- Mitigating safety and protection risks, especially during and after relief distributions, demonstrating efforts to build trust and fulfil partners' responsibilities to principled humanitarian action.
- Integrated mechanisms across the response strategy, operations and coordination that enables accountability to affected people, including effective two-way CwC, supporting access, delivery, acceptance and protection.
- Delivery and strengthening of information on relief constraints before and alongside assistance, as well as engagement and open dialogue with those in the most affected areas to explain the challenges and limitations of humanitarian assistance.
- Mapping of existing PSEA and AAP capacities and ongoing response efforts in addition to sharing relevant experience and information with partners.
- Improve communication with women's and youth organizations and create spaces for their meaningful and effective involvement in response efforts.

### Response:

- Coordination with designated authorities being carried out by OCHA/UNDAC team on the ground to reactivate the national CwC Working Group (CwC WG) and strategically position it as a key part of the humanitarian architecture and response.
- Communicating with Disaster Affected Communities (CDAC) Global Network activated Haiti's ad hoc meetings at the global level, convening experts and personnel from humanitarian organizations and key Media for Development actors with experience on the ground in Haiti to exchange information and collaborate on the advancement of AAP and CwC/Community Engagement (CE).
- Zero Tolerance UN telephone line (3702-6516) and email address Report-UN-Haiti@un.org activated for PSEA-related complaints. Please contact OCHA Haiti for CwC outreach material and include these channels in information provided to communities.

### Potential Gaps & Constraints:

- Multiple sectoral- and agency-based needs assessment currently being rolled out without having effectively integrated AAP, unintentionally fueling affected communities' frustration level due to extractive and lengthy questionnaires that do not result in immediate results/solutions to people's needs.
- Assessments and analysis failing to reflect communities' priorities and recommendations.
- Lack of priority and dedicated resources in humanitarian response plans to enable a localized and accountable response. Financial mechanisms not considering AAP as a minimum requirement for selecting proposals.
- Potential delay in the reactivation of the AAP/CwC WG at the national level due to competing priorities and required coordination with multiple actors.
- Potential delay in the deployment of dedicated capacity required to support the coordination of the AAP/CwC WG.
- AAP/CwC and PSEA focal points to support information management not assigned by lead agencies, partners and inter-agency coordination.
- A fast-changing context with mounting unmet needs that fuel anger, rumours and misinformation which outpace response efforts.

## USEFUL LINKS

- Haiti Flash Appeal – Earthquake (August 2021): <https://bit.ly/3yiSswg>
- UN Business Guide: <https://bit.ly/3yhH0RM>
- ReliefWeb – 2021 Haiti Earthquake (Appeals and Response Plans, Latest Updates, Maps and Infographics): <https://bit.ly/3zlpY6x>
- DGPC webpage: <https://bit.ly/3jpHtxf>

- HumanitarianResponse.info page for Haiti: <https://bit.ly/3gx0M5U>
- IMPACCT (Bulletin on Customs, Immigration and Quarantine Procedures: [EN/FR](#))
- Connection Business initiative (CBI) – 2021 Haiti Earthquake: <https://bit.ly/2UOrKhF>
- WASH Sector: <https://bit.ly/3DlIm2y>
- Shelter/CCCM sectors: <https://bit.ly/2XM9Z3t>
- Logistics Sector: <https://bit.ly/38aY4yc>
- Operational Presence Map: <https://bit.ly/3kKlIrn>

For access to tools and resources for strengthening communication, community engagement and accountability in humanitarian response, go to **CDAC's Haiti resource portal**: <https://bit.ly/2Wqgk3Q>

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