Situation Report #4
Haiti

Key Figures

<table>
<thead>
<tr>
<th>Figure</th>
<th>Description</th>
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<tr>
<td><strong>5.5 million</strong></td>
<td>Total people affected</td>
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<td><strong>1.4 million</strong></td>
<td>Women of reproductive age</td>
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<td><strong>84,921</strong></td>
<td>Estimated pregnant women</td>
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<td><strong>681,000</strong></td>
<td>People targeted with SRH services</td>
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<tr>
<td><strong>330,000</strong></td>
<td>People targeted with GBV programmes</td>
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Highlights

- The humanitarian situation continues to deteriorate as violence by armed gangs intensifies. This is continuing to drive displacement.
- The government renewed the curfew for the entire western department from 28 May to 3 June 2024.
Clashes between armed gangs and police have been reported in some areas. Recent armed attacks took place in Saline and Delmas communes.

The transitional presidential council has appointed Garry Conille, who briefly led the country over a decade ago, to the role of Prime Minister as the Caribbean nation works to restore stability and take back control from violent gangs.

Port-au-Prince International Airport has recently reopened after three months of paralysis. The reopening of the Toussaint-Louverture airport, in the capital Port-au-Prince, is expected to help ease a critical shortage of medicines and other basic supplies. The country’s main seaport remains paralyzed.

The deployment of the multinational force to Haiti, initially scheduled for 23 May, has been postponed to early June due to logistical problems.

An estimated 400,000 people in Haiti have been forcibly displaced due to violence and have limited access to food, water, protection, and health services.

UNFPA CO is procuring Reproductive Health (RH) kits, mainly medicines and supplies for maternal and child health care, including emergency obstetric care. These kits will be shipped by air from Panama to Port-au-Prince on a humanitarian flight.

During May, the distribution of dignity and mama kits in displacement sites in the Metropolitan Area of Port-au-Prince (MZPAP) reached 1,350 women and girls.

The current insecurity is pushing more and more people to leave the capital. To date, more than 33,000 people have fled Port-au-Prince seeking refuge mainly in the departments of the South including Grand’Anse, South, Nippes, and South-East. Most of them are living with host families. UNFPA is planning a rapid assessment and the deployment of medical supplies and post-rape kits to health facilities in these areas to ensure access to reproductive health services and services to prevent and respond to gender-based violence (GBV). Supplies include medicines and equipment to ensure safe births, including C-sections, and for the clinical management of rape (CMR).

UNFPA continues to ensure that supported-health facilities and hospitals that are currently operational have essential medical supplies for maternal health and protection service provision. Twelve facilities (5 in the West Department and 8 in Artibonite) have been provided with equipment and supplies for maternal health and the clinical management of rape.

Many health facilities are closed or have drastically reduced their operations. According to Médecins Sans Frontières (MSF), more than 30 medical centres and hospitals remain closed in MZPAP, including the largest hospital, State University Hospital of Haiti, due to vandalism and looting. As tensions escalate in the Haitian capital, shortages of medicines and other essential supplies are threatening to halt the delivery of medical services, putting patients, including pregnant women, at risk. The closure of the airport and ports has led to critical stock-outs at medical facilities.

The imminent arrival of the hurricane season (June to November) significantly increases the risk of famine for the 1.64 million Haitians already facing acute levels of food insecurity.

The continued displacement of people is creating new protection needs and new challenges for GBV actors who have limited operational and financial capacities – operational costs have increased. There is an urgent need to mobilize adequate resources to ensure robust protection programming in terms of the provision of basic hygiene items, building women and girls’ resilience through social and economic activities and cash assistance.

Despite limited humanitarian access, UNFPA is prioritizing the continuation of life-saving services for
women and girls through the deployment of integrated mobile clinics, dignity kit distribution, coordination of GBV and response services, and remote support for survivors of violence via a hotline.

**UNFPA Response**

During the reporting period:

- UNFPA, in collaboration with Fondation pour la Santé Reproductrice et l’Éducation Familiale (FOSREF) distributed 900 dignity kits and 450 mama kits to women and girls living in internal displacement (IDP) sites – École Paul Lochard, Delmas 24 and Solino.

- In collaboration with the Centre pour le Développement et Santé (CDS) and Femmes en Association pour le Développement d’Haïti et pour le Renforcement de l’Intégration Sociale (FADHRIS), UNFPA deployed 8 mobile clinics to displacement sites – Sowahah, Eglise Pentecôte des Frères Unis, Lycée Joseph Bernard, Lycée Collège Dei Virtus, Centre Hospitalier Fadhris, École Nationale Caroline Chauveau, Cour Source Divine, and Delmas 87) that provided sexual and reproductive health (SRH) and GBV services to 2,361 people, including 219 pregnant women and 77 people with disabilities.

- 787 pregnant women gave birth at 12 UNFPA-supported health facilities.

- 21 survivors of sexual violence received medical support.

- Women’s temporary safe spaces and GBV service points were established by FOSREF in IDP sites (Delmas, Pétion-Ville, Lalue, and Christ-Roi) to address the absence of counseling or support for survivors of violence in new displacement sites as well as in affected communities in MZPAP. A total of 208 women and girls accessed services including counseling and psychosocial support.

- 25 women and girls at risk of GBV were referred and accommodated in UNFPA-supported women’s emergency and temporary shelters. They received support as needed including psychosocial and material support.

- To ensure the continuity of services, UNFPA and its partners are operating a hotline to provide psychosocial support, information, referrals, and to document cases of GBV. An estimated 163 calls were made to the hotline in May.

- Awareness raising on GBV services and how to access them reached 434 people, including 306 women and girls in different displacement sites.
Results Snapshots

- **People reached with SRH services**: 3,148
  - 84% Female
  - 16% Male

- **Health facilities supported**: 13

- **People reached with GBV prevention, mitigation and response activities**: 2,101
  - 59% Female
  - 41% Male

- **Safe Spaces for women and girls supported**: 4

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<tr>
<th>NFI</th>
<th>900/450</th>
<th>Dignity/mama kits distributed to individuals</th>
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<td>4</td>
<td>Safe spaces supported by UNFPA</td>
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<td>4</td>
<td>Reproductive health kits provided to service delivery points to meet the needs of 1,200 women</td>
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Coordination Mechanisms

**Gender-Based Violence:**

- To ensure GBV risk mitigation measures are implemented in coordination with other humanitarian clusters in Haiti, 25 members from the Shelter Cluster received training on GBV risk mitigation and GBV referral pathways. They were also oriented on the GBV Pocket Guide in Humanitarian Settings.
- The deployment of international forces could increase the risk of GBV and sexual exploitation and abuse. In preparation for the arrival of the multinational security force mission in Haiti, the GBV sub-cluster held an awareness session for the Haitian National Police (HNP) in Artibonite on GBV issues and referral pathways.
UNFPA is appealing for US$28 million to strengthen and expand access to life-saving SRH and GBV services and supplies in Haiti for women and girls in need.

As of May 2024, UNFPA Haiti was able to mobilize and secure 19% of the required funding – a total of US$5.4 million.