

# Cholera in Haiti: the silent humanitarian crisis

October 2013



The cholera epidemic which began in Haiti three years ago has already affected **680, 820 people, or nearly 7%<sup>1</sup> of the population, and resulted in 8,307 deaths**. Since January 2013, the disease has affected **41,701 people and killed 360 people<sup>2</sup>**. **More than half of the cholera cases in the world are in Haiti, representing more than 50% of global mortality<sup>3</sup>**.



Since June, 2013, the start of the hurricane season, we have seen a growing and steady increase in the number of suspected cholera cases and observed a troubling increase in global and institutional lethality rates. Despite hurricane season, yet low-intensity, **19,260 cases of cholera were recorded between June 1 and September 30, 2013, representing, in only 4 months, 46% of the cases observed since January 2013<sup>4</sup>**. In August 2013, the national average case fatality rate in hospitals reaches 1.79%<sup>5</sup>, well above the threshold limit of 1%. **More than 50% of deaths occur in hospitals<sup>6</sup>**.



These abnormally high rates result from a combination of factors: poor access to water and sanitation, lack of knowledge and information from communities about disease prevention, poor patient management, and closure of a large number of health facilities in the last 10 months. These findings cruelly demonstrate the limited capacity of the existing structures to deal with cholera outbreaks in the country and the continuing lack of access to water and sanitation. Some Communes no longer have any support structures to help manage the disease.



**The integration of cholera response in the national health system is still weak and incomplete**, despite efforts undertaken by the Ministry of Health (MSPP). Many existing structures are facing significant resource constraints, e.g. not enough health workers to ensure continuity of care and in some cases, not trained to care for patients, frequent non-payment of monthly wages, obsolete infrastructure in water, hygiene, and sanitation, and shortages in supplies.



<sup>1</sup> Of an estimated 10.17 million people total population in 2012 - World Bank

<sup>2</sup> HAITI: Overview of cholera - OCHA - October 8, 2013

<sup>3</sup> "Persistence of cholera in the dry season in Haiti" - Stanislas REBAUDET & Renaud PIARROUX - March, 2013

<sup>4</sup> Humanitarian newsletters - OCHA - June, July, August, September, October, 2013

<sup>5</sup> World Health Organization - August, 2013

<sup>6</sup> Humanitarian SITREP - OCHA - July 25 to August 23, 2013

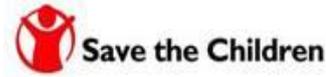


In 2013, funds for the fight against cholera were drastically reduced, (demonstrating a certain minimization of this humanitarian issue) and causing the abrupt withdrawal of many actors. **It is urgent to re-engage all national and international actors, so that the epidemic does not become a forgotten and silent humanitarian crisis.**

Recommended actions:



**1-Stronger links between emergency response and sustainable development programmes.**



It is essential to have more stable funding over the course of an entire year, and not just during the rainy season, when the number of cholera cases are at the highest level. In order to effectively reduce the number of cases during the rainy season and eradicate the disease, strong preventive measures should be taken in high-risk areas during the dry season. Sustained efforts are required to mobilize communities and raise general awareness on a continual basis. In addition, there needs to be renewed efforts to help the most vulnerable groups secure improved access to drinking water, regardless of the economic resources available to them. To do this, there needs to be increased engagement of international donors (both those focused on humanitarian emergencies and those focused on sustainable development programmes) and better coordination of all actors, both national and international.



**2- Improved coordination among government agencies and also of NGOs, reinforcing an overall approach which effectively combines health response with measures to improve access to water and sanitation services.**



The Ministry of Health (MSPP) and the National Directorate of Water Supply and Sanitation (DINEPA) must continue their efforts to coordinate. This will help to avoid confusion at the departmental level and to improve health response and access to water and sanitation services, essential to the elimination of the disease. NGOs reconfirm their commitment to the government to continue their efforts, working as key partners in the fight against this disease.



**3- A more accurate early warning system for targeted response.**



Rapid test kits - recently introduced in some health facilities at the departmental level - should be distributed to all health facilities. Such testing will improve the quality of surveillance efforts as well as the early warning system, leading to a more targeted and more efficient response (resource optimisation).



**List of Signatories to this statement :**

**Action Contre La Faim (ACF)**

**ACTED**

**ACTION AID**

**Americares**

**ATD Quart Monde**

**CARE**

**Concern Worldwide**

**Centre de Coopération Internationale en  
santé et développement**

**Diakonie Katastrophenhilfe**

**Goal**

**Helvetas**

**International Medical Corps**

**International Rescue Committee**

**JP/HRO**

**Lutheran World Federation**

**Mennonite Central Committee**

**Medair**

**Médecins du Monde**

**Mercy Corps**

**Norwegian Church Aid**

**Oxfam**

**Plan**

**Première Urgence-Aide Médicale Internationale**

**Save the Children**

**Secours Islamique France**

**Solidarités International**

**SOS Villages D'Enfants**

**Terre des Hommes Italia**

**UMCOR**

**World Vision**

**About the CCO :** The NGOs Coordination Committee (CCO) is a consortium of international NGOs operating in Haiti in humanitarian and development sectors. Founded after the January 2010 earthquake with 44 registered members, its goal is to increase the coherence and effectiveness of the contribution of international NGOs in improving the living conditions of Haitians, paving the way to sustainable development by strengthening the institutional dialogue and the collaboration between the key actors.

**Disclaimer :** Any opinion expressed in this message do not necessarily represent the views and positions of all CCO members

**About the CLIO :** The *Cadre de Liaison Inter-ONG* (CLIO) is an association of NGOs started in 2005, and that is composed today of 46 Haitian and international NGOs active in Haiti. The CLIO is a structure for consultation and exchange, with the following objectives :

-To offer to the NGOs community a permanent structure of information and consultation on topics of common interest;

-To be an interface between its members and governmental bodies, donors, civil society groups, media, and other private partners;

-To promote partnerships between NGOs, set-up of thematic and sectorial platforms, and to conduct advocacy actions for the Association's members that express a need for it.

More information on [www.cliohaiti.org](http://www.cliohaiti.org)