

U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT BUREAU FOR DEMOCRACY, CONFLICT, AND HUMANITARIAN ASSISTANCE (DCHA) OFFICE OF U.S. FOREIGN DISASTER ASSISTANCE (OFDA)

HAITI - Complex Emergency

Fact Sheet #6, Fiscal Year (FY) 2004

March 12, 2004

Note: The last fact sheet was dated March 9, 2004.

BACKGROUND

- Haiti's 200-year history has been marked by political instability and weak institutional capacity, resulting in a severely debilitated economy and an impoverished population. The current complex emergency is rooted in the country's inability to resolve a four-year political impasse. Following a military coup that ousted elected President Jean-Bertrand Aristide in 1991, the international community intervened militarily to restore Aristide to power in 1994. In May 2000, Aristide's party, Lavalas Family, claimed an overall victory in disputed legislative and municipal elections. In November 2000, the opposition boycotted the presidential election that Aristide won unopposed with low voter turnout. On December 17, 2001, the crisis escalated as armed commandos stormed the presidential palace in Port-au-Prince in an assault that the Government of Haiti (GOH) characterized as an attempted coup d'état.
- The electoral controversy paralyzed the Aristide administration, and Aristide lost popular support due to the inability of the government to attract investment to the country, create jobs, or reduce poverty. As a result, growing lawlessness, instability, and politically-motivated violence began to overwhelm the country in 2002.
- In late 2003, anti-government demonstrations in Port-au-Prince, Gonaïves, Petit-Goâve, and other towns began to increase in size, frequency, and violence. The most recent surge in conflict and violence began on February 5, 2004, when members of armed opposition groups seized control of Gonaïves, Haiti's fourth-largest city. Armed groups opposed to former President Aristide expanded their control throughout parts of the Central, North, Artibonite, Northeast, and South departments. The democratic opposition has distanced itself from the armed groups. Since the most recent crisis began in February 2004, an estimated 300 people have reportedly been killed due to violence throughout the country.
- On February 29, Jean-Bertrand Aristide resigned from the presidency. In accordance with the Haitian constitution, Supreme Court Chief Justice Boniface Alexandre was sworn in as President of an interim government. On March 9, Haiti's seven-person advisory council selected Gérard Latortue, a former United Nations (U.N.) official and foreign minister, as Haiti's new Prime Minister.

SITUATION OVERVIEW

- Structural and institutional weaknesses in Haiti, closely linked to the country's historical, socio-economic, and agricultural development, have had long-term effects on numerous aspects of Haiti's development, such as food security, water and sanitation, health, and nutrition. For many years, Haiti has been the poorest country in the Western Hemisphere, and is currently the only Least Developed Country in the Western Hemisphere. The country was ranked 150th out of 173 countries in the 2003 U.N. Development Program (UNDP) Human Development Report.
- Due to the ongoing and chronic nature of Haiti's underdevelopment, the country is vulnerable to rapid deterioration of humanitarian indicators in a complex emergency. However, certain impacts of a complex emergency, such as malnutrition, are not sudden-onset situations and typically require several months to develop. Two important factors may contribute to food insecurity in Haiti: rising or unstable prices, and a drop in remittances. Haiti is heavily dependent on remittances, receiving an estimated \$800 million on average annually. In addition to food insecurity, the rising incidence of disease and displacement may also contribute to a humanitarian crisis. USAID and its implementing partners are monitoring all of these indicators as closely as possible.
- The U.S. Government (USG), through USAID, is Haiti's largest bilateral donor. In FY 2003, USAID contributed \$71 million. From FY 1995 to 2003, USAID provided a total of \$850 million in direct bilateral assistance. For FY 2004, USAID has planned \$52 million in assistance for programs including health, democracy and governance, education, and economic growth. To ensure the provision of assistance to Haitians most in need, USAID assistance is channeled principally through non-governmental organizations (NGOs). The USG provides food and food-related assistance directly and indirectly to 640,000 Haitians.

CURRENT SITUATION

Security/Political

• Haiti's new interim Prime Minister, Gérard Latortue, took initial steps to choose Cabinet members on March 11. Latortue expressed intentions to appoint retired army Chief of Staff Herard Abraham as the head of the nation's security, and businessman and former Aristide Prime Minister Smarck Michel as planning minister. The Prime

- Minister has indicated that his priorities include disarmament, security, reconciliation, and the organization of new elections. Latortue also stated on March 11 that it may take as long as two years to prepare for elections.
- On March 11, gunfire broke out during a demonstration in Port-au-Prince, killing two people and injuring six. Haitian police fired tear gas to disperse several thousand followers of Aristide outside the presidential palace. The crowds also vandalized cars and set up barricades in the Bel Air district of Port-au-Prince.
- On March 11, U.S. Marines, along with Haitian police and French forces, began to search for illegal weapons in Haiti. Armed opposition groups and supporters of Aristide have indicated that they will not lay down arms until the disarmament of their opponents. U.S. Marines have orders to seize guns from Haitians they encounter on patrol and to open fire, if necessary, to prevent further killings.
- A U.N. assessment team began to arrive in Haiti on March 11 to assess the humanitarian situation and help prepare for the deployment of a peacekeeping mission to the country by June 1. The team will make recommendations to U.N. Secretary-General Kofi Annan regarding the size and composition of the mission.

Humanitarian Assessments

- U.N. Assessment of the Humanitarian Corridor: On March 10, a two-truck U.N. convoy traveled from Port-au-Prince to Cap-Haïtien, the main humanitarian corridor for the country, to assess security along the road. No problems were reported along the road, other than a small roadblock of children, looking for payment for road construction, in St. Marc.
- Cap-Haïtien Assessment: On March 8, the USAID/OFDA assessment team traveled to Cap-Haïtien with representatives of the U.N. World Food Program (WFP), the U.N. Children's Education Fund (UNICEF), Catholic Relief Services (CRS), and CARITAS to assess the humanitarian situation. Though fuel stations remain open, the price of fuel has increased from 85 gourdes to between 300 and 400 gourdes. Stores and schools are also open in the city. No WFP food stocks currently remain in Cap-Haïtien. Since the recent crisis began in early February, looters have stolen 800 metric tons (MT) of assorted food commodities from the WFP warehouse, in addition to 15,000 bags of commercial rice from the port. No major shipment of food, commercial or humanitarian, has arrived in Cap-Haïtien since the current political unrest began.
- The police station and prison were completely looted and burned following the recent unrest. The police force has not yet returned to Cap-Haïtien, and armed opposition forces are in control of the town. According to the opposition commander in Cap-Haïtien, the armed group is providing security to 70 percent of the town and 100 percent of the security at the port. The electrical grid has stopped operating completely in Cap-Haïtien in recent days as the service provider has not been paid in three months.
- The USAID/OFDA team met with the International Committee of the Red Cross (ICRC) in Cap-Haïtien on March 8. According to the ICRC, the priority areas for the provision of humanitarian assistance in Cap-Haïtien, and the North Department in general, are as follow: fuel, vaccines (the re-supply of vaccines as well as fuel to maintain the cold chain), security for the humanitarian corridor from Port-au-Prince to Cap-Haïtien to allow for the transport of food and relief supplies, oxygen for hospitals, and security for hospitals.
- The Sacré Coeur Hospital in Milot, located approximately 40 minutes outside of Cap-Haïtien, has received medical supplies donated from USAID/OFDA to World Vision International (WVI). The results of the USAID/OFDA assessment indicated that the current crisis has not had a major effect on the general health of the local population. There are no marked increases in any major communicable diseases.
- According to the Northeast Department official for Health, the health system in Cap-Haïtien has been affected since the current political crisis began in Gonaïves in December as the road between both cities has been insecure and closed at times. This has lead to a scarcity of fuel for electricity generation in Cap-Haïtien, which has affected the functioning of hospitals and health centers. Since fuel has become scarce, the ability of the health department to supervise health facilities has been compromised. In addition, the medicines that the health department requested from Port-au-Prince could not be sent due to insecurity in Gonaïves. The integrity of the cold chain has been comprised and is therefore unusable due to loss of three refrigerators and the lack of monitoring during one week.
- The Northeast Department official for Agriculture indicated that the agriculture sector has always been in crisis in the Northeast Department and the Ministry of Agriculture (MOA) did not invest in the area. During the past several growing seasons, harvests have been above average despite the lack of investment by the MOA. However, due to the current political crisis, farmers lack access to MOA services such as tractors, fertilizers, or technical assistance. The price of bean seeds has increased from 80 gourdes to 150 gourdes per three kilos.
- The Northeast Department official for Education indicated that almost all schools are open in Cap-Haïtien, and schools in neighboring areas are scheduled to restart later this week. Some schools were looted, and school supplies were also looted from the Ministry of Education's depot.
- **Jérémie Assessment:** On March 9, the USAID/OFDA team traveled by air to Jérémie to assess the humanitarian situation. The main concern in Jérémie is the need for security in Port-au-Prince that would allow the shipment of fuel and goods to Jérémie and the export of products to the markets in the capital. The roads to Port-au-Prince and Les Cayes also need to be secured for the ground transport of people and goods. Due to the high cost of fuel, Jérémie has not had electricity during the past week. The price of fuel has more than doubled in the past two weeks. The

- price of fuel has increased from 60 to 70 gourdes per gallon two weeks ago to 150 gourdes per gallon. While banks opened last week, only one school has reopened in Jérémie.
- According to the Haitian Health Foundation, which serves a population of 200,000 in four counties in the Grand'Anse Department, the current health problems are compounding a chronic problem. Security is the most important need. Morbidity patterns have not changed or increased due to the current crisis. In the past year, the Hospital Saint Antoine de Jérémie has seen an increase in the number of chronically malnourished children, but there has been no significant increase in the past several months. The increased malnutrition over the past year is attributed to increased poverty and food prices.
- The Hospital Saint Antoine de Jérémie is currently facing an accelerated loss of revenue as patients do not want to pay for services during the time of crisis. As a result, nearly every department in the hospital is experiencing deficits and can no longer afford the purchase of X-ray film, drugs, food for patients, fuel, etc. The current political crisis and price increases for fuel, food, and other supplies have exacerbated this situation. The hospital has the material for a blood bank, but cannot afford to operate the generators continuously, as required for a blood bank. In addition, the hospital does not have sufficient staff to cover all shifts.
- The Health Department cold chain is located at the hospital. The last recorded monitoring of the cold chain was on February 27. Even though the refrigerators were within acceptable temperature range at the time of the USAID/OFDA assessment, the fact that the cold chain may have been unattended for the past 10 to 11 days places the integrity of the vaccines in doubt. This issue has been observed in other areas of the country and has been discussed with UNICEF. UNICEF estimates that all vaccines that were in the cold chains during at least the past two weeks have been compromised and will be considered lost.
- The primary concern for boat operators in Jérémie is security when leaving Port-au-Prince. Due to security concerns, no boat has arrived in Jérémie in 15 days. Under normal circumstances, a large boat arrives in Jérémie each Saturday with fuel, food, and commercial goods and then returns to Port-au-Prince on Tuesday.
- Île de la Gonâve Assessment: On March 11, the USAID/OFDA Health Officer and USAID/Haiti Food for Peace (FFP) Officer conducted a humanitarian assessment of the Île de la Gonâve, an island off the western coast of Haiti. Representatives of WVI, World Concern, and the Government of the United Kingdom's Department for International Development (DFID) also joined the assessment. The major impact of the current political crisis on the population of the island is isolation from Port-au-Prince and other islands due to insecurity in the capital. The local population prioritized fuel, food, and medicines as immediate needs. The main issue on the island is chronic poverty, as the population has almost no possibilities for income generation and lives mainly on remittances. Schools remain closed because teachers from Port-au-Prince left the island when the situation deteriorated and have not yet returned. According to WVI, the rate of chronic malnutrition has decreased from 30 percent twenty years ago to 14 percent at the present time. However, this decrease has taken a substantial amount of time to materialize and malnutrition rates are high nonetheless.
- The major diseases seen at the Wesleyan Hospital's outpatient department (OPD) are malaria and typhoid as well as tuberculosis (TB). The hospital has a functioning lab and x-ray machine, and is currently staffed by four doctors. The chronic malnutrition seen in children at the OPD is usually associated with TB or HIV/AIDS. The hospital does not have enough medicines, and staff cannot travel to Port-au-Prince to purchase supplies due to transport shortages and security concerns. The vaccines in the cold chain are no longer viable because there was no electricity for five days. The hospital is now operating on generator power for a few hours per day.
- WVI's health program on the island consists of preventative health care as well as limited curative care, health education, home gardens, and water source protection and piping. WVI-supported health workers provide home visits, screen children using weight for age to detect chronic malnutrition, provide health education, vaccinate children and provide them with Vitamin A, and vaccinate women of childbearing age against tetanus toxoid, among other activities. In February 2004, WVI screened 8,361 children using weight for age. Of those, 14 percent were chronically malnourished. The assessment team visited the warehouse where WVI is storing one month's-worth of food for distribution to 8,000 to 10,000 children in their supplementary feeding program (SFP). WVI also provides a food ration to the families of the children in the SFP. The program covers approximately 40,000 people on the island out of the total population of 100,000. WVI has four warehouses around the island that can accommodate a total of 130 MT of food. WVI will begin its March food distribution on March 15.
- The assessment team traveled by boat to reach Pointe Araquettes, one of WVI's program sites. The population of Pointe Araquettes is estimated at 3,000. The USAID/OFDA assessment team reports that people can no longer afford to pay for consultations and medicines at the health center of Saint Louis. There are no reports of any infectious disease outbreaks in the area. The most common disease in adults is hypertension, while diarrhea is the most common disease in children. The health center has run out of fuel and is therefore unable to operate the water system. In addition, the water table has decreased in the past year, making the water system less efficient.

Food

• USAID's NGO development food aid partners and WFP currently have nearly 15,000 MT of food stocks in country. The European Union (EU) has 2,500 MT of food at a warehouse and 600 MT at the port in Port-au-Prince. Other

- donors have an estimated 2,000 MT available. Thus, the total amount of food assistance available from all donors is approximately 20,000 MT.
- WFP is preparing a six-month Emergency Operation (EMOP) to provide assistance to the most affected people in the northern areas of the country. WFP's assistance, in partnership with other agencies, aims to ensure that children and their families meet daily nutritional needs in order to prevent a decline in their nutritional status. WFP has also launched a Special Operation (SO) to increase logistics and communications capacity in the country. The two operations are included in the U.N.'s Flash Appeal.

Health

 According to assessments by the USAID/OFDA team, the current health situation in Haiti is not at an emergency level. However, the health care system is experiencing a rupture in supplies, due to the insecure environment that exists for drug deliveries and a lack of health staff reporting to work due insecurity.

U.S. GOVERNMENT RESPONSE

- From February 9 to 11, the USAID/OFDA Senior Regional Advisor and a USAID/OFDA Regional Advisor traveled to Port-au-Prince to assist USAID/Haiti and partner organizations with contingency planning for humanitarian assistance.
- On February 18, U.S. Ambassador to Haiti James B. Foley issued a disaster declaration due to the ongoing complex emergency in Haiti. In response, USAID/OFDA has provided \$50,000 through USAID/Haiti to support the transport and distribution of emergency relief supplies, including 12 medical kits and three surgical kits, valued at approximately \$87,000. Each medical kit is equipped to serve 10,000 people for approximately three months. On March 4, USAID/OFDA distributed one medical kit each to Médecins Sans Frontières (MSF), CRS, and WVI, and nine kits to the Pan American Health Organization (PAHO)-supported PROMESS warehouse. The PROMESS warehouse will store the nine kits on behalf of Management Sciences for Health (MSH), PAHO, and USAID/OFDA. USAID/OFDA has also approved \$400,000 for PAHO to purchase additional medical supplies and to conduct emergency relief activities in Haiti. In addition, USAID/OFDA has approved \$412,287 for CRS for emergency cash grants to support local institutions and provide services for the most vulnerable populations. USAID/OFDA has approved \$300,000 for UNICEF's Extended Program for Immunization to provide vaccines and support the cold chain. USAID/OFDA has provided \$340,981 to Air Serv for emergency air transport. Two light planes, each with capacity for nine passengers, are available to the USAID/OFDA team to conduct assessments and deliver relief supplies throughout the country as required. Various USAID implementing partners, including U.N. agencies and NGOs, may accompany the USAID/OFDA team and USAID/Haiti staff on assessment trips. USAID/OFDA has also provided \$500,026 in funding to WVI for emergency relief kits and cash-for-work initiatives.
- On February 24, USAID/OFDA deployed a three-person team to Port-au-Prince, including a Senior Regional Advisor as Team Leader, a Health Officer, and an Information Officer. On March 7, a Military Liaison Officer joined the team in Port-au-Prince. The USAID/OFDA assessment team is currently comprised of the Regional Advisor as Team Leader, an Information Officer, and a Military Liaison Officer.
- The Department of State's Bureau of Population, Refugees, and Migration (State/PRM) has provided \$20,000 to the U.S. Embassy in Port-au-Prince for assistance to Haitian migrants. In addition, State/PRM has contributed \$900,000 to the ICRC for its activities in Haiti, which include strengthening medical/surgical capabilities at hospitals in Port-au-Prince and Gonaïves, as well as improving security at hospitals and medical facilities throughout the country.

U.S. GOVERNMENT HUMANITARIAN ASSISTANCE TO HAITI

Implementing Partner	Activity	Location	Amount
USAID/OFDA Assist	tance ¹		
USAID/Haiti	Transport and distribution of emergency relief supplies; 12 emergency medical and 3 surgical kits	Port-au-Prince and other affected areas	\$137,000
Pan American Health Organization	Medical equipment and emergency health activities	Nationwide	\$400,000
Catholic Relief Services	Emergency cash grants	Port-au-Prince and the southern peninsula	\$412,287
Air Serv	Emergency air transport for USAID/OFDA, NGOs, U.N. and other humanitarian organizations	Nationwide	\$340,981

	Extended Program for Immunization	Nationwide	\$300,000	
UNICEF	Extended Flogram for minimum zation	Nationwide	\$500,000	
World Vision International	Emergency relief kits and cash-for-work initiatives	North, Central Plateau, South, West, and Northwest departments, and Île de la Gonâve	\$500,026	
Total USAID/OFDA			\$2,090,294	
State/PRM Assistan	ce			
U.S. Embassy/Port- au-Prince	Assistance to Haitian migrants	Nationwide	\$20,000	
ICRC	Strengthening medical and surgical capabilities at hospitals	Nationwide	\$900,000	
Total State/PRM\$920,000				
TOTAL USG Humanitarian Assistance to Haiti in FY 2004 (to date)\$3,010,294				

¹ USAID/OFDA funding represents committed and/or obligated amount as of March 12, 2004.

PUBLIC DONATION INFORMATION

The most effective way people can assist relief efforts is by making cash contributions to humanitarian organizations that are conducting relief operations. A list of humanitarian organizations that are accepting cash donations for their response efforts in Haiti can be found in the "How Can I Help" section of www.usaid.gov/haiti. USAID encourages cash donations because they: allow aid professionals to procure the exact items needed (often in the affected region); reduce the burden on scarce resources (such as transportation routes, staff time, warehouse space, etc.); can be transferred very quickly and without transportation costs; support the economy of the disaster-stricken region; ensure culturally, dietary, and environmentally appropriate assistance.

More information on making donations and volunteering services can be found at:

- USAID: <u>www.usaid.gov</u> → "Our Work" → "Humanitarian Assistance" → "Disaster Assistance" → "How Can I Help"
- The Center for International Disaster Information: www.cidi.org or (703) 276-1914
- InterAction: <u>www.interaction.org</u> → "Guide to Appropriate Giving"
- Information on relief activities of the humanitarian community can be found at www.reliefweb.int

USAID/OFDA bulletins appear on the USAID web site at http://www.usaid.gov/our_work/humanitarian_assistance/disaster_assistance/.