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FOREWORD BY MR. EDMOND MULET, SPECIAL REPRESENTATIVE OF THE SECRETARY-GENERAL IN HAITI
“Haïti n’existe pas” (“Haiti doesn’t exist”) – Such is the disturbing title of French historian Christophe Wargny’s book, published in 2004, in which he retraces Haiti’s history and its actors.

In many regards, especially in terms of the Rule of Law and economic and social development, Haiti did not exist in 2010—the year of the earthquake and the displacement of 2.3 million Haitians; the year of Hurricane Tomas and of cholera; a year of political instability and election-related violence.

Among the main reasons why more than 222,000 people perished on 12 January 2010 in Haiti, is not only the magnitude of the earthquake, but also decades of chronic political instability that left so many Haitians vulnerable to natural disasters, even when they were relatively minor.

In any democratic State, elections help provide institutional stability and consolidate the democratic process. However, elections are a process and not an end in itself, and much remains to be done in Haiti to re-establish a culture of democracy and of the Rule of Law. Its weakness has undermined people’s confidence in their government and has allowed corruption to flourish, thus reinforcing this chronic political instability.

Rule of Law is about the police, corrections and the judiciary. But it is also about land registry, civil registry, building codes and commercial laws; it is about the State’s capacity to collect taxes and to guarantee a certain level of judicial security that can promote investments and job creation, to, ultimately, encourage economic development.

Law enforcement in Haiti is unequal at best. With unregistered births, the existence of a certain number of Haitians is not recognised by the State. Consequently, they do not have access to protection, justice and services that would be provided in a country governed by the Rule of Law.

There are other pockets of “inexistence” in Haiti, including the 3,544 pre-trial detention inmates out of a total of 5,255, whose files have been lost in a judicial chain. Citizens whose judicial records are not processed immediately, or not at all, are also wronged by the absence of Rule of Law.

In this context, what can we do for Haiti to recover in 2011? First, we must introduce a more systemic approach of the international community’s support to Haitians’ own efforts to strengthen Rule of Law and social and economic progress. The first element of this approach consists in rebuilding the infrastructure that was damaged or destroyed by the earthquake, including
courts, prisons and the Ministry of Justice. This would be followed by the provision of administrative support to State institutions to try to fill the human resources gap caused by the loss of nearly 30 percent of civil servants in the earthquake. Finally, as a third element of this approach, the Interim Haiti Recovery Commission should also be used as a platform for the launch of a major initiative on governance and the Rule of Law.

On the medium and long term, penal chain reform—police, justice and the penitentiary system—is a pillar on which State institutions must rely. The reform of these three institutions has to be simultaneous and harmonised.

In order to best respond to this initiative, the elaboration of a “Rule of Law Compact”, based on national consensus, should be the cornerstone of any reform strategy. Led by the Haitian Government, this compact would link international actors with the national actors leading the reform and would rest on the people’s strong will to revive this practice.

In the absence of any significant progress in the Rule of Law field in Haiti, all ongoing and future efforts for Haiti’s recovery, including reconstruction, economic and social development, humanitarian aid, security and political stability, might turn out to be unproductive. It is high time to put the Rule of Law back on top of the next government’s priority list.
INTRODUCTION BY MR. NIGEL FISHER, DEPUTY SPECIAL REPRESENTATIVE OF THE SECRETARY-GENERAL, RESIDENT COORDINATOR AND HUMANITARIAN COORDINATOR IN HAITI
Haiti, 12 January 2010. An earthquake devastates the country, killing over 222,000 people and leaving almost 2.3 million homeless. In October of the same year, around the upper reaches of the Artibonite River, the first cases of cholera are found—the epidemic spreads rapidly, leaving 3,500 dead and 150,000 people sick by the end of the year. On 5 November, Hurricane Tomas hedges off to the West of Haiti, but nevertheless devastates certain regions of the country, with torrential rain and winds reaching 130 km/h. Throughout the year, the entire world watches the distressing images of the Haitian people’s broken life, their daily fights and their need for water, housing, employment, education and protection.

In the first months following the earthquake, the international response swamped a weakened government unable to take charge of the coordination of relief efforts. But little by little, the government has demonstrated its leadership in coordinating these efforts. The United Nations has worked to support the various ministries and administrations facing humanitarian and recovery challenges, including the Ministry of Public Health and Population; the Ministry of Interior and the Civil Protection Directorate; the National Directorate of Water Supply and Sanitation; the Ministry of Education; the Ministry of Agriculture, Natural Resources and Rural Development; the Ministry of Public Works, Transport and Communications and the Ministry of Communications, to name a few.

The first part of this report describes the humanitarian aid provided to Haitians by the international community—the United Nations, and government and non-governmental organisations. Many of the agencies themselves were affected by the earthquake, yet a massive relief effort was put together. Camps for the displaced sprang up and local camp management committees were established. Almost 1.5 million people were sheltered and regularly provided with food, clean water, and medical care. Many camp residents had access to latrines for the first time. Welcome centres and family tracing programmes were established for orphaned children and those separated from their families. Impressively, there were no major outbreaks of disease or violence. However women and young girls were sexually abused and raped, and important measures were needed, on many levels. Until the end of 2010, acute malnutrition levels among children remained stable despite the earthquake and cholera. Statistics for November 2010 show, within a five-month period, a 30 percent reduction in the number of displaced people living in camps. This positive trend demonstrates that a number of earthquake victims have found alternative housing and can resume a more normal life.

Mitigation activities to reduce the impact of natural disasters have continued. The United Nations and its partners have worked with the government on contingency planning for the hurricane season and the pre-positioning of materials and foods essential for the response. These efforts have helped mitigate the impact of Hurricane Tomas, whose epicentre fortunately did not run directly over the country.

In October, cholera struck Haiti, which had no prior experience of the disease and therefore no natural immunity. Aided by unprotected water sources, poor sanitation and hygiene practices, floods, fear and population mobility, the number of cases grew quickly, although a rapid response by Haitian authorities and their international partners initially contained the number of deaths. Concentrated at first in the Centre Department, the disease quickly spread to the Northern region of the country and towards the greater metropolitan area of Port-au-Prince, before spreading westwards. The government’s Emergency Operations Centre became the
coordinating body where technical “clusters” and partners would meet to plan the response effort—establishment of cholera treatment centres distinct from hospitals and health centres, public awareness campaigns by radio and cell phone, face-to-face outreach to communities and families with information, chlorination and oral rehydration salts. They also coordinated extensive efforts in logistics and distribution systems throughout the country. Fear of this unknown disease increased difficulties in deciding on sites for treatment centres, waste disposal and for burial sites for victims of the disease. With health authorities and epidemiologists warning of the possibility of more than 400,000 cholera cases in the next 12 months of the epidemic, prevention and treatment efforts focused on minimising the fatality rate. Indeed, the fatality rate did slowly decline from mid-October to December.

Providing swift treatment to the victims can save lives. Prevention is just as important as treatment, if not more important. Since the end of the year, a massive and national mobilisation of Haitians—through churches and religious groups, schools, the Red Cross and civil society organisations—has been underway to spread prevention messages and to influence hygiene behaviours. On 20 December, mortality rate has stabilised at 2.1 percent. While this is an encouraging sign, much remains to be done.

By mid-2010, increasing focus was placed on plans for early recovery and to create conditions for the return of the displaced to former or new communities.

The second part of the report presents the United Nations’ contribution to the Government’s recovery priorities, as presented by the Interim Haiti Recovery Commission: debris, housing, disaster preparedness, education, agriculture and health. The United Nations, through their technical expertise on these themes, have an important role to play. Of course, the involvement of other development partners in these priorities remains critical, as well as in other sectors such as infrastructure or energy.

The United Nations have helped make some headway with regards to recovery. More than 300,000 people have been employed through high-intensity labour projects between February and November 2010. Several debris removal projects are on-going, combining demolition of damaged houses and job creation in communities affected by the earthquake, thus facilitating the return of displaced populations to their neighbourhoods of origin. With more than 388,0001 houses already evaluated, the structural assessment of houses damaged by the earthquake, led by the Ministry of Public Works, Transport and Communications with the support of the United Nations, is 90 percent finalised. The seismic macrozonation of Port-au-Prince

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1 Number on 20 December, 2010, source: UNOPS
is completed—an essential tool for risk-sensitive urban planning. The prevalence of food insecurity in the areas directly affected by the earthquake went from 52 percent in February to 39 percent in June 2010, which demonstrates adequate nutritional care and support to the agricultural sector. In the areas affected by the earthquake, the majority of children who went to school before the disaster now have access to education again. The objective is to offer the same opportunity to all the other children.

Unfortunately, gender inequalities and sexual discrimination remain important facts of life in Haiti. Women are inadequately represented in the legislation. Women form the majority of heads of household, but measures are few which support their role as the principal breadwinner in the family. Gender-based violence, in homes, communities and camps, is the most egregious symptom of inequity. While protection measures such as increased patrolling, improved lighting and creation of protection committees in camps have been instituted, assuming greater equality between the sexes remains largely an unmet challenge in Haiti.

Challenges for 2011 are huge. Not the least, political instability hovers over a country marked by a contested electoral process. The first months of 2011 will be dominated by the transition towards a new government and new National Assembly members. On the other hand, all possible preventive and treatment measures must be taken to further decrease the cholera-related mortality rate. The creation of enabling conditions for the return or voluntary resettlement of displaced populations must be accelerated. This includes debris removal, repair of yellow houses, new economic opportunities and the creation of basic social services in informal neighbourhoods and in communities affected by the earthquake.

Major reforms in the education, sanitation, agriculture, justice and housing sectors, and the strengthening of the National Risk and Disaster Management System remain essential for the year to come. The United Nations will continue to strengthen the government’s capacities in these sectors and to decentralise its operations outside of Port-au-Prince.

Given the scale of the challenges in 2011, the international community’s continued support remains essential. The people of Haiti have endured 2010 hardships with dignity and perseverance. Our role at the United Nations is to accompany them, no matter what happens and in spite of the political unknowns, on the road to economic and social recovery and development.
III. KEY FIGURES
1. 1.05 million internally displaced people were registered in camps in January 2011, compared to 1,500,000 in July 2010.

2. 390,000 rural families benefited from agricultural inputs for the Spring, Summer and Winter harvest, representing a cultivated surface of 69,000 hectares.

3. More than 300,000 people were employed through United Nations high intensity of labour projects between February and November 2010.

4. More than 274 schools damaged or destroyed by the earthquake have been cleared.

5. 1.1 million children across the country are receiving a daily meal thanks to the National School Meals Programme.
In preparation for Hurricane Tomas, quantities of food were pre-positioned in 32 strategic locations across the country to feed 1.1 million Haitians during six weeks.

75 percent of the needs in terms of Cholera Treatment Centers and Cholera Treatment Units are covered as of 17 December 2010.

Cholera prevention campaigns have reached 50 per cent of schools in the country as of 17 December 2010.

More than 11,000 polling stations in the country received the support of MINUSTAH for the delivery, distribution and retrieval of election materials.

Nearly 1,000 United Nations police and 6,000 soldiers worked with the Haitian National Police to ensure security on election day on 28 November 2010.
IV. HUMANITARIAN ACTION: RESULTS, CHALLENGES AND OUTLOOK
A. Earthquake Response

Haiti had made important progress towards stabilisation and a sustained economic development since 2004. The earthquake that has devastated its capital and other large Southern cities on 12 January 2010, taking the lives of over 222,000 people, has not annihilated the progress that had been made, yet it has created new obstacles. The experts who gathered for the post-disaster needs assessment in February and March 2010, concluded that the country had lost the equivalent of over 120 percent of its gross domestic product in the seconds following the devastating earthquake. More than 2.3 million people lost their home, and 1.5 million settled in camps. The State’s capacity was seriously affected following the death of many officials and the loss of numerous State buildings. The Presidential Palace, the Parliament, the Supreme Court and most ministerial and public administration buildings were destroyed. Many schools, hospitals, courthouses, police stations and prisons have also sustained serious damages and loss of human lives. This has greatly affected the already precarious situation of the public administration, the judicial system, the police and institutions providing public services—health, water, sanitation, hygiene, food security, education and culture. The labour market also suffered great damages, with nearly 11 million workdays lost. 102 United Nations colleagues died in the disaster and many more suffered the loss of their friends and relatives.

The day after the earthquake, partner countries, the United Nations, humanitarian organisations and the donor community, supporting the efforts of the government and of the Haitian people, mobilised quite an unprecedented response.

Shelter and Protection

The Shelter Cluster, coordinated by UN-Habitat, provides safe and adequate housing for all families affected by the earthquake. The Cluster also offers a coordination framework on 95 percent of the affected areas where operational partners have been active during the last 12 months.

One year after the earthquake, the provision of emergency shelters has exceeded the initial objective, thanks to a large-scale distribution covering the needs of an average 100,000 people a week in the first four months of the response. The International Organization for Migration (IOM) has contributed to these efforts with the construction of 8,700 transitional shelters and 300 permanent shelters.

Also, in the first three months, agencies have reached their objective of helping at least 300,000 affected families by distributing non-food items. Approximately 2.4 million household articles and toolkits have been distributed to this day.

Today, targeted distributions are still ongoing, to cover gaps and replace deteriorated materials.

Currently, the agencies focus on building transitional shelters with wooden or steel structures and wooden panels. The transitional shelters that must be built within an 18-month period are now totalling 124,889, of which 19,197 are already completed. A needs assessment for transitional shelters, per affected area and per operational partner, was undertaken in a manner that avoids shortages and duplications. It has shown that transitional shelters planned in Léogâne exceeded the needs, while a deficit was recorded in Port-au-Prince.

Concerning camp protection, the Joint Operations and Tasking Centre (JOTC) of the United Nations Stabilization Mission in Haiti (MINUSTAH) has facilitated security for humanitarian distributions and registry operations for displaced people.

The Protection Cluster has produced and disseminated a series of documents on protection and food security, civil...
documentation issues, forced evictions and the protection of people with disabilities. These documents helped raise awareness of these issues among relevant actors.

In cooperation with its partners—civil society, humanitarian agencies, Haitian National Police (HNP), United Nations Police (UNPOL) and the military—the Cluster has also launched joint security evaluations in camps, through consultations with the displaced. It has intervened with national authorities and humanitarian actors to address protection issues such as camp closures and forced evictions, safety problems, and gender-based violence.

In such an emergency context, gender-based violence has grown considerably, even though it may be difficult to assess the gravity, given the lack of consolidated information. A systematic data collection effort is underway, led by the Sub-Cluster on gender-based violence, and will continue in 2011. Specific measures were taken by the United Nations and its partners, such as reinforced patrol presence and the training of UNPOL/HNP patrols in camps (over 500 United Nations police officers were affected to securing the camps, supporting the HNP), the installation of additional lighting, the training of camp managers, the dissemination of awareness-raising messages on the radio and through artistic activities such as theatre, and the re-establishment of a referral system for victims.

Health and Nutrition

By end of January, 396 international health organisations had arrived in Haiti to assist the population in various fields. The Health Cluster\(^4\), led by the World Health Organization (WHO), is the main mechanism through which these organisations were coordinated. Seventeen rural hospitals, among which 11 were managed by military groups, provided care to thousands of patients in the affected areas. It is estimated that about 4,000 amputations were carried out. In March, more than 345,000 boxes of essential medical equipment had been distributed to Health Cluster partners. Beyond its traditional role, the United Nations military component’s medical team provided assistance to 45,398 victims.

A vaccination programme, led by the Ministry of Public Health and Population (MSPP), WHO and the United Nations Children’s Fund (UNICEF), was implemented. Clusters’

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\(^4\) The objective of a humanitarian cluster is to coordinate the actors involved in a particular humanitarian theme (i.e., shelter or food) to fill gaps and to guarantee adequate preparedness and response.
In August 2010, IOM launched the “Suggestion Box” initiative in displacement camps. More than 140 boxes were distributed in 1,199 camps to allow displaced people to express their frustrations and expectations. Any person depositing a letter receives a response through SMS. Urgent requests are submitted to camp managers for follow-up. IOM has received over 2,500 letters over three months. Two of them are presented below.

Hello IOM,

My name is Choucoune Denièse. I live in Corail […]. Actually, the tent belongs to my older brother and the file is in his name. I am a six-month pregnant woman, following a rape I suffered in Tabarre. My brother is not working and the doctor said I have anaemia SS.

Brothers and sisters of IOM, I am not well fed because I am unemployed. I thought the jobs we were promised would be organised by now, then I would have been able to take care of myself and prepare my delivery but there is still nothing, and now I will give birth. I would like to have my own tent. I beg you, if you find my letter, please answer me, so I don’t have to write you again.

Please think of me and of all of those who are pregnant.

Thank you IOM, I am counting on you. This was Choucoune Denièse.

At 18, Venette Altimé has a six-month old baby. She has set up a committee to take care of people with disabilities in Carradeux, a particularly difficult camp. Both her parents have become disabled following the earthquake. Since writing this letter, Venette lives in a transitional shelter. She and the nine other members of the committee were recruited by IOM as communicators in the camps.

Caradeux Accommodation Centre
To IOM Communications Office
From the Committee of people with disabilities of Caradeux
Mister Director of the International Organization for Migration,

We, the people with disabilities of Caradeux, are living terrible moments following the Friday, 24 September hurricane. Our tents are smashed; we have nothing to eat and no work. Hunger is killing us along with our children. We are begging you to please do something for us, to your liking.

Please accept our warmest feelings.

For the Committee:
Venette Altimé, president
Verlande Dorce, secretary
Marie Claude Sterlin
Deizet Brésil
Marie Uvenice
Sématis Jouka Romain
Emmanuel Wooderley Louis
Richard Jean Wesley
Dusme Joies Dely
Pierre Ordulma
partners have vaccinated close to 1,940,000 children against five preventable diseases. The children also received vitamin A supplements. Efforts initially focused on children living in camps, and then extended, in a second phase, to surrounding communities, schools and to residential care centres in areas affected by the earthquake.

A disease surveillance system, operating through 52 fixed health facilities and mobile health centres, was established soon after the earthquake and continues, to this day, to provide analyses and weekly reports.

A particular effort was led by the United Nations Environment Programme (UNEP), WHO and MSPP to process medical waste. For example, personal protection equipment and adequate containers were provided to health personnel in the most affected hospitals.

The 12 January earthquake has also increased the risks and vulnerability linked to HIV transmission among youths and adolescents, particularly in the camps where access to HIV prevention services was very limited. In coordination with national and international NGOs and UN agencies, the United Nations Population Fund (UNFPA) has distributed more than 7 million condoms in the camps during the first months following the disaster.

Moreover, UNAIDS, UNFPA and UNICEF worked together to raise awareness among the youth living in camps. In partnership with the Foundation for Reproductive Health and Family Education (FOSREF), peer-to-peer training and condoms distribution have directly targeted 7,000 adolescent girls and boys. A treatment centre reference system was also put in place for youths and adolescents who tested positive.

A few hours after the disaster, the World Food Programme (WFP) launched the first food distribution. Stocks of food pre-positioned in the areas affected by the earthquake have allowed WFP and the members of the Food Cluster to swiftly start their emergency operations.

At the height of operations, more than 20,000 tons of food, as well as emergency material, were delivered each month to Haitians living in urban areas, as well as those living in rural and isolated regions. The challenges to accomplish these operations were enormous, given the level of damages to infrastructures throughout the country. Temporary tents were used to strengthen existing storage capacities and allow 50 partner organisations to store equipment.

After the first emergency phase, WFP’s intervention increased. The agency started distributing two-week rice rations and introduced a coupon system for people living in affected areas so they could receive the rations. Thanks to this intervention, over 4 million Haitians received food aid. Also, to ensure women’s safety, who most often carry food for the family, distributions took place in the morning, in broad daylight, and at less than two hours walk from their residence.

The Nutrition Cluster, jointly led by MSPP and UNICEF, has guided the nutritional response in support of the populations affected by the earthquake and has contributed to maintaining the nutritional status at a stable level. Since January 2010, it is estimated that more than 250,000 mother-child couples are receiving breastfeeding support at 95 nutrition-counselling sites for newborns, managed by Cluster’s partners. More than 560,000 children under five and pregnant and breastfeeding women have benefited from additional food each month. Until now, 10,476 severely malnourished children under five, without any medical complications, received care in 174 ambulatory therapeutic programme sites, and 1,286 children with medical complications in 12 nutritional stabilisation units.
A study from MSPP, UNICEF and non-governmental partners has demonstrated that nutrition programmes like WFP’s, mostly focused on prevention, have helped Haiti avoid a nutritional crisis following the earthquake.

**WASH – Water, Sanitation, Hygiene**

Until now, WASH Cluster’s partners have worked with the National Directorate of Water Supply and Sanitation (DINEPA) to reach about 1.72 million Haitians affected by the earthquake, thanks to the provision of water, establishment of latrines, distribution of hygiene kits, elimination of solid waste and management of drainage. At least six litres of water per person is delivered to 1 million people, representing a daily delivery of 7,000 cubic metres of water.

Cluster’s partners installed 15,309 latrines, most often in extremely difficult conditions.

A total of 327,300 hygiene kits were delivered (each one to be used by a family of five for one to three months) and a total of 3,500 hygiene promoters and community mobilisers were trained.

In the second half of 2010, the United Nations and NGOs focused their efforts on the rehabilitation of water supplies and drills, the creation of water point management groups, the repair of water-selling kiosks, the sanitation of households and biogas installations. For example, the United Nations Office for Project Support (UNOPS) is mandated by the DINEPA to manage a fleet of sewage vehicles to empty the latrines in displacement camps and in cholera treatment units and centres. This organisation is also building 600 ventilated latrines and facilitates delivery of water to more than 1,500 families through the construction of water collection facilities.

UNEP, IOM and WHO worked alongside the Haitian Government on a joint strategy to develop the liquefied oil gas sector with private companies, and on the establishment of new biogas production technologies to improve energy use in households.

**Education and Heritage**

The Education Cluster has advocated with government partners and NGOs for the access of more than 1 million children to quality education in an emergency context. The Cluster has facilitated the set up of over 1,400 temporary learning spaces, most of them thanks to UNICEF, psychological support to children and psychosocial training of 3,000 teachers and education personnel.

To increase the access of 160,000 children to a conducive learning environment, 117 semi-permanent schools were or are being rebuilt in 2010. It is foreseen that a total of 200 schools will be completed by the beginning of 2011. 325,000 children and 42,000 teachers received learning material in 583 schools in 2010, while 138 schools were equipped with benches and tables, thus improving the quality of the learning environment.

From April to July 2010, the United Nations Organisation for Education, Science and Culture (UNESCO), with support from IOM, organised a series of theatre presentations inside camps in Port-au-Prince as a way of providing psychosocial support to the affected population, especially the youth. The plays were broadcasted in all the camps around Port-au-Prince. Other artistic and musical activities for the young displaced were also put together, including
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the “A Book for a Child” activity, which has allowed the distribution of books to children living in camps, and the creation of a Mobile Media Unit for people living in six camps so they may access the Internet and develop their educational and professional opportunities.

UNESCO has also provided emergency assistance to public and private heritage institutions, notably libraries, to safeguard written heritage, manuscripts, documents and publications. Some historic buildings of Port-au-Prince, including libraries and National Archives’ documentary holdings and collections, were secured in order to prevent looting. Also, a workshop for artwork restoration in Port-au-Prince was organised.

Early Recovery

After the 12 January earthquake, quickly providing economic opportunities for affected families became a priority. Eight days after the earthquake, the United Nations put in place programmes called “Cash or Food for Work” or Labour-Intensive Programmes (HIMO). It is estimated that by the end of 2010 these programmes, supported by the United Nations Development Programme (UNDP), WFP and MINUSTAH, will have employed more than 300,000 people, of which 40 percent are women. Additional jobs were created by other programmes, like those of the Haitian Government or the United States Agency for International Development (USAID).

Citizens’ associations and local authorities are in charge of identifying priority projects, which puts Haitians in the lead for rebuilding their communities. In urban areas, associations mobilised to implement projects such as the removal of debris left by the earthquake, the construction of culverts and dams, the cleaning of open canals to prevent flooding during the hurricane season, the improvement of road access and the construction of watersheds. In rural areas, recovery activities focus on revitalising agricultural land through canal improvement works, the management of river basins and the construction of agricultural roads.

These works have become cohesion projects that encourage people to work together to improve the living conditions of entire communities. As part of a longer-term effort, the International Labour Organization (ILO) collaborated with the Ministry of Social Affairs and Labour on the formulation of a national employment policy for Haiti. This initiative will continue in 2011.
B. Natural Disaster Risk Preparedness and Response

In preparation for the hurricane season, UNDP provided technical support to the Civil Protection Directorate (DPC) for early warning and emergency planning, at national and local levels. These efforts helped DPC coordinate activities for preparation of the hurricane season and, more specifically, the response to Hurricane Tomas. UNDP also played an important role in strengthening relations between the National Risk and Disaster Management System and international humanitarian actors. MINUSTAH’s humanitarian and development aid coordination Section ensured the alignment of contingency plans between ministries and partners, which was then taken up by the Office for the Coordination of Humanitarian Affairs (OCHA). MINUSTAH also organised simulation exercises to strengthen emergency coordination between its various sections, the Haitian Government, United Nations agencies and other partners.

More than 163,000 households have benefited from the distribution of over 360,000 treated mosquito nets in four departments in the South of Haiti. Training sessions were organised in partnership with the Ministry of Public Health and Population and nine NGOs—partnering with community health workers—to disseminate messages on the importance for young children and pregnant women to sleep under nets.

By the end of the hurricane season, Hurricane Tomas swept Haiti with torrential rain and winds reaching 130 km/h. Contingency planning, a national alert to the population and the pre-positioning of essential equipment and food for the response—put in place by the Haitian Government in partnership with the United Nations and the humanitarian community—helped mitigate the impact of this hurricane. A strong storm had already affected certain areas of the country on 24 September, damaging 15,000 tents in 262 camps (on 1,300 sites) that required important repairs.

The United Nations contingency plan, finalised by OCHA, was activated for Hurricane Tomas. Within this framework, WFP, UNICEF and other partners pre-positioned food in 32 strategic locations throughout the country to cover the needs of 1.1 million Haitians over six weeks. The Food and Agriculture Organization (FAO) also pre-positioned stocks of food crops and agricultural equipment to protect the farmers’ production means.

MINUSTAH immediately activated its Crisis Management and Response Centre, which also includes representatives from OCHA and the United States Army liaison team, to coordinate its action at regional and national levels. OCHA also placed personnel within the government’s Emergency Operations Centre, managed by DPC, to ensure good linkages with MINUSTAH’s Crisis Centre and facilitate information sharing between DPC and humanitarian clusters.
Living conditions in the camps increase families’ vulnerability to numerous risks. Because of Hurricane Tomas, over 12,291 people found refuge in temporary shelters. The Shelter Cluster facilitated the evacuation of the most vulnerable displaced populations to safer sites during the hurricane. Support from the Office of the Special Envoy allowed the construction of several community shelters in 2010, and more are planned for 2011.

The humanitarian community and DPC responded to the affected populations’ needs for hygiene kits and drinking water. For example, water treatment and storage kits were sent to Léogâne to help 600 families, and UNICEF sent tankers to the departments of Grande Anse (Jérémie), Sud (Les Cayes) and Sud Est (Jacmel).

In addition, the Logistics Cluster, servicing the entire humanitarian community, facilitated the transportation of emergency material and helped to quickly make damage assessment flights—thanks, among others, to the helicopter of the United Nations Humanitarian Air Services (UNHAS).

After the hurricane, MINUSTAH’s engineering companies undertook basic road repairs. In order to protect certain communities against flood risks, MINUSTAH also distributed sandbags for the construction of water retention walls, and made its air transportation assets available to humanitarian partners.

The assessments carried out by 6 November identified 7,294 damaged and 101 destroyed houses at national level, and 486 damaged and 306 destroyed transitional shelters in the Ouest Department. The Shelter Cluster facilitated a needs analysis of tents and non-food items to be distributed following the hurricane.

As part of its mandate, the Camp Coordination and Camp Management Cluster works on natural disaster preparedness. This is done through the dissemination of key messages in partnership with IOM, UNOPS, Technisches Hilfswerk, and International Emergency and Development Aid on preparation for storms, the implementation of mitigation activities in sites prone to flooding and/or landslides, and the construction of drainage systems and other minor works. Furthermore, the Cluster works to promote the voluntary resettlement of displaced people living in the most vulnerable sites to safer areas. Thanks to the information provided by the Displacement Monitoring Matrix5 and by the immediate assessments led by camp managers, humanitarian actors were able to rapidly address urgent needs in affected camps and sites.

The assessments supported by FAO have revealed that the agricultural sector was among the most severely affected by Hurricane Tomas, particularly in the departments of Grande Anse, Sud, Nippes, Ouest, Sud-Est and Nord-Ouest, where farming families remain highly vulnerable to food and economic insecurity—an important challenge for 2011. In response, FAO distributed agricultural inputs (tools, food crop seeds, garden vegetable seeds or banana trees) to more than 36,000 farming families.

C. Cholera Response

The first suspected cases of cholera in Haiti were recorded on 16 October, 2010, around the upper reaches of the Artibonite river. The number of cases rapidly increased over the following days, and national authorities confirmed an epidemic on 20 October. Confronted to this public health crisis, the Ministry of Public Health and Population (MSPP), the National Directorate of Water Supply and Sanitation (DINEPA), the Civil Protection Directorate (DPC) and local government authorities, with the support of the Cuban Medical Brigade, Doctors Without Borders (MSF), the United Nations and humanitarian partners, launched an

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5 This matrix is a monitoring tool for the movement of displaced populations living in camps and is used by the Coordination and Camp Management Cluster.
intensive and multi-sectoral response, focused initially on the Artibonite and Centre Departments. On 11 November 2010, as the epidemic was spreading, the United Nations, along with national authorities, launched a strategic appeal for additional funding. This strategy covers key sectors of the response: health, water, sanitation and hygiene, camp management and coordination, logistics and communications for a total cost of 174 million US dollars.

The vulnerability in camps initially caused great concern, but in reality, the risks were lower in camps than in rural communities and urban slums, thanks to regular access to water and sanitation through existing installations. One month after the first cases, 24 NGOs had already offered sanitary services in Cholera Treatment Centres (CTC) and Cholera Treatment Units (UTC). In December 2010, 63 CTCs and 123 UTCs were operational on the entire territory, with a capacity of 7,200 beds. Seventy-five percent of needs for CTCs and UTCs are covered as of 17 December 2010. In addition, 64 oral rehydration points were established, out of the 5,000 needed to ensure an adequate national coverage. Construction of CTCs, UTCs and oral rehydration sites will continue in 2011 to reach the planned objectives.

MINUSTAH provided engineering support to set up treatment centres. Training of Haitian personnel is on-going and the Cuban Medical Brigade and other health partners deployed additional personnel. A system was put in place by MSPP, with support from WHO and the Pan American Health Organisation (PAHO), to obtain additional medical staff in the country.

The WASH Cluster, supporting the National Directorate for Water supply and Sanitation (DINEPA)'s strategy, and in partnership with the Cluster's members, such as Action contre la Faim, ACTED, the Centre for International Studies and Cooperation, UNFPA and MINUSTAH, proceeded to a massive distribution of family hygiene kits. These kits include soap, Aquatabs drops and oral rehydration salts, sufficient for one week. Also, MINUSTAH's Violence Reduction Section provided an additional stock of 4,000 water filtration units, 500,000 Aquatab drops and 870 gallons of chlorine, benefiting more than 2 million people. The distribution targeted mainly schools, health centres and orphanages in the Artibonite Department and in the slums of Port-au-Prince, such as Cité Soleil and Belair.

Partners working in Port-au-Prince metropolitan area have intensified prevention activities to reduce public health risks, which include the monitoring of water sources, particularly the water delivered by tanks, to be sure they have been chlorinated at a minimum of 0.5 mg/l free residual chlorine. It also includes the cleaning and disinfection of all community latrines and their surroundings with chlorinated solutions several times a day.

In order to mitigate contamination risks in camps, the Camp Coordination and Camp Management Cluster put in place 80 oral rehydration centres, and others can be established quickly with additional funds. Soap bars, Aquatabs and prevention messages have also been distributed.

The Government led awareness-raising campaigns to inform the population about cholera prevention and treatment, reaching half of the schools in the country. These included the distribution of 415,000 posters and brochures and 4 million SMS messages. Over 2,000 volunteers were trained to raise awareness in the most isolated communities. Following the initiative of the country’s religious leaders, DINEPA, UNICEF, WHO/PAHO, Caritas and other partners work together to disseminate prevention messages in places of worship. These places play an important role in the daily lives of Haitians and thus represent an essential forum to positively influence behaviour towards the epidemic. Partners of the Child Protection Cluster, led by UNICEF, circulated awareness messages to 600 shelters, reaching
over 42,000 children who also received hygiene kits (soap, chlorine and information material). Additionally, FAO works with the Ministry of Agriculture, Natural Resources and Rural Development, and partners of the Agriculture Cluster to ensure that clear and practical messages about cholera reach farmers, to minimise the economic impact on agricultural production, and ensure food security.

UNAIDS and UNFPA also prepared and distributed prevention messages for people living with HIV/AIDS. Washing hands with soap, drinking only clean water, and the dangers linked to defecation remain very important messages in hygiene promotion efforts.

Furthermore, the Nutrition Cluster tries to alleviate the impact of the epidemic among children under five, pregnant or breastfeeding women, and other vulnerable groups. These efforts include adequate feeding of babies and toddlers and the immediate treatment of cholera and severe acute malnutrition cases. To improve the management of these cases, a rehydration protocol for children suffering from malnutrition was developed by WHO and UNICEF, in addition to providing advice on nutrition care of cholera patients showing signs of malnutrition. Cholera awareness-raising messages were also distributed in community nutrition centres.

The Logistics Cluster also deployed considerable means to facilitate air, sea and land transportation to the entire humanitarian community. Since the beginning of the cholera epidemic, 20 organisations have used the Cluster’s services. Meanwhile, MINUSTAH provided logistics and security for the delivery of medical material and drinking water throughout the country. Warehousing tents were used to strengthen storage capacities and allow partner organisations to stockpile material. UNHAS, the air service managed by WFP, has made its three helicopters available to the humanitarian community. A telecommunications network was also made available to the international community to facilitate the cholera response.

MSPP and WHO/PAHO anticipate and estimated 400,000 cases over the next 12 months. While the hospitalized mortality rate is decreasing, the tensions and demonstrations that followed the announcement of the provisional results of the first round of presidential elections on 28 November 2010, have had an important negative impact on the response. The population’s access to health and hygiene services was compromised, which could lead to a rise in the lethality rate. Political instability linked to the electoral period represents a major challenge for the actors involved in the cholera response. In addition to difficulties encountered in the fight against the epidemic, some local authorities are hesitant to designate sites for treatment centres, waste disposal centres and burial places, in light of public demonstrations against these sites. Many of these decisions are still to be made as 2010 draws to a close.
Evolution of the Cholera Epidemic (20 October – 14 December)

Number of New Hospitalised Cases and Hospital Lethality in Haiti, 20 Oct – 14 Dec

Number of New Cases Observed and Global Lethality in Haiti, 20 Oct -14 Dec
Fighting cholera: treating and preventing

Treating

Joseph Dieumène, petty trader, 45, mother of eight children, including Santana Renandjie (25 months), living in Bois Verna, across the church Église Communauté du Christ:

“My daughter Renandjie Santana had diarrhœa, I took her to the Sainte Thérèse Hospital in Hinche. They examined her and asked me to do tests for her. Before I left, they gave me six doses of oral serum offered by UNICEF. These oral rehydration salts helped replace the liquids that my daughter was losing (...).”

Nurses working at the Verettes Hospital since November 25. “We know that this bacteria does a lot of damage. The disease starts with diarrhœa and kills rapidly. Given the situation, hospital authorities asked us to take precautions and clean and disinfect the hospital in order to protect ourselves, the doctors and the visitors, and to avoid spreading the disease. According to some information we received from WHO/PAHO, we must observe the same behaviour to avoid all contamination.”

Preventing

Eunide Joseph, schoolgirl in Dessalines is talking about what she knows of cholera, thanks to the information received through awareness-raising campaigns coordinated by MSPP and supported by the United Nations: “It’s a dangerous disease that we can easily catch if we don’t protect ourselves. To protect myself I must always wash my hands with treated water, coming out of the latrines, after shaking someone’s hand, coming home, I must drink and use only treated water.”

Delivrance Boislo, 39, mother of seven, living in Cité Éternelle, one of the poorest and most overpopulated areas of Port-au-Prince. Her husband was killed in the 12 January earthquake. Her house was destroyed.

“After the earthquake, we were all forced to sleep on the streets until a friend offered us shelter at her home, says Delivrance from a brick house without doors or windows, where she lives with her four children. We have no toilets, we use a bucket and throw the wastes into the sewer”. Unfortunately, such conditions accelerate the spread of the disease. In this context, UNICEF has initiated awareness campaigns throughout the city in order to inform the population on the means to eradicate cholera. “I come here to get water. Thanks to the Aquatabs, I know that drinking this water will be risk-free.”
D. Challenges and Outlook for 2011

The Return and Voluntary Relocation of Displaced Populations

The number of displaced persons living in camps went from 1.5 million in July 2010, to 1.05 million in November 2010, a decrease of 30 percent over a five-month period. The general trend shows that these people explore other housing solutions outside the camps. In 2011, national and international partners will work together to improve socio-economic conditions at community level. This should encourage displaced people in camps to return to their neighbourhoods of origin.

The delays in debris removal and the lack of land for the long-term relocation of the displaced have held up the deployment of transitional shelter units. Only 15 percent of the 124,889 planned shelters have been deployed so far, notably in the metropolitan area of Port-au-Prince.

Land development for the establishment of transitional shelters remains a key challenge, especially considering the people currently living in camps who cannot return to their original dwelling or land, and who do not own land to build a shelter. Temporary agreement mechanisms with landowners have been put in place in response to this challenge, and alternative solutions for sustainable relocation or the consolidation of certain camps are being considered.

The institutional fragmentation did not allow to support a clear government counterpart at the national level. However, at the local level, the Shelter Cluster was able to adequately support and work with the municipalities of Port-au-Prince, Delmas, Carrefour, Croix des Bouquets and Tabarre, who progressively took leadership of the coordination of shelter construction in the various communes.

A large number of displaced people in camps remain greatly exposed to natural disaster risk. This highlights the importance of mitigation efforts by offering them alternative housing opportunities outside the camps. Other activities related to disaster, for instance preparedness and response, are presented on pages 36 and 37 of this report.
Cholera Response

The Government demonstrated its leadership in the coordination of the cholera response through the Emergency Operations Centre (COU), the President’s Office and all government administrations, including the Ministry of Health, the Ministry of Interior and the Civil Protection Directorate (DPC), DINEPA, and the Ministry of Communications. In 2011, the United Nations and its partners will continue to strengthen the government’s crisis response capacities, at central and departmental levels.

WHO/PAHO anticipates over 400,000 cholera cases in the next 12 months, a figure revised upwards since the beginning of the crisis, given the virulent character of the epidemic in Haiti. The response of the government and its partners is planned on that basis. MSPP, UN agencies and bilateral and non-governmental partners in the health sector will need to continue to train health personnel in treatment protocols, and mobilise new staff to strengthen existing capacities. An increase in the number of oral rehydration centres in community settings will be crucial to ensure early intervention and reduced mortality. Even though 75 percent of CTC and CTU needs are covered at the end of 2010, urgent decisions are expected from the government on the location of new CTCs and UTCs, particularly in the Grande Anse Department. Human waste management and treatment of the deceased remain challenges due to the limited number of discharge and burial sites compared to needs. A plea was made to national and local authorities to identify new sites.

Scaling up hygiene promotion activities is essential to ensure an adequate sanitary response over the coming year. These activities must include local awareness campaigns that build on existing nuances and networks within the Haitian culture. Community mobilisation, information campaigns and the distribution of oral rehydration salts are essential to prevent the spread of cholera. In addition to these emergency measures, longer-term efforts must be undertaken to protect clean water sources and improve sanitation and personal hygiene.

Challenges to the environment remained important following the earthquake. They include unsanitary discarding into rivers and the use of chemical toilets, the management of huge volumes of debris and the vulnerability to landslides. In 2011, UNEP will focus on the promotion of appropriate green technologies, targeting for example the sustainable treatment of human waste, a primary cause of the epidemic.

In order to decentralise the action and the presence of United Nations agencies outside of Port-au-Prince and to support DINEPA’s coordination efforts, UNICEF deployed, in December 2010, 52 staff members in 15 locations in the country. More efforts are underway to rapidly strengthen the United Nations’ presence and that of humanitarian actors in all the departments, especially the ones with the lowest coverage like the Nord, the Nord-Est and the Grande Anse.

Given the scale of the humanitarian challenges in Haiti, additional financial support is necessary to sustain the level of the response to the cholera epidemic and to address the needs of the displaced in 2011.
V. RECOVERY: SITUATION, CHALLENGES AND OUTLOOK
A. United Nations’ support to the Interim Haiti Recovery Commission

The Interim Haiti Recovery Commission (IHRC) was created by presidential decree on 21 April 2010. It is co-chaired by Prime Minister Jean-Max Bellerive and former U.S. President William J. Clinton, and directed by a board of national and international members. IHRC’s objective is to help the government determine broad recovery strategic directions and to ensure greater coherence and efficiency in projects’ allocation and financing. This is done in close collaboration with the technical ministries and the Ministry of Planning and External Cooperation (MPCE). Long discussions on its exact role and composition have initially delayed its progress. However, while 2010 is coming to a close, over 74 development projects of an estimated value of more than 3 billion US dollars were approved by the Commission, of which 1.6 billion US dollars are funded. During its 14 December 2010 meeting, the Commission prioritised key sectors, such as housing, debris removal, education, energy, health, job creation, water and sanitation, and capacity building. The Commission also approved a strategic plan that determines the financing objectives and needs for the period up to October 2011, when the Commission’s present mandate ends. Also, IHRC has created working groups on debris and housing that have helped finalise specific strategies on these themes. The United Nations, through the Groupe Logement-Quartier (Housing/Neighbourhood Group) coordinated by UN-Habitat, has contributed to the housing strategy development.

Among the projects approved by IHRC, 14 were developed by the United Nations, for a total of 299 million US dollars, of which 224 million US dollars still remain to be mobilised. These 14 projects, of which ten involve at least two United Nations agencies, support IHRC priorities. These projects are related to education, employment, agriculture, health, and natural disaster risk reduction. The United Nations also developed a project to prevent and respond to sexual and gender-based violence. Another project elaborated with MPCE will assess the public administration situation in 10 cities. Gender equality issues will also have to remain a priority for the Commission in 2011.

For its part, the Office of the Special Envoy monitored donors’ contributions. In addition to these efforts, the United Nations, particularly UNDP, provided aid efficiency, job creation and communication experts to IHRC. Other experts will be assigned in 2011, notably to support the Commission’s natural disaster risk reduction efforts.

In terms of aid efficiency, and on the basis of an ongoing initiative, UNDP has supported MPCE and IHRC to implement a monitoring system for pledges made at the 31 March 2010 New York conference. At this event, donors had in fact promised to disburse 5.3 billion US dollars over the next 18 months to help with Haiti’s recovery. This system is complemented by a database of humanitarian assistance and recovery projects implemented in Haiti. Together they constitute the platform for the re-foundation of Haiti (http://www.IHRC.ht). This platform allows the electronic submission of projects to IHRC. To date, 145 concept notes and 120 projects are available online.

Nearly 10 months after the New York conference, more than 40 percent of the pledged funds were disbursed (see Annex on page 58 of this report). However, additional efforts from donors are necessary for the government and development partners to accelerate Haiti’s recovery in 2011. Haitians still need to see that these funds make a difference in their daily lives. The 14 United Nations projects approved by IHRC can contribute to reaching this goal, provided they receive adequate funding.
B. Debris Removal

Situation

The 12 January earthquake created millions of cubic metres of debris. Even though precise data are not available, it is estimated that several million cubic metres of rubble were cleared in 2010, yet the most part remains to be removed.

This situation can be explained in part by: i) the absence, until December 2010, of a national strategy to determine priority areas; ii) the multiplicity of actors and the lack of coordination between them; iii) the lack of a clear decision on the allocation of land for the dumping and treatment of rubble; iv) difficult access to debris in neighbourhoods where wide sweepers cannot pass.

However, some progress was made, with, for example, the government’s decision to give out contracts to private companies for debris removal in downtown Port-au-Prince. In August 2010, IHRC approved a debris management project submitted by the United Nations (UNDP, UN-Habitat and ILO, with UNOPS’ support), for 16.9 million US dollars, funded by the Haiti Reconstruction Fund (HRF). At the last Commission’s meeting in December 2010, the United States allocated an additional 25 million US dollars to the HRF to extend this project to other priority areas.

In partnership with municipalities and the Ministry of Public Works, Transport and Communication, this project targets six Port-au-Prince neighbourhoods. The project has just received funding from HRF, and its activities will start in January 2011 for a period of 12 months. It will allow the removal, recycling and clearance of debris, and the demolition of almost 4,000 damaged houses. It will benefit not only the 16,200 people who lived in these houses, but also the entire neighbourhood, representing a population of around 200,000. Employment opportunities will be created for 3,500 people. Close to 162,000 cubic metres of debris will be treated.

A similar project in Léogâne, the earthquake’s epicentre, started in November 2010 to remove about 2.5 million cubic metres of debris created by the collapse of 35,000 houses. Over 600 damaged houses were demolished through labour-intensive programmes and the support of heavy machinery. During the course of 2011, this programme aims at clearing all the streets of Léogâne and its surrounding area, and to build a recycling site. The objective is to multiply this approach and to replicate it nationwide.

Meanwhile, MINUSTAH coordinated the humanitarian partners’ action, which has made possible the removal of rubble from several schools, churches, hospitals and
childcare centres. In this framework, MINUSTAH’s military component has proceeded with the removal of 45,154 cubic metres of rubble and the rehabilitation of 12,594 metres of drainage channels. For its part, IOM participated in the clearance of 33,025 tons of debris and rubble from nine schools and one bridge destroyed in the earthquake.

Challenges and Outlook

In December 2010, IHRC submitted a draft national debris management strategy to its board members for comments. The approval of such strategy should speed up debris removal in 2011. This strategy includes an integrated approach to debris management combining community reconstruction and large-scale rubble removal.

Delays due to insufficient operational capacity make the situation more and more complex every day. The accumulation of solid waste mixed with rubble also contributes to the deterioration of the sanitary context, leading to increased risks of spreading the cholera epidemic. Financing for this strategy is crucial for progress in this sector to be visible in 2011.

C. Housing

Situation

The United Nations supports the creation of enabling conditions for the return of displaced persons to their neighbourhoods. UN-Habitat, in partnership with Fédération des Architectes de l’Urgence, Habitat for Humanity International, InterSolidarité International and the Groupe Technologie Intermédiaire d’Haïti, works in the informal neighbourhood of Bristout-Bobin in Pétion-ville. With their agreement, the neighbourhood’s coordination committees...
and the communities completed a risk-sensitive mapping. This mapping opens the way to participative urban planning workshops, at the end of which an urban restructuring plan will be validated directly with the communities and the commune. Four pilot community buildings were rehabilitated as temporary shelters in case of natural disaster, and the neighbourhood’s masons were trained to reinforce good practices. Community-level activities have also helped raise awareness about adequate construction rules.

This partnership was extended to health actors, led by ALIMA, to coordinate the cholera response at the neighbourhood level, raise awareness among the population and set up an oral rehydration centre and a ten-bed cholera treatment centre. 3,500 families are benefiting from these efforts. Similar activities are on-going in other neighbourhoods, in partnership with Habitat for Humanity International, the Pan American Development Foundation, CHF International and the Mission Sociale des Églises Haïtiennes—in Fort Mercredi, Cité Neuf, Ti Savane, Simon Pelé and Ravine Pintade in Port-au-Prince, section 1 in Léogâne, section 9 in Cabaret and other neighbourhoods in Jacmel, Cayes-Jacmel, Marigot and Bainet.

The structural assessment has covered 90 percent of houses in affected areas—more than 388,000 buildings. It is led by the Ministry of Public Works, Transport and Communications (MTPTC) with the technical support of UNOPS and the financial support of the World Bank, and will be completed at the end of December 2010. This effort has enabled the classification of buildings according to level of damage and habitability (green, yellow, red). This activity is essential to allow the return to green houses, and facilitate repairs or demolition of yellow and red houses. Thanks to this classification, more than 70,000 people were able to return to green houses between March and August 2010, and 5,035 families were evacuated from dangerous structures.

Guidelines and technical modalities for the repair of yellow houses prepared by MTPTC, supported by the United Nations (UN-Habitat, UNOPS, World Bank), will help the population, construction workers and operational partners to apply technical prescriptions leading to more earthquake and hurricane-resistant buildings.

IHRC’s “Framework for the return of displaced people to their neighbourhoods and housing reconstruction” was developed with the support of the Groupe Logement-Quartier, coordinated by UN-Habitat. This framework promotes a participatory approach that involves populations in precarious areas, where the majority of the displaced originally lived, as well as the community and municipal leaders. IHRC’s strategy identifies the repair of yellow houses and the establishment of basic social services as essential factors for the return of displaced populations. It is expected that repairing two-thirds of yellow houses will facilitate the return of 40 percent of the people currently living in camps. It is particularly important that reconstruction take into account seismic risks, and especially the fact that certain areas within a city are under different threat levels. This information is crucial for adequate building construction.

Challenges and Outlook

The return to their neighbourhoods—or the voluntary relocation—of the 1.05 million people displaced remains the main challenge for 2011. Without a viable alternative, part of this population will likely have to stay in camps for a longer period. Therefore, they will need to have access to decent living conditions and basic social services. The removal of debris, the repair of yellow houses, the creation of economic opportunities and the establishment of basic social services are the main factors that will facilitate the return of the majority of the displaced into their house or neighbourhood. Additionally, a large share of the private
rental housing market having disappeared, and the owners being financially unable to rebuild, rental costs have inflated, which makes relocation even more difficult.

In 2011, the United Nations will continue to work with relevant Ministries to create minimal enabling conditions for the return of displaced populations. For example, ILO and UNFPA will support a project for the economic reintegration of displaced people in their neighbourhoods, through the technical and vocational training of 75,000 displaced people. This initiative will be implemented with the Ministry of Social Affairs and Labour, the Ministry of Education, unions and trade associations. UN-Habitat and its partners will continue to work with municipalities and communities in the informal neighbourhoods, to identify the residents’ occupancy status and secure their various land tenure rights, thus facilitating access to funding mechanisms to repair or rebuild their houses.

Beyond these priorities, a certain number of structural reforms related to urban planning regulations and property rights are necessary to create an enabling environment for real estate investment.

D. Natural Disaster Risk Preparedness

Situation

The recurring storms and hurricanes devastating Haiti and the 12 January earthquake are dramatic reminders of the country’s vulnerability to seismic and hurricane risks. In addition, the growing erosion of the river basins in the country creates important rockslide, landslide and flood risks in rural and urban areas. Before the earthquake, the natural disaster risk index for Haiti (12.9) was already among the highest in the world6. Cumulated with the last century, natural disasters have caused over 20,000 deaths and affected over six million people7. With the 12 January 2010 earthquake, these numbers have increased dramatically. The country’s vulnerability and its risk level have been updated to an even more critical level for years to come.

This is why strengthening national and departmental capacities for improved natural disaster risk management, preparedness and response remain priorities for the United Nations. UNDP partners with the Civil Protection Directorate (DPC) within the Ministry of the Interior, to consolidate the risk management system at national and departmental levels. UNDP has supported the Comité National Thématique Éducation et Sensibilisation du Public for the production and distribution of documents and the organisation of events, to prepare the population to weather, seismic and epidemic risks. This thematic committee has managed important information campaigns for the hurricane season and cholera

6 Disaster Risk Reduction, A Development Challenge, UNDP, 2004
7 UNDAF, 2009-2011
prevention. Similarly, FAO launched a national campaign over 22 national, local and community radios, with the broadcasting of spots about preventive measures to protect the agricultural, livestock and fisheries sectors in case of a hurricane alert.

UNDP has also supported national authorities to finalise the seismic macrozonation of Port-au-Prince, which is instrumental for risk-sensitive urban planning (while a more detailed macrozonation becomes available). Finding soil characteristics will allow the production of soil maps of the capital and its surroundings. Fifty Haitian public servants and private sector staff were trained on the practical use of this information.

Furthermore, a project to set up Haitian alert services for tsunami and other coastal risks started in October 2010 with UNESCO’s support. This project aims to assist relevant Haitian national organisations (National Meteorological Centre of Haiti, Bureau of Mines and Energy and Civil Protection Directorate), in establishing the technical components of an early warning system for tsunamis and other coastal risks, such as the access to seismic and sea level data. This project also seeks to produce Standard Operating Procedures and develop general public awareness and education strategies.

The United Nations continued to strengthen disaster risk mitigation throughout the country. In the Gonaïves region, a programme supported by ILO, UNDP and WFP has created jobs while lowering flood risks in the communes particularly exposed to this risk. Between April and November 2010, over 329,500 workdays were created for more than 7,600 people. Similar programmes are on-going in other disaster-affected localities such as les Cayes (see box on page 38).

In Port-au-Prince, MINUSTAH facilitated the launch of 15 watershed management projects at the ravines of Morne l’Hôpital as a response to floods affecting the capital, coming from high river watersheds such as those of Obléo. Rehabilitation works have also been undertaken on 56 drainage channels in Port-au-Prince. These initiatives have provided employment for over 44,000 people and allowed to build more than 3,000 ravine dry walls. Of the six major channels in the capital that were cleaned under the supervision of UNOPS, about 26 kilometres of drainage channels were rehabilitated and more than 110,000 cubic metres of waste and debris removed. Over 400,000 people living in the direct proximity of these channels have benefited from this cleaning and did not experience any flooding during the torrential rains resulting from Hurricane Tomas. These efforts also help reduce the spread of cholera.

Improving the local media’s understanding of the risks and mitigation needs constitutes an important aspect of the United Nations work. In this context, UNESCO, UNDP and l’Association des Journalistes Haïtiens organised, between August and October 2010, training sessions for 300 Haitian journalists in the country’s ten departments to strengthen
their knowledge about natural disaster prevention and impact mitigation in Haiti.

**Challenges and Outlook**

Unless risks are taken into account, the reconstruction and development of Haiti will never be sustainable. Therefore, improving the efficiency of the National Risk and Disaster Management System is fundamental to better prepare and respond to various threats, and further reduce risks in all relevant development sectors.

Following the earthquake, there was an important growth in the number of outside institutions in the field of humanitarian aid and risk reduction. This comes at a time when the government’s capacity has been strongly reduced. Coordination of all the actors working in disaster risk management must be strengthened under the government’s leadership.

Preparing for the next hurricane seasons, one major challenge for the Shelter Cluster remains the creation of dignified living conditions, especially for families who will not be able to relocate in 2011. For instance, this will be done by supporting the consolidation of shelters built by the displaced themselves.

An efficient response and adequate disaster management will only be possible with strong capacities at national and departmental levels. It is therefore critical to reinforce the decentralisation of risk management at departmental and communal levels, to allocate budget for the long-term maintenance of the early warning system and to reinforce seismic training of Haitian engineers.

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**Protecting Communities Against Flooding Risks, Les Cayes**

Dear Madam, Dear Sir:

Les Associations Galaxie et Sainte Antoine de la Créole feel obligated to thank the United Nations Development Programme (UNDP) for the gabionnage works undertaken to protect the residents against the South ravine in times of flooding.

Indeed, without these efforts, the people de la Créole would already be flooded by the overflowing of this river, which almost rose past the gabion’s 4 metre height limit [...]. However, without adding the few missing metres to the 160 metres already built, we risk being flooded upstream by the waters of this river during the rainy season. In the hope that you understand the object of the present letter, and that you will follow up on it, les Associations Galaxie et Sainte Antoine de la Créole would like to express their best greetings and anticipated gratitude.
Disaster preparedness challenges also include training and awareness-raising among the population to identify adequate prevention measures, including environmental protection and the creation of a policy to preserve and protect cultural goods.

E. Education

Situation

The education system in Haiti faces important challenges. Indeed, this system is characterised by: i) inadequate educational structures for the size of the school age population; ii) the absence of agreed norms and standards between State and non-State actors on the quality of education; iii) teachers’ lack of training and iv) insufficient government’s monitoring and quality control mechanisms. A presidential commission on education was put in place in 2010 to provide strategic guidelines on education reform in Haiti. These have fed the multi-annual operational plan of the Ministry of National Education and Vocational Training (MENFP) supported by the World Bank, the Inter-American Development Bank, the United Nations and other international partners.

The Education Cluster works in this context and includes key government counterparts like MENFP and the Ministry of Planning and External Cooperation (MPCE), the United Nations and non-governmental and international partners.

UNICEF and the Cluster’s members supported Haitian partners in the application of Minimal Standards for Education in Emergencies, as formulated by the International Network for Education in Emergencies. In this context, UNICEF has trained over 150 education inspectors and school directors in the country, on the norms to follow concerning education in emergencies and natural disaster risk reduction in schools. The Cluster also provided technical support to the government for a successful return to the school year in April and the beginning of the new school year in October.

The Cluster facilitated the creation of 1,000 temporary learning spaces, the training of over 10,000 teachers and education sector personnel, and psychosocial support to children. The Cluster continues to work towards the return to school of over 1 million students. Additionally, it aims to build educational facilities for relocation sites, such as Corail and Tabarre Issa, and to promote the reintegration of children living in camps, in schools located in their community of origin or close to the displacement sites.

With regard to secondary education, in June and July, UNESCO organised psychosocial training for 1,700 teachers from the Ouest Department and the capital, training that will be replicated in six other locations in the country (South,
South-East, Nippes, North, Centre, Gonaïves), notably to include this module in the school curriculum.

In October and November 2010, 28 high schools were equipped with teacher’s desks, administration materials, pocket dictionaries, maps of Haiti and geometric instrument kits for the teachers.

A census of professional training institutions present in Haiti is also on-going with UNESCO’s assistance and in collaboration with the Inter-American Development Bank.

As soon as the schools in the affected areas started reopening, the National School Feeding Programme (PNCS) and WFP reinstated the school feeding programme. It is known as a simple and efficient way to encourage children to come to school everyday, while ensuring they receive at least one nutritious meal a day. This project started again at full capacity with the 2010-2011 school year and provides a daily meal to 1.1 million children all over the country.

Challenges and Outlook

The Education Cluster mobilised partners to develop contingency plans for the other emergencies that occured towards the end of the year, such as the response to Hurricane Tomas and the on-going cholera response. So far, the spread of cholera proved to be the highest threat against the continuation of education activities. Schools are a place where children learn essential information for the prevention of certain diseases, and can play an important role in the protection of their families and communities. This is why particular efforts were made to raise awareness in schools on the prevention and treatment of cholera. To this day, 50 percent of the schools are sensitised. The cluster also focuses on the long-term objective of establishing an information system that helps steer the education sector, while reinforcing vocational and professional training. It concentrates on the updating of the school curriculum at all educational levels and improving initial training. It also continues to train teachers to reach quality education.

F. Agriculture and Food Security

Situation

Rehabilitating farmland and supporting farmers in the areas affected by the earthquake is one of the key objectives of the Haitian Government’s reconstruction plan. It is also considered by both Haitians and the international community as an essential element to build back better. Farmers and agricultural producers’ associations seek to improve their production capacities to open up new markets and sell their produce. To support them, in 2010, WFP bought 1,000 tons of ground corn, 300 tons of rice and 700,000 bottles of milk produced locally. These items were consumed by children benefiting from the school feeding programme implemented in collaboration with the National School Feeding Programme.
The 12 January earthquake continues to have a significant impact on Haitians’ food security. The loss of goods, loss of jobs, migration, and increased food prices jeopardized survival strategies and households’ subsistence means. This has also caused lower food availability, sudden price changes, and lower household revenues.

The evaluations conducted in the areas directly affected by the earthquake have shown an improvement in the food situation between February and June 2010. The prevalence of food insecurity in the areas directly affected by the earthquake went from 52 percent in February, to 39 percent in June 2010, a reduction of 1.3 to 1.1 million people. However, chronic food insecurity remains an important problem in Haiti. It is estimated that, throughout the country, between 2.5 and 3.3 million people live in a situation of food insecurity.

In response to this situation, FAO supported the country’s agricultural production with the distribution of 2,272 tons of seeds for food crops, over the three planting seasons (spring, summer, winter), which produced food such as cereals and vegetables, covering the basic needs of 1 million people for eight months.

In urban areas, and more particularly in the displacement camps, like Camp Corail and Tabarre in the metropolitan area of Port-au-Prince, and the cities of Carrefour, Léogâne and Jacmel, FAO, either directly or in partnership with the NGOs present in the camps, has created urban vegetable gardens to improve the diet of the most vulnerable households.

The sustainable use of natural resources in Haiti remains a priority for the United Nations. In this framework, UNEP
supports rural development programmes with a strong environmental component. The objective is to preserve production sources like river basins, agricultural plains and sea areas to reduce food insecurity.

**Challenges and Outlook**

Haiti had to face successive emergencies that seriously affected the agricultural sector. In addition to the damages in the areas affected by the earthquake, new losses are felt in other departments due to Hurricane Tomas and the effects of cholera. In this particularly difficult context, rural households have not had an opportunity to recapitalise.

The vegetable market is in great danger of a recession, since consuming has fallen for fear of cholera. Farmers leave flooded rice fields and irrigated land because of the epidemic.

Rapid evaluations after Hurricane Tomas, led by the National Coordination of Food security and the Ministry of Agriculture, Natural resources and Rural Development

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**Revitalising agricultural land and fighting erosion**

This small commune of Duvillon Lagarde, located in the middle of the mountains in South-East Haiti, is isolated and has suffered greatly from deforestation and erosion.

Vanise Jean-Pierre, 28, was born here and shares her house with her two children and eight brothers and sisters. She is now in charge of the whole family. To meet the family’s requirements, she grows vegetables on a plot of land. Two years ago, she left. “Life here had become so difficult that I moved to Port-au-Prince. The earthquake destroyed my house. I lost everything and I decided it was time to go home.” Among the factors that made her return possible to Duvillon Lagarde, was a project started in July on her village’s mountain slopes. WFP and FAO, with local authorities and community groups, started an agricultural land revitalisation project. Vanise Jean-Pierre was hired and has been working ever since to improve her commune’s hills.

For the past six months, nearly 1,300 people from the region have been working to build dry walls and plant shrubs. The goal of all these efforts is to ensure that the water remains on the mountain and can be used to irrigate the land where people in the commune grow vegetables.

Workers receive money and food in exchange for their work. “This project helps me a lot. Now I am sure to have food for my family and money to buy what I need. If I succeed in making a living, I will stay home”, she concluded.
(MARND) with FAO’s support, mention over 70,000 hectares of crops destroyed, especially manioc, corn, banana trees and fruit plantations. Many livestock losses were reported, cattle, goats, chickens and pigs, creating new humanitarian needs in the whole country, but more particularly in the Grande-Anse and Sud Departments.

It is therefore essential to give rural households the means to improve their resilience to disasters. Since a great number of households are managed by women, more support should be given in 2011 to women’s role in the agricultural sector.

With FAO’s technical assistance and in consultation with technical and financial partners, MARND, following the Government’s Action Plan of March 2010, elaborated a six-year National Agricultural Investment Plan costing 790 million US dollars. The economic and social reconstruction of Haiti requires a food production relaunch and large investments in rural areas.

G. Health

Situation

Haiti faces fundamental health challenges. Among children under five, the mortality rate is the highest in the Caribbean region (78 deaths per 1,000 viable births). The maternal mortality ratio is also the highest in the area, with 630 deaths per 100,000 viable births. In addition, the sanitary infrastructures remain highly inadequate, in urban and rural areas.

The earthquake and the cholera epidemic only worsened these challenges. In this context, the Health Cluster assisted in restarting public health programmes related to maternal and neonatal health, nutrition and gender-based violence, HIV/AIDS, tuberculosis, malaria, dengue, mental health, the provision of health services and rehabilitation services for people with disabilities. As a long-term element of the health system, the WHO/PAHO programme for free child health services plans on acquiring a basic group of health services for children under five and people living in camps. This programme was approved by the Interim Haiti Recovery Commission in August 2010 for 20 million US dollars.

The Ministry of Public Health and Population (MSPP) proposed a strategy that reviewed the parameters for the recovery of the Haitian health system. This plan addresses the following objectives: to ensure the delivery of health services in camps and to continue to provide services in all facilities of the health sector, including emergency needs; to identify affected facilities and elaborate reconstruction plans; to facilitate the access to services from a financial perspective and provide ways to support vulnerable groups like pregnant women, children under five, people with disabilities and people living with psychological trauma.
due to the earthquake; to maintain and reinforce the MSPP’s governance and its capacity to execute essential public health functions at all levels; to consolidate MSPP’s disaster response capacity; to reinforce public hygiene measures and sanitation; and to improve the country’s sanitary capacities, through partnerships with government agencies and non-governmental organisations.

In this context, UNICEF continues to support 159 therapeutic programmes, through which over 10,000 children were seen and treated since January 2010, while more than 1,250 children received nutritional care in 28 stabilisation centres for children suffering from severe acute malnutrition with medical complications. Assessments made in the course of the second half of 2010 confirmed there was no increase in acute malnutrition levels compared to the pre-earthquake situation, and underscored that prevention activities, including general nutrition, have had a positive impact on the nutritional condition of children. UNICEF has therefore continued to focus its efforts on the reinforcement of local capacities, to provide adequate nutritional interventions and to cover the needs of children and pregnant or breastfeeding women.

UNICEF has also provided MSPP with technical and financial support for the elaboration of a national protocol for the management of severe acute malnutrition (SAM) and the implementation of an integrated management model of SAM, involving both institutional care for children with medical complications, and community basic care for children without complications. UNICEF also works with UNFPA and UNOPS to restore six basic emergency obstetrics centres and neonatal care institutions in several underserved areas like Martissant, the most densely populated slums of Port-au-Prince, and hard-to-reach towns in Grande Anse, Artibonite and Sud-Est. Construction works should be completed by the end of February 2011.

Last November, UNICEF and WFP supported MSPP in the organisation of the second Children’s Health Week in Haiti, where 1,350,000 children received zinc, vitamin A, deworming tablets and catch-up vaccination in Plateau Central, Grand Anse and Nippes.

UNFPA has initiated, in partnership with UNICEF, UNOPS, United Nations Volunteers (UNV) and WHO/PAHO, the establishment of ten “Smile Clinics” aimed at providing all the reproductive health services, with qualified personnel to provide basic emergency neonatal services. Five sites were identified by MSPP (two in the provinces and three in the metropolitan area of Port-au-Prince), and the construction of these first five “Smile Clinics” has started.
Challenges and Outlook

While over 1 million people are still living in camps, the displaced population remains vulnerable to contagious and vector-born diseases. In the coming year, it will still be necessary to treat earthquake-related mental diseases, and provide prostheses and rehabilitation services for people who have lost limbs.

In 2011, the health sector should focus on better maternal services, improved obstetrics care and strengthened protection against gender-based violence and related infections.

The renovation and reconstruction needs of the sanitary infrastructures remain important. Existing capacities are still inadequate given the magnitude of the needs. The physical structures in place no longer follow norms in case of seismic activity or hurricanes. These facilities also need major upgrading of the techniques and sanitary equipment used.

Rebuilding hospitals and building new hospitals are essential for the health sector, particularly emergency room services. All the new health facilities, and the rehabilitation of the existing health infrastructure, will need to integrate mitigation measures to increase their resistance to future events. Nine departmental hospitals are targeted, in an effort to decentralise the health care system. The training of new health professionals also remains a priority.

Other requirements involve the construction and renovation of solid and liquid waste treatment systems. These improvements continue to be essential for the eradication of cholera and the prevention of other diseases. As a contribution to these efforts, UNEP works with the National Directorate of Water Supply and Sanitation (DINEPA) and the Health and WASH Clusters in order to develop innovative techniques combining waste management and the creation of alternative energies such as biogas.

The cholera epidemic shows the importance to significantly improve water and sanitation systems in Haiti. To this day, no sewage system or waste water treatment installations exist, and there is only one official public discharge site in the entire country.

Clean water supply is still a major gap, and sanitation partners must work jointly with the Government to support efforts aimed at increasing chlorination and water analyses.
everywhere in the country. As for urban clean water supply systems, the Government’s objectives for 2011 consist in offering systematic chlorination to the populations of the country’s 40 main cities, reaching approximately 3 million people. In the camps, basic sanitation will be ensured, including drainage and the daily disinfection of latrines.

Responding to the immediate need to treat cholera patients while continuing to rebuild a health system devastated by the earthquake will constitute a major challenge for 2011.
VI. ELECTIONS, RULE OF LAW, SECURITY AND PROTECTION: SITUATION, CHALLENGES AND OUTLOOK
A. Elections

Following the 12 January earthquake, the February 2010 elections to renew the Chamber of Deputies and one third of the Senate were postponed. This has contributed to a climate of political uncertainty due to the absence of a quorum in a Parliament where all the deputies and one third of senators had completed their mandates. In this context, the 28 November 2010 Presidential and Legislative elections were essential to confirm the State’s legitimacy and consolidate the country’s stability. The holding of local elections in 2011 will be just as determining an experience.

In accordance with the United Nations Security Council’s Resolution 1944, and in view of the unique and complex requirements of the electoral process in Haiti, MINUSTAH assisted in the 2010 elections by providing technical, logistical and security support and by ensuring the coordination of all the international partners’ interventions in the process.

For the 28 November elections, the Mission distributed the sensitive material (ballot papers and records) and the non-sensitive material, and gathered the sensitive material in the 1,500 Voting Centres (11,181 polling stations) in the country, according to a plan that was determined in collaboration with the Provisional Electoral Council (CEP).

UNDP manages the electoral trust fund with contributions from Brazil, Canada, the United States, Japan and the European Union. This fund allowed the acquisition of the necessary electoral material (election kits, polling papers and other documents), the setting up of the result tabulation centre and the payment of the national electoral personnel’s salary. International experts in systems and database management, voters’ list and electoral complaints have also provided direct technical assistance to the CEP.

Regarding security on 28 November 2010 Election Day, nearly 1,000 UN police officers and 6,000 UN military have supported the Haitian National police (PNH) in its efforts to ensure security in voting centre and the tabulation centre in Port-au-Prince. Additionally, the United Nations Police (UNPOL) has trained 4,200 local officers to provide security.

During the pre-electoral period, MINUSTAH’s Human Rights Section has monitored the respect of public freedoms such as the choice to assemble, to meet, to express opinions and to demonstrate peacefully. Furthermore, the United Nations, through UN WOMEN and MINUSTAH’s Gender Section, has
encouraged the participation of women in the elections. The United Nations accompanied Haitian women’s organisations in the preparation of the women’s candidate electoral programmes. MINUSTAH also supported women candidates in the elaboration and dissemination of their campaign messages.

Three hundred Haitian journalists received training on the role they can play during elections. This training was financed by a United Nations joint project (UNDP, UN WOMEN, IOM, UNFPA and UNESCO) for violence reduction and social cohesion in collaboration with the Association of Haitian Journalists and the non-governmental organisation International Media Support.

The major challenges to the electoral process, for which no solution has been yet found, are the cholera epidemic, fraud attempts and violent incidents.

B. Rule of Law

Following the 12 January 2010 earthquake, the United Nations immediately took the necessary measures to resume the activities of the Ministry of Justice and Public Security (MJSP) and those of severely affected jurisdictions. MINUSTAH and UNDP supported the Ministry of Justice in the elaboration of an emergency plan and a specific action programme to strengthen its operational capacities, and address dysfunctions previously affecting the judiciary system.

The situation required that the judicial records be extracted from the rubble of the Courthouse. It was also necessary to tackle the issue of prolonged pre-trial detention. MINUSTAH and UNDP helped restart judicial activities, including by providing tents to enable resumption of hearings (for example, tents for correctional hearings, and tents for criminal hearings at the site of the old Courthouse). UNDP also supported the creation of 1,200 square metres of space serving as temporary offices for MJSP and the Haitian National police. In parallel, UNDP supported a special training that allows better identification of the evidence on a crime scene, involving 160 prosecutors, magistrates and police officers. This training will continue in 2011.

In order to promote access to justice for vulnerable populations, MINUSTAH assisted MJSP, in collaboration with the International Legal Assistance Consortium and other partners, in the establishment of four legal assistance offices in Port-au-Prince and Cap-Haïtien.

MINUSTAH also provided technical support to the Ministry of Interior for the elaboration of 140 municipal budgets for the financial year 2010-2011. It also helped survey the sectors where regional capacities should be reinforced to facilitate decentralisation.
In addition, the United Nations provided support to Haitian penitentiary institutions. The first initiative undertaken after the earthquake was the structural assessment of penitentiary buildings. This work was completed in collaboration with the Haitian Prison Administration (DAP) and supported by MINUSTAH, UNOPS, UNDP and the Government of Canada. These evaluations served to reassure DAP employees and the inmates that the buildings still standing were stable, and to plan recovery projects.

The United Nations also contributed to the rehabilitation and/or the construction of new penitentiary and police buildings. In 2010, MINUSTAH has, for example, helped to rehabilitate the Archahaie jail and the Delmas Juvenile Rehabilitation Centre. In addition to the seismic damages they endured, these buildings were also wrecked by the inmates after the earthquake. UNDP, for its part, is planning the construction by 2011 of the Jacmel Courthouse, the headquarters of the General Inspection of PNH in Port-au-Prince and the Delmas 62 Police station.

MINUSTAH’s Community Violence Reduction Section helped Haitian penitentiary institutions resume their activities. A 230,000 US dollar budget was used for the construction of the first detainees rehabilitation centre at the National Penitentiary, which was seriously damaged. These new installations will hold 200 detainees in the best possible conditions for Haiti.

UNDP has also supported the consolidation of the national detainees database, which served as a main tool for PNH and UNPOL to identify detainees who escaped after the earthquake. This database includes an automatic fingerprint identification system and medical data that strengthened the DAP management capacities.

Forty community radio animators in five localities (Port-de-Paix, Gonaïves, Saint Marc, Les Cayes, Ouanaminthe) were trained on violence prevention and promotion of social cohesion. Up to November 2010, two radio awareness programmes on these themes were broadcasted in the same cities. These activities were led by the SAKS association (Société haïtienne d’Animation et de Communication Sociale) and are part of an UN joint programme (UNDP, UN WOMEN, IOM, UNFPA, UNESCO) on violence reduction and social cohesion in Haiti.
C. Security and Protection

The protection sector faced unprecedented challenges following the 12 January 2010 earthquake. Indeed, the Haitian National Police (PNH) endured heavy human and material losses, detainees escaped, and security risks of another type, linked to living conditions in displacement sites, were added to existing ones.

In support of the PNH, MINUSTAH deployed nearly 500 Formed Police Units (FPU) and United Nations Police officers in camps to strengthen security conditions. MINUSTAH also contributed to the reopening of the Police Academy, and the launch of the 22nd Police cadet promotion. Twenty-eight UNPOL officers support 73 PNH instructors in the training of the 900 Police cadets who will join the PNH ranks in 2011.

The United Nations Police also continues to share the PNH premises in the country’s ten departments for follow-up and training activities in police stations and border posts.

Regarding prevention and response to sexual and gender-based violence, UN WOMEN, in collaboration with MINUSTAH’s Human Rights Section and IOM, has contributed to raising awareness among United Nations police officers and MINUSTAH’s military component deployed in camps. Eighty officers and 44 police officers are now apt to train and support the troops and forces deployed in areas with approximately 450,000 displaced people. In addition, nearly 600 departmental units and Rapid Intervention and Law Enforcement Units (CIMO) were trained in law enforcement during the months of July through November 2010. MINUSTAH’s Child Protection Unit has provided training to the PNH on child protection and the role that police officers can play in the framework of this protection.

One of the key concerns of the United Nations following the earthquake was the safety of the victims of violence. REVIV is a living space in the Port-au-Prince metropolitan area designed by the Kay Fanm organisation for sexually assaulted female minors and for the children born out of these aggressions. The 12 January earthquake has destroyed these young girls’ living spaces. With UNICEF and UN WOMEN’s support, the centre was rebuilt in the 15 days following the earthquake. Transitional housing were built in order to allow girls and their children to live in a safe space. Furthermore, UNFPA supported the setting up of 75 solar lamps in 35 camps in the Ouest and Sud-Est Departments to provide light to shelters. This simple measure has proven to be efficient in other contexts to reduce sexual violence against women and girls.

The need for psychological support following a trauma is an important element that led to the creation of psychosocial teams in the camps. These teams were deployed by SOFA and Kay Fanm with UN WOMEN and IOM’s support, and covered a population of about 150,000 people over 76 sites in the metropolitan area of Port-au-Prince and Léogâne. This action has allowed women to talk about their experience and tackle sensitive issues, like physical violence and the traumatic experience of the earthquake.

Meantime, MINUSTAH helped 2,000 street children, who obtained medical, recreational and educational services in Port-au-Prince. This initiative also allows 400 young people to participate in a reintegration programme to free them from gang life. MINUSTAH also implemented a school enrolment programme for adolescent female detainees at the Prison Civile in Pétion-ville, as part of their rehabilitation.

In 102 displacement sites in Port-au-Prince, more than 236,000 people are protected by patrols from the Brigade
de la protection des Mineurs (BPM), who responds to cases of violence against children, especially girls and young women. BPM has 65 officers throughout the country, compared to 12 in 2008. These officers are also trained on aspects of child protection related to separated children and the prevention and detection of child trafficking in border posts and at the international airport. Furthermore, MINUSTAH has led investigations, together with BPM and the Haitian Social Welfare Institute, on allegations of child trafficking, at regional and central levels.

Beyond the camps, 105,000 children, with the support of the Child Protection Sub-Cluster, benefited from cultural and sports activities and psychosocial support in 437 community structures. In the most affected areas, 500,000 vulnerable children have also benefited from the distribution of 464 leisure kits, 301 young child development kits and 122 first aid kits.

D. Challenges and Outlook

The disruption and demonstrations that followed the issuance of the first ballot’s provisional results in the November 2010 Presidential Elections illustrated the fragility of the democratic governance system in Haiti. Beyond the political dispute, an effort to strengthen Haitian electoral management expertise is necessary. To contribute to this challenge, UNDP developed a long-term capacity building project that will address not only technical needs related to the electoral process but also the necessity to “professionalise” electoral agents and improve the electoral council’s political communication and decision-making capacities.

In terms of PNH’s capacity development, providing training to the 23rd Police Academy promotion remains a priority for 2011. A selection committee, with the participation of PNH and UNPOL’s recruitment sections, is at work to select future recruits for this 23rd promotion. A rigorous process, including a written exam, a physical test, a medical exam and an individual interview will be the steps to follow to be admitted to this promotion.

In the field of justice, challenges are multiple and require true political will from national authorities. Focus must be placed on restructuring the Ministry of Justice, strengthening the independence of the judiciary system, by finalising the establishment of the Superior Council of the Judiciary; improving the operation of the courts, registries and prosecution services; and implementing a judiciary inspection system to fight corruption. Priority will also have to be placed on service continuity in tribunals, therefore strengthening judicial security—an essential condition for development and for the Rule of Law. In 2011, UN’s efforts will concentrate on a Rule of
Law Compact between the government, civil society and donors to reinforce a comprehensive police, judiciary and correctional systems reform programme.

In most countries facing a humanitarian crisis, cases of sexual and gender-based violence are often under-reported. In Haiti, victims must very often return to the camps where their violent assailant lives, and as a consequence, even fewer cases are reported. In this context, the Sub-Cluster for sexual and gender-based violence supports the Ministry of Women’s Affairs to resume the national data collection system, and promote the use of national standard filing among partners to obtain a more systematic record of cases.

Coordination with community-based organisations and government institutions needs to be reinforced for more adequate prevention and response to sexual and gender-based violence. The United Nations and its partners will continue to strengthen the capacities of the State and community-based organisations working on these issues. Indeed, women who work within these community organisations are key actors for the prevention and orientation of victims towards adequate care services.

The current increase in training on sexual and gender-based violence remains a key element in the prevention and response efforts, especially for camp managers, the UNPOL and the Haitian National Police, who are in direct contact with the camp population.

Considering the increased risk of violence faced by women and girls, the Haitian organisations SOFA and Kay Fanm, supported by UN WOMEN, have been deploying psychosocial cells in 72 temporary shelter sites since 17 March 2010.

“People appreciate our presence; they are happy to have someone who simply listens to them”. These Human Science students, for the most part, were little aware of the issues related to violence against women before the 12 January earthquake. Before being deployed in the field, these volunteers were trained on issues that include post-trauma violence against women, shelter, peer support, information gathering, and referral to medical, psychosocial and legal facilities.

Cells work in close collaboration with the camp management committees. They listen, inform and sensitise women on violence, on its different forms, and on how to face it. Those women, who lost their homes in a few seconds, are currently living in daily promiscuity that increases their vulnerability to violence. Thanks to the dialogue established with the volunteers, they have an opportunity to recover a certain degree of autonomy and to reclaim their rights.
Challenges to child protection remain. Indeed, about 3,500 street children currently live in the metropolitan area of Port-au-Prince. They are particularly at risk of being abandoned, abused, exploited, used and enrolled in gangs. Patrols from the Brigade de la protection des Mineurs must be increased.

At the community level, the situation requires the creation of child protection committees, with appropriate monitoring, and a greater awareness among parents and childcare workers. Consulting children and the youth also constitutes a fundamental element in this response, ensuring that their ideas and contributions are reflected in child protection related policies.
VII. CONCLUSION
2010 was the year of unforeseeable and unprecedented events for Haiti. The country’s capacity and that of its international partners, including the United Nations, to respond simultaneously to multiple crises was tested in extreme situations. The results presented in the first part of this report show the magnitude of the humanitarian assistance deployed this year in support of government’s efforts. The humanitarian engagement will remain very important in 2011, notably to continue reducing the cholera-related mortality rate and protecting the most vulnerable.

However, humanitarian aid is merely a part of the response required for Haiti. Humanitarian assistance does not generate the investments necessary to the recovery of the country, whose socio-economic indicators were already very low before the 12 January earthquake: a country with high mortality, poverty and unemployment rates; a country whose government and Rule of Law institutions remain weak.

Investments in the socio-economic recovery and in the energy and infrastructure sectors, investments to strengthen governance and the Rule of Law, and to renovate housing and revitalise urban planning will be critical for the years to come. From recapitalisation of the private sector to investment in microcredit and small and medium-sized businesses; from the establishment of transparent processes in public markets to the improvement of custom and taxation operations; from the reconstruction of destroyed communities to the creation of new communities and development poles, Haiti is confronted with a massive long-term recovery challenge. Meanwhile, additional financial support will be necessary. However, at the time of this report, only 25 per cent of the financial needs for the cholera response are covered. The fight against the epidemic will take up important resources throughout 2011, for the prevention or immediate treatment as well as for the structural improvement of the sanitation systems and protection of water sources.

Despite some notable progress, for the most part, recovery efforts remain barely visible to Haitians in 2010. As this report underlines, challenges for 2011 remain enormous. The return or voluntary relocation of displaced populations must be accelerated, by undertaking difficult structural reforms, such as the one related to land tenure, and to create long-term economic opportunities for the poorest. These efforts must be undertaken in a context of political transition at the end of the current electoral process. Almost ten months after the New York conference, over 40 percent of the reconstruction funds pledged have been disbursed. Donors must continue to fulfill their commitments for the government and development partners to accelerate Haiti’s recovery in 2011, according to the strategic priorities defined by the Interim Haiti Recovery Commission, at the December 2010 meeting. These commitments depend on several factors: credible electoral results, a smooth transition to a new government, the visibility of recovery efforts and the continued support of the international community to Haiti’s long-term reconstruction and development.

The United Nations in Haiti remains determined to support Haiti’s recovery, to help existing Haitian institutions and capacities within the public sector and beyond, to contribute to the strengthening of the country’s governance and security and to support a decentralisation and development process that enables gender equality and gives the most vulnerable access to basic social protection.
VIII. ANNEXES
### A. Status of the pledges made by the 30 main donors at the 31 December 2010 - as of November 2010 (million dollars US)

**Office of the Special Envoy for Haïti**

<table>
<thead>
<tr>
<th>Donors (2)</th>
<th>Pledges in 2010 and 2011</th>
<th>Pledges in 2010 (3)</th>
<th>Pledge situation for programmes in 2010 (4)</th>
<th>Percentage of pledges disbursed in 2010</th>
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<tr>
<td></td>
<td>Total amount of pledges in 2010</td>
<td>Debt relief</td>
<td>Programme</td>
<td>Amount Pledged (5)</td>
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Office of the Special Envoy for Haiti (continued)
B. Funds received for the cholera response—including in the 2011 Flash Appeal for Haiti (as of 21 December 2010)

**Cholera in Haiti: Funding and Needs** (as of 21 December 2010)

**Consolidated Appeal 2011**

Total requirements for cholera

174 millions

Percented funded

25%

What can be done with:

- **$15**
  - Personal hygiene kit

- **$250,000**
  - Cholera supplies to meet the needs of 50 CTCs with 50 beds each for a week

- **$750,000**
  - Cholera supplies distributed by PROMESS* to Government and Non-Governmental Organizations since 20 October.

- **$1 million**
  - Cost of one CTC with 200 beds for the first three months

**Staff needed to support one CTC:**

- **With 200 beds:**
  - 9 doctors
  - 45 nurses
  - 80 support staff

- **With 100 beds:**
  - 6 doctors
  - 24 nurses
  - 40 support staff

- **With 50 beds:**
  - 4 doctors
  - 12 nurses
  - 12 support staff

- **Creation date:** 21 December 2010
- **Glide number:** EP-2010-000210-HTI
- **Sources:** FTS, PAHO/WHO, IOM.
- **Feedback:** ocha.haiti.im@gmail.com  http://ochaonline.un.org  www.reliefweb.int  http://haiti.humanitarianresponse.info

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*Cholera Treatment Unit (UTC)*

A health centre, a mobile clinic or hospital that has set up a space (tent or room within the structure) to treat cholera patients. The UTC has capabilities in oral and intravenous rehydration. Capacity: 2-20 beds

Open: 12 hours minimum

*Cholera Treatment Centre (CTC)*

A centre established to treat cholera patients. Ideally, separate tents or rooms are devoted to oral rehydration therapy, intravenous treatment and convalescence. It has the capacity to treat pulmonary oedema.

Capacity: 40-300 beds

Open: 24 hours a day, seven days a week

**Requirements for cholera by sectors**

- **Water and Sanitation:** Funded 19%
- **Health:** Funded 22%
- **Coordination and Support Services:** Funded 55%
- **Agriculture:** 0%
- **Education:** 0%
<table>
<thead>
<tr>
<th>ACRONYMS</th>
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<tbody>
<tr>
<td>ACTED</td>
<td>Agency for Technical Cooperation and Development</td>
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<td>BPM</td>
<td>Brigade de la protection des Mineurs – Brigade for the Protection of Minors</td>
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<td>CEP</td>
<td>Conseil Électoral Provisoire – Provisional Electoral Council</td>
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<td>Centre d’Opérations d’ Urgence – Emergency Operations Center (EOC).</td>
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<td>DAP</td>
<td>Direction de l’Administration Pénitentiaire – Penitentiary Administration Management</td>
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<td>DPC</td>
<td>Direction de la Protection Civile – Civil Protection Directorate</td>
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<td>Fondation pour la Santé Reproductrice et l’Éducation Familiale – Foundation for Reproductive Health and Family Education</td>
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<td>FPU</td>
<td>Formed Police unit</td>
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<td>MTPTC</td>
<td>Ministère des Travaux Publics, Transports et Communications – Ministry of Public Works, Transport and Communications</td>
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<td>Non-governmental organisation</td>
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<td>Office for the Coordination of Humanitarian Affairs</td>
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<td>Pan American Health Organisation</td>
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