

## Haiti

---

### Executive summary

Political stability increased in 2017, but Haiti continued to face multiple development and humanitarian challenges. Access to basic social services was a daily struggle, especially for the most vulnerable. Political uncertainty came to end with a new president elected in November 2016 and assuming power on February 2017. Municipal and community-level elections took place in January 2017.

In October 2017 the United Nations Stabilization Mission in Haiti (MINUSTAH) formerly ended its mandate and a new mission, United Nations Mission for Justice Support in Haiti (MINUJUSTH) began operations, focusing on justice support and rule of law. The Government took a surprising step towards reviving the Armed Forces through a plan to create a 3,000-soldier force over the new president's five-year term.

Haiti still has acute humanitarian needs. Many communities in the southwest continue to suffer from the impact of Hurricane Matthew in 2016, especially in relation to shelter and agriculture. UNICEF Haiti officially ended its humanitarian operation at the end of 2017, closing its Grand Anse office. The UNICEF Les Cayes office remained open but significantly scaled down, as UNICEF Haiti transitioned to development programming in hurricane-affected areas.

In 2017 Haiti narrowly missed a direct landing by hurricanes Irma and Maria. Flooding damage occurred in agricultural areas on the northern coastline. In coordination with the UNICEF Regional Office, UNICEF Haiti responded to needs as the area declared a Level 2 emergency. Deportations from the Dominican Republic (DR), following a 2015 constitutional decision, continued to require reinforcement of UNICEF's child protection response with partners along the frontier. UNICEF Haiti, with the Institut du Bien-Etre Social et de la Recherche (IBESR), assisted over 834 unaccompanied children (269 girls/565 boys), crossing into Haitian territory from the Dominican Republic since April.

Cholera response witnessed an extraordinary year with suspected cases dropping to their lowest levels since the beginning of the epidemic. In 2017, there were 13,747 and 159 deaths, down 67 per cent from 2016. The decline was largely attributable to increased resources for rapid response teams and a focused communication campaign in the most vulnerable department (West, which includes Port-au-Prince) and locations (e.g., transport hubs, market places). The special effort also capitalized municipalities' engagement. To maintain the momentum towards cholera elimination, continued multilateral and governmental engagement is required. In late 2017, the United Nations Deputy Secretary General and Special Envoy visited Haiti to witness progress on cholera and water, sanitation and hygiene (WASH) and to support fundraising.

UNICEF Haiti launched its new country programme for 2017. The UN Development Assistance Framework (UNDAF) was officially signed in 2017. The new country programme document (CPD) put significant emphasis on intersectoral approaches, particularly between child protection, health, education and WASH. Some 71,624 people in rural and urban areas gained access to an improved source of water supply, 13 schools were certified as 'hygiene-friendly

schools', and 29,820 additional people gained access to improved sanitation. The education programme, promoting early grade reading and writing, benefited more than 23,000 children. Evidence-based departmental health plans were adopted and significant achievements were realized in modernizing the cold chain through solar-powered fridges in remote areas. However, preliminary results from the 2017 'Enquête Mortalité, Morbidité et Utilisation des Services' (EMMUS), a demographic and health survey (DHS) equivalent, underscored the need to improve routine vaccination coverage. By December 80 per cent of children infected with HIV had received treatment, and 30,000 individuals and pregnant women had been trained on safe reproductive health practices. Around 10,000 mothers received counselling on infant and young child feeding (IYCF).

UNICEF Haiti launched an innovative and holistic programme aimed at protecting and reducing the number of children in placement outside their biological family. An internal gender task-force was established to ensure gender mainstreaming within UNICEF's programmes. A juvenile justice referral system was established in two departments: 150 persons at risk of violence received multi-sectoral support services; 11,000 people were reached by UNICEF Haiti-supported programmes aimed at increasing children's capacity to identify, prevent and/or report violence; and 42,000 children accessed to psycho-social support activities.

UNICEF Haiti supported the sixth EMMUS, which collects crucial social indicators. A standardized monitoring and assessment of relief and transition (SMART) survey was conducted in hurricane-affected areas. While acute malnutrition rates were lower than expected, malnutrition continues to be a major concern, not only in SouthWest but also in pockets nationwide.

UNICEF Haiti was maintained at capacity, with 113 staff members (compared to 84 before Hurricane Matthew) to cope with regular and emergency programming. UNICEF Haiti successfully delivered one of the first multi-agency trainings on the harmonized approach to cash transfers (HACT).

## Humanitarian assistance

This year was marked by a very intense hurricane season; two major hurricanes (category-5 Irma and Maria in September) devastated many islands of the Caribbean. Haiti was mostly spared: three departments (Artibonite, Nord-East and West) were affected by localized flash floods during Hurricane Irma, including 25 schools. In response, UNICEF Haiti rehabilitated five water networks that supply safe water to 12,500 people. Despite the higher rainfall compared to previous years and heavy rain due to Irma and Maria, 2017 was the first year since the introduction of cholera in Haiti in 2010 and the launch of alert-response strategy in 2013, to experience consistent control of the epidemic throughout the year, including during the high-transmission period (September-December).

In preparation for this hurricane season, UNICEF Haiti supported an update of the national contingency plan and the sectoral plan of the Ministry of Education (MoE); supported the thematic working groups of the Division of Civil Protection (DPC)/OCHA and the establishment of a national "communication with communities" mechanism; and the diffusion of live-saving messages through radio and other communication channels.

UNICEF Haiti focused its preparedness efforts on strengthening the capacity of the six departments most exposed to floods and hurricanes, in order to provide a timely response that meets the immediate needs of the most vulnerable children, women and men. Also, UNICEF

Haiti put in place multi-sectoral contingency stocks covering a population of 50,000 persons, with life-saving items to meet the key needs of children and their families in the areas of nutrition, health, WASH, education and protection. The stocks were pre-positioned at six strategic sites outside Port-au-Prince: Jacmel (South-East), Cayes (South), Cap-Haitien (North), Port-de-Paix (North-West), Jeremie (Grande Anse), Gonaives (Artibonite).

During the year under review, Haiti also continued its recovery from category 4 Hurricane Matthew (October 2016) in the southern part of the country.

In the WASH sector, especially in the framework of post-Matthew rehabilitation programmes, nearly 1,233,500 persons were provided with safe water through water treatment, water trucking or chlorination points, 450,000 people were sensitized about emergency hygiene practices, 5,800 hygiene kits were distributed and 229 hand-washing stations installed.

Furthermore, with UNICEF's support, more than 11,000 children under five years were treated for severe acute malnutrition (SAM), 8,390 for moderate acute malnutrition (MAM) and 37,000 children between 6 and 23 months were provided with micronutrient powders. Thanks to health interventions, more than 23,000 children under one year of age received routine vaccinations, and all 90 cold chain systems were installed as planned.

For the child protection sector, over 4,300 unaccompanied and separated children received interim care and family reunification support, and more than 42,000 children benefited from recreational and psycho-social support activities.

In addition, over 98,000 children aged 5-14 years received learning materials, and close to 90,000 children aged 5-14 years benefited from the rehabilitation and/or equipping of schools.

Finally, UNICEF Haiti reinforced its support to the Government of Haiti for controlling the cholera epidemic. Through its partners, UNICEF Haiti ensured 11,820 rapid responses and prevention activities against cholera, resulting in raising awareness among close to 900,000 people (including 108,000 children under five), disinfecting an estimated 73,000 homes, activating 413 emergency water chlorination points, distributing 21,000 stickers and 100,000 flyers with key messages on cholera. The total value of supplies donated by UNICEF Haiti was estimated at around US\$500,000. UNICEF's response to humanitarian needs will continue into 2018, while ensuring preparedness for future climate-related disasters.

## Equity in practice

The post-Matthew impact assessment showed a situation of extreme vulnerability for many households in affected areas. In addition to the destruction of their homes, many lost their cattle, which was their main source of income. Access to basic services has worsened due to structural damage, and parents were unable to buy school materials for their children. Even more worrying was the fact that one child out of 10 showed signs of malnutrition during this period. In such a context, it was obvious that there was a real risk of separation and abandonment of children, as a negative coping strategy. Also, adolescents might decide to leave their family with the hope of improving their lives elsewhere.

In response, UNICEF Haiti relied on an integrated approach to support the most vulnerable households, using nutrition as an entry point, while also covering child protection and education. The transition back to a development/resilience approach from a humanitarian response aimed to re-establish or set up child protection networks within trained communities that are able to

respond to protection risks, including for nutrition. The convergent approach paid specific attention to prevention from gender-based violence (GBV) and referral of cases, as well as parental education. It consisted of: (1) cash transfers (vouchers) to ensure access to productive assets and food rations; (2) medical assistance, management of malnutrition, school reintegration and other needs; and (3) preventing family separation.

In the area of immunization, UNICEF Haiti continued to implement the reach every district (RED) approach in targeted communes that are difficult to access or have low immunization coverage.

## Emerging areas of importance

UNICEF Haiti worked in four emerging areas: climate change, refugee and migrant children, early childhood development (ECD) and the Scaling-up Nutrition (SUN) movement.

**Climate change and children.** Haiti is classified as one of the countries most vulnerable to climate change. Therefore, UNICEF Haiti focused on addressing vulnerabilities related to climate change-induced disasters, such as the 2015 drought, Hurricane Matthew in late 2016 and Hurricane Irma in 2017. UNICEF included a disaster risk reduction (DRR) component in rehabilitation of water infrastructure, guided by the Sendai Framework Disaster Risk Reduction 2015-2030. UNICEF also contributed to creating secure, sustainable water sources and strategic boreholes in the most drought-affected areas of Haiti (South East, North West and Grand-Anse) and protected water sources damaged by hurricanes to increase their resistance to hydro-geological disasters.

**Refugee and migrant children.** Migration between the Dominican Republic and Haiti continued to expose children, who were on the move in search of better opportunities, to the risk of violence, abuse and exploitation. Since 2015 UNICEF Haiti and its partners have provided assistance to more than 2,500 unaccompanied children (1,109 in 2017, including 361 girls), 38 per cent of whom were identified at unofficial crossing points. Around 384 children received assistance to reintegrate in school and 192 to access birth registration services. Some 331 families were supported through income-generating activities for sustainable return of their children.

As a result, UNICEF Haiti expanded its programming strategies to encompass children at risk of migration and supported four interim care centres, also acting as community centres, to provide counselling, guidance and orientation to children and families. This programming integrated support to vulnerable families and children with access education and economic opportunities as well as civil registration.

**Nutrition.** UNICEF Haiti supported the annual SUN movement self-assessment through the participation by a Haitian delegation, led by the First Lady, to the annual SUN global conference in Abidjan (7-9 November 2017). This important event was a key moment that allowed members to take stock of progress and challenges, share innovations, lessons learnt and experiences in reducing malnutrition. During this mission the First Lady of Haiti, highly honoured by the assembly, committed to be the “Champion of Nutrition” for the SUN movement in Haiti.

**Early childhood development (ECD).** Within its new country programme 2017-2021 (CP), UNICEF Haiti fosters interventions based on multi-programme synergies, in line with the new UNICEF ECD global programme guidance issued in early 2017. This is an important area of work for UNICEF Haiti, as nearly 70 per cent of all children under five years in the country live in

poor households; infant mortality and malnutrition rates are still the highest in the region; and other multiple risk factors, such as poor childrearing practices, have a negative impact on small children.

UNICEF Haiti logged several important achievements related to ECD in 2017. The Office resumed its advocacy for implementation of the 2012 national ECD policy, which fosters inter-sectoral approaches to care for children under six. Moreover, the MoE developed a new parental education programme with technical assistance from UNICEF Haiti and other partners, such as the Inter-American Development Bank (IADB) and the Government of Chile. This programme is scheduled to be piloted in 2018. The ECD action network, ECDAN, was launched in Haiti in mid-2017 by the IADB, with support from UNICEF. This network aims to: convene and coordinate organizations and build alliances at the national and local levels; develop a common voice on ECD; and prioritize engagement with parents and the use of innovative approaches and global goods (e.g., develop tools and standards of practice, use of innovation for scaling-up, quality and efficiency). In addition, UNICEF added value on preschool by playing an instrumental role in developing the first-ever preschool curriculum, and supporting the MoE to pilot the curriculum at selected public preschools in North East Department.

With leadership by the child protection section, community and parental practices to protect and nurture children were selected as major entry points for tackling ECD in Haiti, while promoting convergent approach among programme components to reduce the incidence of certain forms of violence against children.

## Summary notes and acronyms

AMP - annual management plan  
C4D – communication for development  
CATS – community approach to total sanitation  
CERF – Central emergency response fund  
CLTS – community-led total sanitation  
CP – Country programme  
CPD – Country programme document  
DCT – direct cash transfer  
DFID – Department for International Development  
DHS - Demographic and health survey  
DINEPA – Direction Nationale de l’Eau Potable et de l’Assainissement  
DPC - Division of Civil Protection  
DR – Dominican Republic  
DRR – disaster risk reduction  
ECD – early childhood development  
ECHO – European Civil Protection and Humanitarian Aid Operations  
EMMUS – EnqueteMortalité, Morbiditéet Utilisation des Services  
FAO - Food and Agriculture Organisation  
GAVI - Global Alliance for Vaccines and Immunization  
GBV- gender-based violence  
HACT - harmonized approach to cash transfers  
HIV – Human immunodeficiency virus  
HR – Human resources  
IADB - Inter-American Development Bank  
IBESR – Institut du Bien-Etre Social et de Recherches  
ILO – International Labour Organisation

IOM – International Organization for Migration  
 IYCF – infant and young child feeding  
 KAP – knowledge, attitudes, practices  
 LTA – long-term agreement  
 MAM - Moderate acute malnutrition  
 MINUSTAH – United Nations Stabilization Mission in Haiti  
 MINUJUSTH - United Nations Mission for Justice Support in Haiti  
 MOE– Ministry of Education  
 MoH– Ministry of Health  
 NGO – non-governmental organization  
 NICU – neonatal intensive care unit  
 OCHA – Office for the Coordination of Humanitarian Affairs  
 OFDA – Office of US Foreign Disaster Assistance  
 ORE – Other resources-emergency  
 ORR – Other resources-regular  
 PMTCT – prevention of mother-to-child transmission (of HIV)  
 PSEA - prevention of sexual exploitation and abuse  
 REACH – renewed efforts against child hunger and undernutrition  
 RED – Reach every district  
 RR – Regular resources  
 SAM – severe acute malnutrition  
 SDG – Sustainable Development Goal  
 SMART – Standardized monitoring and assessment of relief and transition  
 SRM - Security risk management  
 SUN – Scaling-Up Nutrition  
 UN – United Nations  
 UNAIDS – Joint United Nations Programme on HIV and AIDS  
 UNDAF – United Nations Development Assistance Framework  
 UNDSS – United Nations Department of Safety and Security  
 UNESCO - United Nations Educational, Scientific and Cultural Organization  
 UNFPA – United Nations Population Fund  
 UNHCR – United Nations High Commissioner for Refugees  
 UNICEF – United Nations Children’s Fund  
 UNDP – United Nations Development Programme  
 UNFPA - United Nations Population Fund  
 USAID – United States Agency for International Development  
 WASH – water, sanitation and hygiene  
 WB – World Bank  
 WFP – World Food Programme  
 WHO - World Health Organization

## Capacity development

Thanks to the translation of the manual *Facts for Life* into Haitian Creole, UNICEF supported the establishment of over 120 health clubs in 11 communes and trained their participants in key practices and behaviours related to health. The clubs function with support from some non-governmental partners and civil society organizations, such as religious and women’s groups. .

In addition, UNICEF Haiti launched this year a pilot initiative to strengthen adolescents’ personal leadership and resilience in a post-disaster context. In this framework, animators from 18 non-governmental organizations (NGOs) working with adolescents were trained in animation



techniques and key concepts related to self-esteem and personal leadership, with the purpose of setting up a network of skilled professionals capable of applying the concepts themselves and, in turn, training other animators to promote resilience among youth and adolescents.

UNICEF Haiti also began to support the U-Report platform, with a view to enhancing participation by youth and their communities in social dialogue on key thematic issues and obtaining their opinions on important subject matters concerning youth.

Following the recommendations of the gender review during the previous programme cycle, UNICEF Haiti organized training for staff and partners on gender-analysis frameworks, with a view to providing them with the necessary tools for strengthening the mainstreaming of gender across all programme components.

Other capacity development activities at the community level included: child protection (training of IBESR agents in prevention of gender-based violence, support to foster families along the border with the Dominican Republic; education (training parents to participate in school management); WASH (promotion of women's participation in water point management committees; and expansion of the community-led total sanitation – CLTS–approach).

### **Evidence generation, policy dialogue and advocacy**

UNICEF Haiti is committed to generating evidence to inform decision-making and orient its programming. In 2017, it provided financial and technical support for development of the EMMUS-VI, as well as technical assistance for the population census. Both of these key sources of information are expected to be published or carried out in 2018.

UNICEF Haiti formed partnerships to conduct research with Assistance Publique des Hopitaux de Marseille (APHM) on cholera, as well as Columbia University on violence in households (Thrive Project). At the local level, UNICEF Haiti is involved with Universite Notre Dame d'Haiti and Universited'Etatd'Haiti on collaborative research on protection and cholera epidemiological surveys.

In 2017 UNICEF provided technical support to the Ministry of Health (MoH) to conduct SMART nutrition surveys in 20 food-insecure communes of Grand-Anse and South departments. These surveys were co-funded by UNICEF, WFP and the Humanitarian Coordinator/Resident Coordinator's office, and provided a snapshot of the nutrition situation ten months after the landing of hurricane Matthew on October 4, 2016. Survey results were released in November 2017 and used to inform MoH nutrition programming as well as UNICEF and WFP immediate and longer-term work plans. This complements UNICEF global nutrition evaluation on stunting (for which Haiti was one case-study in a five-country analysis), which made concrete recommendations and contributed to shaping UNICEF Haiti's nutrition programming in early 2017.

Finally UNICEF Haïti entered in a partnership with McGill University to support the MoHto conduct a national iodine survey. Long-awaited legislation on food fortification, including mandatory salt iodization, became effective in February 2017. Survey findings will inform the development of a national action plan for sustained elimination of iodine deficiency disorders and provide a baseline reference for surveillance.

### **Partnerships**

The year under review was the first year of implementation of UNICEF Haiti's new Country Programme. A total of 106 partnership agreements with about 90 partners (including 23 governmental institutions and 65 NGOs (32 international and 33 local) were signed for a total of approximately US\$33 million.

As an active member of the UN country team, UNICEF Haiti promoted joint-strategies on protection and health, such as the multi-sectoral teams for post-Hurricane Mathew response, which decentralized access to health services and strengthened community protection networks. Moreover, UNICEF Haiti was actively involved in UN efforts to support roll-out of the SUN movement in Haiti, in partnership with the World Food Programme (WFP), World Health Organization (WHO) and Food and Agriculture Organization (FAO).

In close collaboration with the Joint United Nations Programme on HIV and AIDS (UNAIDS), UNICEF Haiti supported the 'All In' global initiative targeting the elimination of HIV among adolescents by 2030. In 2017, UNICEF Haiti also promoted joint-programming with the International Labour Organization (ILO) and the UN Development Programme (UNDP) on rule of Law activities in support of the departing MINUSTAH (UNICEF Haiti oversaw the juvenile justice components). Additionally, UNICEF Haiti led the cholera taskforce set in motion in 2016 to implement the new UN approach to cholera treatment and prevention.

Another noteworthy partnership between UNICEF, UNFPA and UNDP resulted in a one-week interagency training on HACT in December 2017 to discuss differences in implementation, challenges and improved joint planning for 2018.

### **External communication and public advocacy**

With UNICEF's new slogan 'For Every Child' and the SDGs as a common thread, UNICEF Haiti pursued a positive narrative to emphasize programmatic results and local empowerment. The voices of staff, partners and local communities were positioned front and centre. In partnership with the UN Communication Group, 'Empowerment' was used to link celebrations of International Youth Day, Day of the Girl Child, and Day of the Convention on the Rights of the Child. The latter served as the soft start for a campaign against violence.

Other 2017 activities included the dissemination of a multimedia marketing package for UNICEF Haiti's new Country Programme; ongoing interactions with youth and social influencers to gather voices and stimulate participation; the extension of UNICEF Haiti's online outreach, including launch of an interactive map featuring its work across the country; and the introduction of a dedicated cholera website to provide an online go-to place for the public, donors and researchers.

UNICEF Haiti's page on the global website was revamped. To inspire hope for Haiti five new videos featuring UNICEF priorities, through the eyes of Haitian heroes, were produced, along with an album featuring renowned Haitian artist Jean Jean Roosevelt.

### **South-South cooperation and triangular cooperation**

The South Department coordinator of Haiti's national child protection agency attended training in Dakar on coordinating child protection in emergencies, with support from UNICEF. Following the training, a debriefing was held for child protection working group members in the South – one of the two departments most affected by Hurricane Matthew—and training aimed at reinforcing coordination capacity and use of harmonized coordination tools was rolled out for other child protection working groups (three of 10 departments trained by end-2017).



## Identification and promotion of innovation

UNICEF Haiti launched an important and innovative ECHO-funded nutrition education programme, using nutritional screening as an entry point to identify vulnerable households and prevent negative coping mechanisms such as family separation, child abandonment and child labour. In a mutually supportive way, the intervention leveraged health actors' access and optimized the reach and impact of violence prevention strategies, as well as strengthening community-level protection networks.

Additionally, UNICEF Haiti, UNDP and UNFPA held a three-day interagency training on HACT, to reinforce joint programming and partnership management– the first such training to be held in the region.

One of UNICEF Haiti's flagship greening projects was the placement of a 130 kilowatt solar power plant on the roof of its building. By maximizing the use of renewable energy, UNICEF will drastically reduce both daily energy costs and greenhouse gas emissions.

In 2017 Haiti progressed in the development of a U-Report platform, designed to empower people to speak out on issues that they care about in their communities, encourage citizen-led development and create positive change. U-Report relies on SMS and uses the established open source platform, RapidPro, to manage communications by U-Reporters. U-Report should be operational in West, South and Grande Anse departments in 2018. UNICEF and partners aim to recruit 10,000 young people in the first year and then to gradually expand U-Report nationally on various socially relevant themes identified by the youth, such as violence, cholera and disaster preparedness.

## Support to integration and cross-sectoral linkages

UNICEF Haiti implemented an intersectoral approach in much of its work, such as incorporating education strategies for the most vulnerable children into work on migration, rehabilitation of WASH infrastructure and hygiene promotion in schools, in coordination with the education section. The Office also built links with the shelter sector to incorporate approaches enabling vulnerable households to access necessary shelter items through vouchers, as well as integrating the shelter sector's vulnerability criteria to include children's needs and mitigating the risk of family separation.

UNICEF Haiti strengthened alliances with the health sector, piloting a training module seeking to enhance health actors' capacity to identify and adequately refer protection cases, using nutrition as a window. These initiatives also contributed to improved cooperation between the MoH and decentralized child protection services. At the national level the child protection agency was also able to negotiate waivers for medical insurance of children in institutions.

Moreover, evidence generated on school inclusion and child labour was disseminated among different sectors to highlight the different levels and intersection of needs, and in support of advocacy for increased inter-ministerial collaboration. Education and social affairs focal points attended together training on education strategies to reduce child labour, which feeds into the ongoing UNICEF-ILO programme to prevent and respond to child labour.

Results from the 2012 violence against children survey generated new learning on help-seeking behaviours, which informed dialogue and cooperation with justice, police and health counterparts on standards of care and quality of services.

## Service delivery

Throughout 2017 UNICEF Haiti continued to keep in mind the importance of strategy adaptation, both in terms of offer and demand, to improve service delivery to beneficiaries.

For instance, the cholera team placed great emphasis on meeting the needs of the affected population, both in terms of quantity and quality of response. On the offer side, a strong monitoring system of partners' responses, updated weekly, was put in place, allowing the team to gather information on quantity (percentage of suspected cholera cases responded to), timeliness (delay between alerts and responses), quality (size of the intervention, number of distributed items), and other data. These data were analysed on demand (at least once a month) during meetings within UNICEF and with partners, and allowed rapid adaptation of strategy and geographic redeployment of teams if needed.

On the demand/recipient side, strong focus was placed on communication for development (C4D) strategies to gauge the number of persons reached by sensitization activities (more than 1,150,000 reached in 2017, up 25 per cent from 2016), but also the quality of the diverse activities (street theatre, sensitizations at marketplaces and other key public places). A change in strategy was also instituted, with the creation of community engagement teams that closely followup in communities where cholera alerts were detected to ensure that hygiene and cholera prevention messages were well understood. In addition, reinforcement of post-distribution monitoring was underway in late 2017, to better understand the strengths and weaknesses of the ongoing response and adapt packages and messages as needed.

## Human rights-based approach to cooperation

Building on 2016 recommendations from the Committee on the Rights of the Child, UNICEF Haiti engaged in a dialogue to ensure that each ministry is aware of its responsibilities for implementing these recommendations. Initiated with the national child protection agency, these efforts mobilize all sections to support the CP's overall human rights focus. Programme integration also provided opportunities to address the intersection of rights and ways in which they are mutually supportive in the fields of legal protection, the right to health, education and a safe and nurturing family environment.

UNICEF Haiti is documenting the use of complaints mechanisms, in coordination with government partners, to reinforce the integration of rights-holder's perspectives and support dialogue between duty-bearers and rights-holders. Programme integration strategies focused on addressing social exclusion; which built on UNICEF's comparative advantages in multi-sectoral reach in three main geographical areas of convergence: Center, Artibonite, North East.

Based on the 2016 gender review, UNICEF Haiti also invested time and resources in training staff and partners in gender-sensitive programming, to better address gender vulnerabilities and systemic discrimination. UNICEF supported efforts by 767 female-headed households to achieve financial autonomy and inclusion. Joint programming with UNDP, through an interagency justice programme, provided an opportunity to reframe juvenile justice as part of a broader human rights issue; 81 children were reached through this initiative.

A Canada-funded joint-programme with the ILO, addressing child labour, facilitated joint advocacy for adopting ILO Convention 189 on domestic labour, as well as for decent access by youth and women to safe, dignified, non-discriminatory and sustainable sources of income –

including access to non-traditional areas of work for women and girls. In addition, use of the renewed efforts against child hunger and undernutrition (REACH) methodology for social outreach to youth enabled 400 youth to engage in rights advocacy and mobilization.

Since Haiti has one of the highest teen pregnancy rates in the region, UNICEF advocated for adoption of the child protection code. Two workshops with the MoH highlighted lack of adolescents' access to information on sexual and reproductive rights; a concern shared by UNFPA. The code incorporated provisions to increase access for youth. Pending its adoption, UNICEF Haiti engaged in training health providers on youth-sensitive care.

## Gender equality

Regarding gender-responsive adolescent health promotion, 13 of 42 supported schools were certified as 'hygiene-friendly', with secure sex-separated latrines and special consideration for menstrual hygiene management. The global 'All In' initiative, which aims to accelerate reductions in AIDS-related deaths and new HIV infections among adolescents, was implemented through HIV prevention efforts targeting adolescents through partnered trainings and communication initiatives with local NGOs. Youth-targeted prevention messages were broadcast mostly via radio and social media. A pilot-project aimed at strengthening adolescents' resilience and capacity to face emotional challenges, was also launched. Eighteen mentors from partner organizations that support marginalized adolescents (boys and girls) attended a first round of training-of-trainers combining theoretical knowledge with practical exercises on adolescent personal leadership, emotional intelligence, post-traumatic stress, mourning management and issues related to puberty. About 500 adolescents benefited from this pilot initiative.

Gender-based violence was addressed as a cross-sectoral element within UNICEF's protection programme. However, in response to Hurricane Matthew, it was addressed through an integrated project where child survivors and those at-risk of gender-based violence were identified through nutrition screening at mobile clinics. A total of 362 survivors for gender-based violence (adults & children) were referred through the project. Financial empowerment of 291 mothers also contributed to mitigating or preventing vulnerability to gender-based violence.

Following the 2016 gender review recommendations, UNICEF Haiti created a gender taskforce to ensure coherence of gender mainstreaming within its programmes and monitoring of its gender strategy's implementation. Also, 123 programme staff and key partners attended training on gender integration tools that highlighted both international standards and national references, with case studies from ongoing activities.

Equal services were offered to children of both sexes in health and nutrition; and gender parity was preserved in the school. A teacher's code of conduct addressing violence in schools against boys and girls was finalized and approved. Within the WASH sector, special focus was placed on transitioning from women's integration to effective women's participation within local WASH committees. Concrete efforts are ongoing through two projects in which gender equality is being integrated in various documents and tools.

## Environmental sustainability

As part of its 'Going Green' initiative, UNICEF Haiti committed to increasing its contribution to environmentally sustainable solutions, to meet both the Secretary General's objective to become carbon neutral by 2020 and UNICEF's goal of reducing greenhouse gas emissions by 10,000 tons by 2021.

One of the flagship greening projects is placement of a 130 kilowatt solar power plant on the office roof, which will help to reduce drastically UNICEF Haiti's daily energy use and greenhouse gas emissions. The surplus energy produced during weekends or UN holidays will be carried forward as energy credits, helping to offset the energy consumed from the national electricity company grid. With support from UNICEF Headquarters' Greening Team and through a mix of greening and accessibility funding, UNICEF Haiti contracted a private firm to install the solar plant in the first quarter of 2018. This power source is expected to save approximately 200 tons of carbon dioxide emissions annually, representing 36 per cent of UNICEF Haiti's CO2 emissions in 2015.

Lastly, UNICEF will contribute to changing the narrative on Haiti and demonstrating its potential to recover from environmental and natural disasters and implement sustainable solutions, showing that it is possible to go green even in the most difficult operating environments. A clean energy system powered by solar energy on UNICEF's premises will contribute to a healthier work environment for staff.

### **Effective leadership**

UNICEF Haiti underwent an internal audit in April-May 2017 which identified risk in: field office management, funding management, work planning, prevention of sexual exploitation and abuse (PSEA) and partnerships, including HACT assurance activities and cash-transfers.

Regarding field office management, UNICEF Haiti defined performance measurement, reporting mechanisms and information flows to manage outposts and zone offices. The annual management plan (AMP) was revised to include reporting mechanisms between the two zonal offices and the three outposts. Exit strategies for the two zonal offices were established, as well as key indicators and milestones.

For funding management, mechanisms for collecting and reporting beneficiary data were reflected in the Office's humanitarian action for children appeals, and part of the funding shortfall for loan reimbursement to the Central Emergency Response Fund (CERF) was addressed. UNICEF Haiti is currently updating its resource mobilization strategy, including an integrated approach to addressing key underfunded programme results.

With reference to work planning, UNICEF Haiti enhanced results-based budgeting by ensuring that all workplans provided detailed activity, planning and budgets. Also, appropriate milestones were defined to assess annual progress toward achievement of planned results.

For PSEA, a committee was convened by the UN Country Team, and UNICEF Haiti continued to advocate for regular meetings and effective performance. UNICEF Haiti also introduced a set of tools to ensure that partners adhere to PSEA standards and are monitored. Guidelines for setting up complaint and feedback mechanisms were developed.

On programme assurance activities, UNICEF Haiti organized a three-day interagency training on HACT, together with UNDP and UNFPA. Monitoring of cash transfer and liquidation transfers' reimbursements and liquidations was undertaken. Training on HACT procedures and related forms was conducted in all ten departments during 2017 with new and current partners.

### **Financial resources management**

Key performance indicators are regularly monitored and discussed during monthly coordination management and programme meetings. Cash transfers to partners and HACT implementation status are also reviewed during programme meetings. The composition of statutory committees was revisited as needed, taking into consideration turnover of staff.

In this first year of the 2017-2021 CP, over US\$43 million were utilized (both ORR et ORE). Grant utilization at the end of the year stood at 100 per cent for RR and BMA, 92 per cent for ORR and 99 per cent for ORE, respectively, for a global resource utilization of 97 per cent for all UNICEF Haiti resources in 2017.

In terms of financial resources management, Haiti is often seen as a very high-risk environment. Nevertheless, of all 92 UNICEF partners, only 3.3 per cent are either high-risk or significant-risk partners (3 for each category; 37.7 per cent are moderate-risk partners (34); 26.6 per cent are low-risk partners, and 31 per cent were not assessed (28). UNICEF Haiti has 78 active partners that received transfers in 2017, of which 38 received more than US\$100,000. In 2017 UNICEF Haiti conducted, through an independent firm, 19 micro-evaluations and 13 audits.

Following the 2016 Matthew emergency, the Office made a strategic choice to resort to third-party monitoring in order to alleviate the workload of an already overstretched team. Of 47 planned spot-checks in 2017, UNICEF Haiti staff conducted 21. An additional 15 were conducted by a third-party. UNICEF Haiti conducted over 200 programmatic visits in 2017, significantly more than the required minimum.

Following the internal audit visit in May 2017, UNICEF Haiti put in place a risk-based cash transfer analysis, including close monitoring of HACT assurance activities, and a taskforce to oversee partners considered to pose high or significant risks.

## **Fundraising and donor relations**

At the beginning of 2017, US\$24.4 million in ORR and US\$25.4 million ORE were available, including carry-overs, which enabled the transition to recovery after Hurricane Matthew. In 2017, US\$28.2 million was mobilized (US\$14.9 million for regular programmes and US\$13.2 million for emergencies).

Despite successful resource mobilization, several sectors remain underfunded, notably health and nutrition, for regular programmes, and all sectors for emergency programming. UNICEF received US\$924,000 to respond to multi-sectoral needs arising in Haiti after Hurricanes Irma and Maria. Additional funds are needed to scale-up cholera field surveillance and quick response and to consolidate 2017 gains.

A resource mobilization strategy is being developed to guide fundraising efforts, providing an analysis of the funding situation and strategies for the remaining Country Programme period and the next; it will be available in January 2018.

The upsurge of funding in late 2016/early 2017, following Hurricane Matthew, created a heavy reporting workload. A total of 62 donor reports were due, representing a 32 per cent increase over previous years. A resource mobilization and reports specialist was recruited to ensure the quality and timeliness of donor reporting: all reports were submitted on time for the first time in the last four years. As 2017 was the first year of the new country programme cycle, new areas for resource mobilization, such as ECD and birth registration, were included.

UNICEF Haiti's main donors include: the UK Department for International Development (DFID), ECHO, CERF, Office of US Foreign Disaster Assistance (OFDA), United States Agency for International Development, the governments of Australia, Canada, Italy, Japan, New Zealand, Norway, Spain and Sweden, and National Committees for UNICEF from Belgium, Canada, Denmark, France, Germany, Ireland, Japan, the Netherlands, Spain and the United States.

## Evaluation and research

During 2017 UNICEF Haiti closely followed up on three evaluation management responses, two of which related to evaluations performed and completed in 2016 (WASH program in Artibonite department and Kore Fanmi programme) and one in 2015 (cholera).

Regarding cholera interventions, 15 out of 17 actions were completed as planned and two were ongoing, so the management response was closed. As a lesson learned from the cholera evaluation, it is important that the evaluation team formulate specific and time-bound recommendations, with clear responsibilities in order to be monitored and acted upon in the short-term.

With respect to the two 2016 evaluations, 29 actions were planned to address evaluation recommendations; by December 2017, 14 actions had been completed and 15 were ongoing. Some actions on the Kore Fanmi management response were delayed and others are outside of UNICEF Haiti's scope of work or control.

In addition, UNICEF's Evaluation Office conducted an evaluation of global stunting-reduction efforts. This evaluation consisted of a desk review of documents from 24 countries, with in-depth case studies in six countries, including Haiti. As a result, UNICEF Haiti developed an evaluation management response tailored to the Haiti case studies' recommendations, with a total of 13 actions planned. By end-year, nine actions were completed and four were ongoing.

Finally, considering the amount of funds received in late 2016 for the humanitarian response to Hurricane Matthew, UNICEF Haiti planned an evaluation to assess its multi-sectoral humanitarian response in affected areas. The call for a proposal was published and the selection of a firm was underway at year-end; the evaluation is scheduled to start in early 2018.

## Efficiency gains and cost savings

In 2017 UNICEF Haiti realized efficiency gains and cost savings through two different types of initiatives: sharing of office space and greening of the office.

Following Hurricane Matthew in late 2016, UNICEF Haiti decided to create two temporary sub-offices in Jeremie and Les Cayes. In line with global UNICEF policy on efficiency through consolidation of administrative infrastructure, UNICEF Haiti concluded a memorandum of understanding (MOU) to share WFP-managed premises at Jeremie. Under this MOU, UNICEF Haiti was able to accommodate its field office staff with all-inclusive services, for a total annual savings of US\$120,000.

Pursuing this joint initiative, UNICEF Haiti agreed to share its premises in Les Cayes to serve as common premises for the World Food Programme and the United Nations Department of Safety and Security (UNDSS), which expressed their intention to achieve economies of scale by improving cost-effectiveness for the mutual benefit of participating UN agencies.



In relation to greening initiatives, in 2017 UNICEF Haiti contracted a firm to install in early 2018 a 130 kw solar power plant on the office roof, which should save about US\$80,000 annually on power consumption. The expected total financial gain by the end of the panels' life span (20-25 years) is an estimated US\$1,700,000 to US\$1,900,000.

With the strong push for green technologies in UNICEF, UNICEF Haiti has fully implemented the 'green printing' initiative, introducing several measures to optimize the use of office supplies (i.e., PIN codes for printer use, two-side configuration, paper recycling).

## Supply management

In 2017 more than half of the total value of procurement by UNICEF Haiti consisted of contracting for services, mainly for WASH surveys and rehabilitation and programme support. The trend toward reduced expenditure on goods and increased expenditure on services was consistent with previous years.

Total procurement of goods and services (including procurement services support to Government) was US\$9,297,925.66, a 6.5 per cent increase from 2016. Of this total, 30 per cent was directed for procurement of services (US\$3,169,144.68), a 15 per cent increase over 2016. As part of UNICEF Haiti's strategy to reduce transactional costs, increase efficiency and improve service delivery, strategic commodities and recurrent service groups were identified and long-term agreements (LTAs) were established.

One example was the US\$2 million contribution by the Gavi Alliance, which permitted the procurement of 677,100 single-doses of oral cholera vaccine and 164 solar refrigerators. The procurement of solar refrigerator was based on Gavi's cold chain equipment optimisation platform, which helps countries to improve efficiency and safety of vaccines by increasing their cold chain equipment's operating time, reducing running costs and improving temperature control.

A list of contingency stocks containing materials from all programme sections (education, child protection, nutrition, health and WASH) was established at the beginning of the year. UNICEF Haiti also moved to a new warehouse, more appropriate in terms of standardization and warehousing norms while also reducing overall leasing costs.

The UN procurement group was very active in 2017, effectively coordinating common procurement initiatives, and establishing common LTAs for services such as security, maintenance and garage services.

The value of programme supplies in UNICEF's leased warehouse as of 07 December 2017 was US\$632,781. The total value of supplies issued by UNICEF Haiti's controlled warehouse was US\$3,255,550.

Supply and logistics key figures	Haiti
<b>(1) Total value of procurement performed by UNICEF Haiti (in US\$)</b>	<b>5,799,670.57</b>
Procurement for UNICEF office	5,510,437.15
Programme supplies, including PS-funded	1,797,907.67
<i>Channelled via programme</i>	1,797,907.67
Operations supplies	543,384.80
Services	3,169,144.68

International Freight	289,233.42
<b>(2) Total value of supplies and services received</b>	<b>9,297,925.66</b>
Programme supplies including PS-funded	5,232,717.09
Channelled via Gavi	2,016,431.70
<i>Channelled via programmes</i>	3,216,285.39
Operations supplies	543,384.80
Services	3,232,590.35
International freight	289,233.42
<b>(3) Total value of supplies managed in the CO's controlled warehouse</b>	<b>3,888,332.33</b>
Total inventory in controlled warehouses	632,781.78
Other inventories	632,781.78
Total supplies issued from controlled warehouses	3,255,550.55
Other inventories	3,255,550.55

### Security for staff and premises

Safety and security measures adopted in 2016 greatly contributed to the satisfactory atmosphere in which UNICEF Haiti operated in 2017. Apart from a few isolated cases of individuals trying to use UNICEF's name fraudulently, no major security incident was registered. However, roadblocks and hijacking of trucks continued to pose security issues, especially along major roads.

During 2017 emphasis was placed on sensitizing UNICEF Haiti staff to comply with the principles of security risk management (SRM) for Haiti. Seventy per cent of staff residences were assessed and recommendations for security improvement were being implemented. The new warehouse, as well as sub-offices in Les Cayes, Jeremie, Gonaives, Cap-Haitian and Hinche, were also assessed and upgraded to meet SRM requirements.

UNICEF Haiti continued to streamline its communication system, such as regular updates of the telephone tree and training of UNICEF wardens. In 2017, the established warden system was tested twice during the hurricane season. Continuous trainings and briefings on staff security issues contributed to increasing staff awareness on safety and security.

Despite the departure of MINUSTAH in October and its replacement by a smaller UN mission—which created a gap in support for UN County Team operations—UNICEF Haiti was able to ensure continuity of its activities and operations in Port au Prince and the regions. A new coordination structure was organized by UNDSS with participation by all UN security professionals through security meetings, in order to respond adequately to the safety and security challenges related to UN staff members and other assets. In addition, security focal points were designated in each department to coordinate security.

### Human resources

UNICEF Haiti is composed of 113 staff members, 41 per cent female and 59 per cent male. Of those 113, 42 were recruited in 2017, mostly to address emergency response staffing needs. At the end of the emergency, sessions on career development and administrative processes on the off-boarding of staff were organized. Senior management and direct supervisors played an active role, offering counselling and advice to staff to be separated.

To address currency deterioration for locally recruited staff, UNICEF Haiti took the lead on ensuring the completion of the local salary survey to allow proper collection of data. UNICEF Haiti also revitalized its learning and training committee, as well as advancing career development initiatives.

Two staff members completed special measures to allow locally recruited staff to complete their university degree, in order to confirm their appointment tonational officer positions. Also in 2017, three major trainings were organized on results-based management, gender programming and interagency HACT approaches.

Moreover, UNICEF Haïti continued to support global human resources reform and reinforce its implementation. Customized sessions were organized to keep programme and operations sections abreast of new developments. UNICEF Haiti's human resources team was trained as changed agents for the human resources reform, and provided continuing technical support and advice to management, staff and the staff association.

The team also co-facilitated a skills-mapping exercise, recommendations from which will be addressed through an implementation plan discussed during the next office retreat in early 2018. Results of the 2017 global staff survey will also be addressed in early 2018, with emphasis on such critical issues as personal empowerment and career and professional development.

### **Effective use of information and communication technology**

UNICEF Haiti's information and communication technology team continued to provide support and services to all staff, in accordance with globally established policies, standards and procedures.

Powerful cloud-based Office automation tools offered a platform for work collaboration, public and private document storage, document elaboration and communication. They were an efficient tool for UNICEF staff, with strong impact on user performance in terms of high availability of users' data everywhere, with just an Internet connection.

The year was particularly marked by many data breaches and phishing attempts around the world, so steps to reinforce users' capacity to face this emerging threat were implemented. Detailed instructions were provided in order to protect resources: data, equipment as well as personal data at home. In addition, Windows 10 was deployed for all users, which helped by adding another layer of security on UNICEF data, more precisely through its cryptography module, protecting users' data even in cases of lost or stolen laptops.

UNICEF Haiti contributed to greening efforts through appropriate configuration of existing printers and copiers and educated users on proper usage. All new equipment acquisition followed greening standards.

Performance monitoring continued in 2017 through strict control of Internet usage, as well as collecting statistics on performance by the Internet service provider. Additionally, servers were monitored in real-time to check on their ability to react quickly should a failure occurred.

Given that Haiti is prone to natural disasters, telecommunication system backup was set up to ensure continued communication through radios for staff and vehicles and satellite phones for

staff deployed to remote areas. Also, essential staff were reequipped with the necessary equipment to continue with minimal business operations during emergencies.

## Programme components from RAM

### ANALYSIS BY OUTCOME AND OUTPUT RESULTS

**OUTCOME 1** By the end of 2021, pregnant women, newborns, children and adolescents utilize health services that include both high-impact interventions and respectful and quality care that promote healthy behaviors.

#### Analytical statement of progress

According to the 2017 DHS, under-five mortality rates remain unacceptably high in Haiti, despite a decline from 88 per 1,000 live births in 2012 to 81 per 1,000 live births in 2017. Under-five mortality rates remain far from the MDG target of 52 per thousand (two-third rate reduction) and even further from the SDG target of 25 per thousand. Since 2012, no progress was observed in neonatal mortality rates: 31 per 1,000 live births from 2012 to 2017. Vaccination coverage decreased, from 45.2 in 2012 to 41.4 per cent in 2017. Furthermore, the number of children fully vaccinated declined by 4.2 per cent, while those who receive no vaccinations has risen by 2.8 per cent since 2012.

Despite such limited progress, UNICEF Haiti continued to support the health sector, especially the MOH and its partners, to increase access and quality of health care, with particular attention to the needs of children and mothers and the most vulnerable.

In this first year of the new programme cycle (2017-2021), UNICEF Haiti provided technical, material and financial support to activities for immunization, MCH, HIV/AIDS and emergency response (notably post-hurricane Matthew response in early 2017). Some key-achievements in 2017 were:

- Implementation of the RED approach in 63 out of 70 targeted communes, which led to vaccination of 128,917 children under one year with penta3 (66 per cent of children under one nationwide)
- Purchase of measles vaccine and support for the installation of 146 solar refrigerators
- Certification of elimination of maternal and neonatal tetanus
- 29 emergency obstetric and neonatal care maternities equipped
- More than 30,000 community members educated on reproductive health through information and materials
- 510 community health workers trained on community mobilization and referral of beneficiaries to health facilities
- Paediatric rehabilitation and equipping of the main hospital of Grande Anse Department, providing care to around 460,000 people
- 45 health providers trained in Grand Anse and South-East health departments on prevention of mother-to-child transmission (PMTCT)
- 7,358 sexually active adolescents screened for HIV, of whom 61 (0.8 per cent) were found to be HIV-positive
- 153,508 adolescents sensitized and educated about HIV/AIDS and safe behaviours
- 10,894 pregnant women received two antenatal visits through mobile clinics
- 655,000 persons received a second dose of the oral cholera vaccine (follow-up from late 2016 campaign)

These results would not have been possible without the financial support of GAVI, World Bank, Government of Japan, Government of Canada, the German National Committee and the Norwegian Refugee Council. UNICEF worked in close collaboration with health partners: UN and multilateral agencies (WHO, UNFPA, UNAIDS, World Bank); with bilateral partners (USAID, Japanese and Canadian Governments); international and local NGOs, mainly MDM Argentine et France; MHDR, GRAF, CSE, FONDEFH, HHF, SBHF, INSHAC, CRAMPSMI).

Progress made in 2017 suggests a positive trend in expanding effective coverage of high-impact interventions, with the potential to address killer diseases affecting children and women.

In 2018 UNICEF will pursue several approaches to address persisting challenges such as: (1) improving donor coordination to harmonize and align external assistance to national priorities; (2) strengthening leadership, coordination and funding to implement and scale-up community health innovative strategies; (3) addressing delays in disbursements for the purchase of traditional vaccines; and (4) advocacy for the allocation of greater national resources to the health and nutrition sectors in the national budget

**OUTPUT 1** The Ministry of Health and its decentralized entities have tools for field evidence-based maternal, neonatal and child health (MNCH) planning and the definition of legal frameworks facilitating access to adolescent services, including in emergency situations.

#### **Analytical statement of progress**

During 2017 UNICEF Haiti focused on strengthening health systems by providing technical support to the development of policy documents, standards, strategies and actions plans.

UNICEF Haiti also contributed to strengthening national health management systems to ensure quality and timely data, thus enabling the planning, monitoring and assessment of health interventions. Through support for materials and capacity building, UNICEF Haiti contributed to progress in the completion rate for health data: 30 per cent of health departments recorded on-time data completion of over 90 per cent, compared to 10 per cent of departments in 2016.

In addition, UNICEF Haiti supported the development of operational plans for maternal, neonatal and child health (MNCH) in health departments. Thanks to this technical and material assistance at both central and departmental levels, the percentage of health departments with evidence-based operational MNCH action plans increased from 0 to 30 per cent (3 of 10 departments).

Regarding access to adolescent services, efforts are ongoing to develop a legal framework. In collaboration with UNAIDS, UNICEF Haiti provided technical support to the MoH to ensure the availability of data on PMTCT. In 2018, UNICEF will provide both material and technical support to achieve more efficient monitoring of PMTCT indicators.

UNICEF Haiti also will continue to foster health system strengthening through support to health departments and at the central level. Advocacy for effective allocation of resources in the health sector will be based on data and evidence from surveys, improved routine administrative systems and analysis of regular bottlenecks and barriers. UNICEF Haiti will maintain its collaboration with WHO as lead agency for the development of health policies, guidelines and tools as well as disease surveillance; with UNFPA, which is leading the strengthening of professional resources for adolescent and maternal health; and the Joint Programme with UNAIDS on HIV/AIDS, spearheading the coordination of HIV programming.

**OUTPUT 2** An integrated package of quality health services are available for newborns, children and women, especially the most disadvantaged in targeted communes.

### **Analytical statement of progress**

In support of MOH efforts to facilitate access to health care services for the population, UNICEF Haiti focused its 2017 efforts in four areas: equity, neonatal care, prevention of vaccine-preventable diseases and availability of vaccines, devices and material. An equity analysis was conducted in 2017 on immunization to answer two fundamental questions: one, where are the unvaccinated children, and two, why are they not vaccinated? The two main barriers to vaccination identified during this analysis were: low availability of vaccines and devices at the service delivery level (62 per cent) and lack of community health workers (57 per cent).

The equity analysis also revealed that the largest numbers of unvaccinated children are not located in remote places, but rather in big cities: 42 per cent of children not vaccinated with penta3 during the last three years were in five municipalities: Port-au-Prince, Cité Soleil, Carrefour (West department), Gonaïves and Saint-Marc (Artibonite department). Contrary to general belief, geographical accessibility is not the main challenge.

UNICEF Haiti supported implementation of the RED approach, which facilitated Penta3 vaccination of 66 per cent of children less than one year of age (over 128,000 in 2017). UNICEF also supported the purchase of measles vaccines for all children under one and provided logistical support to facilitate the distribution of vaccines and devices to health institutions in all ten departments.

To facilitate vaccine conservation and increase storage capacity at peripheral level, 146 solar refrigerators were installed and 20 cold chain technicians were trained for their maintenance, with UNICEF support.

In the area of maternal and neonatal care, UNICEF equipped 29 emergency obstetric and neonatal intensive care units and contributed to the construction of two neonatal care units in Centre and North departments.

UNICEF Haiti supported the MiH in the development and implementation of a maternal and neonatal tetanus elimination plan, which enabled WHO to initiate the issuance of certification of maternal and neonatal tetanus elimination.

At the community level, UNICEF Haiti trained and supported 510 community-health workers in active screening of childhood illnesses, such as malaria, and referrals to health care facilities.

To address HIV and AIDS, UNICEF Haiti provided technical and financial support for the implementation of the following activities:

- Development of a PMTCT training manual
- Training of 45 health providers and 566 supervisors, peer scouts, peer educators in West, South, South-East, Artibonite, North, North East, North West and Grande Anse departments.
- 7,358 sexually active adolescents and young people were screened, among whom 61 (0.8 per cent) tested positive
- 80 young people and adolescents trained on sexual health in seven departments.



- 153,508 adolescents reached by awareness-raising on HIV and AIDS and promotion of safe behaviours. Of these, 88 per cent attended a 'stay negative' club to promote healthy, responsible sexual behaviour.

**OUTPUT 3** Parents and caregivers of children, adolescents and community leaders in targeted communes are aware of available services and the importance of seeking

**Analytical statement of progress**

A knowledge, attitudes and practices (KAP) survey was planned for 2017 to establish baselines on knowledge among populations in targeted areas about the danger signs of common childhood diseases (fever, diarrhoea, pneumonia), complications of pregnancy and new-born emergencies and capacity to respond correctly to such situations. Developing the KAP survey took longer than expected; but results are expected in the first semester of 2018. Once baselines are established, targets for the two indicators will be established.

Despite the KAP survey delay, many community empowerment and behaviour- change activities were carried out; for example: 275 women's and youth groups in 37 targeted communities were mobilized to raise awareness on health issues (reaching approximately 20,000 people and 10,254 pregnant women, young girls and men of reproductive age were sensitized on reproductive health, safe motherhood and good hygiene practices in all 10 departments.

**OUTPUT 4** During emergencies, children and their families have access to a package a health services to respond to their immediate needs.

**Analytical statement of progress**

Through immunization activities in response to emergencies, UNICEF Haiti supported the MoH in the replacement of refrigerators damaged by Hurricane Matthew. To date, 146 solar refrigerators were installed in the departments of Nippes, Grand Anse and South.

Since 2014 Haiti has faced a diphtheria epidemic. In response, in 2017 UNICEF Haiti supported the organization of a vaccination campaign in the municipality of Carrefour in West Department. As a result, 107,215 children aged one to six years received the diphtheria tetanus polio (DTP) vaccine.

To facilitate the availability of health services in Hurricane Matthew-affected areas, UNICEF Haiti continued in early 2017 to support 1,322 mobile medical units, through local NGOs, in the most affected departments of South, Grand Anse and Nippes. Mobile units ensured the vaccination of 23,456 children under one year of age and that 10,894 pregnant women received at least two antenatal check-ups.

UNICEF also supported the MoH to update its cholera and cyclone contingency plans. Medicines, materials and devices were pre-positioned in various vulnerable departments, particularly South, Grand Anse and North-West. UNICEF Haiti funded the social mobilization communication component and part of the operations of the cholera vaccination campaign in South and Grand Anse. A second round of oral cholera vaccine was held in 2017 ensuring that approximately 655,000 people received their second dose (follow-on from the late 2016 first dose campaign).

For 2018 UNICEF, in partnership with WHO, the U.S. Centers for Disease Control and the MoH, will continue to support the cholera elimination plan by: focusing on integration of care at health facilities, supporting communication and social mobilization for immunization campaigns and behaviour-change communication on effective hygiene and sanitation practices.

**OUTCOME 2** By 2021, Pregnant and lactating women and children under five years old have equitable access to an integrated package of quality high-impact preventive and curative nutrition services.

### **Analytical statement of progress**

Preliminary results from the 2017 DHS indicate little improvement in the nutrition situation of Haitian children and women since 2006. While the 2015 MDG target was met for child underweight, stunting rates remained stagnant; 22 per cent of children under five were still stunted in 2017. Growth faltering starts in-utero and increases sharply in the first two years of life from 10 per cent among children 6-8 months to 30 per cent in children 18-23 months, before reaching a plateau in the third to fourth year. This highlights the importance of prioritizing the '1,000 days window of opportunities' for early action to prevent irreversible consequences on child development and generate higher return on investment.

Household socio-economic status and maternal education levels are the two major determinants of growth faltering. In Haiti data show 34 per cent stunting among the poorest (versus 9 per cent for the wealthier economic quintile), and 32 per cent stunting in children with illiterate mothers (versus 14 per cent in children with mothers with secondary education or more). Multi-sectoral pro-poor action is required to significantly reduce malnutrition and break its inter-generational cycle. Prevalence of anaemia, a proxy of iron deficiency, has shown no decrease since 2006, and remains unacceptably high, at 66 per cent in children under five (with a peak of 84 per cent in the 12-17-month age group) and 59 per cent among women of child-bearing age. This calls for a national strategy for anaemia prevention and an integrated package of actions to address multiple nutritional and non-nutritional causes of anaemia. The DHS findings demonstrate the validity of that UNICEF's 2016 nutrition situation analysis for the 2017-2021 – its assumptions and strategic priorities – and underline the need to accelerate scaling-up of nutrition-specific and nutrition-sensitive interventions in social protection, WASH, agriculture, health and education.

The nutrition sector continued to be severely under-resourced during 2017; lacking domestic funding, it relied heavily on external donors. Donors funding continued to shift towards nutrition emergencies and treatment of acute malnutrition, with very few donors supporting long-term programming to prevent chronic malnutrition and its lifelong consequences. UNICEF Haiti supported the nutrition sector with humanitarian funds from OFDA, ECHO, World Bank, CERF, DFID, and the Government of Canada, and non-emergency funds from UNICEF national committees in Canada, Germany and USA. In addition to funds raised in 2016, UNICEF successfully mobilized additional funds from ECHO and Food for Peace/USAID in 2017.

UNICEF Haiti partnered with nine international and local NGOs, involving cash transfers and/or donating nutrition commodities. Seven of these NGOs supported the MoH in delivering an integrated package of curative and preventive nutrition interventions in humanitarian settings while two others worked in non-humanitarian settings. As much as possible, UNICEF Haiti gave priority to local NGOs, both to tap into their local knowledge and experience and build national capacity to benefit the country beyond project duration. NGOs proved to be instrumental in

increasing nutrition programme access and coverage, and to building capacities within the nutrition workforce at the departmental, health facility and community level.

UNICEF Haiti also provided direct support to all 10 health departments, in the form of in-kind and/or cash thereby facilitating the revitalization of nutrition activities in departments where the nutrition programme was under-funded, such as South-East, North and North-East. These combined efforts enabled the achievement of annual targets for key curative and preventive actions, as evidenced by progress recorded by end-October 2017: 87 per cent achievement for treatment of acute malnutrition in children aged 6-59 months, 164 per cent for IYCF counselling for pregnant women and mothers with children under two and 88 per cent for provision of multiple micronutrients to children aged 6-24 months.

Progress at the policy level was advanced more slowly. Legislation and policy on food and nutrition security drafted by the previous government were not finalized, leaving the country without a legal framework and governance structure for food and nutrition security. Nevertheless, key milestones were achieved this year thanks to joint efforts by UN agencies and donors, such as:

- (i) Completion of an organizational audit for food and nutrition security, supported by the European Union
- (ii) Creation of a Parliamentary Front Against Hunger, supported by the FAO
- (iii) Support for the annual SUN self-assessment
- (iv) Participation by a Haitian delegation at the annual SUN global conference
- (v) Reinforcement of joint actions by the WFP, UNICEF, FAO and WHO to accompany the process of finalizing food and nutrition security legal instruments.

The 2017 country rating showed that Haiti made insufficient progress in achieving the four SUN strategic objectives: bringing people together (16 per cent), policy/legal framework (29 per cent), common result framework (39 per cent), and financial tracking/mobilization (35 per cent). While all these initiatives gave positive signs of renewed interest in eradicating hunger and malnutrition, they have yet to be translated into concrete commitments and actions by the recentlyelected Government.

**OUTPUT 1** By the end of 2021, institutions in charge of nutrition have the capacity to develop evidence-based policies and strategies, and coordinate the implementation and monitoring of nutrition interventions, including during emergencies.

### **Analytical statement of progress**

UNICEF Haiti enhanced the MoH's capacity to implement, coordinate and monitor nutrition programmes in areas hit by natural disasters jointly with Departmental Health Offices. The humanitarian crisis triggered by Hurricane Matthew in late 2016 drew attention and resources to areas that had long been neglected and where nutrition services were very precarious. In addition, it provided an opportunity to increase the MoH's national and departmental capacity for utilizing SMART surveys to monitor the post-hurricane nutrition situation.

This year was also characterized by revitalization of the national SUN movement. UNICEF Haiti supported the annual SUN self-evaluation, which had not been conducted for two consecutive years. UNICEF Haiti brought the SUN secretariat's expertise in-country to facilitate the process. This stock-taking exercise allowed identification of gaps, strengths and weaknesses for implementation of the SUN road-map and paved the way for a SUN action plan including: policies and strategies, governance, budget and a results framework. The country report was

validated by the Government and integrated into the 2017 global report. Along with other UN agencies, UNICEF supported Haiti's participation in the annual SUN global conference that took place in early November in Abidjan. The delegation was accompanied by the First Lady, which increased the country's visibility and sent promising signals for enhanced political commitment to combatting all forms of malnutrition.

UNICEF Haiti joined the WFP initiative for an SDG2 strategic review ('zero hunger and zero malnutrition') that will support the Government to finalize the national policy for food and nutrition security and sovereignty and design governance structures.

UNICEF Haiti also contributed to the ongoing mapping exercise supported by the inter-agency REACH partnership and use of the SUN planning and monitoring tool, which is due to be completed by early 2018. This will fill the information gap on actual coverage of key nutrition-specific and -sensitive interventions and inform the development of an investment case for scaling up nutrition.

Finally, UNICEF Haiti entered into a partnership with McGill University to support the MOH in conducting a national iodine survey in 2018. Long-awaited legislation on food fortification, including mandatory salt iodization, became effective in February 2017. Survey findings will inform the development of a national action plan for sustained elimination of iodine deficiency disorders and provide a baseline reference for surveillance. This will complement plans by USAID and the Global Alliance for Improved Nutrition consortium to assess the population's status for other micronutrients (e.g., iron, folate, Vitamin A) relevant to the new legislation on fortification.

**OUTPUT 2** By the end of 2021, health facilities and community stakeholders in most disadvantaged communes have the capacity to provide pregnant and lactating women and children under 5 with an integrated package of quality preventive and curative nutrition services.

### **Analytical statement of progress**

In the absence of a domestic budget for nutrition procurement, UNICEF Haiti remained the major MoH partner for the provision of nutrition commodities for high-impact curative and preventive nutrition interventions, including treatment of acute malnutrition and supplementation of essential micronutrients.

UNICEF Haiti provided financial and technical support to the national programme for management of acute malnutrition with major contributions to nutrition services, strengthened through humanitarian funds. UNICEF donated sufficient quantities of ready-to-use therapeutic food and therapeutic milk to cover annual requirements at the country's 38 inpatient care units and 304 outpatient care units. It also contributed to treatment of 16,994 children under five suffering from SAM nationwide, representing 60 per cent of the estimated annual caseload.

However, only three departments met programme performance standards (i.e., recovery rate above 75 per cent, death rate less than 10 per cent and defaulting rate less than 15 per cent). In the remaining seven departments default rates were high up to 25 per cent of children abandoned treatment before being cured. These departmental averages masked intradepartmental disparities in performance at the various facilities. This points to a need for better use of statistics by facility heads to improve service quality at low-performing facilities. Monthly departmental meetings supported by UNICEF proved to be an effective way to discuss performance and incentivize facilities to implement corrective measures.

UNICEF Haiti also provided essential micronutrients for children under five and women who were pregnant or lactating. Vitamin A capsules donated by the Government of Canada were distributed to the 10 health departments for supplementation in children under five, at a regimen of two doses per child per year. These supplies were used for routine supplementation in health facilities as well as mass supplementation during vaccination campaigns, specifically in emergency settings. According to the national health information management system, routine supplementation reached 645,576 children 6-59 months– well below the national target of 1,362,250 (47 per cent coverage). Two mini-campaigns were conducted in 2017 targeting, respectively, 34 and 41 districts and attaining coverage of 81 and 63 per cent, respectively. These results confirm that high Vitamin A supplementation coverage is difficult to achieve through routine, as contacts with health facilities decline as the child grows older. Under-reporting by health facilities might also be an issue resulting in underestimation of Vitamin A coverage.

Essential micronutrients, specifically iron and folate, were distributed to all 10 departments as supplements for pregnant women for a 90-consecutive-day treatment. UNICEF Haiti resorted to multiple micronutrients supplements, as they have proven to be as efficacious as combined iron and folate tablets, while bringing additional micronutrients to the Haitian plant-based diet. Statistics on iron supplementation are not included in routine health information but rather generated by household surveys such as the DHS.

**OUTPUT 3** By the end of 2021, caregivers and communities in most disadvantaged communes are aware of optimal infant and young child feeding and other essential nutrition actions.

### **Analytical statement of progress**

UNICEF Haiti supported the MoH, both directly and indirectly through NGOs, to scale-up preventive nutrition actions; specifically by promoting recommended feeding practices for infants and young children and providing micronutrients in form of micronutrient powders for children under two and tablets for pregnant and lactating women. UNICEF took advantage of the presence of international and local NGOs on the ground that were delivering humanitarian or non-humanitarian aid to integrate IYCF and micronutrient supplementation as part of a minimum package of interventions to prevent and reduce stunting.

With its own funds, and complemented by funds from OFDA, ECHO and the World Bank, UNICEF Haiti engaged in partnerships with eight NGOs, four national NGOs (FONDEFH, REMODEL, Haitian Health Foundation and GESKHIO) and four international NGOs (Action Contre la Faim, Médecins du Monde, AVSI and Hospital Albert Schweitzer), covering 49 districts scattered in seven departments (North West, Artibonite, Centre, West, South, Grande Anse and Nippes). Provision of multiple micronutrient powders proved to be a useful entry point for improving complementary feeding practices in young children by counselling mothers on recommended age-specific practices and holding cooking demonstrations using locally available nutritious ingredients.

The lack of a standardized IYCF training package for facilities and communities, as well as the absence of a module on home fortification with micronutrient powders and job aids for IYCF counsellors, proved to be a major challenge to delivering quality services. In addition, the inadequacy of community networks, whether paid community agents or volunteers, represented a barrier to expanding geographic coverage and access by bringing services closer to intended beneficiaries.

Overall, this programme component would benefit from a comprehensive C4D approach with the three recommended pillars (advocacy, social mobilization and behaviour change communication) that would mutually reinforce each other, and a mix of communication approaches, including mass media.

**OUTPUT 4** Government and its partners have the capacity to prepare and respond to Humanitarian needs in nutrition in emergency situation.

#### **Analytical statement of progress**

Unlike 2016, Haiti had no major natural disasters in 2017, although a series of hurricanes passed northwards in the Atlantic and brought heavy rains and flooding to northern Haiti.

With funds from OFDA, DFID, CERF, ECHO, the Government of Canada and the World Bank, UNICEF continued to build government capacity to respond to humanitarian needs, specifically in areas most affected by Hurricane Matthew, known as the 'Great South' (Grande Anse, South and Nippes departments), and districts recovering from the 2015 El Niño-induced drought in West, Centre, Artibonite and North West departments. UNICEF engaged in partnerships with eight NGOs, four national (FONDEFH, REMODEL, HHF and GESKHIO) and four international (Action Contre la Faim, AVSI, Save the Children and International Medical Corps) to cover 38 districts. Another 17 affected districts received direct funding from UNICEF for commodities and technical expertise, through the MoH.

NGOs were instrumental in increasing coverage and access to treatment of acute malnutrition. Services were brought closer to users by decentralizing outpatient care from facilities to communities and establishing an extensive network of community-based sites for management of acute malnutrition. Furthermore, scheduled screenings were conducted at rally sites with prior community sensitization. This approach enabled large-scale participation by the population and early identification of acute malnutrition while providing regular nutrition data for surveillance. This approach also resulted in reduced opportunity costs for mothers, early presentation and treatment compliance, and improved service uptake and recovery rates. Most children admitted into the programme were treated in outpatient care and a single commodity, Plumpynut, was used to treat both non-complicated SAM and MAM, thereby simplifying supply chain management and maximizing programme cost-efficiency. The major challenge was lack of funding for managing MAM and of implementing partners for the programme, which traditionally falls under WFP's mandate.

In August SMART surveys were conducted by the MoH– with technical support from UNICEF Haiti and funded jointly by UNICEF, the WFP and UNDP – in 20 districts of Grande Anse and South departments. Survey findings showed that the overall nutrition situation was under control, with rates of global acute malnutrition below the alert threshold of 10 per cent in all communes but one. Prevalence was generally higher in Grande Anse than South, as corroborated by an integrated phase classification for food security and livelihood analysis that classified Grande Anse in "crisis" (phase 3) and South in "stress" (phase 2).

**OUTCOME 3** By the end of 2021, children, women and their families in rural and urban environments use equitable and sustainable improved water, sanitation and hygiene services, contributing to the reduction of cholera incidence in Haiti.

#### **Analytical statement of progress**



DHS results show that 27 per cent of Haitians lack access to improved water sources (40 per cent in rural areas and 5 per cent in urban areas). In urban areas, 53 per cent do not use improved sanitation facilities; in rural areas the rate is 76 per cent. Open defecation is still practised by 25 per cent of the population and only 32 per cent of households have access to a functional handwashing point with water and soap. Low levels of access to safe water and sanitation increase the risk of waterborne diseases, particularly cholera. Since 2010 more than 800,000 Haitians were infected with cholera, and the disease has caused over 9,000 deaths. The impact of Hurricane Mathew in 2016 highlights the continued risk of water-borne diseases in the country.

UNICEF Haiti continued to support government agencies such as DINEPA (the national water and sanitation agency), the MoE and MoH and developed partnership with more than 12 NGOs to implement WASH projects, mainly in South, Grande Anse, Nippes, Centre, Artibonite and South-East departments. UNICEF supported coordination and planning mechanisms at national, departmental and communal level for effective use of resources and better synergy among various actors. It continued to build the capacity of government actors, NGOs and community partners on themes such as hygiene promotion, household water treatment and safe storage, community approaches for total sanitation (CATS), WASH in schools and emergency preparedness and response.

UNICEF Haiti participated in the development of a sector plan based on the SDGs for the period 2017-2030, a process which built on a country status overview of water supply and sanitation supported by UNICEF Haiti. UNICEF continued to host the secretariat of the national water and sanitation partners' working group. A nationwide water and sanitation facilities' mapping is underway and will be the basis for a monitoring the sector in Haiti.

In partnership with UNICEF Haiti, government agencies and 12 NGO partners, 71,624 people in rural and urban areas gained access to an improved source of water supply, while 29,820 additional people benefited from access to improved sanitation facilities in 12 targeted cholera-prone communes in Haiti. WASH in schools interventions benefited 8,719 students (4,083 girls, 4,636 boys) in 24 schools. A total of 13 schools were certified as 'hygiene-friendly schools', and two health facilities were equipped with adequate water and sanitation infrastructure. As a result of CATS implementation, nearly 35,000 people live in an open defecation-free environment and the Government is now convinced of the effectiveness of the approach.

In response to Hurricane Matthew and the drought, UNICEF Haiti and its partners provided emergency WASH services to the affected population. In total, some 1,250,157 people were able to access safe water, 338,692 persons were sensitized to hygiene promotion and 37,156 people benefited from rehabilitated sanitation facilities.

2017 was marked by the lowest incidence rate of cholera (0.105 per cent) in recent years, with 13,747 suspected cases declared by the MoH Department of Epidemiology between January and December 2017, compared to over 40,000 in 2016. This is the lowest the epidemic has been since 2010 and, for the first time, trends in suspected cases continued to decline, including during the high-transmission (cyclonic) season. Haiti is on the path to win the battle against cholera, thanks to a better coordination, improved surveillance and an increased number of rapid responses teams.

Those results would not have been possible without the financial support of by DFID, ECHO, Japan, Canada, USAID, US Funds, Thematic Funds, UNOCHA/CERF, Australia, Spain, OFDA, French Committee, Sweden, and the technical partnerships established with Solidarities,

OXFAM Intermon, ZanmiLasante, World Vision, Plan Haiti, ADEMA, Norwegian Church Action, Heart to Heart, Catholic Relief Services, Croix-Rouge Neerlandaise (CNRL), Cooperazione e Sviluppo (CESVI).

**OUTPUT 1** DINEPA and partners have appropriate policies, strategies, plans, budgets and WASH monitoring tools.

**Analytical statement of progress**

Following UNICEF’s active advocacy, the Government attended the Sanitation and Water for All high-level meeting held in April 2017 in Washington, D.C. Several meetings were organized with the MoH and Ministry of Public Works. The Government expressed its commitment to becoming a full member by the end of 2017. UNICEF was an active participant in three meetings organized by the President of Haiti, who has an interest in the WASH sector.

UNICEF Haiti actively participated and endorsed the development of a WASH sector plan based on the SDGs for the period 2017–2030. This sector plan built on the earlier country status overview of the water and sanitation sector supported by UNICEF Haiti, and also includes the required budget for the first three years (2017–2020). In partnership with other actors, UNICEF Haiti made a significant contribution to the development of a national strategy for household water treatment and safe storage through support to DINEPA.

UNICEF Haiti continued to host the secretariat of the working group of WASH sector technical and financial partners, organizing more than six meetings circulating the minutes. In partnership with the World Bank, IADB and Spanish Cooperation, a nationwide water and sanitation infrastructure mapping is being completed. This inventory will serve as the backbone of the sector monitoring system being established at DINEPA.

These results would not have been possible without financial support from Japan, Canada, US Funds, thematic funds and the technical partnerships established with OXFAM, ZanmiLasante and World Vision.

**OUTPUT 2** Children, women and their families in 15 rural and urban cholera-prone communes have access to sustainable improved water and sanitation services.

**Analytical statement of progress**

Nationwide only 73 per cent per cent of Haitians have access to improved water sources (60 per cent in rural areas and 95 per cent in urban areas). UNICEF Haiti chose to implement activities in 15 cholera-prone communes. In 2017, interventions were realized in 12 of these communes, focusing on areas where development projects had already been launched during the past programme cycle and promising results were ongoing. As a result, a decrease in suspected cholera cases was recorded in those areas.

UNICEF Haiti developed partnerships with various NGOs to increase access to WASH services in 12 rural cholera-prone/poor districts in Artibonite, Centre and South-East departments. It experimented with a new approach, working with decentralized levels of DINEPA and the MOH. The decentralized approach implemented for the rehabilitation of water infrastructure by DINEPA, and CATS by MOH/DSC, allowed the project to be more efficient. It also strengthened the capacity of local technical staff and increased their motivation and credibility in the eyes of communities.

As a result of the DINEPA-supported CATS approach, 71,624 people in rural and urban areas gained access to improved source of drinking water; 13 schools were certified 'hygiene-friendly'; 8,719 students (4,083 girls, 4,636 boys) at 24 schools have access to an improved source of water, with toilets separated by gender and equipped with hand-washing devices with soap; and two health centres were equipped with toilet blocks.

Moreover, an additional 29,820 people gained access to improved sanitation during 2017 in 12 rural communes, despite the fact that sanitation in peri-urban areas of Haiti is a highly complex issue, related to land ownership, as well as the precarious economic situation of residents and lack of community spirit. Discussions with a local NGO partner are ongoing to pilot a small peri-urban sanitation project using the CATS approach.

At the operational level, UNICEF Haiti provided technical assistance to strengthen WASH systems in 12 targeted vulnerable communes in the capital of Port-au-Prince that are prone to cholera or have limited access to WASH services, through support to planning, implementation and monitoring of scalable service delivery models. To address the quality and sustainability of programme results, lessons learned during the previous cycle were used to strengthen links between national, regional and community systems and work on developing a model for scaling-up interventions.

Thirteen schools were directly supported by UNICEF Haiti and certified as 'hygiene-friendly schools' in 2017. Lack of common standards for certification of hygiene-friendly schools is a challenge. Advocacy will continue with the MoE to elaborate and disseminate guidance for the progressive certification of hygiene-friendly schools.

These results would not have been possible without the financial support of Japan, Canada, US Funds, Thematic Funds and technical partnerships established with OXFAM Intermon, Zanmi Lasante, World Vision, Plan Haiti and Heart to Heart.

**OUTPUT 3** Women, children and their families in 15 rural cholera-prone communes know the importance of stopping open defecation and the critical moments to wash their hands with soap.

#### **Analytical statement of progress**

CATS was the main approach implemented during 2017, which contributed to improving communities' understanding of the benefits of stopping open-defecation and led to increased demand for sustainable sanitation. In 12 communes of the three priority departments (Artibonite, Centre and South-East), UNICEF Haiti consolidated and expanded CATS activities to reach 35 new certified open defecation-free (ODF) communities in rural areas, which represents 29,820 people now living in an ODF environment.

The success of previous years spread and changed social norms regarding open defecation. In 2017, 155 communities were triggered and more than 5,964 new latrines, serving 29,820 people, were built by families.

An important goal in the South-East Department was to demonstrate that the CATS approach can be successful in the Haitian context. Prior to implementation in South-East, conversion rates (the number of ODF communities vs. the number of communities triggered) among

different implementing partners ranged from 4 to 35 per cent, whereas South-East (communes of Thiotte, Grand Gosier and Anse-A-Pitre) demonstrated a success rate of 70 per cent. This case study was presented at the Global UNICEF CATS meeting in June at UNICEF headquarters. Globally, sanitation and hygiene services are delivered by strengthening existing systems and developing suitable models to be scaled up by governments. The South-East model was replicated by the MoH in Centre Department, with some success (10 out of 16 communities triggered were declared ODF; a conversion rate of more than 60 per cent). Thus, the capacity of municipal WASH technicians and implementing partners (including NGOs, community health-workers and natural leaders) was strengthened.

However, challenges remain. Parents and caregivers, particularly in rural areas, seem to have relatively limited understanding of the importance of safe water handling, toilet use and proper handwashing at critical moments. Community-based approaches are not yet sufficiently developed and remain project-based, with only limited results –especially in targeting practices such as open defecation. Communities' collective actions and self-reliance have been negatively impacted by cholera epidemics, leading to an over-reliance on free assistance, mainly in poor rural and urban areas. Ability and willingness to pay for WASH services often hamper demand. To better understand the current level of knowledge, attitudes and practices, a KAP survey will be conducted in 2018 with a focus on handwashing with soap. If communities are open to change, CATS implementation will enable them to understand not only the risks associated with open defecation and lack of handwashing, but also how to adopt good hygiene practices.

The main obstacle is the slow community certification process. UNICEF Haiti works closely with DINEPA and the MoH to accelerate and decentralize the process of verifying ODF status in communities.

These results would not have been possible without the financial support of Japan, Canada, US Funds and thematic funds, and the technical partnerships established with OXFAM Intermon, ZanmiLasante, World Vision, Plan Haiti and Heart to Heart.

**OUTPUT 4** DINEPA and its partners have increased capacity to effectively respond in a coordinated manner to WASH-related emergencies including cholera

#### **Analytical statement of progress**

In 2017 DINEPA, UNICEF Haiti and their partners responded to the impact of the summer 2015 drought and Hurricane Matthew in October 2016 by providing emergency water supplies, sanitation and hygiene promotion to the affected population. Water supply infrastructure repair projects started in 2017 for populations affected by Hurricane Irma, and will be completed by the beginning of 2018.

Through the post-Matthew emergency response, 840,033 people benefited from water trucking, chlorination points and water treatment units by UNICEF partners (DINEPA, CARE, Oxfam, ACTED, Solidarités International and Water Mission in the South) in Nippes and Grand-Anse departments. In addition, 139,091 persons benefited from Aquatab distribution for populations living in isolated areas or not supplied by collective water supplies, and 39,790 people received a basic standard hygiene kit.

In addition, 450,222 persons were sensitized to hygiene promotion focused on key messages to protect themselves and their family from cholera and other water-borne diseases. Also, 37,156

pupils and teachers benefited from rehabilitated sanitation facilities in schools previously used as temporary shelters.

At a second stage (recovery phase), 254,368 persons benefited from more sustainable water points and water networks in areas affected by Hurricane Matthew and the 2015 drought, through partnerships with the Netherlands Red Cross, Catholic Relief Services (CRS), Premiere Urgence International, Norwegian Church Aid, ADEMA, ACTED and Solidarités International. In total 17 water networks were rehabilitated or constructed, 13 hand pumps were installed or repaired, 11 spring catchments were constructed or rehabilitated, and 41 water point or water network committees were formed and trained, in the South, Nippes, South-East and Grand-Anse departments.

With regard to emergency coordination and preparedness, in 2017 UNICEF Haiti continued to co-lead of the WASH working group, in collaboration with DINEPA. A simulation exercise was conducted in August 2017 and the two hurricane alerts triggered immediate and well-coordinated emergency response, showing significant breakthroughs in the leadership of both DINEPA and the civil protection directorate.

**OUTPUT 5** By end 2018, the National Plan to Eliminate Cholera in Haiti has been supported in the prevention of cholera, response to alerts and coordination of cholera elimination efforts to reduce the annual incidence rate to 0.5 per cent.

#### **Analytical statement of progress**

Coordination of cholera interventions improved in 2017. UNICEF Haiti participated in weekly national-level technical coordination meetings led by MOH and DINEPA. At the departmental level, UNICEF's NGO partners participated in more than 140 monthly coordination meetings. Particular attention was paid to the most-at-risk departments, to strengthen surveillance and adapt responses.

Accordingly, three UNICEF national officers were deployed to provide direct support to health directorates in West, Centre and North departments. 'Operation Coup de Poing', a high-impact initiative against cholera, was implemented from July to October in West Department, with daily situation meetings involving all stakeholders. In Centre Department weekly planning meetings were held beginning in mid-July to deal with an increase in suspected cases. In Artibonite, two weekly meetings occurred to adapt to the epidemic's dynamics. UNICEF Haiti launched two pilot projects in mid-2017 intended to structure local community surveillance networks in these three departments, under the supervision of the Red Cross. As a result, more than 3,000 volunteers gained better knowledge of cholera, and are able to alert health authorities and deliver immediate counselling to community members.

Increase in the number of rapid response teams after Hurricane Matthew, their re-deployment during the first trimester of 2017 and the securing of funding, allowed for the maintenance of an average of 60 teams throughout 2017, which led to a clear increase in the coverage and quality of cholera response. Throughout 2017, response teams covered 13,011 suspected cases of the 13,747 declared by MoH (95 per cent), of which 92 per cent were provided within 48 hours (87 per cent of total suspected cases). The total toll of suspected cases for 2017 was 13,747 – a considerable decrease compared to 2016 (41,421). This corresponds to an incidence rate of 0.105 per cent – a very encouraging trend, and by far the lowest number of suspected cholera cases since 2010.

NGO teams worked with the 13 MoH rapid response teams to deliver a complete package (information, chlorine, soap, etc.) to impacted households and the 12 surrounding houses (“cordon sanitaire” approach), resulting in about 839,800 people reached. The target (1,237,500) was based on an expected caseload of 30,000 new cases in 2017, but thanks to the increased response and intensified awareness actions, the lower trend resulted in fewer direct beneficiaries.

To strengthen and maintain these good results, UNICEF Haiti supports an assessment of activities, financing and results achieved, to inform discussions on the long-term phase of the national cholera elimination plan, and the final steps toward elimination.

The results described would not have been possible without the financial support of donors such as Japan, Canada, ECHO, DFID and CERFX, and the technical partnerships established with six international NGOs (French Red Cross, IFRC, ACF, ACTED, OXFAM, Solidarites International) and four national NGOs (Zanmi Lasante, ACCESS, Zanmi Timoun, CEDUCC).

**OUTCOME 4** By 2021, girls and boys from rural areas acquire required competencies in an inclusive and quality education system.

#### **Analytical statement of progress**

Haiti’s socio-political and economic context in 2017 was highly challenging for the country and especially for the education sector. Elections took place and the new cabinet was sworn in in April, with a new Minister of Education taking office. The Minister reaffirmed his commitment to improve quality education and urged partners’ support in favour of the public sector, especially in terms of strengthening children’s learning achievement and improving the quality of public schools. Reading and writing were declared a “national priority” and the MoE Unit in charge of coordinating reading and writing promotion initiatives in the country (UDCLEM) was strengthened, notably with technical and financial support from UNICEF Haiti and USAID. In June 2017, the MoE validated the out-of-school children study (October 2016), which confirmed that more than 320,000 6 to 15-year-old children were out of school in 2015, accounting for 11.2 per cent of the entire age group. Although the study showed that the number of out-of-school children was halved between 2011 and 2015, it began to increase again after 2014, demanding new strategies to prevent further deterioration.

The report also confirmed that three major bottlenecks contribute to low school attendance and prevent children from progressing adequately through the education system: late entry, high repetition rates, and low learning achievement. On average, children in Haiti are 8.2 years old when entering 1<sup>st</sup> grade (the legal age is six). Elevated repetition rates and low learning achievement trigger high drop-out rates starting in grade 4 and causing more than 70 per cent of children to abandon school before 9th grade. The new UNICEF CP was developed based on strategies for tackling these bottlenecks, and thus contributing directly to improved learning achievement and school retention. This shift in the proposed strategies is expected to directly contribute to Haiti’s path toward achievement of SDG 4: ensuring inclusive and equitable quality education and promoting lifelong learning opportunities for all.

After only 10 months of implementation of the new CP, although it is still early to measure outcome level achievement, UNICEF Haiti and its NGO partners provided critical support to MoE initiatives to foster quality education, especially programmes that aim to improve reading and writing competences for children in primary education. Also, UNICEF Haiti actively provided technical and financial assistance to UDCLEM to strengthen its capacity to develop learning

materials and assume its coordination and supervisory role, while ensuring the coherence of various partners' initiatives to promote early grade reading. This support contributed directly to fostering partners' alignment on MoE priorities in this field. The European Union, World Bank, IADB, USAID and many other partners and donors have now aligned their interventions to support the expansion and strengthening of the public sector and the MoE for implementing early grade reading initiatives. During 2017 an implementation plan for the national teachers' training policy was completed, under UNESCO's coordination of UNESCO and with participation by local education coordination groups, representing a major milestone towards supporting improvement in children's learning achievements. The third national evaluation to assess fourth graders' grasp of literacy and numeracy was conducted in June 2017, confirming the poor results of the previous year.

Development of the new sectoral plan (ten-year sectoral education plan) started in November 2016, with technical support from several donors and agencies such as the World Bank, UNICEF and UNESCO. UNICEF Haiti was successful in positioning itself as a major contributor to plan preparations, and is now part of both the technical and drafting committees. Thanks to UNICEF Haiti's advocacy work on equity in the education system, the new plan will include sections on non-formal education (as a strategy to respond to children currently out of school) and preschool (as a strategy to ensure a continuum in education system pathways and build the foundational skills that support children learning in early grades. It will focus on early grade reading and writing interventions as a measure to combat drop-out and ensure that children have the competencies required to progress within the system and complete basic education. Moreover, UNICEF Haiti supported the installation of a new General Inspectorate, which is to carry out analysis of the education system and provide the minister with recommendations for improving sector performance.

Following Hurricane Matthew, the situation in the southern part of the country remained precarious throughout 2017. In affected areas, relief efforts continued to restore access to education and to support the 2017-2018 back-to-school campaign. In the context of all post-Matthew relief efforts, UNICEF Haiti's supported interventions accounted for more than 50 per cent of school refurbishing and furnishing, distribution of School-in-a Box and psychosocial support activities.

While these achievements were important steps toward improving the quality of the education system, significant challenges remain. Achieving this goal requires a complex blend of interlinked variables, that will take time to yield positive effects and real impact in classrooms.

**OUTPUT 1** School personnel and communities in the selected communes within the five targeted departments have improved capacity to ensure access to preschool and the first cycle of basic education at the right age, particularly for excluded children.

### **Analytical statement of progress**

Since 2010 the Government has placed more attention on the education sector, mainly through its programme to waive school fees for primary education. Good results were achieved, notably in terms of boosting access. The DHS showed positive changes in attendance rates: from 50 per cent in 2006 to 83 per cent in 2012 (2017 DHS results still pending). Nevertheless, exclusion remains strong and 320,000 children aged 6 to 15 years were still out of school in 2015 (11.2 per cent of all school-aged children). Moreover, one in two children attending school is at risk of dropping out, mainly due to over-age: only 21 per cent of children in school are attending at the right level for their age. The report on out-of-school children represented an



important starting point for developing new, evidence-based strategies to respond to the right to education of excluded children and discuss its root causes.

UNICEF Haiti decided to keep concentrating on back-to-school campaigns to boost school enrolment at the right age by both distributing school materials and mobilizing parents, teachers and communities. Also, in line with its comparative advantage, UNICEF Haiti decided to support the MoE to expand and improve the quality of public preschools. Focusing on pre-school has been identified as a good strategy to catch children at the right age and support their transition to primary school at age six, while ensuring that they can develop the prerequisites for reading and writing.

UNICEF distributions reached more children in 2017 than initially planned, thanks to additional funding received in late 2016 following Hurricane Matthew. Back-to-school activities reached a total of 23,600 children (50 per cent girls) from grade one, compared to the planned 10,000. In total, 152,000 children (75,848 girls) in grades 1-6 at 532 schools throughout the country received school materials, making UNICEF Haiti the most significant contributor to MOE efforts to reduce indirect school fees for parents.

During the year under review, UNICEF supported programmes targeting 106 public schools with training for parent-teacher associations (PTA) and school management committees. This training, based on school management guidelines developed in 2015 by MoE with UNICEF support, strengthened the capacity of 742 parents, teachers, directors and other school personnel for school results-based management. Results were three times greater than planned for 2017, especially thanks to the surge in funding.

However, in terms of preschool, progress was slower than planned, mainly due to lack of ECD funding at the beginning of the year. UNICEF defined an intervention package in support of the MoE, aimed at strengthening the preschool education subsystem. The package is comprised of policy interventions and development of standards, as well as activities in 35 preschool classrooms in Northeast Department to support access and learning.

UNICEF's education programme in 2018 will continue to focus on back-to-school campaigns and boosting activities related to preschool education. Strategies have yielded results and their implementation will continue

**OUTPUT 2** Public schools in the selected communes within the five targeted departments are equipped to facilitate learning and completion of girls and boys in preschool and primary schools.

### **Analytical statement of progress**

Despite the achievements related to access, quality continues to be a major concern, as children's learning achievement is well below standards. A 2016 World Bank study on public financing in Haiti demonstrated that children from the poorest quintiles in rural areas were most likely to receive poorer-quality education and learn less. Evaluations carried out in 2017 at 57 (of 106) 'Haiti Wins'-supported schools showed that less than half of fourth-graders can easily read in Creole, and only one third can read fluently in French. In response, the MoE has taken significant steps toward comprehensive education reform to improve quality, and UNICEF Haiti has aligned its activities in support of MoE priorities.

Recognizing the critical barriers to progress, including, for example, lack of child-centred

pedagogy, UNICEF Haiti decided to support the MoE at both the central and local levels to increase the education system's efficiency and overcome bottlenecks. UNICEF's education team is convinced that if quality and learning, particularly in early grade reading and writing, improves, it will motivate children to attend school and be better equipped to continue their education.

UNICEF Haiti continued to participate in strategic discussions around improving reading and writing and setting national standards. At the end of 2016, UNICEF Haiti partnered with USAID to promote early grade reading and writing for 21,582 children (10,443 girls) in 106 schools of three selected departments, turning UNICEF Haiti into a major player in promotion of the 'quality agenda'. Implementation started in mid-2017 and several results were already attained: the 106 schools received 720 classroom libraries to improve the learning environment and stimulate children's reading, 493 teachers and principals improved their teaching skills, especially in reading and writing pedagogy, thanks to training on the newly adopted scripted methodology for Creole and French. To support teachers in their daily practice, 80 highly trained coaches were deployed to carry out weekly classroom visits. More than 1,100 children (50 per cent girls) took part in summer camps that promoted reading as a playful activity.

In June 2017 the MoE validated a code of conduct against violence in schools, developed with UNICEF Haiti support. Schools will be required to adhere to the code, promoting non-violent communities and reducing the impact of violence in schools. Due to the code's late validation, roll-out of activities in schools is planned to take place in 2018.

Development of alternative learning activities, non-formal education programmes for over-aged and out-of-school children progressed slowly. These activities are expected to pick up pace in 2018 with the finalization of the MoE's 10-year sectoral education plan, which will include strategies for non-formal education. In 2018, UNICEF Haiti will carry out activities to improve early grade reading and writing competencies, while ensuring that UNICEF-supported schools are applying the code of conduct against violence in school. UNICEF Haiti will continue discussions with the MoE to finalize strategies for, and the kick-off of, new alternative learning programmes in favour of out-of-school and over-aged children.

**OUTPUT 3** The Ministry of education at the central and local levels has improved capacity to better identify and address issues of access to the system and its performance especially for out-of-school and overage children, including in emergency situations.

### **Analytical statement of progress**

The bottleneck analysis highlighted that critical barriers to progress include inappropriate models of education for excluded children and lack of institutional capacity. The theory of change developed by UNICEF proposes that if the capacity of the MoE is strengthened to meet and develop proper modalities, especially for children outside the school system or at risk of exclusion, the education system will be more inclusive and better able to meet the needs of those who have been traditionally left out, contributing to a shift towards greater equity. As in previous years, in 2017 UNICEF supported the MoE to improve governance mechanisms, an aspect of the ministry's reform, along with curriculum, vocational training and teacher qualifications.

UNICEF supported central governance bodies and technical directorates, in collaboration with other partners (e.g., IADB, World Bank and UNESCO) particularly for developing the 2017–2021 sectoral plan, which will promote strategies to tackle key issues around inclusive

education. UNICEF succeeded in positioning itself as one of the most trusted MoE partners and gained a seat on both the technical and drafting committee. This position gave UNICEF a key opportunity to influence the process, directly from the inside, to ensure the inclusion of more equity and responses to issues related to out-of-school and over-age children, while also promoting preschool. Although UNICEF did not directly participate in its development, the new national teacher training policy also represents a major milestone toward improved quality education, and UNICEF provided inputs that were highly valued by MoE. The training policy is expected to be validated by public fora in December 2017.

UNICEF technical and financial assistance was also instrumental in strengthening MoE regulatory capacity, by supporting the installation of a planning and study unit and the General Inspectorate, which should provide the minister with evidence-based strategic recommendations on how to enhance education system efficiency and effectiveness. Similarly, UNICEF technical and financial assistance to the unit in charge of coordinating early grade reading and writing interventions contributed to strengthening its governance role while also fostering its field supervision capacity.

Support to local directorates of education was also instrumental for their buy-in and involvement in supervision and quality assurance activities in the classrooms, supported by the 'Haiti Wins: Read, write, succeed!' programme.

The main constraint faced in 2017 was the delay in finalization of the new ten-year sectoral education plan. The country has been without an education plan since 2015, leaving the MoE and partners without a blueprint to refer to. The lack of a plan clearly outlining the country's vision for achievement of SDG 4 and national priorities also inhibits donors' alignment and coordination.

**OUTPUT 4** By 2021, the Haitian education system and its actors gained technical capacities to reduce vulnerabilities and impact of emergencies settings on children in pre-school and primary education, and are able to respond in case of crisis.

#### **Analytical statement of progress**

In spite of a very active hurricane season, Haiti was largely spared. Only hurricane Irma had an impact, on Northeast Department, affecting 25 schools and the education of more than 10,000 children.

However Hurricane Matthew, which struck Haiti on October 4, 2016, caused heavy damage and negatively impacted the right to education of more than 400,000 children. The damage was still visible in 2017, and the first half of the year was dominated by the response.

In Matthew-affected areas, UNICEF Haiti refurbished almost 150 schools and furnished 276, allowing around 89,946 children to return to school in a safer and more conducive learning environment. UNICEF also supported families and children to return to schools by lowering the indirect cost of school materials. Thanks to distributions from January to March, and again in September. To boost enrolment for the new school year, 98,776 children (50,814 girls) received school materials, allowing them to return to school, including 6,000 children in Irma-affected areas. UNICEF's support to the MoE for the Matthew response represented a significant share of the overall response. UNICEF Haiti contributed almost half of all school repairs/refurbishment, 60 per cent of school supplies distributed and nearly 90 per cent of school furniture.

In support of MoEDRR and preparedness, UNICEF Haiti assisted the Ministry to develop a national contingency plan and two departmental contingency plans (in South and Grand Anse). Moreover, 206 school directors were trained on procedures and processes to efficiently manage schools used as shelters in the aftermath of a natural disaster, while 22,000 children and 300 teachers improved their knowledge of DRR principles thanks to sensitization sessions organized in the departments of Grande Anse and South, with the support of local DCP offices.

To contribute to better construction standards and as a DRR strategy, UNICEF Haiti partnered with the Swiss Development Cooperation, IADB and others to promote the use of construction standards developed by the MoE's directorate of school construction. Some 110 technical staff (local MoE engineers and others) were trained on the proposed models and standards.

UNICEF surpassed its annual targets by using the additional funds mobilized for Matthew response activities. However, DRR activities nationwide need to be further strengthened. Local production of benches and school furniture to replace those destroyed by Hurricane Irma in northeast Haiti is ongoing; the furniture will be distributed early 2018.

**OUTCOME 5** By 2021, the children most exposed to the risk of violence have access to quality prevention and response services and to protective parenting, community and individual practices

#### **Analytical statement of progress**

Haiti continued to tackle the restoration and strengthening of its systems for ensuring and enabling a protective environment for children: one in four children lives separately from their parents. Over 700 unregulated residential care facilities operate in the country, hosting an estimated 30,000 children, 80 per cent of whom are not orphans. With the births of two out of 10 children not registered, many children are at risk of being denied access to basic social services and protection. UNICEF's new CPD highlights prevention of family separation as a main area of intervention and a common thread for child protection activities

Support to critical child protection services such as decentralized IBESR social workers and Minors' Protection Brigade officers continued through technical, financial and material (equipment, vehicles) support to IBESR staff deployed in departments, as well as capacity-building for child protection coordination, case management and referral systems.

Building on interventions launched in response to Hurricane Matthew, UNICEF Haiti expanded the reach of multi-sectoral actions and increased its field presence and service delivery. The open-market voucher approach enabled 527 households (93 per cent female-headed) of the 1,319 households assisted to access critical household items, including shelter material, to mitigate the hurricane's impact and promote resilience in a disaster-prone environment. Other households were assisted with a combination of cash and support for income-generating activities (including financial education).

UNICEF Haiti provided emergency psychosocial support to 42,382 children. Mobile recreational approaches were used to reach the most vulnerable children and families. Outreach strategies served as a platform to support social dialogue on gender-based violence, to enhance help-seeking practices (less than 10 per cent of cases are reported within 72 hours, and more than 60 per cent of survivors of sexual violence are children). These efforts, coupled with increased coordination, enabled identification, referral and assistance for 894 survivors of sexual and

gender-based violence.

UNICEF Haiti's child protection section continued to build intersectoral alliances, mainly with the education, WASH and nutrition programmes, to: (1) ensure the reinsertion of boys and girls excluded from the school system, (2) ensure retention of those at risk of dropping out and (3) leverage access to the most vulnerable families on the other hand; (4) identify practices and trends at community-level, which may impact the protective environment or provide entry point to discuss violence, abuse and neglect.. Economic empowerment also emerged as a high-impact programming strategy when coupled with parental education and community-based protection programmes.

2017 also saw the extension of the foster care system to two additional departments and a growth in the number of certified foster families (from 32 to 76) as well as increased use by government actors of foster placement, as opposed to institutionalization.

In the field of juvenile justice and birth registration, UNICEF Haiti strengthened specialized social work benefitting 460 children including 81 social reinsertions and 500 children (252 girls) who accessed birth registration services. It also enhanced the capacity of the Corrections Office (11 legal assistants trained and logistically supported) and contributed to the rehabilitation of one juvenile court. These results were achieved as part of a UNDP-led joint programme and a collaboration between UNICEF and the International Committee of the Red Cross as part of the organization's exit-strategy. Nonetheless, these fields are still under-funded in 2017, not allowing full implementation of birth registration strategies. 2018 should see the concretization of donor support to the sector, which will allow UNICEF Haiti to tackle the issue on a larger scale.

Since June 2015 tensions between Haiti and its neighbour increased, when the DR began implementing its national plan for the registration of foreigners, which resulted in the deportation of people of Haitian descent, including both migrants and those born in the DR. According to the IOM, approximately 150,000 households (230,000 individuals) have crossed the border into Haitian territory. Of these returnees, 132,000 returned spontaneously, 38,000 claimed to have been deported and 58,000 were officially deported. Many spontaneous returns occur as a result of pressure caused by threats and fear of deportation. UNICEF Haiti addressed the consequences of migratory patterns and deportations to gradually incorporate strategies addressing drivers of cross-border movement, with a view to ensure sustainable returns and reunification of children (through parental education, peer education, community-based dialogue in areas of return, socio-economic support and access to education). As a result, 834 children (269 girls) were assisted in 2017.

UNICEF Haiti invested resources in strengthening the capacity of local civil society actors in programme management, case management and financial management. One staff member of local partner IDETTE (Initiative Départementale contre la Traite et le Trafic des Enfants) was supported to attend the Bioforce course on child protection, fostering South-South cooperation.

A significant 2017 achievement was the validation of a framework to address child domestic labour, with contributions from the ministries of social affairs and labour, education, women's affairs, justice and health. This programming framework supports a multi-sectoral and inter-agency initiative to address child domestic work, in partnership with the ILO.

These results were made possible thanks to generous contributions by the Canadian and French governments, ECHO, CERF, UNICEF National Committees in Denmark and China; and technical partnerships with Terre des Hommes, AVSI, Service Jesuite des Migrants,

Grouped'Appui aux Refugies et Rapatries, Soeurs Saint Jean de l'Evangile, RezoFwontalyeJanoSikse, ACTED, IDETTE and Medecins du Monde.

**OUTPUT 1** By 2021, the government at national, departmental and local levels is equipped with inter-sectoral tools, processes and resources in order to prevent and addresses violence, abuse and neglect including in emergency situations.

### **Analytical statement of progress**

Haiti's governance structure for child protection is split between several ministries and parastatal institutions, making it challenging to coordinate efforts and harmonize strategies. Coordination of social work among ministries has gained more attention, most notably from the MoH, but still requires significant improvement and strategic leadership. In 2017 UNICEF Haiti supported efforts aiming to improve communication, information-sharing and joint case-management processes between the national child protection agency and the justice sector and police. UNICEF Haiti also facilitated processes aimed at increased coordination among financial partners of the child protection sector (one meeting organized and a mapping of contributions).

2017 was marked by progress in the allocation of human resources to social work in favour of children in conflict with the law. A dedicated social work force of 22 social workers specialized in juvenile justice supported advocacy, case review and a search for solutions for the most vulnerable children.

However, the social workforce still requires strengthening, both quantitatively and qualitatively, to ensure appropriate action on different child protection challenges. With legislative activity slow until mid-year and turnover within the Ministry of Social Affairs, the push to ensure institutional reform of the national child protection agency and adoption of the child protection code suffered delays. Also, work planned in social work reform, including initial and on-the-job training, was constrained by strikes in the academic sector affecting one of the main partners: the social sciences faculty.

Coordination in the area of juvenile justice was strengthened with the reactivation of the juvenile justice coordinating body under the leadership of the Ministry of Justice and participation by all stakeholders. This contributed to enhanced cooperation between judicial, social and corrections actors.

Decentralization of services, one of the biggest areas of progress of the last programming cycle, still depends predominantly on UNICEF support. Further sustained decentralization requires significant budgetary allocations to social work.

Furthermore, actions aiming at analysing the needs of each geographical area based on case management data were stalled by the fact that case management processes have not yet been decentralized, and a harmonized approach to reporting needs to be developed within the national child protection agency.

The foster care system was extended to two additional departments in 2017 (instead of one, as initially envisioned) and the number of certified foster families rose from 32 to 76. In addition, government actors increasingly relied on foster placement rather than institutionalization.

Leveraging the resources and establishment of the post-hurricane response, UNICEF Haiti supported strengthening of the child protection sector emergency response and preparedness

system in the departments most at risk. This resulted in a comprehensive emergency response plan developed for South and GrandAnse and prepositioning of a standard toolkit for use in future emergencies. UNICEF Haiti supported IBESR to deploy training for government-led child protection working groups in four of 10 departments, in support to preparedness efforts for child protection.

**OUTPUT 2** By 2021, social services (linked to (social welfare, justice, security, education, health) in targeted departments are able to prevent, detect, report, refer and care for children victim of violence, abuse, and exploitation, in collaboration with civil society and community leaders.

### **Analytical statement of progress**

During 2017 UNICEF Haiti and partners engaged in: developing an understanding of vulnerabilities and strategies for reducing them, strengthening alert and referral systems and promoting inter-sectorial synergies. This led to enhanced leadership by decentralized authorities, increased participation by communities in alert and referrals to relevant child protection services (community referrals rose from less than 10 per cent to up to 28 per cent of all referred cases) and resulted in strategies incorporating social dialogue, risk mitigation and economic empowerment.

Both access to and quality of social services remained areas of concern. Incremental progress was achieved in establishing an enduring dialogue between sectors, most notably between the health and education sectors, to address some issues related to structural access, leverage resources and optimize the identification and referral of vulnerable groups and remedial action. Strategic alliances with economic empowerment actors continued, to provide adapted integrated action addressing social, economic and individual drivers of violence, abuse, exploitation and neglect. A training module was piloted to enhance the capacity of health actors to link patients with appropriate services and address some underlying causes of health vulnerabilities. The child protection sector also worked actively with nutrition actors, as part of an integrated pilot using nutritional status as an entry point to address vulnerability to family separation. Collaboration with the WASH sector was also strengthened, with specific indicators integrated into household surveys.

Gender-based violence against children remains an issue of concern, due to limited and late reporting (fewer than 10 per cent of cases reported within 72 hours).

Building on evidence generated by the latest violence against children survey, and in cooperation with the Innocenti Research Centre, UNICEF Haiti carried out an analysis of help-seeking behaviours, which highlighted both perceptions of violence and trust in services as key bottlenecks for case referrals. Accordingly, while actively coordinating with GBV response service providers, UNICEF also strengthened its community outreach strategies (see output 4). Coordination between the ministries of health, justice, social affairs, women's affairs and interior, as well as with UNFPA and UNWOMEN, led to the first draft of harmonized standard operating procedures to regulate assistance to child survivors of sexual violence.

In addition, UNICEF launched in 2017 a multi-year, multi-sectoral initiative – implemented in coordination with the ILO – to prevent and address child domestic labour in three departments, targeting 6,000 households. The initiative will address drivers and structural factors contributing to child labour in domestic work at the institutional, community, family and individual levels



through partnerships with the education, health, justice, gender equality, labour and communication sectors.

**OUTPUT 3** By 2021, civil registry services in targeted areas are able to register declared births according to national standards and coordination with health services

#### **Analytical statement of progress**

In 2017 UNICEF launched a small-scale project in the border town of Belladere of Centre Department to enhance access to birth registration and generate evidence on birth registration practices. Through this initiative, 500 children from this border area accessed birth registration services. The intervention and surveys highlighted significant bottlenecks in: supplying registers to civil registry offices, knowledge of procedures and gendered social perceptions, leading to only 15 per cent of births registered by single mothers. Although more than 53 per cent of the population lives in rural areas, less than 2 per cent of civil registries are located in rural areas, generating unequal access to birth registration services. This is further compounded by financial barriers for accessing a service that is theoretically free, as well as laws and social norms that limit mothers' initiative to register their children (fewer than 15 per cent of births are registered by mothers, against a background in which paternal lineage is prioritized and marital status must be listed on birth declarations – in a country with a 14 per cent teenage pregnancy rate and 44 per cent female-headed households). Advocacy aimed at reforming the current institutional, legal, technological and social environment toward greater inclusiveness and efficiency has gained momentum, with the First Lady championing the use of mobile identification equipment within public health campaigns to reach more children, particularly those from disenfranchised communities.

However, due to limited funding, the needs to reform and modernize the birth registration system could not be addressed. National authorities expressed interest in the subject, with active mobilization by the First Lady, and steps were taken to rationalize the institutional framework, paving the way for modernizing the system; shifting from a paper-based system to a digitalized system incorporating mobile outreach strategies. The National Identification Office piloted automated birth registration systems at five obstetrical units in the capital, Port au Prince. It is hoped that lessons learnt from this experiment will inform the large-scale scaling-up of the system, for which UNICEF has advocated and mobilized support.

**OUTPUT 4** By 2021, communities, parents, children and adolescents understand the benefits of and demonstrate increased capacities to protect children against violence including during early childhood

#### **Analytical statement of progress**

Partnerships with the health and education sectors provided opportunities for a broader dialogue on violence, neglect and exploitation. Joint nutrition-protection interventions, in particular, offered a platform for incorporating elements of parental education into nutritional education activities, including information on ways to better foster healthy dialogue, nurturing parental practices and stimulation of young children.

Parental education initiatives relied on the UNICEF manual *Facts for Life*, which addresses parenting practices across sectors. This module was complemented with financial education training to complement economic empowerment strategies. These strategies used a combination of unconditional cash, income-generation activities, vouchers to access social

services and non-food items to assist families to address short- and medium-term social needs. All of these strategies were supported with parenting education and community dialogue strategies to improve parental engagement and commitment to a more protective environment.

Additionally, partnership with the education sector enabled the development of a code of conduct addressing violence in the school system, which was validated by the MoE.

Results were also due to the overall response to Hurricane Matthew, which included adolescent groups, mobile and fixed child-friendly spaces, leading to exceeding planned results. Resources deployed in support of earlier post-hurricane emergency child protection response and post-Matthew activities (which continued in early 2017), account for results that exceeded annual targets for reaching children and adolescents with activities to improve their capacity to report and identify violence. The cross-sectoral strategies and mobile community outreach approaches employed provide a blueprint for future action.

UNICEF also invested in building the capacity of partners, enabling them to use a life-skills approach that incorporates stress management and psychological first aid in their support to vulnerable youth. Specifically, partners received training on addressing cumulative stress in youth (18 training-of-trainers sessions). Dialogue with influential community leaders, such as the Episcopate, was also initiated, to build alliances and engage and support social actors in their dialogue over issues such as institutional care, access to education, disciplinary practices and childrearing practices.

Moreover, the prevention of gender-based violence ('start, awareness, support, action') methodology, aiming at supporting social dialogue among communities on gender-based violence was rolled out in three departments. Case referral and community-based alert systems emerged as significant areas to be strengthened. UNICEF provided technical support to government and civil society partners resulting in 19 community networks supported, trained and guided. This resulted in an increased number of cases referred by community actors (from 5 to 23 per cent) in targeted areas. The increase reflects strengthened community involvement in child protection governance and problem solving.

**OUTPUT 5** During emergencies, children and their families have access to need-based quality services that prevent and respond to violence, exploitation and family separation.

### **Analytical statement of progress**

In 2017 Haiti's child protection sector faced two major humanitarian crises: one, continued (since June 2015) deportation at the border with the DR, putting children and their families at risk of statelessness; and, two, the aftermaths of Hurricane Matthew in South and GrandAnse Departments, which left many families struggling in late 2016, increasing children's exposure to vulnerabilities.

The deportation process from the Dominican Republic continued and assistance to children affected by cross-border migratory patterns represented a major area of work. UNICEF Haiti expanded programming and partner presence at 16 non-official crossing points, with a view to increasing reception capacity for the most vulnerable children and women. Programming also integrated community outreach approaches to raise awareness of the risks and support sustainable returns for 4,167 children in 2017.

2017 was also marked by residual needs in areas affected by Hurricane Matthew. UNICEF Haiti

strived to ensure that emergency programming was designed to foster resilience, making it possible to address structural drivers of family separation, violence, abuse, neglect and exploitation.

Funding for the post-hurricane emergency child protection response and post-Matthew activities, which continued in the first quarter of 2017, enabled UNICEF and partners to reach 42,382 children through recreational and psycho-social support activities in 2017 (130 per cent completion of 2017 annual target).

Most emergency programming strategies were progressively phased out and woven into regular programming. Child-friendly spaces evolved into mobile integrated social work/health teams leveraging access by health actors to enhance identification processes, while enabling health actors to reach sustained results for treatment adherence and attendance to consultations. Support to emergency response to gender-based violence was complemented through the training of 42 health actors in the detection and referral of child protection cases. Specific standard operating procedures were incorporated into referral maps in targeted communities, while emergency preparedness was included in financial and parenting education training.

Furthermore, UNICEF Haiti used the operational set up in place after Matthew as a stepping stone to enhance child protection coordination. Direct support and daily cooperation resulted in the South and GrandAnse – the two departments most affected by Hurricane Matthew – gradually becoming more systematic and structured in their approach to coordination. The South Department has a regularly updated emergency preparedness and response plan. The child protection sector also validated emergency assessment tools, vulnerability criteria, and provided support for integrating child protection inputs into shelter, nutrition, WASH and cash transfer coordination tools.

## Document centre

### Evaluation and research

Title	Sequence Number	Type of Report
Analyse des facteurs de persistance du choléra et élaboration d'un plan d'intervention pour la ville de Mirebalais	2017/005	Research
Analyse des facteurs de persistance du choléra et élaboration d'un plan d'intervention pour la ville de Hinche	2017/004	Research
Analyse des facteurs de persistance du choléra et élaboration d'un plan d'intervention pour la ville des Gonaives	2017/003	Research
Analyse des facteurs de persistance du choléra et élaboration d'un plan d'intervention pour la zone de Canaan	2017/002	Research
Reducing Stunting in Children Under Five Years of Age - Haiti Case Study	2017/001	Evaluation

### Lessons learned

Document Type/Category	Title
------------------------	-------

Innovation	Complementing UNICEF power sources with solar panels
Innovation	Inter-Agency HACT Training
Lesson Learned	Lesson learned workshop on UNICEF Matthew response

### Programme documents

Document Type	Title	Name
Reviews	Situation Analysis of Children and Women in Haiti 2016	Haiti_SitAn_2016.pdf
CPD	Haiti_CPD_2017-2021	Haiti_CPD_2017-2021.pdf