In 2023, UNICEF estimates that more than 4 million children will need humanitarian assistance in Haiti. Affecting them are many difficult conditions: increased gang-related violence, internal displacement, civil unrest, political instability as the country still reels from the killing of the President and indefinitely postponed elections, a socioeconomic crisis, rising food insecurity and malnutrition, the resurgence of cholera and the continued expulsion of Haitian migrants from several countries in the Americas, including the neighbouring Dominican Republic.

UNICEF supports the Government and humanitarian partners in ensuring access to and continuity of basic services for affected children and families. UNICEF provides water, sanitation and hygiene (WASH), education, health, nutrition, child protection and social protection services, and is also responding to the resurgence of cholera. An important component of UNICEF’s work is disaster risk reduction and emergency preparedness activities.

UNICEF is requesting US$210.3 million to meet the humanitarian needs of Haitian children and their families in 2023.

KEY PLANNED TARGETS

652,200
children and women accessing primary healthcare

1.3 million
people accessing a sufficient quantity and quality of water

1 million
children accessing formal or non-formal education, including early learning

5.2 million
people

4 million
children

IN NEED

2019
2023

TO BE REACHED

2.7 million
people

1.6 million
children

FUNDING REQUIREMENTS

US$ 210.3 million

2019
2023

Figures are provisional and subject to change upon finalization of the inter-agency planning documents.
HUMANITARIAN SITUATION AND NEEDS

In Haiti, nearly 59 per cent of the population lives below the poverty line, with limited access to basic services. Haiti ranks 183 out of 191 countries on the 2021 Human Development Index, and is affected by political turmoil; cholera; poverty; institutional and socioeconomic crises; and natural disasters. Together, these challenges have resulted in persistent humanitarian needs.

A resurgence of cholera in Haiti was confirmed on 2 October 2022. As of 10 November, 734 cases had been confirmed in four departments. The cholera outbreak is layered over major social unrest and gang-related violence, which has gripped the country since September. At the same time, severe fuel shortages restrict utilities and the delivery of basic services, including water and health care. In 2020, 33 per cent of the population was deprived of access to a basic water service, and UNICEF estimates that needs will increase with more people affected by the current overall deterioration. What's more, the impact of fuel restrictions on medical facilities and workers prevents some services from being provided, with severe implications for the management of the cholera outbreak. The fuel restrictions also impact aid delivery, data collection and transportation of test samples and results.

September 2022 saw a peak in violent protests, which had been building since mid-2021 due to gang violence and the killing of the President. Civil unrest and gang violence have directly affected access to education and health services for at least 1.5 million people, while more than 4 million children continue experiencing malnutrition and poor access to education, protection and basic services. The premises of United Nations agencies and non-governmental organizations have been targets of violent lootings. At least 96,000 people are internally displaced in Haiti due to gang violence and civil unrest, including unaccompanied children exposed to abuse, exploitation and violence.

A nutrition assessment in Cité Soleil, an impoverished neighbourhood in the Port-au-Prince metropolitan area, revealed that 20 per cent of children under age 5 are wasted. All told, 4.7 million people in Haiti are facing acute hunger. Where health services are not closed or damaged, irregular availability of electricity, water and fuel jeopardizes activities, aggravating the cholera risks. Around 4 million children aged 5-19 years risk losing learning opportunities. In 2022, 60 per cent of 3,000 schools assessed by UNICEF and the Ministry of National Education and Vocational Training have been vandalized, and more than 500,000 children have lost access to education.

Haitians also face natural hazards and the continued expulsion of Haitian migrants from several countries in the Americas including the neighbouring Dominican Republic. Furthermore, reconstruction efforts remain limited following the 2021 earthquake in the south, with more than 250,000 children there still without access to adequate schools and several health centres still in need of reconstruction.

SECTOR NEEDS

<table>
<thead>
<tr>
<th>Sector Needs</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>People in need of health assistance</td>
<td>4.5 million</td>
</tr>
<tr>
<td>Children in need of nutrition services</td>
<td>778,600</td>
</tr>
<tr>
<td>Children in need of protection services</td>
<td>1.2 million</td>
</tr>
<tr>
<td>Children in need of education support</td>
<td>4 million</td>
</tr>
<tr>
<td>People lacking access to safe water</td>
<td>3.3 million</td>
</tr>
</tbody>
</table>

STORY FROM THE FIELD

Marceline, 12, fled with her mother to escape fights between armed gangs in the metropolitan area of Port-au-Prince in Haiti, to find refuge in Kay Castor. "We had to flee so that we wouldn't be victims of the gangs," Marceline says. "We took detours, so the gunmen couldn't see us. Otherwise, they would force us to stay in the area and shoot at us. They burn houses, kill innocent people."

UNICEF provided children and families displaced in Kay Castor with psychosocial support and mobile health clinics, along with safe drinking water, in cooperation with local authorities.

Read more about this story here
In collaboration with the Government, UNICEF will work with partners to ensure access to and continuity of essential services while responding to cholera and urban violence and strengthening disaster risk reduction and preparedness. Humanitarian cash transfers will be provided to improve access to basic goods and services.

In urban areas affected by gang violence, while responding to the needs of internally displaced people UNICEF will also invest in UNICEF access and engagement capacities to better address the needs of those unable to leave including supporting partners with access opportunities. UNICEF will focus on mobile teams, distributions of critical supplies and promoting community engagement, ownership and resilience.

In response to the cholera outbreak, the case area targeted interventions (CATI) approach will be employed, together with community sensitization, support to treatment centres and WASH responses.

UNICEF will support continued access to essential health care services, immunization and maternal and child health, including in earthquake-affected areas, and will also reinforce health supply chain management.

UNICEF will scale up treatment of severe wasting in children with screening, referral and provision of quality therapeutic care, including in areas affected by cholera, while promoting infant and young child feeding practices. UNICEF will provide nutrition supplies, strengthen end-user monitoring and information management and will complete a SMART survey.

WASH interventions will focus on access to sufficient safe drinking water, sanitation and hygiene services. Prevention of waterborne and infectious diseases will be prioritized through water trucking, household water treatment, rehabilitation of WASH infrastructure, waste disposal, hygiene promotion and distribution of hygiene kits. WASH in schools in the Port-au-Prince metropolitan area will also be prioritized.

UNICEF will promote safe access and return to learning through the provision of school supplies, access to multiple education pathways, psychosocial support and cholera and disaster risks prevention. Conditional cash grants will be provided to schools that enroll vulnerable children and improve educational infrastructure and teachers’ capacity management, using education as a gateway to strengthen social cohesion and promote peacebuilding.

Protection of children exposed to violence, including gender-based violence, exploitation and family separation - notably for internally displaced people and migrants - will be prioritized. Specialized services and community-based structures will identify vulnerable children and provide adequate care and referrals.

UNICEF will continue supporting sectoral and national coordination, co-leading the WASH, education and nutrition sectors and the child protection subsector; UNICEF will also co-lead the cholera response with the Government, the World Health Organization and the Pan American Health Organization. Priorities include pre-positioning supplies and community mobilization to foster social and behavioural change and information on rights, entitlements and available services. Gender equality and accountability to affected populations will be mainstreamed throughout the response. For the prevention of sexual exploitation and abuse, child-friendly awareness-raising material and reporting channels will be disseminated.

UNICEF will support the strengthening of existing national social protection system to appropriately target and swiftly scale up humanitarian cash transfers to people affected by urban violence, with a focus on reaching those hardest to reach in order to improve access to basic goods and services.

Progress against the latest programme targets is available in the humanitarian situation reports: [https://www.unicef.org/appeals/haiti/situation-reports](https://www.unicef.org/appeals/haiti/situation-reports)

This appeal is aligned with the revised Core Commitments for Children in Humanitarian Action, which are based on global standards and norms for humanitarian action. Programme targets are provisional and subject to change upon finalization of the inter-agency planning documents.

### 2023 PROGRAMME TARGETS

#### Health

- 162,400 children vaccinated against measles
- 652,200 children and women accessing primary healthcare in UNICEF-supported facilities
- 3,600 healthcare workers within health facilities and communities provided with personal protective equipment

#### Nutrition

- 100,602 children 6-59 months with severe wasting admitted for treatment
- 600,000 children 6-59 months screened for wasting
- 467,175 primary caregivers of children 0-23 months receiving infant and young child feeding counselling

#### Child protection, GBVIE and PSEA

- 57,840 women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions
- 1,253,660 people with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations
- 102,600 children and parents/caregivers accessing mental health and psychosocial support
- 6,480 unaccompanied and separated children provided with alternative care or reunified

#### Education

- 1,000,000 children accessing formal or non-formal education, including early learning
- 1,000,000 children receiving individual learning materials
- 850 classrooms rehabilitated or reconstructed including temporary learning centers

#### Water, sanitation and hygiene

- 1,253,660 people accessing a sufficient quantity and quality of water for drinking and domestic needs
- 884,963 people accessing appropriate sanitation services
- 884,963 people reached with critical WASH supplies

#### Social protection

- 27,200 households reached with UNICEF-funded humanitarian cash transfers

#### Cross-sectoral (SBC, RCCE and AAP)

- 2,000,000 people reached through messaging on prevention and access to services
- 24,100 people sharing their concerns and asking questions through established feedback mechanisms

#### Cholera

- 1,440,000 people assisted with cholera kits through rapid response teams benefitting from "cordon sanitaire" and community response
- 9,000 suspected cases detected, referred to a cholera treatment center or rehydrated in the community
- 4,000 suspected with cholera and severe wasting are managed according to the national protocol for the management of cholera cases in children with acute malnutrition

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Note: The above text is a summary of the content provided in the image. For detailed information, please refer to the original document.
FUNDING REQUIREMENTS IN 2023

In 2023, UNICEF is requesting US$210.3 million to meet the needs of 2.7 million people in Haiti, including 1.6 million children. The upsurge in violence and social unrest, the resurgence of cholera and the residual needs of the most vulnerable earthquake-affected population have led to an increase in humanitarian needs and funding requirements in Haiti compared with 2022. At least US$23.5 million in additional funding is urgently required to respond to the resurgence of cholera cases.

Full funding of this appeal is critical to enable UNICEF to provide life-saving goods and services to children and vulnerable populations in the context of insecurity and health, social and economic crises. These resources will allow UNICEF to provide access to increasingly scarce water and sanitation - including in urban areas - the lack of which has been one of the main causes of the cholera epidemic; mitigate the effects of continuing degradation of such essential social services as health services and life-saving care for children suffering from severe wasting; and care for the growing number of children and women who are victims of violence, separated children and those in the hands of armed groups. Funding will also enable UNICEF to ensure access to formal and informal education and to cover essential emergency WASH and child protection interventions. Without sufficient and timely funding, UNICEF will be unable to support life-saving assistance and recovery for Haiti's children and families in need.

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*This includes costs from other sectors/interventions: Health (9.6%), Cross-sectoral (HCT, SBC, RCCE and AAP) (7.8%), Social protection (5.1%).
Based on the preliminary estimate for the 2023 Humanitarian Needs Overview for Haiti in different programmatic sectors, conducted by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) and humanitarian partners, including UNICEF.

UNICEF is committed to needs-based targeting, which covers the unmet needs of children; and will serve as the provider of last resort where it has cluster coordination responsibilities.

In the cross-sectoral approach, 3,600 households in the urban area of Port-au-Prince will receive cash transfers, representing an estimated level of US$300 per beneficiary. The households are selected through community-based selection criteria, ensuring that the most vulnerable households are targeted.

While UNICEF remains committed to meeting the needs of children affected by the COVID-19 pandemic response, including programme targets and funding requirements, have been shifted into regular development programming and operations. While UNICEF's Level 3 emergency response phase of the COVID-19 pandemic was deactivated, the organization is continuing to respond to the COVID-19 pandemic and its impact on children, their families and their communities and on the social systems they rely on.

UNICEF activated its Corporate Emergency Level 2 Scale-up Procedure for Haiti for the following period: 18 October 2022 to 17 February 2023. UNICEF Emergency Procedures are activated to ensure a timely and effective response to all crises. The emergency mechanism allows UNICEF to adjust resources, in coordination with the Humanitarian Country Team, as needed and to allocate all available resources across the levels of severity.

The nutrition budget and target have been adjusted to the overall sectoral planning agreed in the framework of the 2023 Humanitarian Needs Overview/Humanitarian Response Plan process. The 2023 budget, compared with 2022, includes additional humanitarian cash transfers including, child protection and WASH sector cash transfers.

The cross-sectoral target includes accountability to affected populations, social and structural change activities and indicators.

Basing UNICEF’s investments on its geographical reach, UNICEF is committed to empowering local responders in humanitarian crises in a variety of ways. The revised Core Commitments made investing in strengthening the capacities of local actors in the humanitarian response a mandatory benchmark for UNICEF action. A more localized response will improve humanitarian action and is fundamental to achieving better accountability to affected populations.

UNICEF is committed to supporting the leadership and coordination of humanitarian response through its leadership or co-leadership of cluster coordination for the WASH, Nutrition and Education Clusters and the Child Protection Area of Responsibility. All cluster coordinators costs are included in sectoral programme budgets.

Based on the single largest sector targets for different age groups: nutrition (under 5 years old); education (school-aged children aged 5-14 years); and WASH (only the proportion of the targeted population that is 15 years and older).

An analysis of the situation of children enrolled by armed groups will be carried out to guide the identification, care and socio-professional reintegration of these children.

International Organization for Migration (IOM), “96,000 Haitians displaced by recent gang violence in capital IOM report”, online article, IOM, Port-au-Prince, 28 October 2022.


All sector needs are preliminary figures, based on the ongoing 2023 Humanitarian Needs Overview/Humanitarian Response Plan process for Haiti.

This figure refers to the needs of the global health sector. This figure is obtained from the ongoing 2023 Humanitarian Needs Overview/Humanitarian Response Plan process for Haiti (preliminary data). It corresponds to approximately 80 per cent of the Haitian population concentrated in the most vulnerable departments (Artibonite, Nord, Ouest), plus the three departments affected by the earthquake in 2021.

The nutrition budget and target have been adjusted to the overall sectoral planning agreed in the framework of the 2023 Humanitarian Needs Overview/Humanitarian Response Plan process.

The WASH sector needs have been reviewed within the Humanitarian Needs Overview process by the sectoral coordination team co-led by UNICEF, through a more accurate analysis at the municipality (commune) level, based on the level of vulnerability of the population. The sector needs figure includes all the population living with a certain level of vulnerability (1 to 5), while the sector target includes only the ones living in a vulnerability level of 3 to 5.

UNICEF is committed to supporting the leadership and coordination of humanitarian response through its leadership or co-leadership of cluster coordination for the WASH, Nutrition and Education Clusters and the Child Protection Area of Responsibility. All cluster coordinators costs are included in sectoral programme budgets.

This appeal is aligned with the revised Core Commitments for Children in Humanitarian Action, which are based on global standards and norms for humanitarian action.

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Among the recipients of humanitarian cash transfers, 3,600 households will be supported through an education sector cash transfer programme, where the most vulnerable households will be selected through enrolment of school-aged children affected by the different emergency situations, including displaced victims of urban gang violence. The estimate is based on a social protection sectoral analysis, considering additional humanitarian cash transfers including, child protection and WASH sector cash transfers.

The cross-sectoral target includes accountability to affected populations, social and structural change activities and indicators.

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