

The Challenge of Haiti



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**Pan American
Health
Organization**



*Regional Office of the
World Health Organization*

The Challenge

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Washington, D.C. 2006

HEALTH: A RIGHT FOR ALL of Haiti

Haiti is one of the poorest and most vulnerable countries in the Americas. In recent years, conditions have worsened as a result of the unstable social and political situation, and the impact of natural disasters, which have affected large areas of the country. With the decided and manifested commitment to Democracy of the Haitian population, a new Government presided by his Excellency René Préval has initiated its mandate providing new opportunities for further solidarity and cooperation from the international community.

Life expectancy at birth is currently estimated to be around 53 years, compared to 49 years in 1990, according to United Nations estimates. In the last few years, Haiti has remained free from cholera, polio, and measles, although there are still many challenges to face. Sustained and joint efforts by the Government, the Pan American Health Organization/World Health Organization (PAHO/WHO) and other international governmental and non governmental organizations have been successful in protecting the health of the Haitian people.

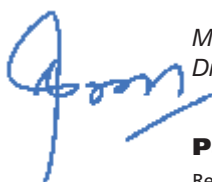
PAHO/WHO has focused its activities in Haiti in two main areas: Humanitarian Assistance and post-disaster rehabilitation; and technical cooperation for National Health Development within the Interim Cooperation Framework (ICF).

PAHO/WHO has been working for decades in Haiti. This sustained work has been possible thanks to a great collective and collaborative effort: PAHO/WHO's permanent country presence, its strong technical support, from both the regional and global levels; support from PAHO/WHO neighboring country offices, particularly from the Dominican Republic; mobilization of horizontal cooperation from other countries and the continuous support of national authorities, donors and multilateral cooperation agencies. Also key to PAHO/WHO's efforts has been coordination with other United Nations and Inter-American System agencies, the Cuban Medical Brigades, non governmental organizations, Haitian civil society as well as other bilateral cooperation.

As a result of this collective effort, many activities and concrete actions have been carried out to benefit the country's population. In this regard, the Millennium Development Goals provide a framework within which aid can be received and invested in long-term and sustainable solutions for the country. PAHO/WHO is advocating for a bi national approach to support Haiti together with Dominican Republic, taking into account the interdependence of both economies and the intense migration between both countries and its impact on the health sector.

This report has three main objectives: first, to share some of the activities developed by PAHO/WHO in the last few years in Haiti; second, to inform the international community and Haitian society about the achievements attained in the health sector resulting from collaborative efforts; and third, to reaffirm to the international community that achieving "Health for All" is not a utopian ideal, but rather an attainable goal even for countries facing complex situations such as Haiti.

In order to move forward in support of Haiti, we must all commit to sustained long term efforts, aiming at improving the country's institutional capacities in the public sector for social inclusion and strengthening democracy under justice, freedom and peace.



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Introduction

This publication takes into account the fact that Haiti is one of the priority countries (in addition to Bolivia, Guyana, Honduras and Nicaragua) identified for special assistance by the Pan American Health Organization/World Health Organization (PAHO/WHO). On the occasion of the 26th Pan American Sanitary Conference (2002), the Member States agreed to provide specific attention to those countries with the most disadvantaged health conditions and to work together in unity and solidarity to improve their people's life and health.

Haiti's maternal and infant mortality rates –two of the most sensitive health development indi-

cators- are the highest in the Region and among the highest in the world. Within this context, PAHO/WHO has strengthened its strategic cooperation efforts and has built strong alliances with different partners to respond to the critical health situation in the country.

Haiti's political instability in the last years, exacerbated the vulnerabilities created by widespread poverty and environmental degradation. The ensuing chronic humanitarian crisis demanded substantial efforts, both by the Haitian government and the international community, to provide tangible solutions to Haiti's structural and development problems.

PAHO/WHO has worked in coordination with many partners, despite the hazardous situation and challenges that everyone faces daily. PAHO/WHO's work could not have been achieved without this enormous collective and collaborative effort.

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Political and



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THE CONTEXT

Humanitarian Crisis

During 2004, the United Nations declared Security Phase III in Haiti and a “UN Mission for the Stabilization of Haiti” (MINUSTAH) was established. Based on the lessons learned over the last decade, government and donors decided to move towards a new partnership elaborating an Interim Cooperation Framework (ICF) to be translated into projects to provide tangible results in the period 2004-2006. At the Haiti’s Contact Group Meeting held in February 2006 at the World Bank in Washington D.C., it was decided to extend the ICF until December 2007.

The ICF exercise has been led by the Government with support of 26 bilateral, multilateral and United Nations agencies. The ICF defines four strategic axes, as follows: (1) strengthening political governance and promote national dialogue; (2) strengthening economic governance and contribute to institutional development; (3) promoting economic recovery and (4) improving access to basic services. Public health issues are included in the fourth strategic axe, which includes five priority objectives:

resume operations in the main hospitals, extend a minimum package of health services to 2.5 million Haitians, strengthen the management and coordination capacity of the Ministry of Public Health and Population; improve the general population’s and vulnerable groups’ access to health care, and restart priority programs.

In order to improve coordination and dialogue among the government, different agencies and other actors involved, 19 sectoral cooperation coordinating groups were created. PAHO/WHO has participated actively in the following ones: Health and Nutrition, HIV/AIDS and Water and Sanitation and solid waste management.

Within this context, the PAHO/WHO Country Office in Haiti is working according to the following lines of action:

- Reinforcing technical presence in the areas more likely to be affected by natural disasters;
- prioritizing equity-oriented resources allocation by financing small projects developed directly by the community (Provie, Cité Soleil; Quartier Lison, in the outskirts of Port au Prince);

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- continuing to invest in the most stable zones with development interventions (Aquien and Port Salut);
- strengthening actions with key partners in and outside the UN system seeking specially to move towards the achievement of the Millennium Development Goals (increased vaccination coverage, maternal mortality reduction, tuberculosis, Malaria and HIV/AIDS prevention and control);
- identifying and implementing concrete coordinated actions with the Dominican Republic particularly at border areas as well as communicable diseases;
- providing support to the Ministry of Health to carry out priority programs as well as coordinating internal partners and external aid.

Health Situation

Life expectancy at birth in Haiti is 53 years, according to United Nations estimates for 2005.

Approximately 40 percent of the population has no access to basic health care. The infant mortality rate in Haiti is 80/1000 live births and the maternal mortality rate is 523/100.000 live births. This last figure is between fifty and one hundred times higher in Haiti when compared to Canada and the United States and seven times higher than in Dominican Republic.

Among children under five, chronic malnutrition affects 25 percent, while acute malnutrition affects 3 to 6 percent. It is estimated that 15 percent of newborns have low-birth-weight. Acute respiratory infections and diarrheas are the cause of death in half of the children under five years of age. Prenatal care coverage is low, 76 percent of deliveries are attended by non-qualified personnel, and 25 percent of deliveries experience complications.

According to the last UNAIDS estimates for 2005, Haiti has the largest number of people living with HIV/AIDS in the Caribbean. HIV/AIDS continues to be a significant threat to life and health. In the population between 15 and 49 years it is estimated that HIV/AIDS prevalence ranges between 2.5 and 11.9 percent. The virus affects both women and men of reproductive age and leaves behind a vulnerable population, particularly orphaned children.

Migration to urban areas and to other countries, particularly the Dominican Republic, has facilitated HIV and tuberculosis dissemination. There is no legislation to protect persons with HIV/AIDS or women who are victims of rape. Those infected are subject to widespread discrimination and have little access to triple-drug therapy.

Vaccination is provided in the majority of health institutions (80 percent) but not on a regular basis. Public dispensaries (24 percent) offer mostly vaccination services. The weakness and deficiencies of the cold chain are a challenge to regular vaccination services; shortages of propane gas, syringes and

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other critical supplies are recurrent. Despite this situation, important achievements have been made. The last case of vaccine-derived polio in Haiti was in July 2001 and the last measles case was detected in September 2001.

Nearly half of Haiti's health services are concentrated in the capital and its poor neighborhoods, with the rest located in rural areas. Although Haiti has very well qualified health workers, there are no comprehensive statistics on the health workforce in the country. Traditional medicine plays an important role, since it constitutes the first recourse for almost 80 percent of the population due to its low cost and proximity.

PAHO/WHO'S INTERVENTIONS

Humanitarian Assistance and Post Disaster Rehabilitation

Haiti has gone through critical situations in the last few years, related to political crises and natural disasters affecting mainly Port-au-Prince, Gonaives, Cap Haitien, Saint Marc, Port-de-Paix and Hinche as well as towns and villages in the North West and Artibonite departments.

PAHO/WHO's Office in Haiti has remained functional during the crises. Only very few non-essential international staff and dependents were evacuated for a short period of time to the Dominican Republic, where PAHO/WHO's country office provided substantial support.

PAHO/WHO remained in contact with its network of partners. Staff and emergency professionals from PAHO Member Countries were deployed to assist Haiti. Technical support to the health sector was mobilized by PAHO and provided from different countries in the Region. Experts in emergency management, epidemiological surveillance and logistics were mobilized.

A simplified epidemiological surveillance system was initiated. Sentinel sites were established, not only in Port au Prince but also in the interior of the country and needs assessment evaluations were carried out in health institutions throughout the country in coordination with national authorities. Messages were broadcast to the population by radio to inform them about hospitals that remained functioning.

The "Plan Opérationnel d'Urgence de Réhabilitation des Institutions de Santé et Entités Centrales, période mai-septembre 2004" was carried out by the Ministry of Health and Population with the support of PAHO/WHO and served as a base for resource mobilization within the Health and Nutrition Sector Table of the Interim Cooperation Framework (ICF) as well as the United Nations Flash Appeal.

PROMESS

Emergency Operations Centers functioned both at PAHO/WHO headquarters in Washington, D.C., and in the country office in Haiti. PAHO/WHO served as the focal point for health, water and sanitation and actively coordinated activities in the Health Sector regarding epidemiological surveillance, vector control, cold chain assessment, as well as immunization activities and provision of essential medicines. PAHO's actions during and after the crises were focused on coordination of activities, monitoring the health situation in the country, and the collection, analysis and distribution of epidemiological information to all partners in the health sector, as well as the distribution of fuel, essential drugs and medical supplies through the essential drugs program PROMESS. PAHO/WHO provided technical support to the health authorities to undertake the Haiti Health Sector Analysis. This analysis allowed the drafting of the National Strategic Plan and served as input for the preparation of the health component within the Interim Cooperation Framework. Moreover, it has been one of the core documents utilized to negotiate cooperation with donors and multilateral agencies between 2003 and 2005.¹

PAHO founded PROMESS -a Central Procurement Agency for drugs and medical supplies- in 1992 as a response to the humanitarian crisis at the time, and has managed it since its inception. PROMESS represents the effort and contribution of a number of committed partners to improve access to essential drugs under PAHO/WHO technical and managerial leadership. PROMESS provides drugs at low cost to public health institutions, NGOs and other non-profit organizations. PROMESS also stores and distributes drugs, vaccines and contraceptives related to the main priority programs subsidized by donor agencies. Most drugs for HIV/AIDS and tuberculosis treatment in Haiti are provided through PROMESS.

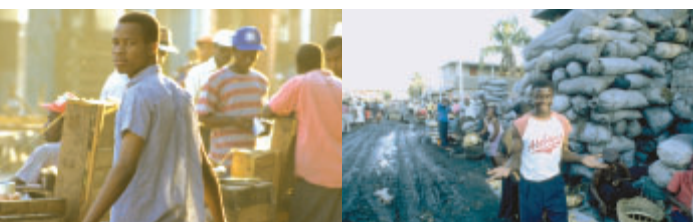
During emergencies, supplies of essential drugs, surgical and other materials have also been channeled through PROMESS and distributed free of charge to 40 health institutions countrywide, including public hospitals and health centers as well as private non-profit health institutions. In past crisis, PROMESS has been spared of looting, a clear sign of the level of respect that the operation of PROMESS commands in the population and the prestige attached to it. In 2006 a great effort is being carried out for its relocation to a more functional and secure warehouse. Meanwhile, secure access to current premises is being arranged through collaboration from MINUSTAH.

¹ For more detailed information on this issue, please visit our webpage: <http://www.paho.org/English/DD/PED/haitisituation2004.htm>

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Technical Cooperation for National Health Development

Mobilizing partners and resources



PAHO/WHO strengthened its strategic cooperation efforts and built strong alliances with different partners (agencies, donors, other providers, including NGOs and private non profit health institutions) in order to respond to the critical health situation in the country. These alliances included traditional partners such as the Inter American Development Bank (IADB), through its project on “Basic Services for HIV/AIDS”; the Canadian International Development Agency (CIDA) for the acquisition of essential medicines; and the World Bank for vaccination, disaster management, nutrition and healthy schools.

ECHO – European Union Directorate General for Humanitarian Aid - has cooperated on projects related to the rehabilitation of the water supply network and disaster management while United States Agency for International Development (USAID) and Office for the United States Foreign Disaster Assistance (OFDA) contributed to several projects on emergencies and humanitarian action.

The Swedish International Development Agency (SIDA) has cooperated with the implementation of Epidemiologic Sentinel sites. PAHO/WHO strengthened maternal and child health programs as well as HIV/AIDS Projects- focusing on the 3 x 5 Initiative. Human resources were mobilized through Technical Cooperation among Countries (TCC) projects, particularly with Cuba in the area of solid waste management, biomedical equipments and safe motherhood.

During the period 2003-2005 more than 850 technical staff from national institutions and their partners have benefited from PAHO/WHO’s technical support and knowledge sharing.



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Partners for Peace

PAHO/WHO implemented projects to promote youth leadership and working opportunities to foster a safe and more peaceful environment. Working closely with affected communities in the poorest areas, a new program, “PROVIE Communauté en action”, was established to empower local communities to identify and act upon environmental risks. Through this project, tools and knowledge are provided to the community to solve identified environment problems. In Cité Soleil, the poorest area of Port au Prince, more than 260 young people were involved in sanitary projects, choosing peace promoting activities to reduce violence in the area. ECO-CLUBS were also created to work with youth in order to improve the quality of the environment.

Family and Community Health

Integrated Management of Childhood Illness (IMCI) is an effective, low-cost strategy aimed at improving children’s health status at both the health facility and community levels.

In collaboration with other partners, technical assistance was provided to the Ministry of Health for the development of a five year Strategic Plan for Child Health, as well as for revision of training materials on Community IMCI.

In addition, an agreement was reached between PAHO and the Catholic Medical Mission Board (CMMB) to start a project “Action for Family Health” to build the capacity of Catholic Health Care networks to scale-up three components of the IMCI strategy: provision of essential drugs, strengthening country activities for prevention of mother to child transmission of HIV/AIDS, and leveraging the vast network of faith-based organizations.

Healthy Schools

Schools have a critical role in promoting health for children and adolescents. As part of the healthy schools project, supported by the World Bank and which involves several partners, activities were carried out on de-worming and nutrition of school age children in Haiti.

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A survey on the prevalence and intensity of parasitic infections, a survey on Knowledge, Attitudes, Beliefs and Behavior of the population regarding intestinal parasites, a trainer of trainers session and training sessions for the Ministry of Education personnel were implemented.

Nutrition activities included reproduction of technical guidelines for the management of moderate and severe malnutrition at the institutional level, provision of materials to the University Hospital in Port au Prince for the treatment of severe malnutrition, and provision of equipment to the Ministry of Health for the production of iodized salt.

Safe Motherhood

Among the activities carried out with United Nations Population Fund (UNFPA) and other partners were the following: implementation of a workshop aimed at revitalizing the national family planning program; elaboration of the National Strategic Plan for the Reduction of Maternal Mortality (2003-2008); extension to the rest of the country of a surveillance system for maternal mortality promoted in Aquin and Port-Salut; revision and updating of treatment protocols; training of physicians and nurses; re-opening of the National School of Obstetric Nurses; development of reproductive health standards, supervision guidelines and referral/counter-referral guidelines; elaboration of a Master Plan for the Creation of a Center of Excellence in Maternal and Neonatal Health. The Maternity Isaie Jeanty will be the reference Center.

The Cuban cooperation has been a key element in this project, while the involvement of the Haitian diaspora is becoming more relevant.

Health Systems and Services

There were increasing difficulties along the crisis in the last few years, to supply hospitals with drugs, medical and surgical supplies, water, propane gas, and diesel. Such problems were exacerbated by the interruption of the stocking drugs process in peripheral warehouses located in zones of difficult access and lack of human resources.

PAHO/WHO is distributing fuel donated by the Government of Venezuela to generate electricity in health establishments. A donation of a total of 528,000 gallons is intended to supply public and non profit Haitian health institutions. Hôpital La Paix in north Port-au-Prince, Sanatorium in the south of Port-au-Prince and the Hôpital de l'Université d'Etat d'Haiti have already received fuel which allowed the functioning of generators and ambulances.



Health Analysis, Epidemiological Surveillance and Infectious Diseases

PAHO/WHO considers the improvement of a health information system in Haiti as a priority and has strongly supported the creation of a sustainable and adequate national system through the promotion of a regional epidemiological/surveillance network, and a network of public health laboratories.

PAHO/WHO has widely distributed health information available in the country and has participated in the response to outbreaks such as typhoid, diphteria and intoxications. Moreover, a joint project with the Dominican Republic on vector control and a project against malaria in the two most affected border areas were carried out with PAHO/WHO support.

Building a Better Environment

Through the Project “Salubrité de l’Environnement et Promotion de la Santé” (SEPROSA), PAHO/WHO cooperates in two different but interconnected areas: Environmental Health and Health Promotion. Its actions aim to provide technical assistance to institutions in the public sector and civil society that deal with priority areas, and to implement health promotion campaigns through social mobilization. SEPROSA conducts its activities in close collaboration with several partners, including Quisqueya University in Port au Prince.

One of the activities that already has been implemented is the rehabilitation of the potable water system in poor neighborhoods of Port-au-Prince.

Regarding the improvement of schools sanitary conditions, particularly in Aquin and Port Salut, hygienic sanitary units in 10 rural schools in the South Department were constructed. Within this project, also provision of potable water and the implementation of a sanitary education program are being carried out.

In Fond Verrettes, in collaboration with other partners, PAHO/WHO has provided financial assistance for the construction of family latrines. PAHO/WHO also provided financial aid for environmental improvement in four city schools within the program “PROVIE: Communauté en Action”.

HIV/AIDS and Safe Blood

PAHO/WHO's contribution to the control of the epidemic in Haiti involved several activities, within the health sector global strategy framework against HIV/AIDS (2003-2007).

PAHO/WHO and the Inter-American Development Bank, with the participation of the Ministry of Health and Population of Haiti, are part of the "Projet d'Appui aux services de santé de base VIH/SIDA" aimed at the implementation of a comprehensive program on HIV/AIDS care. The project consists of three main components: (i) implementation of a Strategic National Plan for HIV/AIDS prevention and control, (ii) strengthening of local capacities, particularly in Petit-Goave and Jean-Rabel and (iii) institutional strengthening to ensure safe blood.

Within these components, several activities have been carried out in terms of education, prevention, resource allocations, strengthening of community networks, strengthening of institutional networks related to blood safety and management and evaluation activities.

Currently, blood donation in Haiti is the weakest in the western hemisphere: 0.76 units per 1000 inhabitants. PAHO/WHO in coordination with the Ministry of Health and the Haitian Red Cross are committed to providing training in order to raise awareness about the importance of blood safety and encourage the establishment of national programs and legislation on this issue.

One of the main requirements for a safe blood supply is that donations be from volunteers. In this regard, PAHO/WHO supports GHESKIO (the Haitian Group for the study of Kaposi's Sarcoma and Opportunistic Infections) to develop and implement a nationwide campaign to recruit voluntary non-remunerated blood donors. The project is part of President Bush's Emergency Plan for AIDS Relief (PEPFAR) support to enhance blood safety and expand blood transfusion services, and is an essential part of the Haitian government's strategy in the fight against HIV/AIDS.

Intense coordination of partners around a National Plan to control HIV/AIDS is still a key challenge.

Expanded Programme of Immunization (EPI)

PAHO/WHO has worked on a plan of action (2005-2009) with strategic orientations and a series of activities that would enable Haiti's Ministry of Health to decrease the prevalence of other immune-preventable diseases such as diphtheria and whooping cough by strengthening the routine program; maintain the achievements of measles and polio eradication, and to eliminate maternal and neonatal tetanus by 2009; strengthen epidemiological surveillance systems; and strengthen vaccine management, cold chain and logistics, as well as vaccine safety.

PAHO/WHO continues to work towards the implementation of Measles, Mumps and Rubella (MMR) immunization activities, which will assist in maintaining the achievement of eradicating measles in Haiti, and strengthening the routine vaccination program.

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The Ministry of Health has declared its goal to eliminate Maternal and Neonatal Tetanus (MNT), echoing the recent goal declared jointly by several UN Agencies, including PAHO/WHO.

PAHO/WHO initiated an investigation in 2004 to confirm and characterize a reported diphtheria outbreak. PAHO/WHO continues to work on increasing and maintaining population immunity to vaccine preventable diseases at the highest possible levels. Strengthening the routine vaccination program as well as performing regular vaccination campaigns in Haiti continues to be high-priority activities for PAHO/WHO.

In addition to the vaccination activities, a number of steps must be taken to prevent future epidemics, namely epidemiological surveillance and active search of suspected cases. These activities will involve a combination of local Haitian experts and external funding.

A joint PAHO/WHO – UNICEF project for immunization to be supported by CIDA is being finalized.

Technical Cooperation among Countries (TCC)

Technical Cooperation among Countries is a way to promote Sustainable Human Development among developing countries. Through this mechanism, developing countries pool their experiences and technical capacities to face their problems, fostering collective self-reliance while broadening the scope and quality of international cooperation.

Horizontal cooperation projects were supported by PAHO/WHO. These projects involved different countries and covered many areas in order to provide Haiti with technical cooperation in health.

The project “Support to technical working groups to prepare for Antiretroviral Therapy negotiations” included Grenada, Jamaica, Guyana and Haiti. It was considered necessary that a sub-regional framework be adopted to help build capacity to negotiate medicine prices by Caribbean governments with regional and sub-regional pharmaceutical companies.

Two projects, “Solid Waste Management” and “Maintenance of Biomedical Equipment” included the cooperation of Cuban technicians. The main objective was to strengthen infrastructure of Community Health Units in D’Aquin and Port-Salut in order to improve sanitary conditions and health through specific interventions.

The project “Sanitary Emergency” agreed between Haiti and Uruguay aimed at supporting Haiti during the emergency situation in 2005, mainly in Port de Paix and Gonaives. A team of Uruguayan doctors visited Haiti and worked in Laborde, 10 km from Les Cayes and Port Salut.

In 2005, a project on “Water and Sanitation” was agreed between Haiti and Paraguay. The objective was to share experience of Paraguay regarding the “juntas de saneamiento” for the adoption of a community based approach that allows access to safe water to the most vulnerable populations in Haiti.

PAHO has also supported technical cooperation projects between Haiti and Dominican Republic, mainly in border areas, focusing on prevention and control of communicable diseases, particularly rabies. For detailed information on TCC projects, please visit the following site: <http://www.paho.org/english/d/csu/TCC05index-Eng.htm>

Paving the Road for the Future

The continuing instability of the socio-political situation in Haiti has been a major concern for the international community. Now, with the newly elected authorities, a new and renovated phase opens up in Haiti.

The international community should contribute to a supportive economic environment through both short and long term strategies with high impact in the most vulnerable sectors of the population.

International cooperation is crucial to help Haiti overcome decades of political turmoil and negative economic growth. The number of financial donors has increased in recent times, and the profile of the donor community has been increasingly shaped by the growing presence of non-

governmental organizations. However, it is still necessary to develop further coordination between these non-governmental organizations, the government and international organizations and agencies.

Access to health care, including drugs and the services of well trained doctors and nurses has been impaired by lack of human resources. People's health is a critical element in the nation's transition to a more stable and safe future, while intensified efforts to address Haiti's structural problems with a long-term approach in the health sector are still needed.

PAHO/WHO has selected Haiti as a priority country and is committed to strengthening its technical cooperation with the country according to Haiti's needs, not only through specific projects but also within the context of the ICF, mobilizing the support from the Haitian "diaspora" and advocating for a binational approach that includes the Dominican Republic towards fulfilling the Millennium Development Goals.

It is necessary to apply both resources and strategies to ensure that the Haitian population, -particularly the young, who make the majority of it-, have access to the opportunities that will enable them to perform the duties and exercise the rights of Haitian citizens, as drivers of their own destinies and that of their nation. PAHO/WHO is determined to continue working for the improvement of the health situation of the Haitian people.

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Acknowledgements:

This publication was written by Dr. César Chelala and Lic. Mariela Cánepa thanks to the information provided by the PAHO/WHO Country Team under the auspices of PAHO/WHO Country Support Unit (CSU) and the Emergency Preparedness and Disasters Relief Program (PED).”



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Acronyms

CAMEP: Centrale Autonome Metropolitaine d'Eau Potable
CIDA: Canadian International Development Agency
CMMB: Catholic Medical Mission Board
ECHO: European Union Directorate General for Humanitarian Aid
GHESKIO: Group Haitien d'Etude du Sarcome de Kaposi et des Infections Opportunistes
IADB: Inter American Development Bank
ICF: Interim Cooperation Framework
IMCI: Integrated Management of Childhood Illness

MDGs: Millennium Development Goals
MINUSTAH: UN Mission for the Stabilization of Haiti
NGOs: Non Governmental Organizations
OFDA: Office for United States Foreign Disaster Assistance
PAHO/WHO: Pan American Health Organization/World health Organization
PEPFAR: President Bush's Emergency Plan for AIDS Relief
PROMESS: Essential Drugs Program founded by PAHO in 1992
SEPROSA: Salubrité de l'Environnement et Promotion de la Santé

SIDA: Swedish International Development Cooperation Agency
SNEP: Service National d'Eau Potable
SUMA: Humanitarian Supply Management system developed by PAHO
TB: Tuberculosis
TCC: Technical Cooperation among Countries
UNAIDS: Joint United Nations Programme on HIV/AIDS
UNFPA: United Nations Population Fund
USAID: United States Agency for International Development
WB: World Bank

<http://www.paho.org/spanish/d/csu/Haiti.htm>



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