The month of August 2017 witnessed the maintenance of a “low” cholera situation, with a number of cases equivalent to that of 2014, which represents a significant decrease compared to previous years. Thus, the number of suspected cases between January and August is 9,531 and 110 deaths, as against 27,479 and 252 deaths over the same period in 2016. The departments of Artibonite, Centre have the highest prevalence of the epidemic in the country, with 70% of the country’s total cases between weeks 31 and 35 of 2017, mostly in rural areas that are difficult to access. To address this situation, (19) response teams from the eight (8) non-governmental organizations supported by UNICEF and PAHO / WHO in support of the MSPP have been redeployed to outbreak areas to strengthen community activities and institutional care.

4 specialized field teams are deployed throughout the country to improve the quality of care and the sanitation conditions in the cholera management structures. However, the lack of funding for the National Cholera Elimination Plan is delaying the implementation of the integration and upgrading of all structures.

**Haiti: Cholera figures (as of 31 August 2017)**

The month of August 2017 witnessed the maintenance of a “low” cholera situation, with a number of cases equivalent to that of 2014, which represents a significant decrease compared to previous years. Thus, the number of suspected cases between January and August is 9,531 and 110 deaths, as against 27,479 and 252 deaths over the same period in 2016. The departments of Artibonite, Centre have the highest prevalence of the epidemic in the country, with 70% of the country’s total cases between weeks 31 and 35 of 2017, mostly in rural areas that are difficult to access. To address this situation, (19) response teams from the eight (8) non-governmental organizations supported by UNICEF and PAHO / WHO in support of the MSPP have been redeployed to outbreak areas to strengthen community activities and institutional care.

4 specialized field teams are deployed throughout the country to improve the quality of care and the sanitation conditions in the cholera management structures. However, the lack of funding for the National Cholera Elimination Plan is delaying the implementation of the integration and upgrading of all structures.

**SUSPECTED CHOLERA CASES** *(DELR¹ available data)*

**WHERE (1st to 31th AUGUST 2017)**

**FUNDING**

Till date, only 4.8 million dollars out of 34.7 M requested in the HRP has been received. The Multi-Partner Trust Fund (UN Haiti Cholera Response MPTF), put in place to collect and manage resources in response to cholera in Haiti, has raised 2.7 million dollars as of August 2017. There is an additional amount of 8 million dollars of United Nations Central Emergency Response Fund (CERF) loan granted to UNICEF to maintain cholera response activities.

HUMANITARIAN RESPONSE PLAN 2017

-$34.7M requested

+$4.8 M funded

13.8% Funded

**WHY DOES CHOLERA STILL PERSIST?**

- Underfunding of national plan of elimination of cholera
- Weak water and sanitation infrastructure
- Lack of access to quality medical care
- High population density and mobility to urban areas

¹ Direction d’Epidémiologie, de Laboratoire et de Recherches ² Multi-Partner Trust Fund

The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.

Update date: 25 September 2017 Sources: Accuweather, MSPP, PAHO/WHO, UNICEF Feedback: ocha.haiti.ILM@gmail.com www.unocha.org www.reliefweb.int