NEW UN SYSTEM APPROACH ON CHOLERA IN HAITI

SECRETARY-GENERAL ANNOUNCES NEW UN APPROACH TO CHOLERA IN HAITI

On August 19th, the Secretary-General announced a new approach to cholera in Haiti. The Secretary-General is actively working to develop a proposal on material assistance and support to those most directly affected by the cholera epidemic. At the same time, the UN, in partnership with the Haitian Government, is intensifying its support to treating and reducing cholera, and ultimately ending the transmission of the disease. This can be achieved by building durable access to water, sanitation and health systems, and by investing in those long-term solutions now.

The Secretary-General aims to present this plan to the General Assembly in the period ahead. The Secretary-General believes that these efforts can succeed with strong political will and financial support from Member States and all those invested in Haiti’s future.

**TRACK 1**
INTENSIFYING SUPPORT FOR CHOLERA CONTROL AND RESPONSE

The first track is a greatly intensified effort to respond to and reduce the incidence of cholera in Haiti.

**Rapid Response:** The UN has been working closely with the Haitian Government in the critical, ongoing response to cholera by supporting the deployment of ‘Rapid Response’ teams to areas where cholera is reported. These teams place a cordon sanitaire around areas of concern and begin the immediate provision of clinical treatment; rehydration of affected individuals, disinfecting homes and community areas, chlorinating water supplies; and managing potentially infectious solid waste.

Their work has been critical saving lives and cutting cholera transmission. Funding shortages in early 2016 led to a reduced number of rapid responders which negatively impacted control of the disease during the rainy season. The intensified in-country plan calls for urgently increasing the number of rapid response teams and ensuring that they are trained and able to deploy in as little as 24-hours.

**Vaccination:** In addition to the ‘Rapid Response’, an oral cholera vaccination is an important preventive measure when used alongside targeted clean water and sanitation interventions. PAHO/WHO & UNICEF alongside the Haitian Ministry of Health have vaccinated more than 400,000 Haitians since 2013, including 118,000 so far in 2016. The Ministry of Health has proposed to expand the initial target group of vaccination beneficiaries to 868,000 persons during 2016-2017.

**MORE EFFECTIVELY ADDRESSING THE MEDIUM/LONGER TERM ISSUES OF WATER, SANITATION AND HEALTH SYSTEMS**

Haiti has the lowest rate of access to water and sanitation in the Western Hemisphere, with currently only a quarter of the population having access to decent toilets, and half the population having access to safe water. The outbreak of cholera in 2010 and subsequent impact on the population has shown the vulnerability of Haiti’s existing water, sanitation and health infrastructure. The United Nations is working with key partners such as the World Bank, the IDB and others to ensure that Haiti meets the Sustainable Development Goals.

**TRACK 2**
PROPOSAL TO PROVIDE MATERIAL ASSISTANCE FOR THOSE MOST AFFECTED BY CHOLERA

Nearly 800,000 Haitians have been infected by cholera since 2010 and more than 9,000 have died of the disease. The UN is committed to a transparent, holistic process of providing support to those most affected. Outreach to those affected is a key component of developing the proposal for the material assistance package. Consultations with experts are also underway in order to gain the benefit of their expertise and experience in developing the proposal. This process will also include Member States, who must provide the necessary mandate and funds for the support package and the mechanism through which it is to be delivered. Engagement with Member States has already begun.

**MOBILIZING RESOURCES FOR AND RAISING GLOBAL AWARENESS OF THE NEW APPROACH**

The priority for mobilizing new resources for this comprehensive approach is to ensure flexibility, rapid response capacity, effective multi-level coordination; and, starting the investment in longer-term development solutions now, with sustained engagement from development institutions over time. Outreach is being planned to individual international financial institutions, donor countries, and other key stakeholders and partners. The overall anticipated funding requirement for the new two-track approach will required $4-500 million over the next two years.

Funds are urgently needed now to fund the elements of the immediate response to cholera and prevent a devastating spike in the disease brought on by the rainy season.