

# Haiti: A Deepening Public Health Crisis

January 2025 | Haiti

## Key Messages

- **In the first eight months of 2024, overall mortality estimates\* were over twice as high compared to 2023 figures.** In Artibonite, they surpassed the WHO emergency threshold. Concerning trends emerged in other regions, including Sud-Est, Ouest, Centre, and Nord. This sharp rise in such a short time signals an acute public health crisis demanding urgent action.
- **Non-traumatic drivers, such as chronic and acute illnesses, drove most deaths, exacerbated by extreme violence, insecurity, economic hardship, and climatic shocks.** Resulting displacement, damaged infrastructure, and trade disruptions significantly affected access to basic needs and services and eroded the populations' coping capacity. This fueled acute food insecurity (for nearly half the population) and malnutrition and facilitated the spread of disease.
- **The crisis is expected to deepen in 2025.** Critical drivers of mortality in the first eight months of 2024 (violence, floods, displacement) persisted, if not intensified, throughout the second half, and prospects of a solution to end extreme violence are lacking. Acute food insecurity is projected to swell in the coming months, ahead of the typical lean season. Without improved access to basic needs, and under a possible scenario of declined assistance, **preventable loss of life will likely continue to manifest among the most vulnerable.**

## 0.73

The overall\* crude death rate (CDR) **is more than twice as high** as the nationwide CDR from 2023, indicating a worrying trend of increasing crisis severity.

## 1.04

The CDR in Artibonite was **significantly\*\* higher** than the overall rate, and **passed the WHO Emergency Threshold.**

## Context & Rationale

Haiti's complex humanitarian crisis is characterised by insecurity and gang violence on top of years of recurring drought, climate shocks, and economic instability, leaving over 1 million people displaced and an estimated 5.5 million in need of humanitarian assistance. A significant escalation of violence and political turmoil in 2024 further eroded critical services and institutions, including the country's health system and water infrastructure. These factors contributed to widespread acute food insecurity (affecting 48% of the population) and malnutrition.

REACH has conducted a retrospective mortality survey as part of the 2024 Multi-Sector Needs Assessment (MSNA) to gather critical data on crude and under-five mortality rates and their leading causes. This data aims to guide government and humanitarian actors with resource prioritisation and response planning and to contribute to advocacy

efforts for enhanced funding and programmatic action to strengthen Haiti's health systems and response strategies. Find the full technical report [here](#).

### Using the crude death rate (CDR) and under-five death rate (U5DR) to estimate severity

The CDR and U5DR are measures to estimate the severity of humanitarian crises and/or the effectiveness of public health interventions. Mortality rates can be compared against the global WHO emergency threshold ( $\geq 1$  death per 10,000 people per day, or  $\geq 2$  deaths per 10,000 children under 5 per day) to determine whether a population faces a critical crisis. A doubling of baseline mortality is another critical indicator used to define acute emergencies, particularly in protracted crises.

\* This figure does not include IDPs as the sampling frame for the MSNA for this demographic was non-probabilistic. More information on the methods on p.4. \*\* The difference was statistically significant with a p-value of less than 0.05.

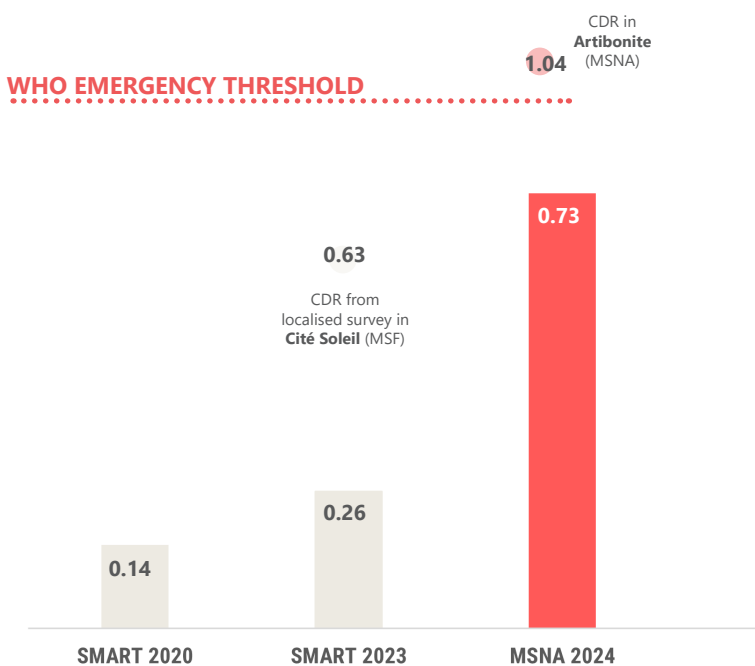


Figure 1. Crude death rate (CDR) values from nation-wide surveys in 2020, 2023, and 2024.<sup>1</sup>

## Mortality has more than doubled compared to 2023

The overall mortality rate found among non-displaced households in Haiti in the first 8 months of 2024 was 0.73 [95% confidence level: 0.60-0.78]. This figure came close to, but did not surpass, the WHO Emergency Threshold of more than 1 death per 10,000 persons per day. The under-five rate of 0.6 [0.2-1.0] did also not exceed the threshold of 2.

**Compared to previous survey results, however, the overall CDR signals a worrying trend. In fact, the rate is more than twice as high as the 2023 figure,** which was in itself already much higher than the rate observed in 2020 (see figure 1). Considering the global Sphere Standards, a doubling or more of the baseline CDR indicates a **public health emergency that requires immediate response.**

**Analysis of subnational data shows that some areas are of particular concern.**

The highest mortality rate was found in the department of **Artibonite**, which saw a worsening of humanitarian conditions since the second quarter of 2023, characterised by increasing access constraints as gang violence spread to rural areas, severely disrupting livelihoods and services.<sup>2</sup> Likely reflective of this worsening of conditions, the mortality rate of 1.04 surpassed the WHO Emergency threshold and was significantly\* higher than

the overall average.

Other areas of concern were **Sud-Est, Ouest, Centre,** and **Nord** — in all these places the upper limit of the confidence interval was above the threshold as well, suggesting that these places might also have been experiencing severe access gaps in the first half of 2024.

## Most deaths were non-traumatic, driven by shock-induced disruptions to critical infrastructure and services

**Most reported deaths were due to non-traumatic causes** (58%), mostly chronic and acute illnesses. Trauma-related deaths accounted for 13% of deaths, with all deaths due to intentional violence being reported in **Ouest**, which includes the Port-au-Prince metropolitan area (ZMPAP), one of the country's conflict hotspots.<sup>3</sup>

Indeed, conflict surged in Haiti in the early months of 2024, particularly in **Ouest, Artibonite, and Centre.**<sup>4</sup> And while deaths were not often directly related to conflict, the findings illustrate that, even though conflict in Haiti strongly roots in the context of gang rivalry and political instability, **the consequences are borne by the population at large.** This is because insecurity, exacerbated by climatic shocks (dry spells, heavy rainfall, floods, hurricanes)<sup>5</sup> and economic stresses, significantly disrupted access to critical services, which were already in poor shape due to years of protracted crisis and limited investment.<sup>6</sup>

**Moreover, the conflict uprooted increasingly large numbers of people in 2023 and early 2024;** estimated at over half a million by June 2024,<sup>7</sup> most of whom were reportedly living among host communities in the south of the country and in crowded IDP sites in the ZMPAP area,<sup>6</sup> stretching thin the limited resources of host communities.

**As a result, half of the population did not have enough to eat,**<sup>9</sup> placing Haiti on the list of the countries at the very highest concern hunger.<sup>10</sup> Gaps in access to sufficient and nutritious food weaken the immune system, making people more vulnerable to diseases. In this context, disease vulnerability is also strongly driven by the overall **very poor access to clean water and sanitation and limited health infrastructure to mitigate risk factors.**<sup>11</sup>

\* The CDR in Artibonite was significantly higher than the overall figure, with a p-value of less than 0.05.

# 65%

of households had WASH-related needs, mostly **a lack of access to improved latrines.**

But in many areas, particularly in **Centre, Grand'Anse, and Artibonite**, over one-third of households relied on **drinking water from unsafe sources** (2024 MSNA).

A political solution to quell violence and deescalate the economic crisis seems unlikely to happen in the short-term,<sup>20</sup> while damages and losses incurred during previous months and the high number of IDPs are projected to drive an increased share of the population into emergency and even catastrophic levels of acute food insecurity through June 2025.<sup>21</sup> As such, **without urgent improvements in the population's access to critical needs and services, preventable loss of lives will likely continue to manifest among affected communities.**

Communicable diseases, such as cholera, which particularly affected Artibonite, Ouest, and Centre in early 2024,<sup>12</sup> spread easily and are hard to contain due to access constraints, limited resources, and frequent displacement, with high disease risks also flagged in overcrowded informal sites and violence-affected neighbourhoods in the ZMPAP area.<sup>13</sup> Reflective of such dynamics, during the 2024 MSNA, 32% of children under 5 had been ill in the two weeks prior to data collection - signalling an extremely severe public health situation as per global standards.

The convergence of these systemic drivers and acute events in the first half of 2024, happening in an already vulnerable context, likely caused mortality rates to increase substantially to the levels measured in assessed areas during the 2024 MSNA.

## The crisis is expected to deepen in 2025

**The factors that likely drove acute needs in the first half of 2024 persisted, if not intensified, in the second half.** Conflict increased substantially in November and December of 2024, particularly in Ouest and Artibonite, and more violence was targeted towards civilians.<sup>14</sup> Displacement nearly doubled over the span of a few months, crossing the 1 million mark in December.<sup>15</sup> Heavy rainfall, flooding, and landslides swept across the country in June and again in November and December,<sup>16</sup> damaging croplands and infrastructure, increasingly stretching coping capacities, particularly in areas hosting large numbers of IDPs.<sup>17</sup>

The response, meanwhile, fell short of critical funding, and resources,<sup>18</sup> and access constraints prevented assistance from reaching some of the most affected communities.<sup>19</sup>

## METHODOLOGY OVERVIEW

The 2024 MSNA took place between June 13 and August 8 in Haiti's 10 Départements (admin1) and the Port-au-Prince Metropolitan Area (ZMPAP) through household-level surveys with displaced and non-displaced households. Additional details and findings can be found in the [methodology note](#) and the Haiti MSNA [Publications](#).

The mortality survey was conducted as part of this MSNA but only included host community households because the MSNA sampling framework for displaced households was non-probabilistic. Findings do not include populations in isolated, hard-to-reach areas who could not be interviewed for the MSNA. The retrospective recall period covered the period between January 1st (2024) until the day of data collection (roughly 180 days), and thus covered the traditional lean season.

A total of 180 deaths (including 11 among children under 5) were recorded, yielding sufficient data to meet the sampling thresholds to report findings at the level of the Département (admin1) and the ZMPAP. More information on the methodology of the mortality survey, as well as its detailed results, can be found in the [Technical Brief](#).

## Endnotes

1. National 2020 and 2023 SMART surveys from: MSPP (2023). Enquete nutritionnelle nationale et de mortalité retrospective d'Haiti.
2. OCHA (April 2024). Haiti: Artibonite Humanitarian Snapshot.
3. ACLED (August 2024) Haiti: Mid-year metrics 2024.
4. Ibid.
5. The World Bank (March 2024). Haiti Climate and Health Vulnerability Assessment.
6. FEWS NET (September 2024). Key message update: Persistent insecurity continues to exacerbate population displacement and food insecurity in Haiti.
7. IOM DTM (June 2024). Displacement situation in Haiti. Round 7.
8. Ibid.
9. IPC (March 2024). Haiti: Acute food security projection update for March-June 2024.
10. FAO (November 2024). Hunger hotspots: FAO-WFP early warnings on acute food insecurity.
11. The World Bank (March 2024). Haiti Climate and Health Vulnerability Assessment.
12. PAHO (April 2024). Epidemiological update: Cholera in the region of the Americas.
13. MSF (August 2024). People fleeing violence in Port-au-Prince urgently need water and sanitation.
14. ACLED (January 2025). Data explorer: Organized violence in Haiti in 2024, by month and admin1.
15. IOM DTM (December 2024). Displacement situation in Haiti. Round 9.
16. Copernicus (January 2025). Floods in Haiti - November to December 2024.
17. FEWS NET (December 2024). Escalating insecurity in Port-au-Prince and Artibonite worsening household food and income.
18. FTS. (2024). Haiti 2024 Country snapshot.
19. International Crisis Group (December 2024). 10 conflicts to watch in 2025.
20. IPC (September 2024). Haiti: Acute Food Insecurity Projection Update for March - June 2025.
21. FEWS NET (December 2024). Escalating insecurity in Port-au-Prince and Artibonite worsening household food and income.

## ABOUT REACH

REACH Initiative facilitates the development of information tools and products that enhance the capacity of aid actors to make evidence-based decisions in emergency, recovery and development contexts. The methodologies used by REACH include primary data collection and in-depth analysis, and all activities are conducted through inter-agency aid coordination mechanisms. REACH is a joint initiative of IMPACT Initiatives, ACTED and the United Nations Institute for Training and Research - Operational Satellite Applications Programme (UNITAR-UNOSAT).