

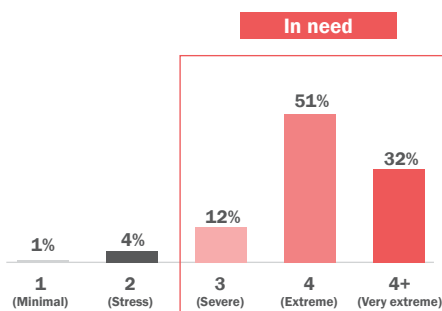
2022 MSNA BULLETIN

KEY FINDINGS

December 2022
HAÏTI

CONTEXT. The multifaceted nature of the crisis in Haiti explains why the humanitarian coordination estimated that there will be 4.9 million people in need in 2022. While humanitarian access is an increasingly tangible barrier to information collection, due to the isolated nature of some areas and the volatile security environment, available data are often specific to one particular intervention, location or sector. REACH Initiative, under the mandate of the Inter-Sector Coordination Group (ISCG), facilitated for the first time in Haiti a nationwide multi-sectoral needs assessment (MSNA) to inform the 2023 Humanitarian Programming Cycle. Data collection took place from June 12 to September 13, 2022. 3896 households participated in person to the survey. The sample is two-stage stratified cluster with a 95% confidence level and a 10% margin of error. Data are available at the departmental and setting level (either rural or urban), and at the commune level for the Port-au-Prince metropolitan area.

PERCENTAGE OF HOUSEHOLDS PER SEVERITY PHASE:¹

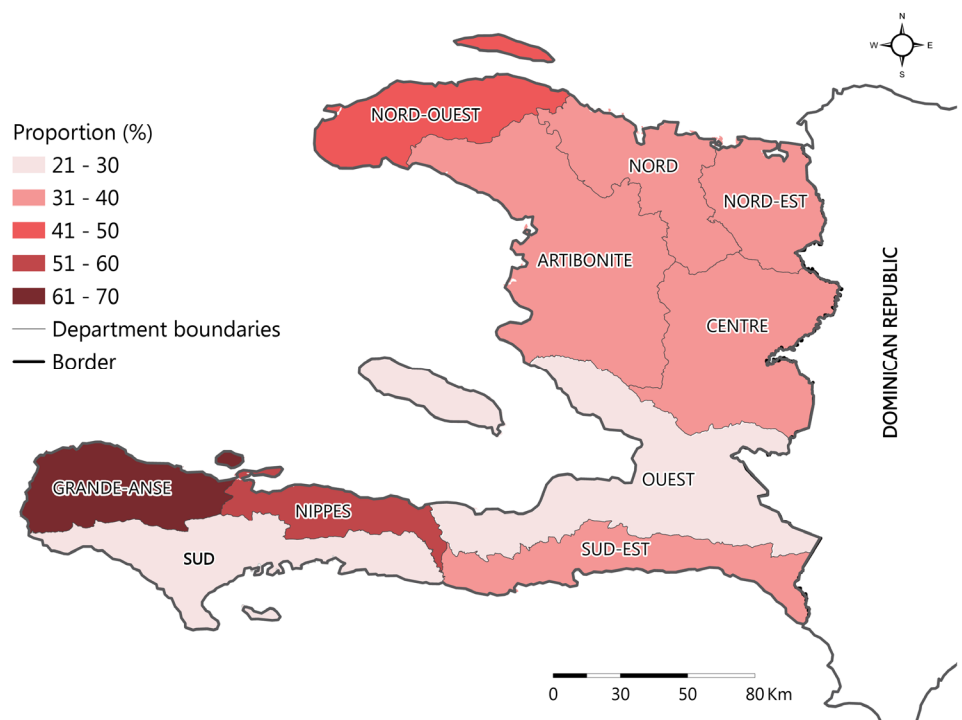


83%

of households in Haiti were found to have **severe or very severe unmet needs**, notably **45%** of **rural** households had very extreme unmet need (compared to 28% of urban households).

HOUSEHOLDS IN NEED BY DEPARTMENT

Percentage of households with a MSNI severity of 4+, by department:



Prevalence of households facing severe (4) or very severe (4+) needs, in particular in rural settings.

- **Almost all (93%)** of **rural households** had extreme or very extreme unmet needs, compared to 80% of urban households. In particular, 45% of rural households had very extreme needs.
- In the context of the resurgence of the cholera epidemic since October 1, 2022, which has spread rapidly and reached all departments, the drinking water, sanitation and hygiene (WASH) situation is problematic.² Indeed, 89% of households were found to have unmet WASH needs, and **98% of rural households (91% of households even had extreme or very extreme needs)**. This is mainly due to the practice of open defecation (26%) and the use of the open pit (35%) as the usual sanitation facility.

Prevalence of very extreme (4+) unmet needs in WASH and shelter.

- The three sectors with **the highest proportion of households with unmet needs** are **WASH (89%), shelter (68%)** and **food security (64%)**.
- In **WASH**, the situation is mainly due to inadequate access to sanitation and water. A **high proportion (60%)** of **rural households** in Nippes and Grand'Anse were found to have very extreme unmet needs.
- The three departments most affected by the 2021 earthquake and 2016 Hurricane Matthew had the highest proportion of households with **very extreme unmet shelter needs: Grand'Anse (18%), Sud (8%)** and **Nippes (7%)**.

MULTI-SECTOR NEEDS ASSESSMENT (MSNA) OVERVIEW

CONTEXT. The multifaceted nature of the crisis in Haiti explains why the humanitarian coordination estimated that there will be 4.9 million people in need in 2022.¹ While humanitarian access is an increasingly tangible barrier to information collection, due to the isolated nature of some areas and the volatile security environment, available data are often specific to one particular intervention, location or sector. REACH Initiative, under the mandate of the Inter-Sector Coordination Group (ISCG), facilitated for the first time in Haiti a nationwide multi-sectoral needs assessment (MSNA) to inform the 2023 Humanitarian Programming Cycle.

Country ranked 163rd out of 191 on the Human Development Index (HDI)², Haiti is experiencing a deteriorating socio-economic, political and security context that has recently contributed to the exacerbation of underlying issues. This deterioration is reflected in particular in the impoverishment of households, linked to a particularly high rate of price inflation while the country is 60% dependent on food imports and insecurity is on the rise.^{3,4} Initially limited to certain neighborhoods in the city of Port-Au-Prince, the activities of armed gangs have intensified and spread to most of the Port-au-Prince metropolitan area (PAPMA), as well as to other departments such as Artibonite, exposing a significant proportion of Haitian households to violence and internal displacement.

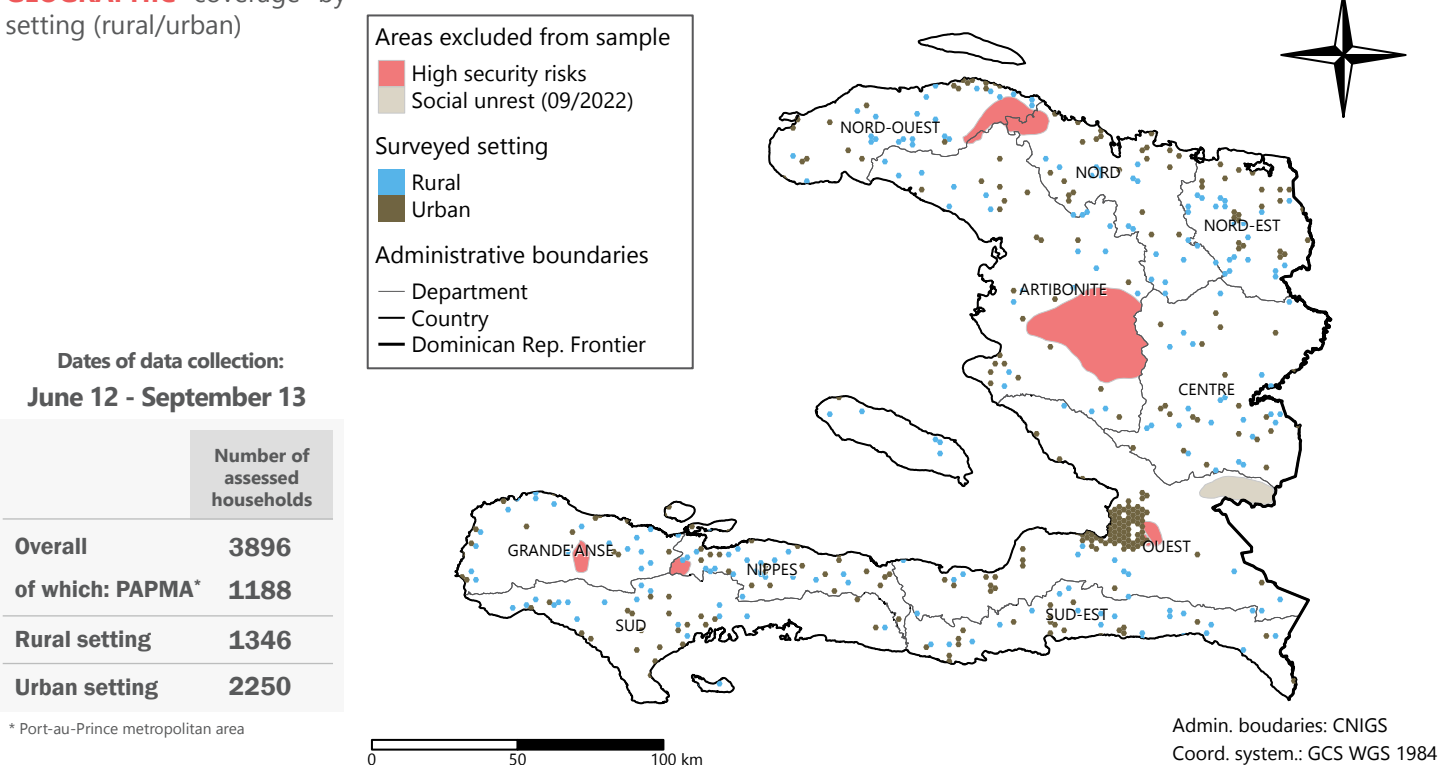
Data collection took place in a context of increased urban violence in Port-au-Prince and of the closure of Route Nationale 2—which connects the departments of the Grand Sud—due to the activity of armed gangs. It also follows the earthquake of August 14, 2021, which registered 7.2 on the Richter scale and hit the departments of Grand'Anse, Nippes and Sud. The earthquake affected more than 800,000 people and more than 650,000 people needed emergency humanitarian assistance.^{5,6}

Almost two-thirds of rural households in Grand'Anse (65%) and Nippes (62%) were found to have very extreme unmet needs.

Since the end of data collection, social unrests due to the fuel crisis and the cost of living has been rampant in the country. On September 19, the "G9" armed gang group blocked the Varreux oil terminal—the main entry point for fuel in the country—for more than a month. Furthermore, on October 1, 2022, the Haitian Ministry of Public Health and Population (MSPP) reported a confirmed case of cholera in the commune of Port-au-Prince. In its November 28 situation report, the Ministry reported 1,031 confirmed cases and 227 deaths, and a total of 10,247 hospitalized cases since the outbreak.

ASSESSMENT SCOPE AND GEOGRAPHIC COVERAGE

GEOGRAPHIC coverage by setting (rural/urban)



MULTI-SECTOR NEEDS INDEX (MSNI): CRISIS-LEVEL SEVERITY

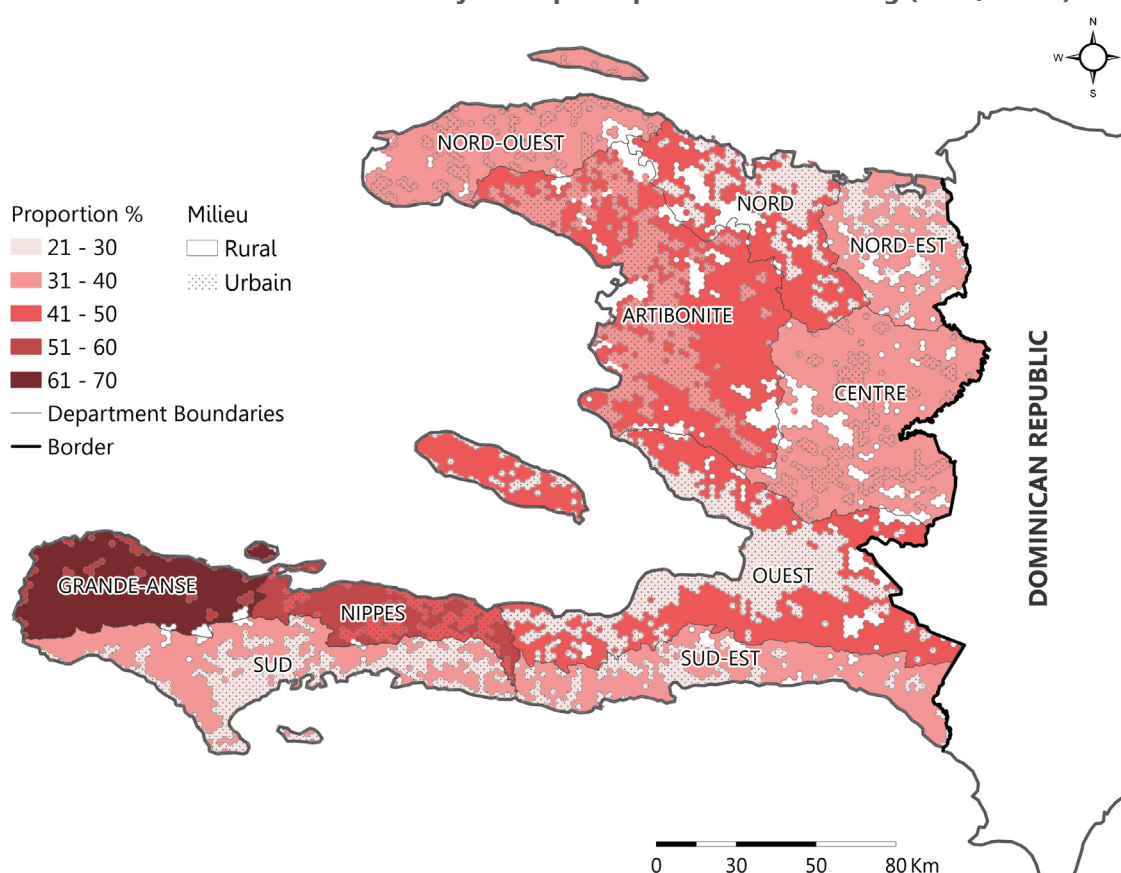
Percentage of households per severity phase:

| | | |
|---------|-------------------|-----|
| In need | 1 (Minimal) | 1% |
| | 2 (Stress) | 4% |
| | 3 (Severe) | 12% |
| | 4 (Extreme) | 51% |
| | 4+ (Very extreme) | 32% |

The MSNI is a composite indicator, designed to measure the overall severity of humanitarian needs of a household. It is based on the highest sectoral severity identified in each household and expressed through a scale of 1 to 4+. Sectoral severity is determined through the calculation of sector-specific composite indicators. The full methodology behind the calculation of the MSNI and individual sectoral composites, in accordance with the REACH MSNA Analytical Framework Guidance, can be found [here](#).

HOUSEHOLDS IN NEED BY GEOGRAPHICAL AREA

Percentage of households with an MSNI severity of 4+ per department and setting (rural/urban):



MSNI SEVERITY PHASE BY POPULATION GROUP

Percentage of households per geographic area and severity phase:

| | 1 | 2 | 3 | 4 | 4+ |
|-------------------|----|----|-----|-----|-----|
| Overall | 1% | 4% | 12% | 51% | 32% |
| Rural setting | 0% | 1% | 6% | 48% | 45% |
| Urban setting | 1% | 5% | 14% | 52% | 28% |
| Rural Grand'Anse* | 0% | 1% | 10% | 25% | 65% |
| Cité Soleil | 0% | 2% | 14% | 66% | 17% |

Overall, over 80% of households were found to have extreme (4) or very extreme (4+) unmet need.

Rural Haitian households had the highest proportion of households (45%) with an MSNI severity of 4+. In particular, rural Grand'Anse was the area with the highest proportion of households with very extreme unmet needs (65%).

In Cité Soleil, one of the poorest communes in the PAPMA* with a strong armed gang presence, 83% of households had extreme or very extreme unmet needs.

*All percentages in this fact sheet are rounded to the nearest percent. Minor discrepancies in the data and percentages greater than 100 may therefore occur.

* Port-au-Prince metropolitan area

HUMANITARIAN NEEDS AND DRIVERS

Who are the most in need? Where are the most in need? What are the drivers of those needs?

91% of rural households showed extreme unmet WASH needs. 61% of them reported open pit or open defecation as their usual sanitation facility.

25% of households reported living in the open air or in a collective, improvised or uncovered shelter, or that the shelter was totally collapsed or too damaged to live in.¹

- **Almost all households (95%) were found in need (including 83% with an MSNI greater than 4), regardless of department or population group**, with the exception of the urban Ouest (91% of households in need). Many households exhibited very extreme unmet needs (MSNI severity of 4+), although there were differences between settings: 45% of rural households compared to 28% of urban households.
- **The departments and settings with the highest proportion of households with very extreme needs are rural Grand'Anse (65%) and rural Nippes (61%),** areas heavily affected by the 2021 earthquake and by 2016 Hurricane Matthew. This situation also strongly affected households in urban Grand'Anse (53%), urban Nippes (48%), rural Artibonite (48%), and rural Nord Ouest (45%).
- Three sectors account for the high proportion of households in need, which reaches 95%. **Indeed, 89% of the households assessed had unmet needs in drinking water, sanitation and hygiene (WASH), 68% in shelter, and 64% in food security.**
- **WASH needs** were primarily **problems of access to improved latrines shared by less than 20 people** (only 36% of rural households and 62% of urban households had access). Only 37% of households reported having

access to sufficient water.² Further, only 40% of rural households had access to an improved drinking water source in an adequate amount of time.³

Unmet needs in drinking water, sanitation and hygiene, shelter and food security are the most prevalent. The most common multi-sectoral needs profile covers WASH, shelter, and food security (24% of households).

- **Shelter needs** were tied to the type of housing shelter, with **25% of households reporting that they were living in the open air or in a collective or improvised shelter, or that the shelter had collapsed or was too damaged to live in.** In addition, 60% of households did not live in a shelter with satisfactory living conditions.⁴
- As for **food security, 61% of households had a consumption phase level of 3+** according to the Few Net Matrix,⁵ and more specifically 22% of rural households in the Nord Ouest and 20% of those in Artibonite had a level of 4+.
- A **fourth of households (24%) had unmet needs** and reported **capacity gaps, i.e., they were using emergency livelihood coping strategies.**⁶
- There are few differences in preexisting vulnerabilities between departments and settings. Overall, **23% of households** are identified as **having unmet multi-sectoral needs and considered vulnerable.** The main factor is that the head of the household was over 65 years old (15%).
- The most common multi-sectoral needs profile covers WASH, shelter, and food security (24% of households). The second most common profile for households (10%) covers WASH and shelter. Regardless of the setting or department, the most common profile is the same. See table below for more details.

Percentage of households in need by sector:

| Secteur | Percentage |
|----------------------|------------|
| WASH* | 89% |
| Shelter | 68% |
| Food security | 64% |
| Health | 20% |
| Protection | 16% |
| Education | 14% |

* Drinking water, sanitation and hygiene

Most common needs profiles, overall and by population group:

| Population group | Education | Food security | Health | Protection | Shelter | WASH |
|---|-----------|---------------|--------|------------|---------|------|
| Overall (24%), profile 1¹ | | ✓ | | | ✓ | ✓ |
| Overall (11%), profile 2 | | | | | ✓ | ✓ |
| Rural setting (31%) | | ✓ | | | ✓ | ✓ |
| Urban setting (21%) | | ✓ | | | ✓ | ✓ |
| Port-au-Prince metropolitan area (16%) | | ✓ | | | ✓ | ✓ |

The table above shows the **most common "combinations" of one or more LSGs** among those in need to identify the **most common needs profile** (that can consist of one or several LSGs).^x "Profile 1" is the most common profile, "Profile 2" is the second most common profile.

The table on the left shows the proportion of households in need **by type of LSG in decreasing order** to identify the **most commonly occurring needs** among those in need.

HUMANITARIAN ASSISTANCE: POPULATION PERCEPTIONS

For more details, **key results on accountability to affected populations (AAP)** are available [here](#).

The humanitarian response has been particularly centered on the departments of the Grand Sud following the 2021 earthquake. Households reported that they received humanitarian assistance primarily in departments heavily impacted by the earthquake (from 17% in Grand'Anse to 28% in Nippes).

Among the households that received humanitarian assistance, **55%** reported that they were **not being consulted about the type of assistance they sought**, while 25% reported being consulted in a direct interview and 15% in a focus group.

20% of households were dissatisfied with the **behavior of aid workers in their area**. The main reasons mentioned for this dissatisfaction were fraudulent or corrupt behavior on the part of aid workers (32%), unsatisfactory handling of feedback and complaints about the intervention (5%), and having witnessed or experienced sexual exploitation or abuse by aid workers (5%).

Self-reported priority needs (top 4)

| | |
|---------------|-----|
| Food security | 58% |
| Shelter | 53% |
| Health | 44% |
| Livelihoods | 36% |

Improving the security situation was reported as a priority by **12%** of urban households compared to 1% of rural households, latrines by 10% and 21% respectively, and agricultural inputs and seeds by 5% and 11%. Moreover, **80%** of households in the departments of **Grand'Anse** and **Nippes** that were heavily affected by the 2021 earthquake **reported shelter as a priority need**.

Preferred means of communication to receive information (top 5)

| | |
|----------------------|-----|
| Phone calls | 67% |
| Television and radio | 32% |
| Text messages | 23% |
| WhatsApp | 15% |
| Face to face | 13% |

Types of self-reported desired information by setting (top 3)

| | Rural | Urban |
|---|--|--|
| 1 | How to access humanitarian aid and register as a beneficiary (35%) | How to access humanitarian aid and register as a beneficiary (31%) |
| 2 | How to access food and food assistance (25%) | News about the area (22%) |
| 3 | News about the area (19%) | Security situation in the area (20%) |

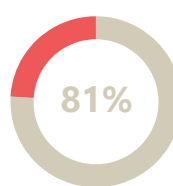
6%

of households reported having **received humanitarian assistance** in the 12 months prior to the assessment, and only 2% in the 3 months prior to the assessment.

95%

of households are **in need** (households with a MSNI severity of 3 or higher) and **83%** of households were found to have extreme (4) or very extreme (4+) unmet needs.

Satisfaction with aid received:



Of the 66% of households who reported having received aid in the 12 months days prior to the assessment, 81% reported having been satisfied. The top three reasons reported by households who were unsatisfied with the aid received included:

- 1) Insufficient quality of aid (56%)
- 2) Insufficient quantity of aid (52%)
- 3) Delay in receiving assistance (13%)

Trusted information source and mobile network

Trusted information sources (top 4) : Radio (77%), Television (13%), Religious leader (11%) and Community leader (11%).

Access to mobile network/phone, % of households by setting:

| | Rural | Urban |
|-----------------------------------|------------|------------|
| Call, SMS and Internet coverage | 20% | 38% |
| Call and SMS coverage | 41% | 29% |
| No network coverage | 23% | 28% |
| No phones in the household | 16% | 5% |

ACKNOWLEDGEMENTS

THE MSNA WAS CONDUCTED IN THE FRAMEWORK OF:



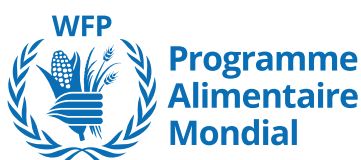
Groupe de coordination
inter-secteur (ISCG)



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WITH THE SUPPORT OF:



Methodology. Data collection took place from June 12 to September 13, 2022, and 3896 households participated to the survey in the 10 departments. Interviews were conducted in person. REACH conducted the data collection for the general population households. The sample is cluster stratified with a 95% confidence level and a 10% margin of error. Data are representative at the departmental and setting level (either rural or urban), and at the commune level for the Port-au-Prince metropolitan area. Due to security access constraints and social unrest in September 2022, the sample for the 'Ouest - Rural' stratum could not be completed and the results should be considered indicative.

For more details on the methodology and limitations, the methodological overview of the assessment is available [here](#).

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).

END NOTES

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¹ The different levels of severity can be defined as follows:

- Very extreme (4+) : Indication of a total collapse of the living standards, with potentially life-threatening consequences (increased risk of mortality and/or irreversible damage to physical or mental well-being).
- Extreme (4) : Collapse of the living standards. (Risk of) significant damage to physical or mental well-being.
- Severe (3) : Deterioration in living standards (relative to usual/typical levels). Reduced access/availability of basic goods and services. (Risk of) deterioration of physical or mental well-being.
- Stress (2) : Living standards are under stress. Minimal impact (risk of impact) on physical or mental well-being/concerned state of overall physical or mental well-being.
- Minimal (1) : Living standards are acceptable, showing at most some signs of deterioration and/or inadequate basic services. No or minimal impact (risk of impact) on physical or mental well-being.

² MSPP, [Choléra Communiqué #1](#), October 1, 2022.

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¹ OCHA, [Aperçu des besoins humanitaires \(HNO\)](#), 2022.

² UNDP, [Classement de l'IDH](#), 2022.

³ Trading Economics, [Haïti Inflation Rate](#), 2022. For example, the inflation rate was 30.5% in July 2022.

⁴ IFAD, [Haïti Context](#), 2022.

⁵ OCHA, *ibid.*

⁶ Direction Générale de la Protection Civile (DGPC), [Stratégie de réponse humanitaire au séisme du 14 août 2021](#), 2022.

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¹ This percentage represents households that reported living in the open air or in a makeshift shelter, in a tent, in an uncovered building, or in a collective shelter, as well as households that reported that their shelter was totally collapsed or too damaged and dangerous to live in.

² Households considered to have sufficient water are those that reported having access to enough water for two purposes in addition to drinking water (e.g., cooking or personal hygiene). For more details, see the [methodological overview](#) (page 21).

³ A time to fetch, collect and return water of less than one hour is considered acceptable. See the [methodological overview](#) for more details on the definition of improved water sources (page 21).

⁴ This indicator is a composite indicator that includes damages to the shelter, problems of living conditions within the shelter, access to electricity, and sufficient space for all individuals in the household to sleep indoors.

⁵ For more information on the methodology of the Few's Net matrix classification, see the [methodological overview](#) (page 19) or the full Few's Net methodology [ici](#).

⁶ The cross-cutting capacity gap is based on the Livelihoods Coping Strategies Index (LCSI), which is a composite indicator based on several categories of livelihood strategies. See the [methodological overview](#) (page 24).

^x Living Standard Gaps (LSGs) are composite indicators designed to measure the sector-specific severity and magnitude of needs for each humanitarian sector included in the MSNA. LSGs are the analytical building blocks for producing the overall MSNI.