



HAITIAN RECONSTRUCTION FUND NARRATIVE PROGRESS REPORT REPORTING PERIOD: JANUARY 2023 - DECEMBER 2023

Programme Title & Project Number	Country, Locality(s), Priority Area(s) / Strategic Results
Programme Title: Strengthening the Management of Services and the Health System in Haiti	<i>Country/Region</i> Haiti / Port-au-Prince
 Programme Number <i>(if applicable)</i> 00098088 MPTF Office Project Reference Number: 	The purpose of this project is to improve the health conditions of the Haitian population having access to the network of health services implemented through two strategic priorities directly related to the priorities of the government.
Participating Organization(s)	Implementing Partners
 Organizations that have received direct funding from the MPTF Office under this programme UNDP 	 National counterparts (government, private, NGOs & others) and other International Organizations UNDP Brazil
Programme/Project Cost (US\$)	Programme Duration
Total approved budget as per project document: USD 19.800.000,00 MPTF /JP Contribution: • <i>by Agency (if applicable)</i>	Overall Duration <i>(months) 90</i> <i>months</i>
Agency Contribution by Agency (if applicable) 	Start Date 23/06/2017
Government Contribution (<i>if applicable</i>)	Original End Date 22/06/2020
Other Contributions (donors) (<i>if applicable</i>)	Current End date 31/12/2024
TOTAL: USD 19.800.000,00	
Programme Assessment/Review/Mid- Term Eval.	Report Submitted By
Assessment/Review - if applicable <i>please attach</i> Yes X No Date: <i>dd.mm.yyyy</i> Mid-Term Evaluation Report – <i>if applicable please attach</i> Yes X No Date: <i>dd.mm.yyyy</i>	 Name: Maria Teresa Amaral Fontes Title: Programme Analyst Participating Organization (Lead): UNDP Email address: maria.teresa.fontes@undp.org

NARRATIVE REPORT FORMAT

I. Background

Haiti is the poorest country in the Americas and its perverse indicators of health, especially life expectancy and infant mortality rate, reflect that serious problems still plague the health sector, such as:

- Low reception capacity of the existing health services.
- Low sanitary coverage characterized by a lack of sanitary facilities in comparison with the size of the population.
- Lack of equipment in many health institutions.
- Lack of infrastructure to accommodate the few existing equipment.

Although the right to health is a fundamental right that the Government of Haiti (GoH), through its Ministry of Public Health and Population of Haiti (MSPP), must ensure, the well-being of the population is dependent on improvements in the health service. Aware of this reality and faithful to its mission, the MSPP sought the financial support of the Haiti Reconstruction Fund (HRF) to promote the capacity of health management in the country.

This project gives continuity to NIM Project BRA/10/005, known as Tripartite Cooperation, a cooperation in health in Haiti under the Brazil-Cuba-Haiti Tripartite Memorandum of Understanding, signed in 2010 and implemented directly by UNDP Brazil with resources from the Government of Brazil (GoB). Project BRA/10/005 resulted a remarkably successful experience of South-South Cooperation, promoting the strengthening of the health authority in Haiti and providing the country with three full equipped community reference hospitals, a rehabilitation center and one prosthesis and orthoses lab.

Project BRA/17/018 was designed around two strategic outcomes, in accordance with the guidelines of the Action Plan for the Recovery of Haiti (PARDH), especially with reference to its Pillar 3: social reconstruction; and program 3.3: increase access to health services. The outcomes are: 1: Strengthening management, services, and governance in public health in Haiti; 2: Development and implementation of a plan for the management of the Tripartite Cooperation health services, with the aim of enabling sustainability and preservation of structures by the Haitian government.

Activities foreseen in the project are acquisition of strategic health products, professional training and strengthening primary health care and emergency services in Haiti. It also envisions the transfer of full management of the maintenance of health services built by Brazil in its previous cooperation to the responsibility of the MSPP. The actions to be performed are based on cross-sectional values that govern the South-South Cooperation and provide the key elements to improve the access to and quality of care in the health services network and, in the end, have an impact on the entire health system of Haiti.

II. Purpose

The purpose of Project BRA/17/018 is to improve the health conditions of the Haitian population having access to the network of health services. As described above, the main outcomes of the project are:

Strategic Axis 1: Strengthening of management, services, and governance in public health in Haiti. Strategic Axis 2: Development and implementation of a plan for the gradual transfer of the Tripartite Cooperation health services management in order to enable sustainability and preservation of structures by the Haitian government.

As stated in the Project Document, UNOPS Haiti (UNOPS) was selected as an implementing partner. Justification for that is that through the original NIM Project BRA/10/005 (Improvement and reinforcement of the Haitian Health Sector), financed by the Ministry of Health of Brazil (MoH), UNOPS was appointed by UNDP Brazil (UNDP) in 2011 to build and equip 3 Community Reference Hospitals (HCRs) and 1 Haitian Institute of Rehabilitation (IHR). Results of the previous cooperation were held as very satisfactory and for that, UNOPS was invited by GoB and UNDP to give continuity to the services also under Project BRA/17/018. For the achievement of the listed outcomes for Project BRA/17/018, an UN to UN Agreement was signed in 2017 with UNOPS in order to optimize the operations of the health facilities (3 HCRs and 1 IHR) and assets; to establish sustainable capacities within the MSPP maintenance units; to guarantee the offer of medical services to the local population; and to implement a progressive handover plan so that the hospitals and a rehabilitation center become under the MSPP full control and financial support.

Similarly, the partnership with PAHO/WHO was also foreseen in the scope of the Project and an UNto-UN Agreement was signed with the agency in August 2019. Through this collaborative agreement, PAHO/WHO was expected to provide capacity-building and technical support to health managers, professionals, and technicians of the MSPP in Haiti to improve the management of medical and health emergencies in three hospitals, while ensuring the continuity of health care services through the strengthening and expansion of the community health model.

Main activities of the signed Agreement are: provide technical support to the MSPP for the preparation of routine manuals, standardization of care and operational protocols to be used in emergency departments; promote capacity building and provide technical support for MSPP managers, health professionals and technicians; support the expansion and consolidation of the Community Health Model (ASCP / ESF / RISS) to ensure continuity of health care and community participation.

III. Results

i) Narrative reporting on results:

• Outputs:

Output 1 – "Perform diagnostic assessment of the management model of urgency and emergency services in Haiti." Status: COMPLETED

Output 2 – "Provide technical support to the Ministry of Public Health and Population (MSPP) in defining the organizational structure, organizational chart, professional profile, and positions regarding the Management of Urgencies and Emergencies in the country." Status: COMPLETED. Activities have been carried out by GOH itself and are not necessary under the scope of this Project anymore.

Output 3 - "Provide technical support to the development of optimal flow of emergency care procedures, referencing and counter referencing, and the preparation of an Improvements Action Plan." Status: COMPLETED

Output 4 – "Provide technical support for the preparation of manuals, standardized administrative and health service operational procedures, and clinical care protocols in matters of urgency and emergency, together with professional of the MSPP." Status: COMPLETED

Output 5 – "Support the training of managers, health professionals and technicians of the MSPP."

Status: COMPLETED

Output 6 – "Support the technical upgrade and reintegration of health center community workers (ACSP) trained by the Tripartite Cooperation." Status: COMPLETED

Output 7 – "Provide technical support the health care services through technical missions and visits *in loco* for continuing education of teams trained by the project." Status: AS PLANNED. Last mission conducted in April 2022.

Output 8 – "Support access to the provision of health care in urgencies and emergencies through the physical structuring of services and the technology park of the hospitals covered." STATUS: Partially completed.

Output 9 – "Support the operationalization on, and the follow-up of, the three HCRs (Bon Repos, Beudet and Carrefour) and the Haitian Rehabilitation Institute."

STATUS: Partially completed.

Output 10 – "Transfer the total management of the HCRs and of the IHR to the MSPP." STATUS: COMPLETED

• Describe any delays in implementation, challenges, lessons learned & best practices:

As reported in the last progress report, the Steering Committee of the project held in December 2022 a meeting to discuss the critical situation in Haiti and the impossibility of implementing the final project activities until the end its deadline. In order to ensure the completion of the activities provided for in the project schedule, a 2-year extension was sent to the FRH.

In view of the above-mentioned information, the Brazilian Embassy in Washington was instructed to take steps with the World Bank (WB) in order to reiterate Brazil's expectations regarding the extension of the project's implementation period.

The HRF Steering Committee made a decision to extend HRF for another two years in the meeting dated March 21, 2023.

Online meetings between MSPP, MS Brazil and ABC were held in order to discuss the impossibility of accessing the hospitals due to the security and political crises in Haiti. Construction scenes in Bon Repos and Carrefour are unfinished until further notice. News reported by MSPP regarding the health equipment in Haiti are:

A) Dra Zilda Arns Hospital (Bon Repos): All its activities are paralyzed due to recent thefts of hospital medical equipment, generators, solar energy equipment, etc. As reported by the Haitian Representative, in the Steering Committee, the security authorities in Haiti will be carrying out a detailed survey of the damage caused in this hospital, and when completed this inventory will be shared with the Brazilian representative, so that the necessary measures can be taken.

B) Hospital Dr Louis Pierre (Carrefour): This hospital is partially operational due to security issues, as well as structural problems on the roof, which when it rains floods internal areas of the health institution.

C) Dr Ary Bordes Hospital (Beudet): 4 This hospital has its activities paralyzed, due to the lack of security in the vicinity of this institution.

D) National Ambulance Center of Haiti (CAN) is fully functioning, with no negative intercurrences.

E) Rehabilitation Institute Dr Gerald Leon: Due to the lack of security, this institution finds its services paralyzed.

• Qualitative assessment:

Political instability, the health crisis and the earthquake in the south of the country have dramatically affected the implementation of the final activities of the Project, especially regarding the support given by UNOPS. The administrative building is unfinished and there is no expectation that the services can be completed in the scope of the project.

Considering the extension of the project until December 2024, when the project shall conclude its operational and financial closure, several meetings have been held with Project Steering Committee to accord the project's next steps, that resulted into the agreement of an inception mission in January 2024 to assess CAN's condition and consult with the MSPP about where the project could focus.

A discussion with UNOPS was held on the possibility of carrying out a last support to CAN, that would include the procurement of power generators, fuel tanks, vehicles, spare parts for ambulances repair, GPS system for 100 ambulances and ICT equipment.