



Haiti

31 March 2025

## 1. Crisis overviewi

<b>4.0</b> /5	6 million	3.9 million	\$908 million	<b>5</b> %
Inform severity index	People in need of humanitarian aid (HNO 2025)	People targeted in the response plan (HRP 2025)	Required to reach the target (HRP 2025)	Of the required funding secured (HRP 2025)
103 MSEK	-	1.4 MSEK	104.4 MSEK	
Initial allocation	Additional allocation	Flexible funding	Total Sida funding 2025	

Haiti is facing a severe and multifaceted humanitarian crisis with political instability, economic collapse, escalating violence, food crisis, displacement and the impact of natural disasters and epidemics. The protection situation has drastically worsened compared to last year, with the brutality and territorial expansion of armed gangs, particularly impacting women and children. The population is around 11.8 million and the worsening security situation, the near-collapse of basic services, the impact of years of drought and natural disasters has left 6 million Haitians highly vulnerable and in need of humanitarian assistance, including around 2.5 million children.

The ongoing violence in Haiti has profound and far-reaching impacts on the population. The instability has severely affected the economy, the violence aggravates the food insecurity and the hunger is at a historic high. Nearly one in two Haitians is suffering from hunger. The internal displacement and the lack of access to health care and clean water has increased the risk of diseases. The constant threat of violence and displacement has led to widespread psychological trauma. Reports of rape and other forms of gender-based violence have increased significantly. The widespread armed violence in Haiti forces many to flee and currently 1 million people are displaced across the country. The rule of law is extremely weak. Hospitals, schools, banks and state institutions are only partially functional or closed due to violence.

The level of violence in the country poses significant challenges to humanitarian operations. Many areas are controlled by the gangs and the violence and insecurity make it difficult to operate safely and limits access to people in need.

## 2. Humanitarian needs & affected population

As of October 2024, the latest Integrated Food Security Phase Classification (IPC) report indicates a severe food crisis and Haiti is now the third most acute food insecurity crisis in the world in terms of percentage of the population. The analysis shows that nearly 48 per cent of Haiti's population is facing high levels of acute food security and approximately 17 per cent are facing emergency levels of food insecurity.

In the latest report IPC report 6,000 people are experiencing state of famine (IPC Phase 5). One in two children is currently facing food insecurity, which in turn has led to increased rates of malnutrition and several other health issues. Women and girls constitutes more than half of the population affected by hunger in Haiti and the food crisis disproportionately affects women and girls. Pregnant women and young girls are also at higher risk of malnutrition and mortality.

Armed groups dominate approximately 80 per cent of the Port-au-Prince metropolitan area (ZMPP), severely restricting the movement of people, goods, and essential services. Their control extends over territory housing 2.7 million residents, including half a million children, deepening the humanitarian crisis. The recent uptick in gang violence and food insecurity has caused major internal displacement. The Great South region hosts nearly half of the internally displaced persons in the country, but the Port-au-Prince metropolitan area (ZMPP) has also seen significant displacement due to ongoing violence.

The majority of Internally Displaced Persons (IDPs) live within the host community. However, the prolonged nature of the crisis has exhausted host families' capacity to support displaced persons, leading to secondary displacement. This displacement often leads to overcrowded and unsanitary living conditions in temporary shelters and camps with limited access to clean water or hygiene facilities which in turn leads to waterborne diseases, such as cholera. Many Haitians who had sought refuge in neighbouring countries are being forcibly returned, the majority from the Dominican Republic. The number of IDPs is rapidly increasing, both in the capital and the provinces. Out of the 1 million people displaced in Haiti due to armed violence, approximately 500,000 are children. This situation highlights the severe impact of the ongoing crisis on the most vulnerable populations, particularly children who face heightened risks of violence, exploitation, and lack of access to essential services. Population displacement is also the main cause of family separation.

Gender-based violence (GBV) is being used systematically by armed groups for territorial control and intimidation, involving sexual violence committed by gangs, including cases against children. Children also face increased risks of forced recruitment into gangs, with an estimated 30-50 per cent of gang members being minors. Kidnapping is used as a source of revenue, targeting already impoverished families. Access to healthcare and education is negatively impacted both by repeated attacks on hospitals and schools as well as lack of access to fuel for generators. Pregnant women face particular levels of vulnerability, as access to reproductive health care and qualified staff is severely limited. Many are also subjected to trauma from

violence and displacement, leading to widespread psychological distress, especially among displaced people.

## 3. The humanitarian response

The global freeze and scale-back of US humanitarian funding announced in January 2025 is having major consequences on aid operations. Haiti is one of the crises with the highest proportion of funding from the U.S. (65 per cent during 2024). Extensive disruptions in humanitarian operations are reported as a result of the freeze. The World Food Programme (WFP) reports that in February and March, 200,000 individuals in IPC Phase 4, along with 20,000 internally displaced persons, will be left without food rations. Additionally, emergency food assistance through cash transfers for another 285,000 people in IPC Phase 4 will not be feasible. Additionally, 12,000 children under two years old and 14,000 pregnant and breastfeeding women will not have access to planned nutritional supplements. Disruptions are occurring to air, sea, and road transport, as well as storage and logistical coordination for humanitarian actors throughout the country. At the same time, the humanitarian crisis is escalating. Cuts to food security and protection programs also risk disproportionately impacting women, particularly those who are displaced or living in rural areas, reinforcing cycles of vulnerability

The Humanitarian Needs and Response Plan (HNRP) published in February 2025 estimates that 6 million people need humanitarian assistance. Of these, humanitarian actors are targeting 3.9 million. The HRNP's scope for 2025 has been redefined and is strictly focused on addressing acute needs caused by recent shocks, including armed violence, forced displacement, epidemics, and the consequences of natural disasters. Priority target populations include displaced people, host communities, people in areas controlled by or under the influence of armed groups, people in cholera hotspots and other epidemic hotspots and people vulnerable to natural disasters.

The humanitarian response has placed a strong emphasis on food security, health, shelter and non-food items (NFIs), water, sanitation, and hygiene (WASH) and providing protection services, particularly to women, girls and boys who have suffered or are at risk of gender-based violence. The response also includes addressing the humanitarian consequences of violence, forced displacements, drastic reduction in access to basic services, natural disasters, acute malnutrition, food insecurity, epidemics, and out of school children and youth. Humanitarian partners are working with authorities to provide hot meals to the displaced, school meals across the country, and cash transfers so people can buy what they need most. Additionally, humanitarian partners seek to ensure that displaced, out-of-school children from the most vulnerable host communities have equitable access to a safe and protective education.

Humanitarian access in Haiti is severely constrained, making a sustained and multi-sector response to people in need, highly challenging. For example, partners estimate that only 15 per cent of the capital, where needs are among the highest in the country, are accessible to humanitarians. Nevertheless, the humanitarian community is able to implement programmes,

and needs to be equipped to respond to needs at scale and when security improves in a given area. Sectors that have received more funding include food security, health, and protection, whereas education, shelter, NFIs and WASH have received less funding. Some significant challenges to the scale up has been recruitment of qualified and technical staff and strengthening the response capacity of local actors.

The Multinational Security Support (MSS) mission in Haiti is led by Kenyan police and began operations on June 25, 2024. While the mission is seen as necessary to address the escalating violence and humanitarian crisis, there are concerns about its effectiveness and the potential for human rights abuses.

## 4. Sida's humanitarian allocation

Sida's humanitarian response is multisectoral and flexible in the form of program based support, in order to better respond to the changing and unpredictable operational environment. Due to the severe state of violence, activities in Haiti need to be based on centrality of protection in order to help ensure the safety, dignity, and rights of those affected.

Sida's humanitarian support is guided by the last HNRP and will target food insecure people in both urban and rural areas, especially focusing on the ZMPP, the Artibonite and the Grand Anse area. Improving access to health services, including Sexual and Reproductive Health services (SRHS) and referrals for survivors of GBV, psychosocial support (PSS), especially targeting children and affected families as well as screening, referral and treatment of malnutrition is a priority. Additionally, cash assistance is considered an efficient way of mitigating food insecurity, providing flexibility and local market stimulation. Due to recent outbreaks of water borne diseases, such as cholera, access to safe drinking water and sanitation are important especially in IDP sites. Additionally, access to education and school feeding are important in order to reduce the risk of gang recruitment and malnutrition.

INITIAL ALLOCATION (SEK)					
PARTNER	SECTOR	INITIAL ALLOCATION			
ICRC	Health, Protection	20,000,000			
Save the Children	Health, Nutrition, Food Security, WASH, Child Protection and Education	20,000,000			
UNICEF	Health, Nutrition, Food Security, WASH, Child Protection and Education	40,000,000			
WFP	Nutrition, Food Security, Protection	23,000,000			
TOTAL		103,000,000			

FLEXIBLE FUNDING & ADDITIONAL ALLOCATIONS				
PARTNER	FLEXIBLE FUNDING <sup>1</sup>	ADDITIONAL ALLOCATION		
MSB <sup>2</sup>	1,400,000	-		
TOTAL	1,400,000	-		

<sup>&</sup>lt;sup>i</sup> The 2025 initial allocation of humanitarian funding is based on Sida's humanitarian allocation analysis methodology. The analysis reflects the current humanitarian situation across crises and is being updated continuously with the latest available data. The information in the HCA is based on reports, data, and information from partner organisations and other entities, as well as observations from field visits and dialogue with partners.

<sup>&</sup>lt;sup>1</sup> Flexible funding includes a mix of allocations such as Rapid Response Mechanism and other flexible funding mechanisms.

 $<sup>^{2}</sup>$  Sida provides flexible funding to MSB, and this allocation is therefore subject to change.