



**National Epidemic Response Strategy**  
**The Example of Metropolitan Port-au-Prince**  
**Ministry of Public Health and Population**  
**with the technical collaboration of PAHO/WHO, UNFPA,**  
**and other agencies of the**  
**United Nations System**

## Description of the Strategy

The national response strategy for the cholera epidemic involves the following three levels:

- Protection of families in the community.
- Reinforcement of the 80 primary health care centers in the Metropolitan Area
- Management of severe cases in the CTC and 8 main hospitals.

This strategy is illustrated by the example of Port-au-Prince.

**Projection: 100,000** cases in need of health services in Port-au-Prince and Artibonite (~200 000 in the country)

### Level 1. Protection of families

#### Description:

- The goal is first and foremost to guarantee basic protection for families, distributing oral rehydration salts directly to them in their communities.
- At the same time, disease prevention and health promotion messages will be transmitted by various means (*criers, sound track, the media, etc*).
- Then, a cadre of community health workers will be developed and deployed in the most populous and vulnerable areas--in particular, densely populated disadvantaged neighborhoods and displaced persons camps.
  1. The community health workers' only mission will be to identify people with diarrhea and refer them to the cholera treatment centers (CTC).
  2. These workers will have oral rehydration salts at their disposal so that patients can have an initial source of hydration before reaching the CTC.
- Thus, a cadre of community prevention and detection personnel will gradually be deployed, with 1 for every 25 families.

#### Objectives:

1. Community prevention
2. Community health promotion
3. Community identification and referral of diarrhea cases.

### Level 2. Reinforcement of 80 health centers in the Metropolitan Area

#### Description:

- The goal is to reinforce the 80 primary care structures so that they can:
  1. perform triage
  2. observe cases
  3. provide medical hydration
  4. refer the patients who show up.
- To accomplish this, teams of health workers will man a post at the entrance to the health center 24/7.

#### Objectives:

1. Guarantee triage of patients
2. Put cases under observation
3. Ensure medical rehydration of cases
4. Refer patients to the CTC

### **Level 3. Management of severe cases**

#### Description:

- This involves the deployment of 10 CTC, each with a 200-bed capacity, on the outskirts of the Metropolitan Area
- Reinforcement of PAP's 8 main hospitals for rapid case management and referral to a CTC, as needed

#### Objectives:

1. Management of severe cases (in the case of hospitals)
2. Referral to the CTC

To adequately implement this strategy, an operations center will be set up and put into operation to ensure **management, supervision, and control.**