# Resource Guide

Generated November 28, 2026 · 3 open facilities · closed facilities are not listed · call before you go: details change quickly

## Haiti

### Community Clinic La Source Chaude "Cholera Treatment Center – CTC" – (MSPP) STANDBY

Medical Facility · Standby

Medical Clinic

Second Section Commune; Clinic Coord:; 19 degrees 38'10.66" N 72 degrees 54'58.93" W; Helicopter Coord. next to clinic (approx.); 19 degrees 37'51.49" N 72 degrees 55'07.19" W; 2 hours from Gonavies, road partially really bad, La Source Chaude

**Service** Permanent

1/2/11: Email from Amber
The cholera cases have decreased significantly but we are still discovering little pockets where the epidemic is causing lots of harm. For example, there was one village Habert discovered about a month ago where three people died during his brief visit of a few hours. THe village was impossible to get to with a car. Hebert brought the village to the attention of MSF, MSPP and IOM. IOM sent in some folks with supplies.

We are now concentrating on spreading our house–to–house education campaign and questionnaire throughout the commune. We are also working with the community to develop a health program for the Lagon and La Source Chaude clinics. We are currently receiving supplies from Americares.

12/16/10 Post on HEAS from Amber Munger
The community health committee reports that the La Source Chaude clinic is being well attended by MSF–France. In the past two weeks, new tents have been added to the clinic property (totaling 3). One is being used as a depot for materials, the other two host patients. MSF has provided beds and other helpful materials for the full operation of the CTU. MSF is also supporting 5 nurses at this clinic which, prior to the outbreak, had no competent medical professionals. Yesterday, when A29's coordinator gathered the report from the committee, there were only 8 patients at the clinic. One patient had died earlier that morning (for a total of 9 patients that day).

The village of La Source Chaude is the main market–trading village for the region. This market, which meets twice a week, usually attracting people from far away villages the night before, has no public latrine, creating a public health hazard and threatening the potability of the water. The community has mobilized together for the placement of a latrine near the market and they have dug the initial pit for the latrine. To complete the latrine, funds are needed for materials and masons. A29 seeks an NGO partner for latrine building, or funds so that it can facilitate the construction of the latrine with community leaders.

Although the numbers have stabilized and even decreased in Communes Anse Rouge and Terre Neuve, we still have preventable cholera deaths on a regular, daily basis, due to a lack of education about cholera prevention and treatment. A29 is supporting a house to house community education campaign in 22 hard to reach villages in the region. We are seeking partnership with a health based NGO who has medical staff that can give a two day training for 30 cholera agents, supported by A29. We also seek support in the form of informative leaflets that can be left with each household, aqua–tab and soap. If other health based NGOs are able to provide other forms of support to the region, A29 would be happy to facilitate the implementation of health based programs in the region. We have a good relationship with an extensive community network of peasant groups that reach every corner of Communes Anse Rouge and third section Terre Neuve.

12/6/10 Email from Amber Munger
Karine from MSF emailed me today and said that ORS/OPS had also sent supplies to the Lagon clinic. I dont know who that is or what supplies. In the meantime, AMURT is reporting that they sent a doctor to La Source Chaude that was there for three days, but I did not hear this from Hebert or MSPP.

11/4/10 Email from Dr. Grazia Caleo, PAHO Gonaive
I am based in Gonaive for PAHO/OMS. I am following the alert situation in the Haut Artibonite.

Regarding the situation in Anse Rouge I contacted MSF France they told me that in Source Chaude they set up a UTC in Anse Rouge a points ORS. Also they regularly provide support and supply. (LPar Note: Amber is contacting MSF to coord. and clarify what their support will be. Supply drop was noted in 12/2/10 entry. Staff support needs to be clarified.)

12/2/10: From conversation with Amber
Market days are twice a week Thurs. and Sat. Missionary Air Sities uses airstrip. We were also able to hook them up with CARE for educational materials! Herbert has a meeting with them set up.

12/2/10 Email from Amber Munger
...still waiting for verifiable information. The volunteer nurse auxiliary in the La Source Chaude Clinic is refusing to give A29 or the community health committee information on cholera patients because we won't provide him with a salary or other means of compensation. As I mentioned before, the nurse auxiliary is a volunteer that does not have a good relationship with the community but is the only medical

personnel that the community has. The Communal Director for MSPP (Dr. Carlo) is meeting with the community health committee, community leadership council, A29, and the nurse auxiliary on Friday to resolve the issue. A29's coordinator, Hebert Pierre, at this point can only verify the number of patients that he has seen at the clinic while he has been present in La Source for the last week. In general, the La Source Chaude clinic has had about 15–19 overnight cholera patients per day for the last five days at the CTC.

We can confirm, too, that MSF brought 9 boxes of supplies, (presumably hydration fluid) (this is in addition to a large tent and small amt. of supplies that MSPP dropped off after 63 patients were transported)to the La Source Chaude clinic yesterday. After the meeting on Friday I will be able to give an inventory report on what was given.

In terms of the Town of Anse Rouge, as I mentioned before, Hebert said that that clinic is closed. When he went to the clinic again on Tuesday to get information there was only a guardian there who could not provide him with any information. He is hoping to establish more formalised lines of communication today and tomorrow as he meets with CARE – who contacted him yesterday – and MSPP on Friday at the community meeting.

11/22/10 Notes from Amber
Hebert has not yet even met with the organization in PAP to know what supplies we will get . That appointment is at 10:00 today. The we still ahve to figure out transport for the supplies. As soon as we receive supplies I will let you know. These supplies will be for the La SOurce Chaude clinic FIRST and anything we can spare we will give to teh CIty Clinic. The City Clinic is on Route National One and patients can more easily find transport to Gonaives from that Center. That is not the case where we are in La SOurce Chaude. We need to have supplies at the La SOurce Chaude clinic because those people will not be able to make it to another location easily. It was a blessing that MSPP had a truck available to send to La Source last time. I dont think our luck wil be the same next time around.

Water – the La Source Chaude clinic has water as we have hot springs in la Source Chaude (which means, in French, "hot spring"). The nurse auxillary who works there is highly incompetent and does not use the water filter that was set up for the clinic because he does not like the person who installed it. If he decided to use it again it has to be reinstalled and will be at least a few weeks before it is up and running. So we need aquatab or other water disinfectant for the clinic (as well as for the population in general).

11/21/10 Update on Assessment from Amber Munger

When did cholera patients begin to come at this location? 9 or 10 November

How many people does your facility serve? There are approximately 37,000 people in Commune Anse Rouge. Normally, the La SOurce Chaude clinic services about 1/6 of the population. Now that all other clinics except the one in the City of Anse Rouge have closed, people are coming from throughout the commune to the La Source Chaude clinic.
Current Cholera Patient Load Up until November 18th there were only five cases (all of whom died). However, yesterday 63 patients walked or were transported to the La Source Chaude clinic many of them walking from extremely remote locations where they were expected to have brought cholera from Port–de–Paix. Most of the patients were coming from Tante, Yaya and Bonsinye, extremely high mountain regions that border third section Port–de–Paix.

Fatality Rate for Cholera? Five of the five patients who had cholera until November 18th died; one is suspected of intentionally polluting the water source when he was shut out of the clinics, spreading cholera to three other people in the village of Kay Felip. Yesterday, November 20th one patient died and then 63 more people proceeded arrive at teh clinic. These people were transported in a MSPP truck to Gonaives. No one died en route but we are unclear as to what happened after they were deposited in Gonaives.

Has number of patients stabilized? Today there were only seven patients in total. Yesterday was market day and people came from very far to the La Source market, explaining the huge increase in numbers.

Medical Staffing (eg. no. of Doctors, no. of Nurses, no. of non medical staff): The community health clinic has no paid staff. There is only a volunteer nurse auxillary at the clinic. There are no qualified medical proffessionals (doctors or nurses) in the entire second section Commune Anse Rouge and only one that we know of in the first section.

How many patients are you treating daily? Will update in a few days.

How many hospitalized? Just transported all patients

Does your facility provide Mobile Medical Clinics to the community?we do not have transportation available
What is your Cholera Bed Capacity? There were only five beds in the La SOurce clinic. MSPP sent a tent for the clinic to set up in the lakou but have not provided beds.

Describe accessibility to your site (e.g. Passable roads? Helicopter Landing Pad or spot? Airstrip for small planes? Please provide conditions for air landings and GPS coordinates). By road, it is a 2 hour trip from Gonaives (one hour on route national

one and another hour on teh road from Letan to La Source Chaude). It is a very difficult road, even by Haiti standards. There is a helicopter landing strip in the City of Anse Rouge, which is a one hour drive from La Source Chaude, but is a much easier drive than the trip from Gonaives.

Can you pick up supplies? We can pay local trucks to retrieve the supplies. THe local leaders in the community will offer the use of their large transport vehicles.

Medical Supply needs (List by PRIORITY please). cholera related supplies and disinfectants. The clinic is also lacking in basic antibiotics for most other treatable illnesses.

11/21/10 Email from Amber
Hi folks – Just a quick update on this. Yesterday 63 patients showed up at the La Sources Chaude clinic after noon because all other clinics in Commune Anse Rouge (except for the one in the City of Anse Rouge) closed their doors to cholera patients. A29 Coordinator lobbied MSPP in Gonaives for help. In response, MSPP sent a truck to La Source Chaude to transport the 63 patients to Gonaives.

Our coordinator said there were only a few patients who came to the La Source Clinic this morning before he left for PAP to try to seek medical supplies. MSPP sent us some fluid and IVs as well as a tent to set up a CTC in the lakou of the La Sous Clinic. The supplies will not last long. Hebert is in PAP meeting with Americare to see if they would be willing to give us free antibiotics, fluids, clorox for disinfecting the center, and aquatab.

As I mentioned before, there are no qualified medical personnel in second section Commune Anse Rouge, and I am not sure that there are any either in the first section either (other than the regional director, who is helping to coordinate rather than see patients).

11/21/10 Email from Amber
I am on a call until 8:00 when I will get back to this but for now I wanted to make clear that A29 does not represent the ILODEP clinic. A29 is trying to find support for the community clinics – not the private clinic run by a private organization. I just received word that even the ILODEP clinic closed, just as all of the other private clinics. The private clinics will not accept cholera patients. Since I last wrote you yesterday, the La SOurce Chaude clinic received 63 patients – because all of the other clinics in the entire commune closed except for the City of Anse Rouge clinic which has no materials. Since the La SOurce Chaude clinic also had no materials, our coordinator Hebert Pierre worked with the Ministry of Health to try to find transport to Gonaives for all 63 of the patients. Gonaives is a treacherous two hour drive from La Source Chaude, and not many vehicles make the voyage.

I will fill out the information on the sheet that you sent me just as soon as I am off the call with my board.

Thanks for your help!

11/21/10
Have requested Assesment information from Amber for clinic. lpar

Email from Amber Munger of Article 29 Organization 11/21/10
Commune Anse Rouge has approximately 37,000 residents but also services parts of Terre Neuve, raising the number to about 42,000. Article 29 Organization's base is in Second Section Commune Anse Rouge, which has four physical health clinics. One is the ILODEP clinic sponsored by Parole et Action, the other three are community clinics which have no paid staff and have not received supplies since July, the last time that A29 secured supplies for distribution to the clinics. There is no doctor or nurse in second section Commune Anse Rouge. There is rumored to be a doctor present in the City of Anse Rouge at the tent clinic (in first section Commune Anse Rouge) at the site of the old hospital that burnt down last year. This clinic is between a 2 to 8 hour walk for people in Second Section Commune Anse Rouge and there are virtually no taptaps or cars in the region.

Cholera first entered Second Section Commune Anse Rouge about two weeks ago with cases coming in from people who had been in Gonaives. In second Section Commune Anse Rouge, we had five cases last week. The La Source Chaude clinic, which is the main clinic for the second section and is run by a volunteer nurse auxillary, closed its doors for fear of cholera. All five cholera victims died. A29's coordinator lobbied regional MSPP to re–open the clinic, which the volunteer nurse auxillary has now done, but there are currently no supplies (IV's, hydration fluids, antibiotics) to treat patients. Thus, more patients have arrived at the clinic, receive a cholera diagnosis, and then die. By the time the patients arrive at the clinic they have been too far along to respond to ORS, so IVs are needed. There are very few cars in the region so it is difficult to get patients to the City of Anse Rouge clinic, which as of yesterday was also out of IVs and rehydration fluids.

As of yesterday, at least five more cholera patients found transport from SEcond Section Commune Anse Rouge to the City of Anse Rouge clinic in the first section. Two more died at the La Source Chaude clinic in Second Section. Five new patients had arrived at the La Source Clinic yesterday.

A29 launched a public education and prevention campaign two weeks ago at teh regions two largest public markets (the City of Anse Rouge and the La Source Chaude markets). Information is spread by megaphone regarding prevention of cholera, treatment and how and when to make ORS.

As a result of the outbreak in Gonaives, people are afraid to go to Gonaives for fear of contracting cholera. This puts the entire region in a precarious position as most of the region's supplies are procured in Gonaives (rice, oil, gas, everything). Commune Anse Rouge produces shallot and sourghum and pwa congo but no other crops in sufficient quantity to meet people's basic dietary needs – everything comes from Gonaives.

There have been reports that one of the first two cholera victims in the region, when being shut out by the clinic and the community, deliberately polluted the drinking water source in Kay Felip, causing the other three people (of the initial five people) to contract cholera. There is a lot of panic and fear as a result, which could all easily be assuaged with the presence of a qualified doctor or nurse and some cholera medical supplies.

A29 is currently engaged in efforts to secure supplies and transport for cholera treatment from PAP but has met with great challenges thus far. A29 is also attempting to engage medical teams to bring support to the region, which almost never receives such assistance because of its isolated location NW of Gonaives.
**Campaigns:** 2010 /2011 Haiti Cholera Epidemic; 2010 Haiti Earthquake; Article 29 Organization; Cap Haitien Health Network (CHHN); MSPP (Haiti – Department of Public Health & Population
Updated Jul 24, 2011 · https://reliefdb.org/shelters/6827

## Lagon Clinic (MSPP)

Medical Facility · Open

NO PHONE SIGNAL; GPS Coord from Google map for Lagon; 19.701986, –72.83083; Should be able to see the Road from Gro Mourne than ends at Lagon.; Clinic has 2nd level to accomodate a doctor., Lagon

**Service** Temporary

12/16/10 Post on HEAS from Amber Munger
The report from the Lagon health committee, backed by the nurse auxiliary who staffs the clinic, was that there has been no consistent support for the Lagon clinic. There is a CTC in the nearby town of Gwo Moun, however, the nurse auxiliary claims that Gro Mourne was too far away for many people served by the Lagon clinic. They agreed that patients should be transported to the Gro Mourne clinic after being treated at the Lagon clinic because Gro Mourne was well staffed and had a much better capacity than the Lagon clinic. However, they were very concerned that patients who arrive at the Lagon clinic are not able to be treated because the clinic is not receiving regular supplies. That day at the clinic there had only been two patients, one of whom died that morning and one still there. One person at the clinic told A29's coordinator that there were people with cholera in the village of Gayette who were not seeking treatment because they had heard that the clinic had no supplies and Gro Mourne was too far for them to try to make it. A29's coordinator went to gayette to confirm if this was the case. In Gayette he found 3 people with cholera who all confirmed that they would not go to the Lagon clinic because it had no supplies. A29 coordinator convinced one of them to go to the clinic but the other two remained and said that they would seek care in La Source Chaude the following day.

A29 observes that there is a need for coordination between the Gro Mourne and Lagon clinics. MSF and PAHO brought supplies to the Lagon clinics a few weeks ago but according to the folks staffing the Lagon clinic, those supplies have run out. At a minimum, it would be helpful if the nurse auxiliary of the Lagon clinic were kept informed of whether any supporting organizations will commit to providing materials to this clinic. A29 can coordinate with the clinic, but encourages health based NGOs in Gro Mourne to please respond (either directly to the nurse in Lagon or to A29). There are two nurse auxiliaries in Lagon. There information is as follows: Louissant Evlyn – 3775–3740; Sanitas Lizette – 3787–5841. You can contact A29's Coordinator Hebert Pierre for more information on the clinics at 3820–9678. For English/Kreyol and computer communications, you can contact me at the numbers listed below

Although the numbers have stabilized and even decreased in Communes Anse Rouge and Terre Neuve, we still have preventable cholera deaths on a regular, daily basis, due to a lack of education about cholera prevention and treatment. A29 is supporting a house to house community education campaign in 22 hard to reach villages in the region. We are seeking partnership with a health based NGO who has medical staff that can give a two day training for 30 cholera agents, supported by A29. We also seek support in the form of informative leaflets that can be left with each household, aqua–tab and soap. If other health based NGOs are able to provide other forms of support to the region, A29 would be happy to facilitate the implementation of health based programs in the region. We have a good relationship with an extensive community network of peasant groups that reach every corner of Communes Anse Rouge and third section Terre Neuve.

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12/2/10 Email Posted on HEAS from Amber Munger
Lagon Clinic
We now have information that the clinic in Lagon has had several cholera patients, 10 of which have died. Although no inventory was taken at the clinic, we are told that several patients have left the clinic because of a lack of materials and are staying at their homes in the village despite repeated pleas by the nurse auxiliary that they stay at the clinic.

The nurse auxiliary who volunteers at the Lagon clinic gave us the following information:

Since 6 November there have been 81 cholera patients. 10 have died. 8 of those died at the clinic and 2 died at their home.

Today, our coordinator counted 23 cholera patients at the Lagon clinic. The nurse said that there were "many" more affected by cholera but that they would not stay at the clinic because there were no supplies that could help them. A29's coordinator did not enter the clinic to take an inventory of the supplies that were there. However, members of the Lagon Health Committee approached A29's coordinator and asked for help, reiterating that there were no supplies for the cholera patients. They have requested a tent and basic CTC supplies for the clinic. They said that Dr. Carlo with MSPP visited the Lagon clinic weeks ago and

said that MSPP was planning to send material assistance the following week, but no assistance has come. The health committee says that there are no NGOs coordinating with this clinic other than A29, (which is not a health organization, only an organization that connects community clinics with resources).

Lagon is in a very remote location with the only "road" access coming from Gro Mourne. It may be technically in Commune Terre Neuve but one of the main trade routes to the village is connected through COmmune Anse Rouge. A29 works with peasant networks in this region.

As we deem this situation urgent, A29 is requesting assistance from other organizations in securing basic cholera supplies, and personnel for the Lagon clinic. It seems relevant to make the Lagon clinic a CTC as there are no other clinics within an hours walk from Lagon and there are no transport vehicles that stay in the village on a regular basis.

Town of Anse Rouge Clinic
The clinic was still closed yesterday. However, Dr. Carlo, in his meeting with our coordinator today, announced that the Town of Anse Rouge clinic would reopen to cholera patients as early as tomorrow. The "clinic" is actually at the site of the burned down hospital and to our knowledge has not seen cholera patients since the epidemic began.

Other clinics in Commune Anse Rouge remain closed to cholera patients. Some clinics had closed completely when the cholera numbers peaked. THose clinics have now re–opened but refer cholera patients to La Source Chaude or Gonaives.

Article 29 Organization is gathering daily and bi–weekly information on the cholera situation in the Commune and coordinating with MSPP and other organizations who can help with supplies for the clinics. If your organization has information to add to this report, or can provide training materials, personnel, or supplies, please contact Amber Munger via email or telephone for more information (English and Kreyol only).

If your organization is on the ground in Haiti and can provide direct assistance in Anse Rouge please contact Hebert Pierre (kreyol only) at 3820–9678.
**Campaigns:** 2010 /2011 Haiti Cholera Epidemic; 2010 Haiti Earthquake; Cap Haitien Health Network (CHHN); MSPP (Haiti – Department of Public Health & Population
Updated Dec 17, 2010 · https://reliefdb.org/shelters/6922

## ILODEP Clinic (Supported by Parole et Action)

Medical Facility · Open

Second Section Commune

**Service** Temporary

12/3/10 Email from Amber Munger
the ILODEP clinic is open but not to cholera patients. It is close to La Source so it makes sense that they send cholera patients to the CTC.

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Updated Dec 4, 2010 · https://reliefdb.org/shelters/6824