

No. 25-1084

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IN THE  
**Supreme Court of the United States**

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DONALD J. TRUMP, PRESIDENT OF THE UNITED STATES, *et al.*,

*Petitioners,*

v.

FRITZ EMMANUEL LESLEY MIOT, *et al.*,

*Respondents.*

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On Writ of Certiorari Before Judgment to the United States Court of Appeals for District of Columbia Circuit

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**BRIEF OF MÉDECINS SANS FRONTIÈRES  
USA, INC. D/B/A DOCTORS WITHOUT  
BORDERS USA AS *AMICUS CURIAE*  
IN SUPPORT OF RESPONDENTS**

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**INTEREST OF *AMICUS CURIAE*<sup>1</sup>**

Médecins Sans Frontières (“MSF”), also known as Doctors Without Borders, is an independent, international humanitarian organization that provides medical assistance to people affected by armed conflict, epidemics, disasters, and exclusion from healthcare.<sup>2</sup> MSF was created in the belief that all people should have access to medical care regardless of gender, race, religion, creed, political affiliation, or national boundaries. Since its founding in 1971, MSF has grown to an organization of more than 67,000 staff. In 2024 alone, it provided 16.5 million outpatient consultations and admitted nearly 1.7 million patients to MSF facilities in seventy-five countries. In recognition of its pioneering humanitarian work, MSF was awarded the Nobel Peace Prize in 1999.

MSF has engaged in extensive operations in Haiti for thirty-five years, as the country has faced repeated natural disasters, armed violence, political upheaval, and public health crises. MSF currently runs seven active projects in Haiti, including trauma centers; primary medical and psychological care facilities; water, sanitation, and hygiene services; maternity care; and support for recent victims of sexual violence. MSF has more than 1,800 full-time staff in Haiti with

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<sup>1</sup> This brief was not authored in whole or in part by counsel for any party, and no person or entity, other than *Amicus*, its members, or its counsel, made a monetary contribution to the preparation or submission of this brief.

<sup>2</sup> MSF comprises twenty-four associations based in countries around the world. One of those associations is Médecins Sans Frontières USA, Inc. d/b/a Doctors Without Borders USA.

recent annual expenditures of €48.3 million (\$57.0 million USD).

MSF has an interest in this proceeding because it is uniquely situated to provide this Court with real-world insight into the urgent challenges facing persons living in Haiti. Few humanitarian organizations operate in the country in the same manner as MSF, and none can match its longstanding role in providing medical services. MSF emphasizes—in the strongest possible terms—that Haitian nationals living in the United States cannot safely return to Haiti.

### INTRODUCTION AND SUMMARY

Haiti is currently among the most dangerous places to live in the world. In the past four years, the country has collapsed into widespread conflict. Dozens of armed groups vie for control, collectively taking over nearly all of Port-au-Prince and steadily expanding to areas outside the capital. These armed groups use violence of all kinds, including heavy weapon attacks and sexual assault, as tools to terrorize and control the communities in which they operate. Meanwhile, a resurgent cholera epidemic, recent natural disasters (including another destructive hurricane in October 2025), and widespread internal displacement have contributed to an unprecedented public health crisis in Haiti.<sup>3</sup>

As MSF’s CEO recently explained, “[h]umanitarian conditions in Haiti have not improved—they’re

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<sup>3</sup> See generally MSF, *Haiti in Crisis: What to Know* (Jan. 23, 2025), <https://perma.cc/67NX-ZVSU>.

actually getting worse.”<sup>4</sup> Over the past year, MSF has witnessed violence and public health crises overwhelm the country. MSF has cared for thousands of Haitians who were victims of armed conflict, assault, collective rape, and other violence, yet has not come close to meeting the total need. The Haitian government, for its part, has no meaningful capacity to protect its own citizens, much less to facilitate the safe return and resettlement of nationals currently living abroad.

MSF’s on-the-ground experience reflects that, without question, Haiti is not a place to which TPS holders can safely return. If immediately forced to go back to Haiti, more than 350,000 TPS holders will face life-threatening harm from violence, displacement, and health crises. Some number of those forcibly returned men, women, and children will almost certainly be killed, while many more will be seriously injured, sexually assaulted, or compelled to join armed groups to survive. Individuals returning from the United States are subject to particular risk, as they are often the direct targets of kidnapping for ransom and other violent crime.

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<sup>4</sup> MSF, *A US Judicial Ruling on Temporary Protected Status Reflects Haiti’s Deepening Crisis* (Feb. 3, 2026), <https://perma.cc/YK76-CA7H> [hereinafter MSF, *February 2026 Statement*]; see also Int’l Rescue Comm., *Haiti’s Gang Violence Crisis: What to Know and How to Help* (Feb. 12, 2026), <https://perma.cc/5D24-2BYM> (agreeing that “Haiti is facing one of the world’s most severe humanitarian crises”); UN Off. for the Coordination of Humanitarian Affs. (OCHA), *Haiti Humanitarian Needs and Response Plan: Executive Summary 3* (Dec. 2025), [https://www.unocha.org/attachments/9fa04d0c-17c9-4fea-b6fd-5f0719234ab4/HTI\\_HNRP2026\\_Executive\\_Summary\\_EN\\_20251218.pdf](https://www.unocha.org/attachments/9fa04d0c-17c9-4fea-b6fd-5f0719234ab4/HTI_HNRP2026_Executive_Summary_EN_20251218.pdf) (agreeing that “Haiti’s humanitarian crisis continues to worsen at an alarming pace”).

It is no surprise that the U.S. Department of State warns against travel to Haiti in the strongest terms possible: “[d]o not travel to Haiti due to kidnaping, crime, terrorist activity, civil unrest, and limited health care.”<sup>5</sup> Indeed, in light of rampant instability, the U.S. government does not currently allow commercial aircraft to fly to Port-au-Prince at all.<sup>6</sup>

The district court, reviewing the administrative record, accurately described Haiti as “a country in chaos and crisis.” J.A. 685. MSF submits this brief to provide the Court with its firsthand experience of current conditions in Haiti, to explain the grave danger that TPS holders will face if they are immediately forced to return, and to urge this Court to leave undisturbed the district court’s order) staying the termination of TPS status for Haiti.

## ARGUMENT

### I. Haiti Is Suffering a Widespread Humanitarian Crisis.

Haiti is engulfed in violence, disease, and social instability. *Amicus curiae* MSF’s healthcare facilities

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<sup>5</sup> U.S. Dep’t of State, *Haiti Travel Advisory* (2025), <https://perma.cc/FGP8-ADZ8> (emphasis omitted); *see id.* (advising travelers to, among other things, “[e]stablish a proof of life protocol with your loved ones . . . so that if you are taken hostage, your loved ones can . . . be sure that you are alive,” and to “[l]eave DNA samples with your medical provider in case it is necessary for your family to access them”).

<sup>6</sup> *US Extends Ban on Commercial Flight to Haiti’s Capital Due to Gang Violence*, Associated Press (Mar. 4, 2026), <https://perma.cc/2357-7JBJ>; Fed. Aviation Admin., *Notice to Airmen (NOTAM) KICZ/A0024-26* (Mar. 2, 2026), <https://perma.cc/ZBV9-YBQD>.

are routinely filled with victims of shootings, stabbings, burns, and sexual assault. Failing infrastructure, extensive internal displacement, and armed conflict make it difficult to render care, and MSF staff and volunteers themselves struggle to maintain their own safety. MSF’s medical convoys have been attacked by armed groups and state actors alike, and its staff have been held hostage by hours-long crossfires outside its facilities.<sup>7</sup>

In addition to the rampant violence, recurrent disease outbreaks are at among the worst levels in memory. From every perspective, “Haiti’s multidimensional political, economic, humanitarian, and human rights crisis” has only grown worse.<sup>8</sup>

### **A. Violence Is Inescapable for Those Living in Haiti.**

Since the assassination of Haitian President Jovenel Moïse in 2021, a near-total breakdown of Haiti’s government has left a power vacuum in which dozens of armed groups now compete for control of the

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<sup>7</sup> See, e.g., MSF, *Haiti: Escalating Violence in Bel Air, Port-au-Prince* (Jan. 8, 2026), <https://perma.cc/5867-95RK> (reporting recent incident in which the building used for MSF’s medical activities in the Bel Air neighborhood “became a battlefield amid intense fighting between an armed group and the Haitian National Police,” with “community volunteers . . . trapped there for several hours before managing to escape”).

<sup>8</sup> Human Rights Watch, *World Report 2026: Events of 2025*, at 198 (2026), <https://perma.cc/K6BX-MJY2> [hereinafter HRW, *World Report 2026*]; see also UN Children’s Fund (UNICEF), *Humanitarian Situation Report No. 8: Haiti 1* (Jan. 24, 2026), <https://perma.cc/J6SX-HZ7L> (“In 2025, Haiti descended into its darkest chapter yet.”).

island nation.<sup>9</sup> In early 2024, a loosely organized coalition of armed groups calling itself “Viv Ansanm” besieged Haiti’s capital, Port-au-Prince, triggering the then-prime minister to resign.<sup>10</sup> Armed groups have since gained control of all roads in and out of Port-au-Prince and have carried out attacks on the airport, forcing a stop to regular air travel.<sup>11</sup> MSF staff observe that “[p]eople are fleeing in large numbers” to escape not only gun violence, but also “kamikaze drone” attacks causing mass civilian killings.<sup>12</sup>

The government has lost control. Political leaders cannot reach basic agreements on how to proceed.<sup>13</sup> Although Haiti again has a prime minister (following expiration of a Transitional Presidential Council mandate last month), his power is severely limited, and

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<sup>9</sup> Int’l Crisis Grp., *Undoing Haiti’s Deadly Gang Alliance* 1-2 (Dec. 15, 2025), <https://perma.cc/RRX6-P7LM> [hereinafter ICG, *Deadly Gang Alliance Report*]. Although often described as “gangs,” these groups are essentially armed, criminal militias, many equipped with weapons as powerful as those commonly possessed by state actors. *See, e.g.*, Global Initiative Against Transnational Organized Crime, *From Criminal Governance to Community Fragmentation: Addressing Haiti’s Escalating Crisis* (Sept. 18, 2025), <https://perma.cc/54DG-FNP7>.

<sup>10</sup> ICG, *Deadly Gang Alliance Report, supra*, at i, 5-7.

<sup>11</sup> *Id.* at i, 14-15.

<sup>12</sup> Statement by MSF project staff. All quotations from MSF staff are on file with counsel of record.

<sup>13</sup> *See, e.g.*, Int’l Crisis Grp., *Locked in Transition: Politics and Violence in Haiti* 28 (Feb. 19, 2025) (explaining that “Haiti is paralysed” and that “[e]arly hope that an inclusive transitional government would quickly tackle the country’s rampant insecurity ... has faded”).

the country has no sitting legislature.<sup>14</sup> National elections have not been held since 2016 and have repeatedly been postponed due to violence and civil instability.<sup>15</sup> In the meantime, “[a]rmed gangs have consolidated into federated coalitions that exercise control or influence over significant parts of the national territory,” funding their operations through “arms and drug trafficking, fuel smuggling, migrant exploitation, extortion and other unlawful activities.”<sup>16</sup>

The scale and scope of violence have only gotten worse. The conflict, originally concentrated in Port-au-Prince, has radiated outward throughout the nation. Violence—both by armed groups and their opponents—kills and injures tens of thousands of people each year. William O’Neill, the UN High Commissioner’s Designated Expert on Haiti, stated in 2025 that “[h]uman rights violations and abuses have reached a scale and intensity that [he has] never seen before in Haiti.”<sup>17</sup>

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<sup>14</sup> See Center for Strategic & Int’l Stud. (CSIS), *Haiti Embarks on Another Rocky Political Transition* (Feb. 9, 2026), <https://perma.cc/F2YJ-KA8T>.

<sup>15</sup> HRW, *World Report 2026*, *supra*, at 202.

<sup>16</sup> UN Off. on Drugs & Crime (UNODC), *Tenth Quarterly Report Under Security Council Resolution 2692*, Doc. No. S/2026/32, ¶ 3 (Jan. 16, 2026) [hereinafter UNODC, *January 2026 Report*]; see also Global Initiative Against Transnational Organized Crime, *Brokers and Patrons: Unstitching Gangs From Haiti’s Political Fabric* (Mar. 2026), <https://perma.cc/Y2BZ-BWE9> [hereinafter *GITOC Report*].

<sup>17</sup> UN Off. of the High Comm’r for Human Rights (OHCHR), *Restoring Dignity: A Global Call to End the Violence in Haiti* (Apr. 7, 2025), <https://www.ohchr.org/en/stories/2025/04/restoring-dignity-global-call-end-violence-haiti>; see also UN OHCHR, Press Release, *Haiti: UN Human Rights Chief Alarmed by*

And as discussed in a recent MSF report, brutal sexual violence has come to pervade the conflict, with women and girls of all ages raped in collective attacks.<sup>18</sup>

### **1. Armed Groups Subject Communities to Sweeping and Indiscriminate Daily Acts of Violence.**

As the district court recognized, Haiti is “a country in full-blown conflict.” J.A. 686 (citation and internal quotation marks omitted). Armed groups—and the various security and vigilante forces trying to stop them—have created pervasive internal violence that, but for its lack of organization, would readily be described as civil war.<sup>19</sup> Armed groups currently control an estimated 90% of Port-au-Prince and much of its surroundings.<sup>20</sup> These groups target specific neighborhoods and key transportation routes that connect to the capital, enabling the groups to operate illegal

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*Widening Violence As Gangs Expand Reach* (June 13, 2025), <https://www.ohchr.org/en/press-releases/2025/06/haiti-un-human-rights-chief-alarmed-widening-violence-gangs-expand-reach> (“UN Human Rights Chief Volker Türk said today that the human rights crisis in Haiti has plummeted to a new low[.]”).

<sup>18</sup> See MSF, *Sexual and Gender-Based Violence in Port-Au-Prince, Haiti* (Jan. 2026), <https://perma.cc/9LQD-RLN6> [hereinafter MSF, *Sexual and Gender Violence Report*].

<sup>19</sup> ICG, *Deadly Gang Alliance Report, supra*, at i, 2-3, 6-7; see also Guy Metayer, *Criminal Gangs in Haiti and Power Structure*, 13 *Class, Race & Corp. Power* 1 (2025).

<sup>20</sup> UNODC, *January 2026 Report, supra*, ¶ 6 & map 1; HRW, *World Report 2026, supra*, at 199.

checkpoints, engage in extortion, and control the flow of food and supplies.<sup>21</sup> AB

These armed groups are also actively spreading beyond the capital.<sup>22</sup> In the Artibonite and Centre Departments, armed groups have swept in and “targeted key highways, coastal municipalities[,] and strategic land border crossings.”<sup>23</sup> In entering a new area, armed groups engage in brutal, often indiscriminate showings of force by killing, assaulting, or forcibly displacing thousands of residents.<sup>24</sup> They also “embrace[] a scorched-earth approach,” destroying

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<sup>21</sup> UNODC, *January 2026 Report*, *supra*, ¶ 8; ICG, *Deadly Gang Alliance Report*, *supra*, at 11; UN, *Quarterly Report on the Human Rights Situation in Haiti (January-March 2025)*, at 5-6 (Apr. 30, 2025) <https://perma.cc/76M6-G9VJ>; UN OHCHR, *Situation of Human Rights in Haiti*, Doc. No. A/HRC/61/74, ¶¶ 14-15 (Mar. 23, 2026), <https://perma.cc/W2J9-T2N8> [hereinafter *OHCHR March 2026 Report*].

<sup>22</sup> UN Sec. Council, UN Integrated Off. in Haiti (BINUH), *Report of the Secretary General*, Doc. No. S/2026/31 ¶¶ 13-16 (Jan. 15, 2026) [hereinafter UN Integrated Office in Haiti, *January 2026 Report*]; *OHCHR March 2026 Report*, *supra*, ¶ 5; *GITOC Report*, *supra*, at 4, 8-10 (discussing armed groups’ creation of “franchises” throughout the country).

<sup>23</sup> UNODC, *January 2026 Report*, *supra*, ¶ 11 & map 2; *see also* UN Integrated Off. in Haiti (BINUH), UN Off. of the High Comm’r for Human Rights (OHCHR), *Intensification of Violence in Lower Artibonite, the Center Department, and Regions Located East of the Metropolitan Area of Port-au-Prince: Major Risk for Haiti and the Caribbean Subregion 4* (Jul. 2025), <https://perma.cc/SR2Q-76ZH>.

<sup>24</sup> *See, e.g.*, HRW, *World Report 2026*, *supra*, at 198 (explaining that armed groups’ violence “is deployed strategically not only to extract rents, but also to expand influence, contest authority in areas under formal State administration[,] and enforce coercive systems of criminal control”); UN, *Quarterly Report on the Human Rights Situation in Haiti (October-December 2025)*, at 10-11 (Jan. 30, 2026), <https://perma.cc/L6R5-ZMMS>.

homes, schools, hospitals, and public buildings during their campaigns.<sup>25</sup> As the U.S. Secretary of State has acknowledged, these armed groups effectively seek to create “a gang-controlled state where illicit trafficking and other criminal activities operate freely and terrorize Haitian citizens.” J.A. 676 (citation omitted).<sup>26</sup>

Reflecting the armed groups’ expanding reach, a January 2026 report by the UN Integrated Office in Haiti noted a sharp increase in killings outside Port-au-Prince.<sup>27</sup> Between January and November 2025, authorities reported almost 2,000 homicides in the outlying departments of Artibonite and Centre, or roughly double the corresponding figure in 2024.<sup>28</sup> Armed groups recently massacred dozens of people in eight rural towns in the Artibonite department.<sup>29</sup> According to some analysts, Haiti now has the “highest homicide rate in the world.”<sup>30</sup>

Kidnapping is an ever-present threat. As armed groups jockey for resources and control, individuals

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<sup>25</sup> ICG, *Deadly Gang Alliance Report* 14; see, e.g., *Gangs Set Fire to Haiti’s National Soccer Training Center in Croix-des-Bouquets*, Haitian Times (Feb. 4, 2026), <https://perma.cc/J67F-J5A6> (reporting on armed groups’ intentional destruction of the FIFA Goal Center, “one of the country’s most important institutions for youth development”).

<sup>26</sup> See Sec’y of State Marco Rubio, Press Release, *Terrorist Designations of Viv Ansanm and Gran Grif* (May 2, 2025), <https://perma.cc/4ZZR-45YA>.

<sup>27</sup> UN Integrated Office in Haiti, *January 2026 Report*, *supra*, ¶¶ 3, 13, 15.

<sup>28</sup> *Id.* ¶ 14.

<sup>29</sup> André Paultre & Frances Robles, *Dozens Killed in Haiti Massacre as International Force Trickles In*, N.Y. Times (Apr. 4, 2026), <https://perma.cc/T4YX-977M>.

<sup>30</sup> HRW, *World Report 2026*, *supra*, at 198.

throughout the country are at risk of being captured for ransom, extorted, or having their property destroyed.<sup>31</sup> As plaintiffs in this case have observed and others have documented, the threat of ransom kidnapping is particularly high for persons who have spent time in the United States; armed groups perceive returnees as having access to substantial amounts of money and specifically single them out as targets for threats and violence.<sup>32</sup>

Those who oppose the armed groups further contribute to the violent chaos.<sup>33</sup> Numerous private security companies and vigilante “self-defense” organizations “function outside formal structures” and beyond government control.<sup>34</sup> Innocent bystanders are routinely hit by stray bullets and killed or injured by explosive drones used in private and government

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<sup>31</sup> UN Integrated Office in Haiti, *January 2026 Report, supra*, ¶ 15.

<sup>32</sup> See Decl. of Fritz Emmanuel Lesly Miot (“Miot Decl.”) at 4-5, *Miot v. Trump*, No. 25-CV-02471 (D.D.C.) (Dkt. 81-2); Decl. of Rudolph Civil at 3 (Dkt. 81-3); Decl. of Marcia Merline Laguerre (“Laguerre Decl.”) at 6-7 (Dkt. 81-5); Decl. of Vilbrun Dorsainvil at 7-8 (Dkt. 81-6); *accord, e.g.*, Immigration & Refugee Board of Canada, *Haiti: Treatment of Haitians Nationals Who Return to Haiti* (Aug. 14, 2025), <https://perma.cc/7SC3-WPFZ> (reporting interviews with multiple Haitians reflecting that “society views returnees who have lived abroad for an extended period of time as wealthy,” which “puts them at risk to be held for ransom by either criminal groups or individual criminals”).

<sup>33</sup> Statement by MSF coordination staff, Haiti; HRW, *World Report 2026, supra*, at 198; OHCHR *March 2026 Report, supra*, ¶ 7; *GITOC Report, supra*, at 4 (identifying “tripartite configuration in which gangs, armed vigilante brigades[,] and state forces compete”).

<sup>34</sup> UNODC, *January 2026 Report, supra*, ¶ 29.

attacks.<sup>35</sup> Government forces themselves engage in intentional violence: in just one quarter of 2025, police summarily executed at least 46 people without due process,<sup>36</sup> and an “extremely high” number of people have been killed or injured by police operations.<sup>37</sup> Armed groups, in turn, respond in increasingly organized ways, “routinely unit[ing] against Haitian and international security forces, pooling personnel, fire-power and logistics.”<sup>38</sup>

Given this intense, chaotic violence, Haiti is one of the most dangerous places in the world for MSF’s teams to operate. Armed groups and their opponents alike operate without apparent regard for MSF’s medical and humanitarian mission. Accounts from medical staff at MSF’s trauma hospital in Tabarre, who treated victims of the September 2025 “kamikaze” drone attack in the Simon Pelé neighborhood, reveal a pattern of Haitian police stopping ambulances for extended periods of time, increasing the likelihood that victims will succumb to their injuries:

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<sup>35</sup> UN Integrated Off. in Haiti, *Quarterly Report on the Human Rights Situation in Haiti (April-June 2025)*, at 13 (Aug. 1, 2025), <https://perma.cc/7BY4-RBU4> [hereinafter *UN Quarterly Report on Human Rights in Haiti (Q2 2025)*]; UN Integrated Office in Haiti, *January 2026 Report*, *supra*, ¶ 17; *OHCHR March 2026 Report*, *supra*, ¶ 6; *GITOC Report*, *supra*, at 18-19; see Dánica Coto, *Human Rights Watch Details Deaths from Police Drone Attacks in Haiti*, Associated Press (Mar. 10, 2026), <https://perma.cc/447T-Z8BW> (reporting that “[d]rones operated by Haitian security forces and private contractors have killed at least 1,243 people and injured 738 others”).

<sup>36</sup> *UN Quarterly Report on Human Rights in Haiti (Q2 2025)*, *supra*, at 13.

<sup>37</sup> *Id.* at 12; UN Integrated Office in Haiti, *January 2026 Report*, *supra*, ¶ 22.

<sup>38</sup> UNODC, *January 2026 Report*, *supra*, ¶ 7.

The first victim of [the drone] attack was a patient between 30 and 40 years old; she had extensive wounds to her limbs (right arm and right leg). She was conscious but showed signs of hemorrhagic shock and also had an abdominal wound. During her transfer to Tabarre (MSF hospital), the police stopped the ambulance for more than twenty minutes. The Haitian National Police (PNH) then inspected the vehicle, searching for suspected gang members, while she was inside. The staff of the Haitian State Ambulance (CAN) were also subjected to verbal abuse during this time. The woman inside unfortunately died.<sup>39</sup>

In another incident, a second ambulance transferring a child and parents was stopped by police for 15 to 18 minutes, endangering the patients.<sup>40</sup> And on one particularly egregious occasion, police and members of self-defense groups attacked an MSF ambulance, executed two MSF patients, and tear-gassed MSF medical staff.<sup>41</sup>

As a result, MSF sometimes must suspend, or even permanently close, operations at facilities to ensure

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<sup>39</sup> *Protection of Civilians in Haiti: Drones* (MSF internal document); *Testimony of Simon Pelé* (Oct. 17, 2025) (MSF internal document).

<sup>40</sup> *Id.*

<sup>41</sup> MSF, *Where We Work: Haiti* (2025), <https://perma.cc/2D8W-58DT>; see also MSF, Press Release, *MSF Outraged by Police Attack on Ambulance and Execution of Patients in Haiti* (Nov. 13, 2024), <https://www.msf.org/haiti-msf-outraged-attack-ambulance-and-execution-patients>.

the safety of its staff, volunteers, and patients.<sup>42</sup> Indeed, for over a year, MSF has been unable to operate its own ambulance service due to repeated threats and attacks on MSF vehicles.<sup>43</sup> Given the near-complete lack of safe emergency transport, “many critically injured patients arrive late” and with “worsened injuries because they were unable to access care earlier.”<sup>44</sup>

The violence has only grown worse in recent months. “Despite severe constraints people face trying to access care, MSF teams have recorded a marked increase in patients with violence-related injuries.”<sup>45</sup> As MSF recently reported, in the first two weeks of January 2026 alone, MSF treated more than 100 people injured by violence at MSF’s hospital in the Drouillard neighborhood of Port-au-Prince, including 66 with gunshot wounds.<sup>46</sup> That two-week figure alone “far exceed[ed] the monthly average” for gunshot wound admissions at the same hospital in 2025.<sup>47</sup> “The trend

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<sup>42</sup> See, e.g., MSF, Press Release, *MSF Announces Permanent Closure of Our Turgeau Emergency Centre in Port-au-Prince* (Oct. 15, 2025), <https://www.msf.org/msf-announces-permanent-closure-our-turgeau-emergency-centre-port-au-prince>; MSF, *Haiti: Escalating Violence in Bel Air, Port-au-Prince* (Jan. 8, 2026), <https://perma.cc/5867-95RK> (reflecting January 2026 further suspension of “all [of MSF’s] activities in Bel Air until further notice”).

<sup>43</sup> MSF, *Port-au-Prince: Over 100 Patients Admitted in Just Two Weeks as Violence Escalates* (Jan. 22, 2026), <https://perma.cc/VZ36-3DP6> [hereinafter MSF, *Over 100 Patients Admitted in Just Two Weeks*].

<sup>44</sup> *Id.*

<sup>45</sup> *Id.*

<sup>46</sup> *Id.*

<sup>47</sup> *Id.*

[of violence] shows no sign of slowing” in 2026, “highlighting the persistence and intensity of violence in the capital.”<sup>48</sup>

## **2. Armed Groups Employ Sexual Violence to Expand Their Control.**

Armed groups in Haiti are increasingly using organized sexual violence as a tool of combat and social domination.<sup>49</sup> As the UN has reported, and MSF likewise has witnessed, these groups have “systematically resorted to gang rape” to “subjugate residents living in areas under their control.”<sup>50</sup> Armed groups frequently “have a stronger intelligence system” than the government, and they use “extensive[]” premeditated targeting to maintain control in these areas.<sup>51</sup> The severity of sexual violence in Haiti cannot be overstated. Since opening a dedicated Port-au-Prince sexual violence clinic in 2015, MSF has treated more than 17,000 survivors, 98% percent of whom are women and girls.<sup>52</sup> And the numbers are increasing at an alarming rate: “The number of survivors of sexual and

<sup>48</sup> *Id.*

<sup>49</sup> MSF defines sexual violence as “any unwanted sexual contact without consent using force or coercion.” MSF, *Sexual and Gender Violence Report, supra*, at 3. MSF defines gender-based violence “any harmful act that is perpetrated against a person’s will, threats of such acts, coercion, and other deprivations of freedom based on socially ascribed gender differences between males and females.” *Id.* This brief refers to both forms of violence as “sexual violence.”

<sup>50</sup> *UN Quarterly Report on Human Rights in Haiti (Q2 2025), supra*, at 3, 15; see also *OHCHR March 2026 Report*, ¶¶ 4, 10.

<sup>51</sup> Christopher Hernandez-Roy & Juliana Rubio, CSIS, *CSIS Briefs: The Gender-Based Violence Crisis in Haiti* (Sept. 2024), <https://perma.cc/7FL7-RKNK> [hereinafter CSIS, *Gender-Based Violence Report*].

<sup>52</sup> MSF, *Sexual and Gender Violence Report, supra*, at 2.

gender-based violence who receive care at the clinic has almost tripled from an average of 95 admissions per month in 2021 to more than 250 in 2025,” according to MSF’s current head of mission in Haiti.<sup>53</sup> Even those extreme numbers seriously understate the scope of the problem, given chronic underreporting of sexual assault.<sup>54</sup>

Demonstrating the weaponized nature of sexual assault, sexual violence involving armed perpetrators has significantly increased. Prior to 2022, attacks involving armed perpetrators accounted for roughly 35% of the MSF clinic’s cases, but after 2022, that number grew to 57%.<sup>55</sup> MSF data reflect that instances of sexual violence occurring during broader attacks on families or communities has increased nearly fivefold since 2022.<sup>56</sup> Now more than ever, even children are targeted: according to UNICEF reporting, Haiti has witnessed a 1,000% increase in sexual violence against minors between 2023 and 2025.<sup>57</sup>

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<sup>53</sup> Statement by Diana Manilla Arroyo, MSF Head of Mission.

<sup>54</sup> The number of sexual and gender-based violence survivors in all of Haiti vastly exceeds those who have been able to seek treatment through MSF. For instance, Haiti’s Single Health Information System recorded 16,470 cases of sexual and gender-based violence in 2022 alone. UN Population Fund (UNFPA), *Addressing Gender-Based Violence in Haiti* (Jun. 2023), <https://perma.cc/N2FK-57K6>. But underreporting makes determining the true extent of such violence “impossible” to know. *Id.*

<sup>55</sup> MSF, *Sexual and Gender Violence Report, supra*, at 9-11.

<sup>56</sup> *Id.* at 11 (citations omitted).

<sup>57</sup> UNICEF, *Haiti’s Children Under Siege: The Staggering Rise of Child Abuse and Recruitment by Armed Groups* (Feb. 7, 2025), <https://www.unicef.org/lac/en/press-releases/haitis-children-under-siege-staggering-rise-child-recruitment-armed-groups> [hereinafter UNICEF, *Haiti’s Children Under Siege*].

Sexual violence involving multiple perpetrators is also now routine. From 2020 to 2021, 30% of the cases in MSF's Port-au-Prince clinic had involved multiple perpetrators, but that number climbed to 58% between 2022 and 2025.<sup>58</sup> On average, each such attack has involved three perpetrators, but over 100 survivors were attacked by ten or more perpetrators.<sup>59</sup> The problem has only grown worse: a UN report addressing the second quarter of 2025 found that collective rapes accounted for 85% of all sexual violence cases in Haiti.<sup>60</sup> In a majority of cases for which MSF provides healthcare and treatment to female victims of sexual assault, the victims were assaulted by multiple armed perpetrators, and in many instances the victims had previously suffered other such attacks.<sup>61</sup>

That sexual violence has essentially become a weapon of war is demonstrated by a shift in the profile of perpetrators and their targets. In prior years, sexual violence was usually committed by perpetrators known to victims, such as intimate partners.<sup>62</sup> Although MSF continues to see such cases, they are now surpassed by the number of cases involving members of armed groups.<sup>63</sup> The demographics of sexual assault survivors has shifted as well; the age

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<sup>58</sup> *Id.* at 9.

<sup>59</sup> *Id.* at 11.

<sup>60</sup> *Id.* at 15; *see also* UN Integrated Office in Haiti, *January 2026 Report, supra*, ¶ 50 (reflecting that “[c]ollective rape remained the predominant violation” in latter parts of 2025).

<sup>61</sup> UNICEF, *Haiti's Children Under Siege, supra*, at 13. Psychological scars remain long after an attack, particularly since many women face community stigma after being sexually assaulted. *See id.* at 1, 2, 12, 15-20.

<sup>62</sup> *Id.* at 9.

<sup>63</sup> *Id.*

distribution of survivors has become more even across all age groups, with attacks on women aged fifty to eighty years old increasing sevenfold since 2022.<sup>64</sup>

As armed groups spread, sexual violence follows.<sup>65</sup> Studies by the UN and the Haitian NGO Nègès Mawon found that rape often accompanies looting, murder, and the destruction of property.<sup>66</sup> Armed groups target women and girls because they “hold the families and community together,” and “physical and emotional destruction [of women and girls] aims at destroying social and cultural stability.”<sup>67</sup> Armed groups thereby not only acquire physical territory but also maintain psychological control.<sup>68</sup>

Horrific stories abound. As one example, in 2025, five women and two men encountered an armed group ransacking and vandalizing a car dealership.<sup>69</sup> Multiple members of the armed group raped the women

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<sup>64</sup> *Id.*

<sup>65</sup> Rampant sexual violence is a characteristic of countries experiencing violent internal conflict or civil war. See, e.g., Caroline Kapp, *The Devastating Use of Sexual Violence as a Weapon of War: Three New UN Reports Detail Atrocities in Ethiopia, Haiti, and Ukraine*, Think Global Health (Nov. 2, 2022), <https://perma.cc/UAK2-AVNB>.

<sup>66</sup> *Id.*

<sup>67</sup> Ruth Seifert, *The Second Front: The Logic of Sexual Violence in Wars*, 19 *Women’s Stud. Int’l Forum* 35, 39 (1996), <https://perma.cc/Q3HD-BQYG>.

<sup>68</sup> See UN Integrated Off. in Haiti (BINUH) & UN Off. of the High Comm’r for Human Rights (OHCHR), *Sexual Violence in Port-au-Prince: A Weapon Used by Gangs to Instill Fear* (Oct. 2022), <https://perma.cc/5ENV-J7SX> [hereinafter BINUH & OHCHR, *Joint Report on Sexual Violence*].

<sup>69</sup> *UN Quarterly Report on Human Rights in Haiti (Q2 2025)*, *supra*, at 7.

before shooting them dead.<sup>70</sup> On another occasion in May 2025, the UN reported that members of an armed group raped, shot, and burned the bodies of two women residing in one Port-au-Prince neighborhood after the women allegedly visited another neighborhood that the armed group had declared to be off limits.<sup>71</sup> On another occasion, women were raped for days by multiple armed groups during a five-week blockage of a major national road.<sup>72</sup>

Accounts from women treated by MSF make plain the pain and suffering that this weaponized use of sexual violence has caused:

Since that day [on which I was raped], I have found myself living on the streets. They took my son . . . as well as his father. Since then, I have had no news of them. I am on the streets with my four children. I have nothing left, no one . . . . When I returned to my house, they had burned everything down. I had a son who owned a motorbike taxi . . . it was burned as well. My entire future is gone; sometimes, I even feel like hurting myself, but my daughter always comforts me. Woman, age 51.<sup>73</sup>

It was truly a tragedy. I had to flee my home without being able to take anything with me. When I returned home to

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<sup>70</sup> *Id.*

<sup>71</sup> *UN Quarterly Report on Human Rights in Haiti (Q2 2025)*, *supra*, at 8.

<sup>72</sup> CSIS, *Gender-Based Violence Report*, *supra*.

<sup>73</sup> MSF, *Sexual and Gender Violence Report*, *supra*, at 12.

collect clothes for my children, I came across an armed man who was there, in the hallway. Immediately, he called a group of armed men who joined him. They raped me, beat me, and threatened to kill me. I didn't know if I was going to live or die, terrified at the thought of leaving my children behind. Woman, age 41.<sup>74</sup>

Survivor accounts documented by other humanitarian organizations similarly reveal the brutality and viciousness of the ongoing sexual violence in Haiti:

Rose, a mother of four and five-months pregnant, was severely beaten and raped, in the presence of her children, by three heavily armed masked men. The latter had forced their way into her home during an attack launched against the residents of [her neighborhood] . . . . Earlier that day, Rose's husband had been shot dead by members of the same gang. Before leaving, the armed individuals set her house ablaze, forcing Rose and her children to sleep out in the open in a public space for many nights.<sup>75</sup>

[H]eavily armed gang members forced their way into Marie's home in Cité Soleil. After her husband was executed with a gunshot to the head, the armed

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<sup>74</sup> *Id.*

<sup>75</sup> BINUH & OHCHR, *Joint Report on Sexual Violence, supra*, at 3.

men forced her to lay on top of his dead body, and then they raped her one after the other in the presence of her children. After the attack, the assailants set her house ablaze. She and her children had time to get out of the house before it was completely burned down, together with the body of her husband.<sup>76</sup>

After surviving sexual violence, many women flee, only to face the risk of additional sexual violence in makeshift camps for internally displaced persons: “One night, I was lying somewhere in the camp when I suddenly felt someone touch me. I stood up, surprised, and saw three men surrounding me. I screamed, but no one came to help me. All three raped me.”<sup>77</sup>

### **B. Haiti Faces Complex Public Health Emergencies.**

The rampant violence just described alone demonstrates that it is not safe for TPS holders to return to Haiti. But Haiti also faces public-health emergencies that independently make it a gravely dangerous place to live. Haiti’s healthcare system has collapsed, at the same time the country is facing a resurgence of cholera at levels unseen elsewhere in the Western Hemisphere.

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<sup>76</sup> *Id.* at 9.

<sup>77</sup> Rachel Opota et al., UNICEF, *A Silent Crisis: The Long Healing Process of Survivors of Sexual Violence in Haiti* (June 26, 2025), <https://www.unicef.org/haiti/en/stories/silent-crisis>.

### 1. Haiti Cannot Provide Adequate Health Services to Its Citizens.

Haiti's healthcare system has almost entirely fallen apart. Armed groups pillage pharmacies, clinics, and hospitals, "leaving these areas with little access to essential medicines."<sup>78</sup> Purposeful attacks and looting between 2023 and 2025 have struck important healthcare facilities such as St. Francis de Salles Hospital, Bernard Mevs Hospital, Hôpital Sanatorium, and the National Faculty of Medicine and Pharmacy.<sup>79</sup> Since the start of these attacks, "70% of the capital's public health facilities have closed, depriving 4.4 million people of access to health care."<sup>80</sup>

Even where healthcare facilities remain operating, they often cannot be accessed due to the facility's location, fear of violence, or lack of funds.<sup>81</sup> First, "[t]here are very few hospitals run by the Haitian state; most hospital facilities are private, and people do not have enough money to pay."<sup>82</sup> The dearth of accessible healthcare extends well beyond Port-au-Prince. For instance, MSF's facility in Port-à-Piment "is now one of the few facilities offering comprehensive care" in the southern part of the country, and the only

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<sup>78</sup> Statement by Jean Marc Biquet, MSF Head of Mission.

<sup>79</sup> *Id.*; see also MSF, *Over 100 Patients Admitted in Just Two Weeks*, *supra*.

<sup>80</sup> Int'l Comm. of the Red Cross, *Haiti: Making Impossible Choices in a Health-Care System on the Verge of Collapse* (Oct. 23, 2025), <https://perma.cc/9PNH-SXRN>.

<sup>81</sup> Statement by MSF psychologist, Mental Health Team, Port-à-Piment, Haiti.

<sup>82</sup> *Id.*

one in that region offering hospital services for newborns.<sup>83</sup>

Second, the presence of armed groups effectively limits the ability of people to travel for treatment.<sup>84</sup> Injured patients must “cross long barricades, navigate blocked roads, and pass through neighborhoods under fire to reach one of the few hospitals still operational.”<sup>85</sup> And “[f]ear is a major barrier to life-saving care.”<sup>86</sup> As described by Betsie Lewis, MSF’s Humanitarian Affairs Manager in Haiti:

Over the past nine months, I have spoken with more than 50 Haitian colleagues, patients, and community members across the North, West, and South of the country. What has struck me most is the depth of psychological strain people must endure simply to survive daily life. For patients and staff alike, fear shapes every step of the decision-making process: whether to leave home, accept a referral, travel at night, or remain in medical care. As a result, people increasingly self-restrict their movements, even when services exist, weighing the risk of seeking care against the risk of not returning home alive.<sup>87</sup>

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<sup>83</sup> Statement by MSF project coordinator, Port-à-Piment, Haiti.

<sup>84</sup> Statement by MSF Health Promotion Staff, Cité Soleil, Haiti.

<sup>85</sup> MSF, *Port-au-Prince: Over 100 Patients Admitted in Just Two Weeks*, *supra*.

<sup>86</sup> Statement by advisor to MSF Head of Mission.

<sup>87</sup> Statement by Betsie Lewis, MSF Humanitarian Affairs Manager, Haiti.

In fact, “an average of 40% of [MSF] patients refuse necessary referrals to hospitals in other parts of the city, out of fear of being caught in crossfire or accused of belonging to an armed group. This includes elderly people and women with children.”<sup>88</sup>

Ongoing conflict similarly limits access to crucial medical supplies. For example, in summer 2024, armed violence prevented supplies from reaching Port-au-Prince for three months, disrupting access not only to basic supplies but also other crucial medicines like HIV treatment.<sup>89</sup>

MSF’s on-the-ground experience confirms that the health-related fears expressed by plaintiffs are well-founded. Many TPS holders would be particularly vulnerable to illness or death if forced to return to Haiti. As Mr. Miot explained, returning to Haiti “would likely sooner or later be a death sentence” because he has Type 1 diabetes, and reliable access to insulin cannot be guaranteed.<sup>90</sup> The same is true for Ms. Noble, who suffers from spinal tuberculosis. Returning her to Haiti, where she has no known family and has not lived since she was two years old, means sending her to a country that “has no functional health care system to treat [her] health issues.”<sup>91</sup>

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<sup>88</sup> Statement by advisor to MSF Head of Mission, Haiti.

<sup>89</sup> MSF, *Medical Supplies Arrive in Haiti After Three-Month Disruption* (June 21, 2024), <https://perma.cc/W7VS-GLBN>; MSF, *Closed Ports, Empty Shelves: Haiti Urgently Needs Medical Supplies* (May 21, 2024), <https://perma.cc/EKS7-SQ6N>.

<sup>90</sup> Miot Decl. at 4-5.

<sup>91</sup> Decl. of Marlene Gail Noble at 6 (Dkt. 81-4); *see also* Laguerre Decl. at 7.

## 2. Severe Disease Outbreaks Threaten Haiti's People.

Haitians suffer from numerous communicable diseases that do not exist in the United States—most notably, cholera. Cholera is caused by a bacterial infection of *Vibrio cholerae*, usually ingested through water contaminated with fecal matter, which disrupts the intestinal lining and produces severe diarrhea. The resulting dehydration and loss of electrolytes can trigger organ failure, disrupt heart rhythms, and lead to hypovolemic shock and cardiovascular collapse.

Following the 2010 earthquake, Haiti experienced what was then the worst cholera outbreak worldwide in modern history, sickening more than 800,000 Haitians and killing approximately 10,000. Responding to that outbreak required a sustained, international effort. MSF, for example, mobilized more than 1,150 international and Haitian staff to operate 21 temporary cholera treatment centers throughout Haiti. Through that global effort, the first cholera outbreak was eventually contained, but not until 2019—nine years after it started.

Unfortunately, the conditions for widespread disease soon returned. As a result of recent violence, roughly 12 percent of Haiti's population—1.4 million people—has been displaced from their homes, double the figure recorded one year earlier.<sup>92</sup> Many of these displaced persons now reside in spontaneous, makeshift sites around Port-au-Prince and elsewhere. These makeshift communities are overcrowded and lack access to clean water and basic sanitation. As MSF's head of mission explained: "Stagnant water,

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<sup>92</sup> See, e.g., *OHCHR March 2026 Report*, ¶¶ 16, 48.

broken sewage lines, and the accumulation of trash across the city create ideal conditions for outbreaks to spread whenever the rains come.”

Cholera is now again resurgent. In 2022, MSF opened three cholera treatment centers, which immediately reached full capacity, and distributed millions of liters of clean water. Nonetheless, as of November 2025, the current epidemic has sickened more than 90,000 Haitians—a third of them children under the age of nine—and has led to thousands of deaths. In a two-month period between September and November 2025, a single outbreak in one neighborhood in Port-au-Prince resulted in almost 400 cases and more than a dozen fatalities.

Cholera outbreaks require prompt hospitalization. With quick access to proper care, it is an easily treated disease. Without such care, cholera can turn deadly in a matter of hours. But, as explained, Haiti’s public healthcare system is essentially non-functional, and Haitians risk grave personal harm simply by seeking to travel from one neighborhood or community to another for treatment.

Preventative efforts have proven equally difficult. To respond to the 2010-2019 cholera epidemic, Haitians and international organizations, including MSF, undertook a decade-long campaign involving administering oral vaccines, conducting laboratory testing and diarrheal disease surveillance, expanding access to clean water and sanitation, deploying over 10,000 volunteers trained on hygiene and sanitation practices, and opening almost 300 cholera treatment centers. Those systematic interventions were possible because Haiti at that time possessed a more functional government with comparatively little violence.

But similarly systematic interventions are not possible in Haiti today: the government controls only limited territory; aid workers cannot easily access violence-plagued areas; patients cannot reach hospitals or are too afraid to travel to them; and necessary medical supplies cannot reliably enter Haiti, meaning rates of cholera and other transmittable diseases are likely only to worsen.

## **II. The District Court’s Stay Protects Haitian TPS Holders.**

As the district court rightly concluded, Haiti is not “on the brink of recovery” but rather is “a nation deep in crisis.” J.A. 680, 687. Or as the UN’s Secretary-General put it just months ago: “The people of Haiti are in a perfect storm of suffering.” J.A. 687 n.29 (alteration omitted). Conditions remain dire, especially as “armed conflict is only intensifying in residential areas.”<sup>93</sup> Humanitarian organizations have little to no spare capacity available to help care for returning TPS holders.<sup>94</sup> Extinguishing the district court’s stay would likely mean death, injury, sexual assault, and other profound harms for thousands of people forced to return to Haiti. In MSF’s view, “[e]nding protected status could not come at a worse time.”<sup>95</sup>

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<sup>93</sup> MSF, *February 2026 Statement, supra*.

<sup>94</sup> See e.g., UN Int’l Org. for Migration (IOM), *Violence Triggers Record Displacements in Port-au-Prince: Over 60,000 People in a Month* (Mar. 18, 2025), <https://perma.cc/8BGF-9C6Z> (explaining that “[r]esources are stretched thin, and humanitarian needs far exceed the current response capacity”).

<sup>95</sup> MSF, *February 2026 Statement, supra*.

## CONCLUSION

MSF works in conflict zones, in areas stricken by natural disasters, and throughout parts of the world where epidemics routinely claim lives. Haiti has suffered the peril of all three. From MSF's first-hand experience, it can confirm that current conditions in Haiti prevent TPS holders from returning to the country in safety.

Absent temporary protected status, TPS holders may face immediate removal to Haiti. Once there, they will face an extremely high risk of violence, including kidnapping, rape, mutilation, and murder. TPS holders may also become victims of one of the country's public health epidemics or die in the absence of a functional healthcare system. This fate looms large, particularly for individuals with pre-existing medical conditions.

For the foregoing reasons, MSF respectfully urges the Court not to disturb the district court's stay of the termination of TPS status for Haiti.

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