IN 2019, ACTION AGAINST HUNGER...

**WAS FINANCIALLY SUPPORTED BY**

> 1M PEOPLE

**RAISED**

€450.2M

**REVENUE**

**EMPLOYED**

8,477 PEOPLE GLOBALLY

**DISTRIBUTED**

€42.4M

**CASH**

**CONDUCTED**

72

RESEARCH PROJECTS

**RESPONDED TO**

43

EMERGENCIES

**MANAGED A GLOBAL SUPPLY CHAIN VOLUME OF**

€146.5M

**REPORTED**

10

VERY SERIOUS SECURITY INCIDENTS

WHERE WE WORKED IN 2019

**NUTRITION**

- 5.5 MILLION people supported by our nutrition programmes
- 209 nutrition assessment and surveillance reports
- 210 mobile and satellite teams for nutrition treatment
- 642,364 admissions to CMAM programmes supported by Action Against Hunger
- 81% average CMAM cure rate in high burden countries

**HEALTH**

- 19,857 health and nutrition education training sessions
- 2.9 MILLION people supported by our health programmes
- 1,951 health centres
- 288 health and nutrition projects

**MENTAL HEALTH AND CARE PRACTICES**

- 229 Mental health & care practices projects
- 13,112 people received a mental health & care practice kit
- 416,086 people benefited from mental health & care practices
- 88% of individuals who benefited from IYCF received preventative support

**DISASTER RISK REDUCTION AND MANAGEMENT**

- 60 DRR and DRM projects
- 215,666 people supported by our DRR and DRM programmes
- 40,122 people received DRR and DRM training

**WATER, SANITATION AND HYGIENE**

- 5.6 MILLION people supported by our WASH programmes
- 2.6 MILLION hygiene kits distributed
- 13,256 water points improved
- 1.8 MILLION cubic meters of water delivered
- 38.7% of Action Against Hunger projects have a WASH component

**FOOD SECURITY AND LIVELIHOODS**

- 2.4 MILLION people supported by our FSL programmes
- 271,752 people received unrestricted cash
- 252 food security and livelihoods projects
- 18,194 tonnes of food assistance delivered
INTRODUCTION

There are three major aims of the International Strategic Plan 2016-20: to mitigate the consequences of hunger; to address the causes of hunger; and to change the way hunger is viewed and addressed. These aims contribute towards the achievement of the 2030 Agenda for Sustainable Development. Zero hunger, good health, gender equality, and clean water and sanitation are the four Sustainable Development Goals emphasised by our International Strategic Plan 2016-20.

GLOBAL GOAL 2: NO HUNGER
End Hunger, achieve food security and improved nutrition and promote sustainable agriculture.

GLOBAL GOAL 3: GOOD HEALTH
Ensure healthy lives and promote well-being for all at all stages.

GLOBAL GOAL 5: GENDER EQUALITY
Achieve gender equality and empower all women and girls.

GLOBAL GOAL 6: CLEAN WATER AND SANITATION
Ensure availability and sustainable management of water and sanitation for all.

Our aims are framed by Action Against Hunger’s theory of change. This is an overarching guide for achieving a world free from hunger. It outlines our four crosscutting tools: powerful and legitimate voice; transfer of our knowledge and expertise; operational capacity; and technical expertise and innovation.

The International Annual Report 2019 highlights the ways in which our country offices have contributed to achieving a world free from hunger, through several sectors and focuses:

FOCUS ON OUR INTERNATIONAL STRATEGIC PLAN 2021-25

The Action Against Hunger network is governed by a five-year International Strategic Plan (ISP) that provides a shared direction for the 8,000 staff working across our organisation, and informs the strategy and plan of action of our more than 50 offices. Our next International Strategic Plan (ISP3) will set the intentions and ambitions of the network for the 2021-2025 period, and provide a common roadmap to achieving them.

The development of the ISP3 was kicked off in 2019 by a wide consultation process conducted over a period of several months, which aimed to bring together the views and aspirations of Action Against Hunger’s key stakeholders, including our staff, donors, and partners. The insights gathered from the Mid-Term Review of our previous 2016-2020 ISP have been a key input throughout the development of the new strategy and will continue to inform its operationalisation. This first consultation phase was followed by strategy development workshops.

This participative process enabled the network to identify a number of key priorities, which will continue to be further refined as we finalise the ISP3 over the next few months.

1. WE ENHANCE THE CORE OF WHAT WE DO FOR GREATER IMPACT

While our expertise as an emergency responder and frontliner will remain core to our identity as an organisation, we aim to significantly strengthen our efforts to achieve sustainable long-term change, by putting a greater focus on prevention and addressing the root causes of hunger.

We know that the climate crisis will be a key accelerating factor in increasing hunger over the next five years. Climate change will not only disrupt local climate conditions and reduce agricultural output, but also have a compounding effect on other drivers of hunger such as conflict and protracted crises, exacerbating existing needs and increasing the pressures facing the most vulnerable populations. This means that we need to fundamentally change the way we address hunger by making this a key focus.

In addition, inequalities in terms of social, political and economic power also remain a key driver of hunger that will be central to our 2021-2025 International Strategic Plan. We believe that the world cannot eliminate hunger without eliminating gender inequality and gender-based violence, since they are both causes and consequences of hunger, and we commit to significantly strengthening our approach in that regard.

Furthermore, the COVID-19 pandemic is reshaping the environment in which we operate, and is already having a deep impact on hunger and food security, disproportionately affecting the most vulnerable populations. The information and knowledge gathered by our teams as they work to address both the direct and indirect repercussions of this crisis will inform the development of our next ISP.

2. WE TRANSFORM OUR APPROACH AND ACT AS A FACILITATOR AND A CATALYST FOR CHANGE

We know that addressing escalating humanitarian needs will require new ways of working that can produce change on a greater scale, and we will aim to achieve this by rethinking our approach to collective action with our partners and by harnessing the potential of digital transformation. In addition, our recognised technical expertise and decades of experience mean that we are uniquely positioned to mobilise and empower others. Over the next five years, we will aim to maximise our ability to act as a catalyst for change, joining forces with communities and actors at all levels to achieve unprecedented and sustained gains in the fight against hunger.

To this end, we will work hand in hand with and communities to develop and implement the most effective solutions to prevent and reduce hunger. We will build on our recognised technical expertise to collectively create and share knowledge to empower individuals, communities and actors on a global scale, and leverage our relationships and our global footprint to connect people at all levels to come together and call for change.
**KEY GLOBAL STATS**

Action Against Hunger’s ambition of a world free from hunger translates into a comprehensive variety of humanitarian and development interventions, spanning from livelihoods to nutrition; from advocacy to research.

Our actions focus on immediate support to save lives, to prevent the causes of malnutrition, to help to mitigate factors that contribute to crisis, and to deliver development initiatives and sustainable solutions.

In 2019, Action Against Hunger operated in 46 countries’ worldwide providing assistance in the sectors of nutrition, health, WASH (water, hygiene and sanitation), food security, livelihood and disaster risk management (DRM).

Overall, we reached 40 per cent of the beneficiaries (6,983,097 individuals) in our identified high burden countries while 60 per cent (10,453,254) were in the rest of the countries where we intervene.

4 Central America is composed of Nicaragua and Guatemala
We work to tackle the consequences of child malnutrition, thus ensuring the full development of children’s capacities so that they are better equipped to break the cycle of poverty.

We fight against the causes and consequences of hunger and malnutrition, freeing children, women and men from their threat.

We directly treat the causes of malnutrition and prevent nutritional deterioration that could lead to diseases.

We promote more balanced power relations between women and men and favour the empowerment of women and girls.

We seek to guarantee access to water and basic sanitation needed for the life and development of communities.

We promote employability and inclusive entrepreneurship.

We promote a greater connection between the social responsibility of companies and the third sector in order to achieve the 2030 agenda.

We work to put in place all the necessary measures to break the complex ties that link violence and hunger.

We increase the resilience of communities and develop sustainable livelihoods to adapt to future crises.

We work to eradicate the differences and injustices that stand in our way against world hunger.

We promote balanced and equal participation in power relations and work to foster women’s empowerment.

We work to put in place all the necessary measures to break the complex ties that link violence and hunger.
AFRICA

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Three humanitarian crises are ongoing in Cameroon. Refugees from the Central African Republic are present in the east; the region in the far north suffers from Boko Haram attacks resulting in population movements and affecting the delivery of basic services; and the English-speaking regions are in turmoil with an ongoing conflict between the government and anglophone armed groups.

In the east, Action Against Hunger continued to assist refugees and host communities with nutrition and food security and livelihood interventions. In the far north, Action Against Hunger implements nutrition and health, WaSH and NFI (non-food items) emergency programmes to respond to acute humanitarian needs in the area most affected by attacks. It also implements multi-year programmes that aim at strengthening resilience, nutrition security and well-being in communities through health and nutrition assistance, WaSH, FSL, mental health, and advocacy as well as support to local governance. A food security monitoring and early warning project also undertaken. This plan will be operational in 2020.

In response to the deterioration of the humanitarian situation in the northwest and southwest (NWSW) regions, Action Against Hunger distributed NFIs to displaced populations and started mobile clinics providing primary health care and nutrition to affected populations in areas where health services are compromised or non-existent.

Action Against Hunger consolidates its strategy based on emergency actions to address the effects of the crises caused in particular by the NWSW crisis and the war against Boko Haram, and on medium-term actions to increase the resilience of populations, fight the underlying causes of undernutrition, and promote social cohesion.

A total of 645,540 beneficiaries were reached in 2019. Action Against Hunger in Burkina Faso continued its health and nutrition activities as part of the PADI project in the Hauts Bassins region. This project has contributed to reinforcing the resilience of communities by including vulnerability and capacity studies, as well as cartographies of zones at risk of food insecurity. This project was also supported by Confluences, an advocacy project aimed at strengthening the capacity of civil society actors in favour of healthy nutrition practices.

The programme initiated emergency projects to provide quick shelter, WaSH, protection and mental health support to displaced and host populations. The mission collaborated with WFP for a food assistance project in aid of internally displaced persons, and with UNICEF for the distribution of WaSH kits and WaSH in Nut interventions.

The programme also elaborated an emergency preparedness and response plan to identify main risks, and monitoring and preparedness actions to undertake. This plan will be operational in 2020.

Despite a peace and reconciliation agreement signed in February 2019, there are still some 600,000 internally displaced persons in the Central African Republic to date, due to armed conflict and insecurity. Over half of its 4.9 million population rely on humanitarian assistance. Malnutrition remains a major issue and is a leading cause of morbidity and mortality for children under five.

In 2019, Action Against Hunger implemented emergency projects to respond to acute humanitarian needs. Rapid Response Teams provided non food items, water and sanitation assistance, food aid and psychosocial support to newly displaced people in three prefectures in the north-west of the country. Drilling and nutrition mobile teams responded to WaSH and nutrition emergencies. Additionally, health, nutrition, mental health and care practices and emergency WaSH programmes were implemented in the Basse Kotto Prefecture and in Bangui.

Looking at the longer term, we implemented a food security and livelihood programme in Bossangoa, building the resilience of vulnerable communities. Action Against Hunger continued to work with the University of Bangui to reinforce psychological care capacity in the country, and to collaborate with the Pediatric Centre of Bangui for the treatment of severe and acute malnutrition in children, while strengthening the capacity of concerned medical doctors for malnutrition treatment. To support health system strengthening, a major diagnostic of the system was conducted in Bangui. We conducted a value chain analysis on caterpillars in Bangui, a major source of protein for the population.
Ivory Coast has remained politically stable since the end of the 2010-2011 crisis. However, recent confrontations have emerged between political protesters and the police following the arrest of opposition politicians. This series of events has heightened uncertainties related to the election scheduled for October 2020, which may trigger more political revolts. The poverty rate is high at 46.3%, and nutrition remains a major public health issue: 21.6% of the population suffers from chronic acute malnutrition. Limited access to basic social services and low employability also impede sustained development.

In 2019, Action Against Hunger reached 471,341 people. The mission continued to strengthen the Ivorian health system through the Health System Reinforcement Programme (PROSSAN), which follows a community-based approach to strengthen community involvement in health centre management and activities related to prevention and promotion. PROSSAN aims at improving the health of vulnerable populations, such as women, young adolescents and children under 5 in the poorest parts of Abidjan. In addition to strengthening the capacity of health professionals, Action Against Hunger rehabilitated 3 health centres and 2 youth listening posts to provide support for young people suffering from psychological distress.

The mission also continued to implement activities supporting civil society organisations on nutrition advocacy projects as part of the Scaling Up Nutrition (SUN) movement.

The Congolese population suffers from decades of bad governance and armed conflicts, especially in the eastern provinces. Extreme poverty, population displacement, lack of functioning basic services and poor infrastructure have resulted in one of the most severe humanitarian crises, with 15.6 million people in need of humanitarian assistance in 2019. Measles, Ebola and cholera epidemics worsened the situation in vast areas of DRC.

Action Against Hunger has continued to respond to acute nutrition needs through its emergency nutritional programme, which can deploy response teams and conduct nutrition surveys anywhere in DRC in order to provide food aid to vulnerable families in Kasai. Action Against Hunger has responded to the acute humanitarian crisis in the Djugu territory of Ituri with an integrated nutrition and health approach, mental health and care practices, WaSH and food aid projects; and in the Masisi territory in North Kivu with a multi-sectorial rapid response project. In addition, we implemented Ebola infection control and protection activities in Kinshasa and Ituri, and responded to floods in the South Libenge province.

To address the causes of undernutrition, Action Against Hunger also implemented longer term multi-sectoral interventions in Kasai and Kasai central. We also concluded a study in 2019 on nutritional resilience in the province of Kwango to better understand the determinants of malnutrition, the behavioural barriers of communities, and the specific vulnerabilities associated with gender.

Ethiopia experienced positive socio-political developments in 2019. At the same time, protracted and acute crises continued to disrupt the lives of a significant and growing number of people, causing widespread food and nutrition insecurity and forced displacement. Natural disasters, epidemics, and livestock diseases further drove increased humanitarian needs. In 2019, Ethiopia hosted 2.6 million internally displaced people and nearly 700,000 refugees. 39% of people had access to improved water sources and just 7% to safe sanitation. 8.5 million people faced severe acute food insecurity and, among children under five, 37% were chronically malnourished and 7% were acutely malnourished.

Action Against Hunger responded to multiple emergencies with integrated, multisectoral assistance including malnutrition treatment, mental health support, WaSH services, gender and protection programmes, support for food security and emergency livelihoods, and resilience-building activities.

Our teams prevented, detected, and treated malnourished South Sudanese refugee children and mothers. We conducted an innovative pilot project to reduce anaemia among refugee children called the Toddler Care Group approach. In 2019, we provided emergency cash transfers to 47,965 people. Each month, we screened 215,326 children under five and 52,379 pregnant women and breastfeeding mothers for malnutrition per month. Throughout the year, our teams treated 19,992 severely malnourished children, 71,697 moderately malnourished children, and 46,714 malnourished pregnant and breastfeeding women. We held education sessions through mother-to-mother support groups, reaching 21,284 mothers and infants and provided mental health support to 7,513 people.
More than half of the Liberian population lives in poverty. The Ebola epidemic of 2014 precipitated a prolonged economic crisis, which in turn created serious political and social tensions in 2019. Currently, 38.4% of the population is food insecure, 25% of the population does not have access to drinking water, and only 17% has access to basic health services. Although HIV and Ebola prevalence rates have declined, diarrhoeal diseases remain the second cause of death for children under 5.

In 2019, Action Against Hunger Liberia reached 308,032 people. The mission continued its Nutrition and Health activities through the implementation of a project involving direct nutrition interventions targeted at women and children in 8 counties out of 15 throughout Liberia. The project aimed to improve the nutritional status of beneficiaries through direct nutrition interventions both at public health centre and community levels. In partnership with the Scaling Up Nutrition Civil Society Alliance in Liberia (SUNCSAL), Action Against Hunger also carried on with its nutrition advocacy work.

During the summer, the mission began a new WaSH project in rural areas of Montserrado aimed at preventing the spread of waterborne diseases by improving drinking water coverage and access to sanitation, which includes the construction of wells and latrines in schools.

In Kenya, arid and semi-arid areas face immense challenges, including drought, hunger, malnutrition and poverty. Across the country, 4.2% of children are acutely malnourished and 26.2% are chronically malnourished.

From January to September 2019, drought increased food and nutrition insecurity, reduced water access, and increased child morbidity. In October, deadly floods and mudslides affected thousands of people, disrupting health services, economic activities, and livelihoods. Desert locusts entered Kenya in December and quickly spread, posing a significant threat. These emergencies adversely impacted pasture and water availability, crop cultivation, livestock reproduction, agriculture, livelihoods, and food prices.

Action Against Hunger launched an early drought response to support livelihoods. After the floods hit, we provided health services, including screening and treatment of malnutrition, distribution of hygiene kits, basic goods, and home water treatments, and restoration of critical water infrastructure. Our nutrition teams reached 1,226,213 people through emergency response and programmes to strengthen health system capacity, teach caregivers to detect malnutrition, and improve care and feeding practices. Our health programmes benefited 705,350 people, helping to improve maternal and child health in communities and at health facilities.

We supported 4,677 herders by helping keep livestock healthy through vaccinations and deworming. Our teams also trained animal health experts and assistants to build early warning and response capacity and to protect livelihoods. Our water, sanitation, and hygiene programmes supported 48,677 people through distribution of hygiene kits, water treatment tablets, and home water treatment tools.
**MADAGASCAR**

Madagascar ranks 162 out of 189 on the HDI, with 75% of the population living below the poverty line. In 2019, the island suffered significantly from malnutrition. The island’s extreme weather conditions have intensified due to climate change, increasing food vulnerability. Such food insecurity affects all regions, and particularly those in the south, which have a semi-arid climate and are particularly exposed to severe and recurrent droughts. In 2019, a lack of rainfall and a powerful El Niño phenomenon led to the loss of 90% of the harvest and placed more than 60% of the population in food insecurity.

The response in Madagascar is focused on an integrated approach to combating undernutrition, notably by strengthening the health system. Action Against Hunger continued its fight against undernutrition, by providing treatment of acute malnutrition and quality psychosocial care, as well as nutrient supplementation to the most vulnerable in urban areas, such as children under 5 and pregnant women. To help populations survive and build resilience against worsening climate change-related shocks, Action Against Hunger also implemented a multi-sectoral transversal programme, including Health and Nutrition, WaSH and Food Security activities. Action Against Hunger also works to strengthen both local and national resilience capacity in the longer run, as embodied by its implementation of a two-year Disaster Risk Reduction project.

**Mali**

The security situation in Mali saw a significant change in 2019. The central and eastern areas of the country were subject to ethnic-community violence and reprisals, which were followed by an increase in attacks by radical armed groups on soldiers and camps of the Malian army. Furthermore, the conflict is increasingly internationalising with the multiplication of international coalitions and involved countries.

In 2019, with the strong deterioration of the humanitarian situation, there were three times more internally displaced persons than the previous year, and more than 200,000 people in need of food assistance. In addition, the loss of government control of large parts of the country reduced the coverage of basic services, limiting NGOs’ access.

Action Against Hunger teams worked to address emergency needs in the northern, eastern, and central regions of the country; areas where the conflict is particularly intense. To respond comprehensively to country needs, we also expanded our activities to the centre (Sego, Sikasso) near the area known as Liptako-Gurma, epicentre of the current conflict.

**Mauritania**

In 2019, food insecurity was the major issue in the southern area of Mauritania, as anticipated by the end of 2018. The rainy season lasted until October, but in most cases with scarce intensity compared to 2018. However, the support of the government and humanitarian partners have in part alleviated the situation. The security situation remained stable despite the elections and the change of president.

For the third consecutive year, and in particular in the south area of the country, populations continued to face a challenging situation due to scarce rainfall. For the humanitarian response, Action Against Hunger teams implemented early warning mechanisms, and reinforced its presence in the eastern region of the country, in the Hod El Chargi, where most of the support is needed.
Niger's border areas with Mali, Burkina Faso and Nigeria (the Tahoua, Tillabéry and Diffa regions respectively) continued to be in a state of emergency. Despite hampered access imposed by the security situation to the bordering region of Lake Chad, it is still possible and necessary to intervene in the area.

In the second half of 2019, Action Against Hunger teams participated in the emergency response in the Maradi area, where since August approximately 80,000 people have fled from insecurity and conflict in Nigeria, on the other side of the border (Sokoto area).

Due to worsening security conditions, Nigerian authorities are sporadically limiting humanitarian organisations' access to border areas with Mali, Burkina Faso and Nigeria. Despite the situation, Action Against Hunger has reinforced its action in providing emergency and rapid response in health and nutrition, specifically in Tahoua and Diffa.

After more than a decade of conflict, the humanitarian crisis in the north-eastern states of Nigeria remains one of the most serious in the world. In 2019, the security situation worsened, and the risks for humanitarian workers increased.

Across the three crisis-affected BAY states, 7.9 million people out of a total of 13 million – more than one in two people – will need humanitarian assistance in 2020. This 11 per cent increase from 7.1 million people in need of some form of assistance in 2019 resulting mainly from rising violence and insecurity. It is estimated that more than 1.2 million people including 971,000 in Borno State and 244,000 in Yobe State are in areas that are inaccessible to international humanitarian organisations.

The number of food-insecure people increased to 3.8 million persons, and 1.1 million women and children are in need of immediate nutritional services or treatment for malnutrition.

In 2019, Action Against Hunger reached more than 2 million people across the four states Borno, Jigawa, Yobe and Kano. We continued to invest in nutrition and health interventions in order to reach populations through reproductive, maternal, newborn and child health services.

In 2019, both nutrition-specific and nutrition-sensitive programming were equally at the centre of our approach. We continued to implement the WaSH in Nutrition strategy, food security and livelihood interventions aimed at fighting the root causes of hunger by addressing production, access and income issues through emergency, recovery and resilience programming, cash assistance to vulnerable people in Borno and Yobe and much required policy initiatives around social protection.

In addition, a rapid response mechanism enabled Action Against Hunger to meet the urgent need in wash and in non-food items of newly displaced persons.

In 2019, the northern areas of Senegal experienced a severe food security crisis. In particular, in the three northern departments, where Action Against Hunger has a greater presence, more than 300,000 people were threatened by severe food insecurity during the famine season, between June and September.

In addition to the support delivered in the Northern region, Action Against Hunger teams continued to focus on the implementation of research initiatives such as SAM Photo Diagnosis or employment projects in Dakar.

In 2019, Action Against Hunger continued to implement a one-year multi-sectoral programme aimed at improving the nutritional status of children under five and women of reproductive age through the implementation of the integrated management of acute malnutrition. Action Against Hunger also helped many mother support groups, including pregnant and lactating women, to organise activities aimed at improving the nutrition of infants, young children and mothers, hygienic practices and community screenings.

This programme also included a Food Security and Livelihoods component.

As a continuation of its nutrition and health actions, in August 2019, Action Against Hunger started the implementation of a project aimed at strengthening the prevention and management of undernutrition. Activities fall into three areas, improving knowledge and practice in nutrition services, improving the capacity to coordinate and promote nutrition services at national level, and producing evidence to enable improving knowledge of best practices to fight undernutrition.

During the massive floods in the summer of 2019, Action Against Hunger launched an emergency intervention in Cash and WaSH, in partnership with Oxfam and national stakeholders, through the Start Fund. The intervention consisted of water distribution, installation of water storage tanks, disinfection and rehabilitation of water points, and 1,289 households benefitted from unconditional emergency cash.

Finally, in the rural and urban West zones, the implementation of the multi-year regional project PROSSAN started in autumn 2019. It is focused on improving access to basic health services for the most vulnerable, especially women, children and youth.
Across Somalia, more than one million children under five - 1 in 10 - are acutely malnourished, of which 178,000 severely malnourished and 830,000 are moderately malnourished. Additionally, an estimated 832,000 pregnant women and breastfeeding mothers need nutrition assistance. Malnutrition is driven by number of factors, including conflict, political instability, displacement, climate change, as well as limited access to healthcare and clean water, food insecurity, and poor hygiene and sanitation practices.

Poor environmental conditions, limited access to water, and unsafe sanitation exacerbate the impact of food insecurity and drive increased levels of malnutrition and epidemics. Outbreaks of malaria, measles, diarrhea, cholera, and polio, combined with high malnutrition rates and limited access to services, lead to increased morbidity and mortality. Harsh conditions, violence, and displacement subject the population to psychological distress, resulting in social and mental health issues.

In 2019, we improved access to nutrition treatment and prevention programs through fixed and mobile treatment sites, reaching 22,395 severely malnourished children. Our teams increased access to quality primary healthcare services for 163,112 pregnant women, breastfeeding mothers, and young children in hard-to-reach communities.

Our teams integrated water, sanitation, and hygiene projects into health, nutrition, food security and livelihoods programs, reaching 213,522 people and increasing access to clean water, safe sanitation, and good hygiene practices in areas with high malnutrition rates. To improve food security and support livelihoods among displaced and host populations, we provided $2.45 million in cash transfers to help 122,199 vulnerable people access basic goods, strengthen resilience, and promote local markets.

In South Sudan, 7.5 million people are in need of humanitarian assistance and nearly half of the country’s population - an estimated 5.5 million people – are expected to face severe food insecurity in 2020. Climate shocks, poor living conditions and public services, limited access to humanitarian aid and safe water, and inadequate hygiene practices are all key drivers of undernutrition.

Severe flooding in 2019 impacted livelihoods: reports indicate that 74,157 hectares of cultivated land was damaged and 72,611 metric tons grain were lost. The effects will be felt in 2020: large parts of the population are expected to face greater food deficits during upcoming lean seasons.

In 2019, we established a new Stabilisation Centre in the hard-to-reach area of Paguir, providing treatment to severely malnourished children, in addition to treating common illnesses in the community and providing prenatal care.

Our teams provided agricultural support to 7,215 farming families and built 22 latrines at nutrition centers and 4,079 in homes. Our teams distributed 11,572 dignity kits – including water, sanitation, and hygiene supplies as well as menstrual hygiene supplies – to families of severely malnourished children and to pregnant women and breastfeeding mothers.
In 2019, food insecurity in Tanzania was driven primarily by a prolonged dry spell, armyworm infestations, and erratic rainfall. About 25% of districts had vulnerable food insecurity pockets in 2019, compared to 5% in 2018. Nearly one million people in 16 districts, were estimated to be experiencing severe food insecurity. Nearly one million people in 16 districts, were estimated to be experiencing severe food insecurity. More than 500,000 children across Tanzania suffer from acute malnutrition, of which more than 91,000 are severely wasted. This high burden, coupled with high anaemia (39.6%) and stunting rates (32%), predispose children under five to poor nutrition and health.

Before our programme began, treatment was not available to malnourished children in the area. Our teams increased availability and access to treatment and support for acutely malnourished children in previously hard-to-reach areas. By the end of 2019, we had supported 58 health centers to expand treatment services, and 741 children were treated for acute malnutrition. We strengthened health system capacity by training 153 health workers in acute malnutrition treatment and providing basic supplies and equipment. Our teams also trained 1,629 parents and caregivers to prevent and identify malnutrition at home through the Family MUAC approach.

More than 200 trained community health workers conducted events to promote nutrition and hygiene, reaching 216,235 community members. Through our advocacy efforts, integrated management of acute malnutrition is now a key issue to be addressed and funded by all levels of Government. We continue to engage with nutrition champions to influence budget processes in key sectors like agriculture and health.

Zimbabwe is ranked 150 out of 189 on the Human Development Index. According to the 2019 ZimVAC report, GAM prevalence was 3.6% and SAM prevalence was 1.4% at the national level for children under 5. Food insecurity increased sharply in 2019 following several destructive economic and climatic shocks. The agricultural sector suffered heavy losses due to Cyclone Idai and droughts caused by the El Nino climate phenomenon. Because of the current disastrous agricultural and macro-economic situation, 38% of Zimbabweans were in need of urgent humanitarian assistance in autumn 2019.

Action Against Hunger and its partners, Africa Ahead Zimbabwe and Nutrition Action Zimbabwe, responded to Cyclone Idai through an emergency food assistance intervention and a cash transfer project in the Chipinge region, one of the most affected areas. To cover basic nutrition needs, Action Against Hunger and NAZ implemented another cash transfer responses to respond to the prolonged drought and macroeconomic crisis. These projects supported households in acute need of food assistance. Action Against Hunger distributed emergency sanitation kits to 6,000 beneficiaries in order to prevent the spread of disease and infections.

Action Against Hunger in Uganda delivers interventions in nutrition, WaSH and Food Security and Livelihoods. Currently we work in the four districts Adjumani, Yumbe (Bidibidi and Lobule settlements), Kiryandongo and Kibuuke (Kyangwali settlement).

In an attempt to tailor Action Against Hunger’s interventions to the needs of the target population in the Ugandan context and in line with the comprehensive refugees response framework led by the office of the prime minister, the programme was able to diversify its portfolio towards multi-year livelihoods and nutrition programmes. In particular, Action Against Hunger is gaining a strong position in the livelihoods and resilience sector, through the introduction of the graduation model, which provides a set of interventions based on the vulnerabilities, skills, assets and financial status of our beneficiaries. This innovative approach is already demonstrating tangible results, and generating interest for different partners in Uganda. It has been launched in 2018, and we are scaling up the approach.

Action Against Hunger is the main actor in the nutrition sector in Uganda, being the main WFP partner in the prevention and treatment of moderate acute malnutrition countrywide.

The programme has invested in the use of digital tools and data-driven optimisation of livelihoods programmes for smallholder farmers in order to improve the agricultural production system to address food security, nutrition and climate change adaptation.
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In Iraq, an estimated 4.1 million people remain in need of some type of humanitarian assistance, with over 1.4 million based in Ninewa governorate and nearly 300,000 in Dohuk governorate (Humanitarian Needs Overview, 2020), where Action Against Hunger is operational.

Iraq's 2014-2017 conflict with Islamic State (IS), with multiple military campaigns to regain control of Iraqi territory, resulted in several waves of displacements. The time spent under IS rule and the military campaigns has exacerbated many problems experienced by the population, such as limited livelihood opportunities, damaged or destroyed housing and water supplies, and a breakdown of social cohesion due to past hostilities between different groups. Although the conflict with IS has since ended, the consequences of this instability and volatility continue to affect the most vulnerable groups in Iraqi society.

Our key sectors in Iraq are FSL, mental health and care practices (MHCP) and WaSH. We recognise the importance of the integration between the sectors. Therefore, many of our projects are integrated in order to meet the holistic needs of the Iraqi people.

The Iraq mission has an established presence in Mosul, Dohuk, Sinjar, Sinune, Erbil and Baghdad. In addition, Action Against Hunger are currently opening a new field-base in Basra in southern Iraq to expand our geographic coverage and extend our support to the Iraqi people.

In 2019, the Jordan programme maintained its presence in its three main sectors: WaSH, FSL, and mental health and care practices (MHCP), across three bases for both host communities and encamped populations. Most key activities from 2018 continued into 2019, including household-level water connections; WaSH facility rehabilitation at the household and public institution level; cash-for-work; mental health system strengthening; and community awareness raising for water conservation, waste sorting and recycling; and mental health stigma and referral pathways. The programme also began implementing its first agriculture-centric activities through a WaSH and FSL integrated project to improve the resilience and water optimisation in communities hosting Syrian refugees and vulnerable Jordanians.

Jordan

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The conflict between Israel and Palestine continues to generate acute humanitarian needs among Palestinian populations in the West Bank, Gaza and East Jerusalem. The humanitarian impact of the blockade on Gaza and the internal political divisions between the West Bank and Gaza administrations remains equally serious.

There has been an increase in the politicisation of humanitarian aid, as the Israeli government prohibits the import of specific humanitarian items into Gaza, and Hamas imposes restrictions on humanitarian operations within the strip. In addition, aid is being confiscated in all parts of the territory. The 2019 Israeli electoral process led to a paralysis due to the failure to form a majority government. This situation adds to uncertainty and political tension. 2019 was also characterised by a significant escalation of tensions between Gaza and Israel, with peaks of increasing armed confrontations in early May and November.

The blockade and thorough checks on the programme and its activities by the de facto authority in Gaza has led to a restriction of movement, which continues to affect the programme today.

In March 2019, the United States and the Kurdish militias declared the defeat of the Islamic State while the demilitarisation campaign in the northwest (Idlib) continued, which had begun in late 2018, and remains unsolved. The first half of the year was thus characterised by open fighting and massive population displacements within the Syrian territory. The second half of 2019 was characterised by the Turkish offensive in the northeast of the country that led to the creation of a “safe zone” along the border and to negotiations between the parties involved and their allies. This situation has led to a further increase in population displacement and a worsening of the coverage of basic needs in the affected communities.

Significant changes in the context as well as the increasingly harsh push at the regional level for the return of refugees to Syria mean that our programmes continue to balance between emergency response (distribution of fodder, warm clothing, food, water from tanks, etc.) and programmes to facilitate access to shelter, health and water services as well as awareness-raising on hygiene measures. Health and Nutrition programmes were introduced due to a collaboration with the ministry of health.

In Turkey, Syrians represent 4.43% of the total population. Many are living in big cities, especially in Istanbul, Izmir, Bursa and Konya. In Turkey, Syrians represent 4.43% of the total population. In 2019, we focused on strengthening our partnership with our Turkish counterpart, Support to Life (STL), including a stronger focus on localisation. This approach comes from our long-term engagement with STL, which started in 2011 with a joint initiative to respond to the effects of the Van earthquake that developed into a mutual capacity strengthening partnership directed towards the Syrian refugee crisis in Turkey.

In Turkey, Support to Life is a Turkish organisation committed to supporting communities affected by disasters and emergencies, by partnering with humanitarian NGOs and donors. Since 2011, Action Against Hunger Spain has been working with Support to Life and recently started to explore how this partnership could be modelled and piloted as an example of localisation and partnership which could provide learning for the future.

Conflict between pro-government forces in the south of the country and natural disasters in other areas have completely destabilised the country, and led to the resurgence of large internal displacements of populations. The city of Hodeida is still under siege. It has become increasingly difficult to access vulnerable communities. Almost 24 million Yemeni are in need of humanitarian assistance. 14.3 million of which are in acute need of assistance, which represents a 27% increase year on year.

238,000 people have reached level 5 (famine) according to the Integrated Food Security Phase Classification. Around 7.4 million people need treatment for malnutrition, 2 million of which are children under 5.

In 2019, Action Against Hunger worked to strengthen staff capacity within the ministry of public health and at health services level in order to improve delivery of severe acute malnutrition treatment. Nutrition interventions reached 44,620 people throughout the country.

57,201 individuals within households suffering from food insecurity received support in the form of multi-purpose cash transfers in the 3 governorates of Hudaydah, Abyan and Lahij. Households suffering from moderate acute malnutrition were prioritised in receiving monetary support.

In keeping with its response against the cholera epidemic, 36,658 individuals received drinking water. Interventions to promote hygiene and prevent the spread of the disease also took place at the community level. WASH and FSL interventions were prioritised in zones that presented high rates of malnutrition and limited access to health services.
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In 2019, Action Against Hunger in Afghanistan implemented several multi-sectoral projects at the country level, responding to the needs of the most vulnerable people. The ninth phase of the Emergency Response project, funded by ECHO, started in April. This programme addresses immediate and life-threatening needs arising from the ongoing conflict in Afghanistan and regular natural disasters. With the support of ECHO, GAC and SIDA, Action Against Hunger provided 24,351 beneficiaries with multi-purpose cash. Other emergency responses were also targeting children with acute undernutrition and drought-affected people, and included an emergency winterisation response.

Action Against Hunger in Afghanistan is recognised for its expertise in Health and Nutrition. Action Against Hunger deploys mobile health teams, as well as rapid intervention teams, in areas that are difficult to access. These activities benefited 3,226 children with severe acute malnutrition in 2019 and provided primary health care consultations to 30,992 children under the age of five and to 3,665 pregnant and lactating women. Mental health and psychosocial support are also part of the services provided by these mobile health teams. These activities benefited 36,940 beneficiaries in 2019, with 85% of them being women and girls. In Helmand in particular, a therapeutic feeding unit has been set up to treat children suffering from severe malnutrition.

In 2019, Action Against Hunger India developed numerous projects focusing on Nutrition, FSL and WaSH. 755 children received therapeutic supplementation for severe acute malnutrition, and 3,777 children received preventive supplementation. In total, 4,532 children benefitted from counselling and home visits and received support for tackling malnutrition. In addition, the transition from CMAM to CMAM +1000 days programme, has strengthened the preventive and curative strategy to diagnose, treat and prevent malnutrition.

Action Against Hunger India developed a multi-sectoral project in Dharni, Amravati (Maharashtra), which has an integrated approach to tackle malnutrition. It takes into account the three contributing factors to malnutrition – Nutrition, FSL and WaSH.

To further improve the impact of its work, Action Against Hunger has strengthened its collaboration with the local government, to increase coordination and develop a deeper sense of mutual responsibility towards tackling malnutrition. Supporting the Poshan Abhiyaan (National Nutrition Mission), with a focus on convergence and strengthening the Government system, has increased our reach in the intervention locations.

**AFGHANISTAN**

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**BANGLADESH**

Inflows of refugees coming from Rakhine state in Myanmar took place in 1978, 1992, 2012 and 2016. But by far the largest influx occurred in August 2017: UNHCR estimates 615,500 Rohingya refugees fled to Bangladesh between August and November 2017. As a leading actor in Cox’s Bazar district, Action Against Hunger, together with its partners, is conducting a massive multi-sectoral emergency response in order to alleviate the needs of refugees and host communities.

We implement activities in nutrition and health to screen and treat severely and moderately malnourished children, and pregnant and lactating women, in centres accessible for host communities and refugees. We estimate that 340,000 people from refugee and host communities benefited from food security and livelihood activities. Throughout 2019, Action Against Hunger distributed an average of 3,424 meals per day.

Action Against Hunger is providing safe drinking water to both refugees and host communities through the construction and maintenance of water points, latrines and the distribution of hygiene kits.

We implemented gender-responsive assistance and protection for Rohingya women and girls, which allowed beneficiaries to access safe spaces, and to receive mental health and psychosocial support services and gender-based violence protection services.

**CAMBODIA**

Despite economic growth, a significant portion of the Cambodian population lives close to the poverty line, at high risk of falling back into poverty at the slightest shock. Undernutrition remains a major public health concern: 32% of children under five years old suffer from stunting, 24% are underweight, 10% are acutely malnourished, and micronutrient deficiencies are widespread. Cambodia is highly vulnerable to natural disasters, with regular monsoon flooding and localised droughts. Limited and unequal access to education and health services and low investment in public infrastructure further perpetuate food insecurity and undernutrition.

In Cambodia, Action Against Hunger aims to improve hygiene, nutrition, and health practices at the community, household, and individual level, focusing on pregnant women, breastfeeding mothers, and children under two years old. By building the capacity of local stakeholders and communities, we work to reduce undernutrition in a comprehensive and sustainable way and to lessen the impacts of climate change.

In 2019, we created 1,422 local water committees, provided 1,548 people with access to latrines and water filters, fostered 1,747 mother-to-mother care groups, hosted 913 mothers and fathers in Gender and Nutrition sessions, and cultivated 5,310 community groups focused on increasing food security through rice banks, farming, and home gardens. We engaged households in cooking demonstrations, visited homes, and provided support to improve food security. In collaboration with WFP, we produced a booklet as a Supportive Document on Integrating Socially Inclusive Food Security and Nutrition into the Commune Development to be used by the Council of Agriculture and Rural development.

**INDIA**

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The humanitarian situation in Myanmar is characterised by a complex combination of vulnerability to natural disasters, food and nutrition insecurity, armed conflict, inter-communal tensions, displacement, trafficking and risky migration. The situation is compounded by chronic poverty and underlying structural inequalities and discrimination, based on gender, disability, ethnicity and religion.

According to the 2020 Humanitarian Needs Overview released in December 2019, more than 985,000 people in Myanmar need humanitarian assistance. Of these, 864,000 people are experiencing critical problems related to physical and mental wellbeing.

In 2019, Action Against Hunger provided treatment for 5,327 children suffering from severe acute malnutrition, 2,837 children suffering from moderate acute malnutrition and 865 malnourished pregnant and lactating women through 9 outpatient therapeutic programme centres in Rakhine state. Action Against Hunger also provided mental health and psychological support for people in distress.

Action Against Hunger conducted important advocacy activities due to reduced access to humanitarian assistance for the conflict-affected population.
Pakistan is highly impacted by climate change and in 2019, earthquakes, heavy rainfall, and drought hit the country. A severe drought occurred specifically in the provinces of Sindh and Baluchistan, affecting 5 million people and devastating the agriculture. Alongside this, the province of Khyber Pakhtunkhwa is still going through a crisis, due to military operations against militias in tribal areas, which has led to a high-level of displacement of populations.

Overall, the country has one of the worst numbers of children under 5 affected by stunting with 45% countrywide (50% in Sindh and 48% in Khyber Pakhtunkhwa).

In 2019, Action Against Hunger continued the implementation of the Programme for Improved Nutrition in Sindh (PINS) with the support of the EU. The Nutrition-specific component focuses on treatment of malnutrition in health facilities supported by an outreach programme to screen children and a referral system for their follow-up and a behaviour change communication programme for improved child care, sanitation, and feeding practices. It allowed the management of 44,797 severely acutely malnourished children in 2019.

In Sindh, Action Against Hunger also implemented a pilot project focusing on Saline tolerant fodder approach, to address the high levels of soil salinity and the water scarcity in the district of Thatta. This project supports small farmers in re-cultivating their agricultural land that has been abandoned due to increased salinity.

As the malnutrition and stunting of adolescents is a concern in Pakistan – and since girls under 24 make up for 21% of Pakistan’s population – Action Against Hunger launched an innovative project in Hyderabad (Sindh) to raise awareness on hunger among adolescent girls in four schools.
LATIN AMERICA & THE CARIBBEAN

COLOMBIA
GUATEMALA
HAITI
NICARAGUA
PERU
VENEZUELA
Multiple humanitarian agendas coexist in Colombia. On one side, there is the emergency response due to the humanitarian impact that the violence generated by various armed actors, who continue to generate displacement and confinement in rural areas of the country, still have on the population. On the other hand, there is a need to work on the stabilisation of the post-conflict situation and on the implementation of peace agreements, which include a series of commitments in the territories, especially rural ones, to have better conditions of development and integration of ex-combatants. Finally, there is the humanitarian emergency linked to the situation in Venezuela, which has generated the largest migration flow on the continent. Official data indicates that by the end of 2019, more than 1.63 million people from Venezuela lived in Colombia.

We reached 115,048 people in 2019, focusing our work on urban contexts (including Bogota) and the main border areas (Guajira, Vichada, Norte de Santander and Narinio) to serve Venezuelan migrants and host communities. We have prioritised health and nutrition care, strengthening public institutions. We also worked in mental health and psychological first aid serving 3,287 people (67% women). In relation to food security and livelihoods, we carried out activities to deliver seed kits, food aid, training for employment and employability through the “VIVES” approach.

In 1996, Haiti was reported in February 2019.

Political tensions in Haiti continued and worsened in 2019. Corruption, inflation, gang activity, and fuel shortages sparked regular mass protests. Blockades, demonstrations, and violence were common, forcing the country to standstill episodes known as “Peyi Lock” in February, July and from September-November 2019, hampering food and nutrition security and access to healthcare, education, and water.

Persisting drought has considerably impacted agriculture. Farmers in the Low Northwest Department have experienced extended lean periods with fewer rainy seasons and annual production nearly cut in half.

IPC analysis, released in October 2019, found that 3.67 million people were acutely food insecure. Around the country, global acute malnutrition increased from 4.6% in 2012 to 6% in 2019 and global chronic malnutrition is estimated at 22.7%.

In 2019, Action Against Hunger provided cash transfers to 5,822 families to reduce food insecurity. We trained 201 Lead Mothers in improved nutrition practices and how to detect undernutrition early - these Lead Mothers subsequently trained 19,289 vulnerable people.

Our teams built or rehabilitated 95 latrines in 16 schools, benefitting 168 teachers and 4124 students. Additionally, we rehabilitated 18 water points in cholera-prone areas and distributed 39,331 hygiene kits.

Since cholera emerged in Haiti, Action Against Hunger has been heavily involved in eradication efforts in Artibonite and Northwest Departments. Our teams respond to suspected cases quickly, promote healthy hygiene and safe sanitation, and work to create a market for locally-manufactured and purchased water treatment products. The last confirmed case of cholera in Haiti was reported in February 2019.
PERU

In 2019, Peru’s social, political and economic context was highly unstable. Following the dissolution of the Congress, new leaders took control of local and regional governments, and economic growth has subsequently been reduced to less than 3 per cent. Hunger has grown, now affecting 9.7 per cent of the population. Peru has received a constant flow of migrants from Venezuela, which is starting to generate xenophobic reactions as politicians, mayors and ministers publicly show their rejection of this population. Moreover, the media have begun a campaign of criminalising Venezuelans, encouraging people to “protect themselves” from them, while the Central Government has started the public expulsion of Venezuelans. Meanwhile, Venezuelan citizens are increasing the intensity of complaints about their employers for their illegal and unethical labour practices, such as payment below the legal minimum wage or the absence of contracts.

In 2019, Action Against Hunger implemented a comprehensive response to the humanitarian emergency situation following the arrival of more than 850,000 Venezuelans to the country (80% in Metropolitan Lima). Furthermore, we worked on strengthening capacities at the regional, municipal and community levels to reduce the high levels of child malnutrition in rural areas of Puno and Ayacucho and to improve employment and entrepreneurship among young people and women in northern Lima.

VENEZUELA

Protracted economic crisis continued to set the tone in Venezuela during 2019. Although initiatives to encourage political dialogue continued, and there was an expectation of a democratic solution to the differences between the government and the opposition, discussions stagnated. The socio-economic and humanitarian consequences of this impasse were the maintenance and aggravation of economic degradation, and with it: increasing unemployment, hyperinflation, the degradation of industry and production, the deterioration of services, in particular health, education, energy, drinking water and sanitation. All of this has had a significant impact on people’s quality of life, highlighted by an increase in unmet basic needs and an expanding humanitarian response.

In Venezuela we adapt our work to address the unique characteristics of each territory, with a focus on gender equity, respecting and incorporating cultural elements, and seeking to optimise the identification of people with a greater vulnerability to develop malnutrition. Priority has been given to children under 5 years of age, pregnant and lactating women, people with disabilities and older adults with severe illnesses. Considering the lack of official figures, we and our local partners implemented different strategies (surveys, anthropometric measurement days, etc.) in order to identify the most vulnerable people, and adapt the humanitarian response according to their needs.
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In 2019, we empowered 5,781 people to gain employment or create a business. This is part of our strategy to provide a real-time and systematic diagnosis, making it ideal for community-level and survey use. By using the app, health workers and volunteers will be able to avoid the current challenges experienced by communities in remote areas with limited access to health facilities, as well as in areas affected by armed conflict or displaced populations.

Since 2015, Action Against Hunger’s team in Madrid has been developing the “SAM Photo Diagnosis” app to provide governments and humanitarian agencies with a tool that identifies acutely malnourished children based on a photo of their left arm. The app aims to provide a quick and reliable diagnosis, allowing for timely intervention and effective treatment. The SAM Photo Diagnosis smartphone app uses a small ultrasound device and captures a photo of the child’s left arm to calculate the Mid Upper Arm Circumference (MUAC) andWeight-for-Height z-score (WHZ). It provides real-time results, enabling health workers to make informed decisions regarding the need for further testing and treatment.

In order to support future scale-up and use in programmes across different populations, a final stage of technological development, validation and refinement is needed to adapt the app to its end-users: Community Health Workers and Volunteers. This will involve a user-centred design study with community-based nutrition workers and with key health workers. This will ensure that the app remains effective and accessible to communities in remote areas and in settings with limited access to technology.

The SAM Photo Diagnosis smartphone app avoids these challenges by using morphology (the study of shapes) to identify acutely malnourished children aged 6-59 months and their nutritional status. The app has the potential to greatly improve the accuracy of diagnosis as well as the efficiency and cost-effectiveness of screening and surveys. The app also avoids the need to take a photo of the child’s face (unlike traditional methods). It has been designed to be user-friendly and accessible to health workers and volunteers who may not have access to traditional screening tools.

Since October 2018, the Action Against Hunger Spain team has been implementing a validation phase to test the app in Senegal. Data collection will continue until March 2021 during which time data will be collected from 1800 children to improve the accuracy of the classification algorithm. During this stage of testing, the four nutritional status groups addressed by WHZ and MUAC are being considered for inclusion in the app including: 1. Severe Acute Malnutrition, 2. Moderate Acute Malnutrition, 3. At risk of Acute Malnutrition, 4. Optimal nutritional condition.

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LOGISTICS AND INFORMATION SYSTEMS

Logistics and information management systems are fundamental to deliver humanitarian and development actions. Action Against Hunger considers it essential to focus on quality, timely and effective processes to support its operations.

The logistics system is composed of several components which support daily management. It mainly concerns procurement and supply chains, and premises and fleet management. This includes the selection of vehicles and equipment, and the procedures necessary to establish, manage and monitor a fleet of vehicles, ensuring that systems and procedures follow safety and legislative requirements. It also includes the development of skills and competences to: guarantee proper supplies for operations and access to energy in remote areas; provide energy devices (generators, solar panels, inverters, etc.); replace and anticipate the needs of the equipment; facilitate waste management; and establish operational rapid response mechanisms.

In 2019, Action Against Hunger spent €146.5 million through its logistics and supply chain, recording a slight decrease of 3 per cent compared to 2018. This volume was shared by 46 Action Against Hunger operational country offices, three regional offices (Middle East, East Africa and West Africa), as well as seven logistics centres (in Accra, Barcelona, Dubai, Lyon, New York, Panama, and Paris).

Country offices that experienced a significant increase their supply chain volume in 2019 were Pakistan (+356%), Jordan (+136%), Iraq (+153%), Yemen (+102%) and Bangladesh (+52%).

Overall, expenditure followed the reduction trend started in 2017, when the volume was €177.9 million. The 2019 decrease can be explained by the restriction in Action Against Hunger’s movements and ability to flex in some emergency contexts like Nigeria (-10% compared to 2018), Ethiopia (-29%), Syria (-35%), South Sudan (-39%), and Mali (-77%). The trend in reduced overall volume from 2017 to 2019 can also partly be attributed to the closure of offices in Malawi and Egypt.

In 2019, thirty country offices utilised Action Against Hunger’s Logistics Assessment Tool (LAT™), scoring an average completion rate of 70 per cent (69 per cent in 2018). The tool provides an assessment of the implementation of standardised logistics processes and tools, using 19 indicators that give guidance to our logistics teams on current performance. The average completion rate represented a slight improvement compared to 2018. The increase can be attributed to the high scores recorded by Kenya (90%), South Sudan (93%), Syria (89%) and Colombia (86%) country offices.

Twenty-five country offices reported using vehicle trackers last year, against sixteen in 2018. Action Against Hunger has been progressively deploying trackers to save costs by monitoring vehicle movements in real time. In 2019, on average 57 per cent of vehicles were tracked in countries adopting tracking devices (in 2018, 25%). Jordan, Kenya and Nigeria country offices reported the tracking data of all their vehicles.

Supply management also benefited from positive results in terms of the timely delivery of orders. In fact, in 2019 the percentage of timely orders delivered in 22 country offices was 64 per cent, with an outstanding score for Niger (85%), Senegal (89%), Georgia (96%) and Guatemala (87%).

Only seven country offices reported on positive perception rates in 2019 with an average of 76 per cent. The weak participation to this indicator was due to the difficulty in conducting a Logistics satisfaction survey. Notwithstanding this low participation and other challenges, positive perceptions increased by 6 per cent points.
The results will be presented in early 2020.

Efficiency improvement and cost effectiveness is at the heart of the RLH’s mandate. The idea behind the paper was to provide a potential response to the funding gap in the humanitarian sector, as in 2018 approximately 60% of humanitarian needs were covered (with a funding gap of almost 10 billion dollars in humanitarian response plans).

The report is based on an assessment of logistics practices in the humanitarian sector and considers progress in the private sector. The analysis showed that practices need to be further developed in the humanitarian sector, as well as highlighting the need to increase collaboration among organisations and thereby optimise existing resources. Those practices might optimise the use of resources, and enhance the quality and efficiency of logistics services across the sector.

The paper was presented in several key forums such as the Global Logistics Cluster, Humanitarian Network Partnership Week, Forum Espace Humanitarian and ECHO Brussels, with the aim of sensitising and promoting a political reflection.

Following this publication, the RLH members launched a study to identify opportunities to scale up the pooling of resources, such as in the area of procurement, through a dedicated structure.

The Information System tool ‘LINK’, utilised in the majority of our countries of operation, welcomed over 1,200 simultaneous users in 2019. Last year was also important for the development of the Stock Management module, as well as the launch of an inter-NGO platform project. The sharing of this platform will allow users to pool the costs of using the tool and to develop new functionalities, opening the possibility for carrying out joint purchasing and logistics operations.

Information management plays a fundamental role in relation to MEAL. In 2019, 82 per cent of country offices utilised a digital tool (ODK, KoBo toolbox, Commcare, DHS2) to conduct data collection in the majority of the projects implemented, thus supporting the transition toward a digitisation process.

To support the Logistics system, information management and technology need to be integrated within established work processes to provide timely access to comprehensive, relevant, and reliable information. The main phases comprising the information management system are information capture, transmission, storage, retrieval, manipulation and display. Information management can also support wider programmatic needs, such as Monitoring, Evaluation, Accountability and Learning (MEAL) and Nutrition activities.

STRENGTH IN NUMBERS: TOWARDS A MORE EFFICIENT HUMANITARIAN AID. POOLING LOGISTICS RESOURCES

In 2019, the Réseau Logistique Humanitaire (the Humanitarian Logistics Network - RLH), an alliance composed of several international humanitarian organisations, including Action Against Hunger, presented a paper with the aim of outlining important areas of work orientated towards collaborative practices.

In 2019, Action Against Hunger signed a partnership with Handicap International to allow the access to an inter-NGO platform project. The sharing of this tool will allow users to pool the costs of using the tool and to develop new functionalities, opening the possibility for carrying out joint purchasing and logistics operations.

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To support the Logistics system, information management and technology need to be integrated within established work processes to provide timely access to comprehensive, relevant, and reliable information. The main phases comprising the information management system are information capture, transmission, storage, retrieval, manipulation and display. Information management can also support wider programmatic needs, such as Monitoring, Evaluation, Accountability and Learning (MEAL) and Nutrition activities.

The Information System tool ‘LINK’, utilised in the majority of our countries of operation, welcomed over 1,200 simultaneous users in 2019. Last year was also important for the expansion of its functionalities, in particular with regard to the development of the Stock Management module, as well as the launch of an inter-NGO platform project. The sharing of this platform will allow users to pool the costs of using the tool and to develop new functionalities, opening the possibility for carrying out joint purchasing and logistics operations.

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Information systems are critical for managing and organising daily activities as well as responding to new emergencies through early warning and preparedness schemes. In particular, these systems inform decision-making on transport, supply chain management, resource mobilisation, programming, monitoring, evaluation, and assessment. They promote information creation and enable sharing mechanisms within and among humanitarian actors.

In several countries, Action Against Hunger acts as a lead organisation in the Logistics Cluster, promoting lessons learnt and facilitating the conversation among humanitarian, development and governmental actors (e.g. in South Sudan and Uganda). The participation in Logistic clusters allows Action Against Hunger to provide coaching, mentoring and training initiatives (Advanced Humanitarian Logistics, Basic Humanitarian logistics course, Logistics cluster induction, dangerous goods awareness course, warehouse management training) to benefit the staff of our partner organisations (e.g. 50% of Action Against Hunger staff in South Sudan received training).

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6 In 2019, Action Against Hunger signed a partnership with Handicap International to allow the access to the tool.

7 Nutrition information systems play a key role for targeted action in population, nutritional health and food insecurity. In more detail, nutrition information supports measuring changes in the nutrition status of vulnerable people, namely women and children, tracking progress in the implementation of actions, helping the prioritisation of responses. Nutrition information assists in decision-making on policy and nutrition programme design, legislation, channelling of resources and implementation.
Action Against Hunger is a leader in technical expertise and innovation in the field of undernutrition. Our International Strategic Plan 2016-2020 outlines our commitment to research, innovation and learning in our operations, and to ensuring that all research projects strengthen practical approaches to prevent and treat undernutrition. This chapter highlights our progress towards the achievement of our research, learning and innovation targets, and our Research Strategy 2016-2020. The research strategy has three strategic workstreams:

- Prevention of undernutrition
- Treatment of undernutrition
- Effectiveness of humanitarian assistance and emergency response

In 2019, Action Against Hunger conducted 33 research projects. The number of research projects that we conducted as well as the overall financial volume increased compared to 2018. Our projects span our operational sectors and countries, where we collaborate with a variety of donors and partners to produce the results needed to deliver evidence-based interventions.

We conducted research projects in 25 countries, the most common of which were Senegal and Mali, with five projects each. For an example of one of our research projects conducted in both these countries, see the case study on the ICCM+ project. The majority of our research projects were conducted in countries in Africa (73% or 24 projects in 17 countries). Our research presence in Latin America doubled compared to 2018 with 4 projects in 2019 in Colombia, Guatemala, and Haiti. The number of projects did not change in the remaining areas in Asia (4 projects in Nepal and Bangladesh), the Middle East (2 projects in Iraq), and Europe (1 project in Spain). For a full list of our research projects please see Annex 2.

In line with Action Against Hunger’s technical expertise and experience, 82 per cent of our research projects have a nutrition component.
Similarly, the majority (67%) of single-sector projects were nutrition focused. Three quarters of our projects were multi-sectoral, addressing research gaps in health, mental health care practices and water, sanitation and hygiene to name a few. The least frequently researched thematic sector is disaster risk reduction and disaster risk management, in which we only have two projects.

One quarter of our research projects have a fully developed and funded research uptake strategy. The total number of projects with a fully developed (but unfunded) uptake strategy remained similar at 70 per cent. Progress in this area must become an organisational priority to ensure we proactively include research uptake in all proposals, and advocate for and secure funding for uptake activities.

We produced 19 publications linked to our research projects. One third of these publications were peer reviewed, and all of these articles are published in open access journals. For a full list of our research publications please see Annex 2.

Action Against Hunger continues to prioritise learning and innovation in all that we do. The International Strategic Plan 2016-2020 highlights the importance of making learning a core part of Action Against Hunger’s culture.

In 2019 Action Against Hunger produced the eighth Annual Learning Review. The document highlights key learnings from across our programmes, in order to capitalise on our technical knowledge and expertise. Learning initiatives launched in 2018 – the Knowledge Hub and No Hunger Radio – continued in 2019. In particular, the latter aired a series of podcasts on the 2018 Research Review, demonstrating how innovation and research can overlap.

To position learning in the centre of our organisation, Action Against Hunger launched the inaugural Learning week in April 2019. This first edition included international webinars (including on research and uptake), talks and podcasts (including a No Hunger Radio series) across the network. Learning Week was a success and contributed to reinforcing the learning culture by providing space for learning between staff, and experiencing how simple, impactful and rewarding learning can be. The Action Against Hunger International Learning Community Facebook Group was created for this occasion and continues to be active with knowledge sharing from across the network.

The total value of Action Against Hunger’s ongoing, multi-year research portfolio is €14.2 million, an increase from €12.9 million in 2018. Of this total budget, €3.8 million was for activities in 2019, up from €3.1 million in 2018.

In 2019, we collaborated with 58 partners on our research projects. Academic and research institutions continue to be our most common partners, collaborating with us on 88 per cent of projects. As part of our work with academic institutions, we supported 13 graduate degrees across 12 research projects. We also partnered with a range of non-governmental organisations, public and private institutions and United Nations agencies. Our donor portfolio has also increased; in 2019 we received support from 21 donors, up from 17 in 2018 and ten in 2017.
INNOVATIONS IN THE TREATMENT OF ACUTE MALNUTRITION
FROM EVIDENCE TO ACTION. A MEETING HOSTED BY ACTION AGAINST HUNGER ON BEHALF OF THE NO WASTED LIVES COALITION

Research uptake is a critical part of effective research at Action Against Hunger, to support the use of emerging evidence in order to inform programming, policy decisions, and future research across our own organisation as well as our partners. In addition to dissemination and publication of research results, Action Against Hunger also aims to support ongoing and active discussion about emerging findings through conferences and events with key stakeholders.

In the following case study, we highlight one example of an event that was held to support the uptake of emerging evidence on innovative approaches for the treatment of wasting. In addition to focused events like this one, the annual Research 4 Nutrition (R4NUT) Conference also supports presentation and discussion of emerging evidence on broader nutrition topics; and the Research 4 Action (R4ACT) workshops allow for small-group, in-depth discussions about emerging findings through workshops focused on the Continuum of Undernutrition - PREVENTION AND TREATMENT: SHARING THE EXPERIENCE (OF THE ES COALITION) INTEGRATION INTO HEALTH SYSTEMS: Treatment of acute malnutrition is often delivered in parallel to the existing health platforms, creating inefficiencies in delivery and the workforce.

PUTTING EVIDENCE INTO ACTION: In addition to the three focused panel discussions, a final panel reflecting on the meeting and forward looking opportunities was chaired by Lucy Lamble of the Guardian Global Development Desk included senior representatives from Action Against Hunger, the UK Department for International Development, the Children’s Investment Fund Foundation (CIFF), and Save the Children UK. Key themes from four panel discussions:

- **INTEGRATION INTO HEALTH SYSTEMS**: Treatment of acute malnutrition is often delivered in parallel to the existing health platforms, creating inefficiencies in delivery and the workforce.
- **INNOVATION IN DIAGNOSTICS**: With known limitations to the existing methods used to identify children with acute malnutrition in different contexts, innovation is important to expand our options and reach more children.
- **SIMPIFIED APPROACHES**: Acute malnutrition is a continuum, and yet moderate and severe acute malnutrition are treated separately, with different protocols and by different organisations which can often result in inefficiencies or even blockages in care. Ready-to-use foods (RUFs) are a costly component of treatment and supply shortages are not uncommon, limiting the availability of treatment for both moderate and severe acute malnutrition.
- **EVIDENCE BASED INVESTMENT for the Short- and Long-Term**

Action Against Hunger uses advocacy as an important tool to change the way hunger and malnutrition are viewed and addressed. Our advocacy work draws legitimacy from our operations, research and direct work with communities. In our International Advocacy Strategic Framework 2016-2020, there are four goals for advocacy:

1. Achieve nutrition security
2. Improve humanitarian response
3. Address the drivers of hunger
4. Develop advocacy capability

We advocate for government policies to reduce malnutrition

The number of children with severe acute malnutrition (SAM) who are receiving treatment has risen due to the increased prioritisation of governments and donors to support the scale up and replication of cost effective interventions.

Action Against Hunger has worked with governments to adopt national plans for achieving SDG2.2 on ending malnutrition and the World Health Assembly 2025 health and nutrition targets, in particular across East and West Africa. All countries in the Horn and East Africa have developed nutrition action plans and have integrated nutrition into their national health sector plans and Universal Health Care (UHC) frameworks. Our country programmes support and engage with the Scaling Up Nutrition (SUN) movement and are playing a leading role in national and regional SUN Platforms. We are now also seeing positive trends in resource allocation and political commitment for nutrition.
Elsewhere, a three-year advocacy project in India, ‘Building an enabling environment for improved nutrition results in India’ won the team a ‘Public Relations in Action’ national award.

**WE CALLED FOR ACTION TO BREAK THE CYCLE BETWEEN CONFLICT AND HUNGER**

This continues to be the focus of an ongoing network-based advocacy initiative. In 2019, we partnered with Save the Children to host a workshop in London with UN Agencies, governments, NGOs and academic experts to develop proposals for improving reporting and accountability for upholding UN Resolution 2417 on conflict and hunger.

The report from this workshop was shared at a UN event in New York during the Protection of Civilians Days, at which our Nigeria Country Director discussed the links between conflict and hunger in Nigeria and proposed concrete recommendations to strengthen implementation of the resolution.

We are now working on a “causal analysis between violence and food insecurity” together with the Basque Country University. The report, due in 2020, will include a guideline methodology and two case studies.

Sanctions and counter terrorism legislation are increasingly impacting vulnerable people’s access to humanitarian assistance. This is why in 2019 we increased our action to highlight the impacts with both national and donor governments, to reduce the high levels of child undernutrition and tackle the causes of food insecurity across the region.

A key approach has been to raise the voice of local civil society to counter the security oriented approach of the Sahel G5 and G7 countries, and promote prioritisation of access to services, human rights, resilience, agroecology and inclusive governance. Action Against Hunger acts as a facilitator to ensure that civil society organisations are capable of uniting to influence governments. This approach puts the local populations at the centre of advocacy action, recognising they have the best understanding and legitimacy to identify and call for the right solutions. We support partners to reach global audiences too, such as facilitating the participation of a Malagasy partner organisation in the 2019 World Health Assembly. Across the region, notably in Mali and Niger, this approach has successfully influenced improvements in community access to health services.

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The Sahel region of West Africa is a network advocacy priority. We are working to help shape the policy responses from national and donor governments, to reduce the high levels of child undernutrition and tackle the causes of food insecurity across the region.

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FOR FOOD.
AGAINST HUNGER AND MALNUTRITION.

FOR CLEAN WATER.
AGAINST KILLER DISEASES.

FOR CHILDREN THAT GROW UP STRONG.
AGAINST LIVES CUT SHORT.

FOR CROPS THIS YEAR, AND NEXT.
AGAINST DROUGHT AND DISASTER.

FOR CHANGING MINDS.
AGAINST IGNORANCE AND INDIFFERENCE.

FOR FREEDOM FROM HUNGER.
FOR EVERYONE. FOR GOOD.

FOR ACTION.
AGAINST HUNGER.

ACTION AGAINST HUNGER