

# REGIONAL NEWSLETTER | 2021 - N° 2

**COVERAGE TERM:** MARCH 1ST – APRIL 30TH 2021 **DATE:** 21/05/2021

## HIGHLIGHTS

ATR

- Drastic increase in poverty in Colombia in 2020, reaching 42%
- 10 million people in humanitarian need in Central America



# **1. HUMANITARIAN CONTEXT**

## **CENTRAL AMERICA**



During March and April there was a general increasing of COVID-19 cases in Central America, especially in Guatemala and Honduras, where positive cases reached higher peaks than the registered in 2020, with more than 1,000 daily infections in both countries. While the pandemic keeps spreading in those countries, the vaccination process is slow and less that 1% of the population is immunized.

Furthermore, according to a recent report published by FAO<sup>1</sup>, it is expected that, during the first half of 2021, Central America will suffer a deterioration in the food security situation due to the double impact of hurricanes ETA & IOTA and economic effects of COVID-19.

PARTICULARLY, THE PREDICTION IN GUATEMALA AND HONDURAS IS THAT, **BETWEEN MARCH AND JULY, MORE THAN 6 MILLION PEOPLE ARE EXPECTED TO FACE HIGH ACUTE FOOD INSECURITY (CRISIS LEVEL, IPC 3)** INCLUDING 1 MILLION PEOPLE IN EMERGENCY (IPC 4).

The notable deterioration of the Central American context has been responded to by the humanitarian

community. On April 20, OCHA convened different UN organizations, member states and international organizations to a briefing on the humanitarian situation in Guatemala, Honduras, and El Salvador, who number 10 million people with humanitarian needs, 30% of their total population. During the meeting, the need for a Humanitarian Response Plan for the region was unanimously highlighted.

## COLOMBIA

On April 29th, the National Administrative Department of Statistics -DANE (for its acronym in Spanish) published the poverty indicator registered for Colombia during 2020. According to the entity, monetary poverty went from 35.7% of the population in 2019 to 42.0% in 2020, which means that 3.5 million people entered this condition last year, which is explained by a significant deterioration of the economical basis of a large part of the population that violated their income due to the closure of commercial establishments, restaurants, effects on people who live off informal trade and who have lost their livelihoods and purchasing power.

According to official figures, the ordinary and extraordinary aid programs provided during the pandemic prevented national poverty from rising 3.6 percentage points, which means that 1.7 million people did not fall into poverty (*Portfolio, April/21*).



<sup>&</sup>lt;sup>1</sup> Hunger Hotspots FAO-WFP early warnings on acute food insecurity: March to July 2021 outlook



These figures highlight the importance of continuing with programs to support vulnerable population.

Based on the FAO survey conducted during the months of April and May, in which 1,837 rural households were surveyed on the effects that COVID-19 has generated on agricultural supply, livelihoods and food security:

- 25% affirmed that household income decreased significantly during the previous three months.
- This percentage increases in households with an agricultural vocation, who report a reduction in income of 61% in relation to the sale of garden crops and 73% in the sale of livestock products.
- Regarding the progress of the vaccination process at the cut of April, which represents a total of 1,859,657 million immunized people nationwide.

Despite the logistical and personnel efforts that have been implemented by the regions to comply with the vaccination plan, there continue to be delays with respect to the goals set by the government.

## IN APRIL, INFECTIONS HAVE RISEN, WITH 15,000 CASES PER DAY AND THE HIGHEST NUMBER OF DEATHS SINCE THE BEGINNING OF THE PANDEMIC (400 TO 500 PER DAY). PLACING COLOMBIA AS THE FIFTH COUNTRY IN THE WORLD WITH THE HIGHEST MORTALITY RATE DUE TO COVID-19.

This panorama is aggravated by the difficult public order situation that, since April 28, has been generated by massive social mobilizations. Among the public's disagreements are the proposed tax reform, which the government had to withdraw, and the reform of the health system, which does not meet the expectations of the population.

In addition, there is general discontent due to the continuing murders of social leaders and former combatants; to date, 276 former FARC combatants have been murdered and 904 social leaders. These situations have generated social unrest of great proportions that had already been expressed in January and February 2020 and that was overshadowed by the increase in COVID-19 infections. Finally, it should be noted that **the massive demonstrations that the country is going through are recurrent and evidence a deep and cumulative social unrest of large proportions of the population.** 



## PERU

Since April 16, a territorial and universal vaccination strategy has been in place, with the aim of vaccinating all citizens over 18 years of age, including resident foreigners, in vaccination centers located near their places of residence. Venezuelan migrants and refugees can approach the vaccination points on the shift of their age group and, with an invoice that shows residence, access the COVID-19 vaccine. This has made it possible to align resources from EsSalud, the Health Services of the Armed Forces and Police, and the integrated health networks that depend directly on the Ministry of Health.

After starting the vaccination process (although it does not indicate causality), the weekly number of deaths has begun to fall, with eight days in a row with a decrease in the number of deaths, although it varies according to the region. **Despite this, the occupancy of ICU beds remains at its highest, and the percentage occupancy remains very high despite the increase in the number of operative beds.** 



A variant has been identified, C.37, known as "the Peruvian variant", which is being investigated, although for now and according to the investigators it does not qualify as a variant of concern. Its epidemiological relevance is still uncertain.

The country is in the second round of the general elections, with the candidates Keiko Fujimori and Pedro Castillo, which programs are very different both in the political, educational, social or economic terms.

THE UNCERTAINTY ASSOCIATED WITH THESE MODELS HAS BEGUN TO GENERATE SOCIAL AND ECONOMIC INSTABILITY, CONTINUING THE UPWARD TREND OF THE DOLLAR AGAINST THE SOL (REACHING THE DOLLAR VALUE UP TO 3.84 SOLES). THIS INCREASE COULD AFFECT THE PRICE OF BASIC FOOD BASKET PRODUCTS SUCH AS BREAD, NOODLES OR OIL, EVEN MEDICINES (MANY OF THEM IMPORTED) IN CASE OF CONTINUING.

There is a positioning of Venezuelan migrant and refugee population in social networks. This had not occurred in previous electoral processes, and is giving greater visibility to this group, with the risk that this entails of xenophobic attacks or reprisals.







# 2. STUDIES / SURVEYS



## CENTRAL AMERICA

## **STUDY OF LOCAL MARKETS,** IN CLOSE COLLABORATION WITH CASHCAP



MUNICIPALITIES: Cuilco and San Ildefonso Ixtahuacán in the department of Huehuetenango, one of the most affected departments by the ETA & IOTA storms and characterized by a situation chronic food insecurity, since it is located in the Central American Dry Corridor.

## Methodology included









## 95 HOUSEHOLD **SURVEYS**

## THE CONCLUSIONS OF THIS STUDY REFLECT:



A good functioning of local markets



A high acceptance of assistance through cash transfer programs

They served as a diagnosis to design a food assistance project that is starting with support from BHA / USAID, consistent mainly in the realization of monetary transfers to the most vulnerable dispersed households.







## SURVEY ON THE SITUATION OF FINANCIAL INCLUSION OF THE MIGRANT AND REFUGEE POPULATION



7 DEPARTMENTS: La Guajira, Atlántico, Norte de Santander, Santander, Vichada, Bogotá D.C and Putumayo.

Methodology included:



INTERVIEWS TO 60 STAKEHOLDERS INTERNAL AND EXTERNAL

Among the questions that were formulated, the survey inquired about the barriers that these entities have managed to identify regarding to access to the financial system by migrants and refugees.

Aiming to have a broader panorama of the situation, they were consulted on those **measures or strategies** that the humanitarian community could implement in order to facilitate the access of these people to the financial system.

## THE CONCLUSIONS OF THIS STUDY REFLECT:

#### **BARRIERS**:

What is the main barrier migrants face in accessing the financial system?

46.7%

3%

availability of financial

of the population.



of the people surveyed consider that **the main barriers to access the financial system are** related to the documentation required to migrants and refugees.

Bearing in mind the latest measures adopted by the institutions to regularize the situation of this population in the country, it is necessary to have assertive communication channels and media in which the scope of the temporary protection status is clearly presented.

## In addition:

consider the main barrier is 8.3% xenophobia/exclusion

## **3%** consider the main barrier is other

\*In the option "other", obtained responses were related to the bilateral responsibility that exists between financial entities and the migrant community regarding the commitments to purchase a product.



Declared that is the little information Declared that **the insufficient** and advice which the disconnection that exists between the supply **products** are adapted to the and demand of financial services is needs and specific conditions evident.

Based on the above, the importance of having mechanisms / tools that allow coordinating both parties to optimize communication is highlighted.



### **OPPORTUNITIES**

What support can the humanitarian community provide to facilitate access to the financial system?

38.3%



stands out the incidence for the creation of products/specialized conditions focused on the needs of the migrant and refugee population. Among the actions that can contribute to motivate this change, **it is highlighted the impartial position exercised by humanitarian organizations as intermediaries in the communication** between the current supply and the demand of financial products and services.

# 31.7%



Stands out that it is **related to providing tools, so that people know what documents, certificates and procedures** they must comply with to regularize their situation in the country.

According to the responses obtained, there is a current need for more information about the temporary protection status both by financial institutions so that they can include it within their products and by people in relation to its benefits and scope.

Por otro lado el:



**13.3%** proposed linking system institutions with people

**11.7%** proposed advice an training on the financial system

\*In the other option, responses were obtained related to the documentation required by the migrant population to access services. The need to strengthen financial inclusion initiatives is also mentioned since most of the programs currently aim to support ongoing ventures.

5% proposed other\*



As a conclusion to these results, **the coordinated actions of advocacy and communication developed by the humanitarian community, can help the financial sector and those interested in joining it,** to have the necessary tools to make informed decisions.





## SURVEY ON SYSTEMS PROTECTION OF PEOPLE WITH HIV/AIDS

DECEMBER 2020



PERU

Methodology included:

SURVEY **248** PEOPLE WHO LIVING WITH HIV/AIDS

This survey was carried out within the project **"Developing capacities to strengthen the community response to COVID 19 from the point of view of people living with HIV / AIDS, Peruvians and Venezuelan migrants"** 

The results of this study serve as a basis for local authorities, **by providing information about people living** with HIV in their municipalities and their protection needs, as well as guides for the development of public policies and protection systems.

## THE CONCLUSIONS OF THIS STUDY REFLECT:



## FROM PEOPLE SURVEYED ABOUT FOOD SECURITY:

## **91%**

Had to borrow food from friends



Had to eat cheaper food **40%** Had to

give up food to feed children 70% Had to reduce food

85%

portions

ood reduce the number of meals



from 3 to 7 days during the week.

# **QO** ON GENDER/SEXUAL ORIENTATION, FROM PEOPLE SURVEYED:

Gender Violence/Sexual

Orientation/LGBTL

97%

Declared that they are NOT aware of protection mechanisms against

## 95%

Declared that they are not aware of norms against discrimination or xenophobia Declared that they are NOT aware of institutions that act against discrimination or xenophobia

## 77%

Declared that they do not trust NGOs in relation to Gender Violence/Sexual Orientation/LGBTI

# 72%

Declared that they do NOT trust the State or its institutions to eliminate discrimination or xenophobia

## 10%

Declared to have been a victim of Gender Violence/Sexual Orientation/ LGBTI in the last 9 months in his/her (neighborhood - work - home)



Declared that they do NOT trust NGOs and their institutions to eliminate discrimination or xenophobia.



Among its conclusions highlights **the need to "provide security and food to those living with HIV, Peruvian people and Venezuelan refugee migrants, who do not have the capacity to face the current risks they are in due to the COVID-19 pandemic;** being the greatest risks unemployment, underemployment, stigma and discrimination, exacerbated by homophobia, transphobia and xenophobia pre-existing in the HIV pandemic."



## REGIONAL

How can we face the challenge and opportunities generated by migratory movements in Latin America? Since 2018, Action Against Hunger has been working with migrant and refugee populations, as well as in the communities of origin and destination in Central and South America, but how should we approach the issue from a comprehensive perspective in order to achieve a long-lasting change? Together with some of our main stakeholders, we have defined our framework for action using the theory of change methodology, which allows us to make a more in-depth reading of the causal pathways and the actors involved, as well as to maintain the necessary flexibility and adaptability to meet such articulated and changing needs.

After analysing the trends, discussing with other **actors** working on the topic and listening to the point of view of the target population, we have decided that the change we want to promote is people-centred, comprising the dimension of migrants and/or refugees, as people with rights and responsibilities, but also of all those who have the obligation, or the capacity, to facilitate attention to their needs and their integration.

Change is an individual and social opportunity that is built on **territories**, understood as living and socially constructed spaces, which do not necessarily reflect geographical or administrative boundaries, but are the product of social interactions between people, institutions, businesses and organisations, expressing a shared identity and purpose.

We also speak of inclusion, as a process of the territory and the **public institutions** that ensures that all people have the opportunities and resources necessary to participate fully in economic, social, and political life, enjoying living conditions that allow for adequate human and social development; and of integration, which we understand as a process of the individual, centred on his or her confidence and self-esteem.

You can find all the information in the document **MIGRANTS AND MIGRATION: ROUTE OF CHANGE FOR LATIN AMERICA.** 

## **CENTRAL AMERICA**

There are innovations that change people's lives without the need to resort to cutting-edge technologies or a new mobile APP. With the support of the Andalusian Agency for International Development Cooperation (AACID), over the last year we have worked on the organization of two agricultural cooperatives specialized in strawberry cultivation, in one of the few enclaves in Nicaragua where this agricultural production is feasible. COABUFRESA and COPROHORTIFRESA are the two new entities that bring together 21 partners (4 women and 17 men) in the municipality of Las Sabanas, in the northern mountains of Nicaragua. **This locality has unique conditions for the strawberry plantation,** and thus offers an extraordinary alternative of economic income for families that until now depended for their livelihood on temporary emigration and traditional plots of corn and beans that are increasingly subject to irregularity. of the rains.

Our work has allowed the recovery of the crop with quality plants, the constitution of two cooperatives, the installation of 3 micro drip irrigation systems, technical training in the sustainable management of plantations and the promotion of joint marketing. It has directly benefited 21 producer families and the 84 neighboring families benefited indirectly by interacting and learning about the technologies and new production methods promoted by the project, making use of the services provided by COTUCPROMA.





strawberry plantation in the municipality of Las Sabanas, Nicaragua.





CARMEN ELENA CALDERÓN Aguas Calientes, Nicaragua

Before the COVID19 pandemic, **Carmen Elena Calderón** and her granddaughter lived very simply in the community of Aguas Calientes, in the Nicaraguan municipality of Somoto, near the Honduran border. Carmen Elena earned her daily income by carrying avocados and bananas to Honduras, and with this money she brought back bread that she sold to the residents of Aguas Calientes. Carmen Elena lost her income due to mobility restrictions caused by the pandemic, which caused her and her granddaughter's diet to deteriorate.

The story of Elena Calderón and her granddaughter is like that of 9,000 other Central American families who are receiving humanitarian assistance during 2020 and 2021 coordinated by Action Against Hunger with the support of Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO), making a difference when Carmen Elena and her granddaughter needed it most.

#### THE FULL TESTIMONY CAN BE FOUND HERE $st_{igstar}$



**Maria Clara Palmar Fernandez** and her family belong to the Wayuú indigenous community and have lived all their life in Venezuela. They had not foreseen the drastic change in their lives and the dangerous journey they would face after having to join the 1,7 million Venezuelan migrants who have arrived in Colombia by January 2021, according to Migration Colombia data, leaving their homes due to the worsening situation in their country.

After their arrival in La Guajira, Colombia, María Clara and her family were admitted to the Comprehensive Assistance Center camp - CAI (for its acronym in Spanish), where ADN Dignidad program provides humanitarian assistance. This Center is located in Maicao, municipality where 25,1 to 50,2% of the households live in poverty. "I will use the cash to buy food so that my children can eat better. I will also use it to buy a new roof for our house, because the one we have right now is thinly made of bags and plastic, so when it rains the water goes through" – says Maria Clara about the cash assistance.





## PERU

[...]I was a little scared, because CHICHA DON MIGUEL is a young business and the pandemic is coming, the truth is that it has been a very big scare[...]



#### MIGUEL ÁNGEL LONGART Lima Metropolitana, Perú

**Miguel Ángel Longart and his wife Danny Bárcenas** arrived in Peru from their native Venezuela on October 14, in 2016, after a rather long and suffered 6-day trip by land. Miguel Ángel had the idea of starting a business to sell Venezuelan chicha, because he had experience selling it and for him, chicha has a very important value: *"It connects me with my customs and childhood memories, because as a foreigner, I feel the need to feel at home"*. Thus, was born **"Chicha Don Miguel"**, a family business with great hope.

When the pandemic arrived "I was a little scared, because CHICHA DON MIGUEL is a young business and the pandemic is coming, the truth is that it has been a very big scare."

Miguel Angel had contact with Action Against Hunger and through his participation in the virtual trainings of the **"VIVES EMPRENDE"** program, he managed to adapt his business to comply with biosafety protocols, providing his workers with the necessary provisions for their care and that of their customers.



# **5. REGIONAL RESPONSE**

## MARCH - APRIL 2021

## WATER, SANITATION AND HYGIENE

15	Hygiene promotion campaigns carried out
4.806	People trained on WASH
32	Sanitation facilities rehabilitated/constructed (14.600 People reached)
15	Water points rehabilitated/constructed (40.807 People reached)
5.467	Hygiene Kits delivered
730	Water filters, eco-filters and tanks delivered
10	handwashing facilities built/rehabilitated

## FOOD SECURITY AND LIVELIHOODS

(21.015 People reached)

2.525	People trained in food security and livelihoods		
29.272	People receiving food aid		
6.735	People receiving multipurpose cash transfers or vouchers		
160	People receiving CASH/Vouchers for productive initiatives and/or fixed expenses		
2.180	People received agricultural supplies		
5.893	People supported with guidance and/or training on employment and/or entrepreneurship		

## **DISASTER AND RISK MANAGEMENT**



**484** People trained in desaster and risk managment

People reached by the rehabilitation and/or construction of infrastructures for emergency mitigation and response



46.765 PEOPLE REACHED

2.436 PEOPLE REACHED



# **5. REGIONAL RESPONSE**

MARCH - APRIL 2021

HEALTH A	ND NUTRITION	
214	People reached by malnutrition prevention interventions	
24.947	People reached by infection, prevention and control actions "WASH FIT/IPC COVID-19 strategy"	
172	People provided with Technical advice on nutrition and health	
140	Refugees/migrants received guidance on affiliation processes to the health system	
1.46	People supported with Phsycosocial support consultations	
172	People trained on prevention of COVID-19	
40	Health workers, promotors and volunteers trained	
2.353	People supported with outpatient consultations	41.562
2.393	People assisted in Sexual and reproductive health	PEOPLE
2.241	People screened for malnutrition	REACHED
149	People supported with Personal Protective Equipment (PPE) for COVID-19 prevention	
956	People received COVID-19 prevention supplies	
2.207	Child care kits delivered	
3	People monitored for malnutrition	
1.990	People sensitized on healthy nutrition and good childcare practices	
2.122	People sensitized in Sexual and reproductive health and gender-based violence	

## **INSTITUTIONAL STRENGTHENING**



- **5** Community-based organizations strenghtened
- 8 Refugee/Migrant-based organizations strenghtened

150 PEOPLE REACHED







ARE CHILDREN

**UNDER 5 YEARS OLD** 



## **GEOGRAPHIC COVERAGE**





ARE

MEN

ARE

WOMEN



# CENTRAL AMERICA ACTION AREAS AND PEOPLE REACHED BY SECTOR



## WATER, SANITATION AND HYGIENE

- 7 Hygiene promotion campaigns carried out
- 4.527 People trained on WASH
  - 7 Sanitation facilities rehabilitated/constructed (1.000 People reached)
  - **10** Water points rehabilitated/constructed (1.807 People reached)
  - **722** Water filters, eco-filters and tanks delivered

## FOOD SECURITY AND LIVELIHOODS

- **2.281** People trained in food security and livelihoods
- **1.922** People receiving multipurpose cash transfers or vouchers
- 150 People receiving cash transfers or vouchers for productive initiatives and/or fixed expenses
- **3.200** People supported with guidance and/or training on employment and/or entrepreneurship
- **2.175** People received agricultural supplies

## **HEALTH AND NUTRITION**

- **1.306** Malnutrition prevention interventions
  - Prevention of COVID-19 training
  - 40 Health workers, promotors and volunteers trained
- **1.617** People screened for malnutrition
- 149 People supported with Personal Protective Equipment (PPE) for COVID-19 prevention
- **1.480** Awareness sessions in healthy nutrition and good childcare practices

## **DISASTER AND RISK MANAGEMENT**

**162** People trained in desaster and risk managment



#### **INTERVENTION ANALYSIS**





## CENTRAL AMERICA ACTION AREAS AND PEOPLE REACHED BY SECTOR



## OTHER RELEVANT INFORMATION

Increasing international aid to cover the current gaps in protection and basic needs of the most excluded population groups: migrants, households impacted by ETA & IOTA, rural communities in the Dry Corridor.



## COLOMBIA ACTION AREAS AND PEOPLE REACHED BY SECTOR



## WATER, SANITATION AND HYGIENE

- 279 People trained on WASH
  - 8 Water filters, eco-filters and tanks delivered

## FOOD SECURITY AND LIVELIHOODS

- 244 People trained in food security and livelihoods
- 5.290 People receiving food aid
- **4.813** People receiving multipurpose cash transfers or vouchers
  - **5** People received agricultural supplies
  - 103 People supported with guidance and/or training on employment and/or entrepreneurship

## **HEALTH AND NUTRITION**

- 95 People reached by malnutrition prevention interventions
- 172 People provided with Technical advice on nutrition and health
- **1.331** People supported with Phsycosocial support consultations
- **447** People supported with outpatient consultations
- 335 People assisted in Sexual and reproductive health
- **487** People screened for malnutrition
- **956** People received COVID-19 prevention supplies
- 3 People monitored for malnutrition
- 1.026 People sensitized on healthy nutrition and good childcare practices
- 1.408 People sensitized in Sexual and reproductive health and gender-based violence

## **DISASTER AND RISK MANAGEMENT**



- 119 People trained in desaster and risk managment
- **1.952** People reached by the rehabilitation and/or construction of infrastructures for emergency mitigation and response

#### **INTERVENTION ANALYSIS**



Action Against Hunger continues to develop its projects to aid the migrant population and victims of internal humanitarian violations. Coordination with entities and organizations in the territories has allowed us to provide a multisectoral response to address the structural causes of hunger from different approaches. Active participation in humanitarian architecture spaces has strengthened our advocacy activities on the humanitarian situation at the national level.





## COLOMBIA ACTION AREAS AND PEOPLE REACHED BY SECTOR



#### **OTHER RELEVANT INFORMATION**

Despite the different impacts generated by the pandemic and the public order situation in the country, the national field teams have adjusted their work plans, which has allowed us to continue providing services to the most vulnerable communities.



## PERU ACTION AREAS AND PEOPLE REACHED BY SECTOR



## WATER, SANITATION AND HYGIENE

- 9 WASH trainings carried out
- 12 Sanitation facilities rehabilitated/constructed
- 736 Hygiene Kits delivered
- 10 Handwashing facilities built/rehabilitated (21.015 People reached)

## FOOD SECURITY AND LIVELIHOODS

- 13.719 People receiving food aid
  - 10 People received CASH/Vouchers for productive initiatives and/or fixed expenses
- 2.590 People supported with guidance and/or training on employment and/or entrepreneurship

## **HEALTH AND NUTRITION**

- **24.947** People reached by infection, prevention and control actions "WASH FIT/IPC COVID-19 strategy"
  - 140 Refugees/migrants received guidance on affiliation processes to the health system
  - **132** People supported with Phsycosocial support consultations
  - 82 People trained on prevention of COVID-19
  - 4 Trainings to Health workers, promotors and volunteers
  - 964 People sensitized on healthy nutrition and good childcare practices
  - 714 People sensitized in Sexual and reproductive health and gender-based violence

## **DISASTER AND RISK MANAGEMENT**

203 People trained in desaster and risk managment

## INSTITUTIONAL STRENGTHENING

- **5** Community-based organizations strenghtened
- 8 Refugee/Migrant-based organizations strenghtened

#### **INTERVENTION ANALYSIS**



The humanitarian response to migrants and refugees of Venezuelan origin is maintained through the coverage of basic needs (delivery of food, hygiene kits). We continue strengthening municipal institutions and accompanying MINSA in its public health campaigns (COVID-19 prevention, mental health management, vaccination) and we had expanded our lines of intervention in disaster risk reduction.



#### **OTHER RELEVANT INFORMATION**

NGO staff on the front lines of humanitarian response have not been included in priority vaccination programs. The pandemic situation has shown the urgent need to improve the WASH conditions of the population, both in urban and rural contexts.



**MAIN DONORS** 



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