



LATIN AMERICA

REGIONAL NEWSLETTER | 2021 - N° 4

REPORTING PERIOD: JULY 1 - AUGUST 31, 2021

DATE: 20/09/2021

CENTRAL AMERICA

Household food insecurity and high food costs are the main concerns for 4 out of 5 families in Central America.

COLOMBIA

Violence is on the rise and population displacements have increased by 167% compared to last year.

PERU

Socio-political instability continues.

1. HUMANITARIAN CONTEXT

CENTRAL AMERICA



GUATEMALA

Thousands of people, including children, have been deported from Mexico to the isolated border town of El Ceibo, in northern Guatemala. Between August 22nd and September 3rd alone, more than 400 people were deported to this border crossing in 125 buses. The majority of the deportees were family units and mothers with children. In total 1,186 children under 18, of which 606 are originally from Honduras and 473 are originally from Guatemala. There is only one migration center located in El Ceibo (that has 35-people capacity), yet in a single day, approximately 180 people came seeking shelter.

This situation is happening within the context of increasing corona virus cases in Guatemala, with more than 5,000 cases reported daily, and 12,500 overall deaths. The high infection rates have overwhelmed the country's main temporary corona virus treatment hospital, as well as the national hospitals in Zacapa and Chiquimula. The directors of these hospitals report that they have reached their maximum capacity and will no longer accept more corona virus patients.

The vaccination roll-out has been slow, and it has been further delayed by heavy rains that have affected Guatemala over the last three months. Since May, 23 people have died and 1.1 million people have been affected by mudslides and flooding. The Humanitarian Country Team has scheduled an urgent meeting to coordinate an appropriate response.

The regional Humanitarian Needs Overview and Humanitarian Response Plans for each country was completed and made public at the end of August.

HONDURAS

Honduras has registered more than 2,000 daily cases of coronavirus, and the death toll to date, is more than 9,000. A report from the Ministry of Health confirms that the Pediatric Intensive Care Units of the national public hospital network are at maximum capacity, due to the high rates of corona virus and its variant's infection among children under 18.



As witnessed at the border town of El Ceibo in Guatemala, thousands of people continue to migrate from Honduras to the United States in search of a better life. According to reporting by the Consular and Migration Observatory of Honduras, Mexican authorities have deported 38,383 Hondurans back to their country. Of this figures, 4543 are minors under 18, including some unaccompanied children.

In response to the situation in the country, Humanitarian Response Plan for Honduras has identified 1,8 million people in need of humanitarian assistance, with an estimated financial requirement of US\$ 222 million.

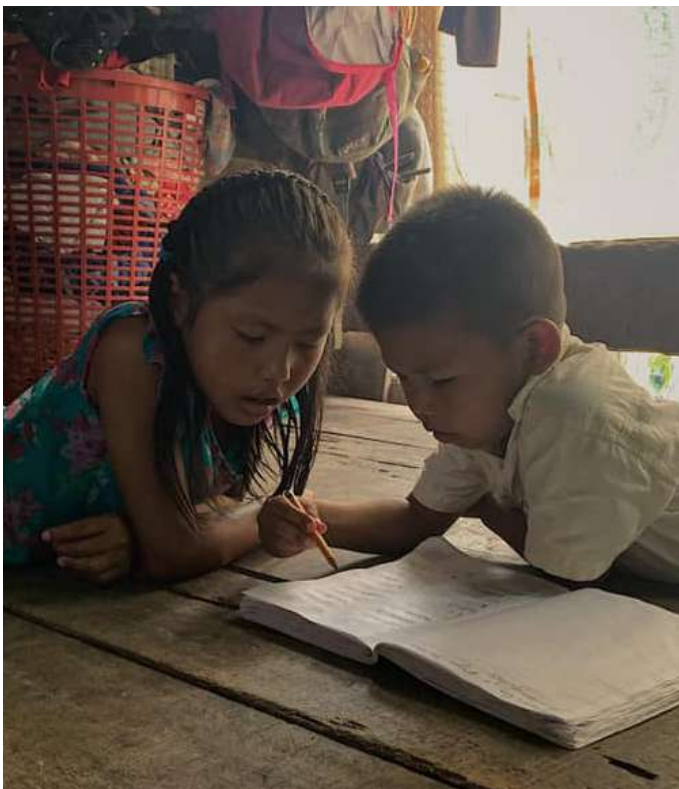




COLOMBIA

According to data reported by DANE in August, the Multidimensional Poverty Indicator (MPI) increased during 2020, with the new registration of 500,000 more people in this condition (2019: 17.5%; 2020: 18.1%). The most affected by multidimensional poverty live in densely populated cities and dispersed rural areas.

COVID-19 cases have considerably decreased across the country compared to the first half of the year. From an average of 15,000 cases per day down to 2,000 in the month of August. The reporting is consistent with the number of COVID-related deaths and hospitalizations across the same period. Many factors have contributed to this decrease, particularly the rigorous vaccination campaign led by the national government and public-private entities. As of August 31st, 35.8 million doses were made available, with 14.8 million people having received at least one dose.



Meanwhile, it is important to note the sharp increase in violence in the country. As of August 29th, 2021, 68 attacks have resulted in the death of 247 people. The systematic non-fulfillment of the terms and conditions outlined in the peace accords, in terms of guarantees and protections for signatories and social leaders, has put many people at acute risk of persecution. So far this year, 64 signatories to the peace accords and 108 social leaders have been murdered¹.

In addition, more than 7,100 people were forcibly displaced from their land in July alone.² By the end of July, 98 of such events were reported, with more than 48,500 people forcibly displaced from their homes and farms. Compared to the same period in 2020, this represents a 167% in the number of people displaced. It is estimated that only an estimated 21% of the total number of displaced persons have returned to their homes, with the rest still living in situations of vulnerability.

Movement restrictions imposed by organized armed groups are increasing in frequency as well across Colombia. During the month of July, 6,242 people were reported confined in 35 separate events. Of particular concern is that 78% of those confined belong to indigenous communities.³

In terms of migration, more than 1,179,000 people from Venezuela successfully registered within the Single Registry of Venezuelan Migrants and more than 1,125,000 completed the Economic Characterization Survey. Both steps are necessary towards the registration with the Temporary Protection Statute instituted by the national government. The registration process aims to gather important demographic information about registrants while promoting their ability to exercise their rights to temporary protection in country.



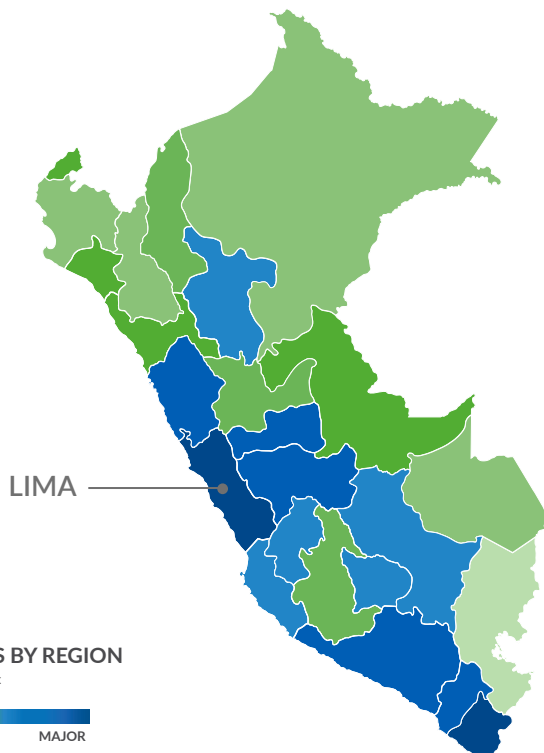
¹ Indepaz, August 29: <http://www.indepaz.org.co/informe-de-masacres-en-colombia-durante-el-2020-2021/>

^{2 3} OCHA, August 30: <https://reliefweb.int/sites/reliefweb.int/files/resources/Colombia%20-%20Impacto%20y%20tendencias%20humanitarias%20entre%20enero%20y%20julio%20de%202021%20a%20agosto%20de%202021%29.pdf>

PERU

The current political situation in Peru remains volatile, with significant tensions between the national Congress and the Council of Ministers that threaten the country's political and economic stability.

Moody's - an international bond credit rating entity, further downgraded Peru—from stable to negative a few months ago, and now to moderately negative, reflecting the continued political polarization which has led to increased political risk and decreased government policy-making capacity. Direct impacts of the situation includes delayed approval of regulations related to community canteens, and some protection policies.



Source: Data La República 2021⁴

Approximately 24 million people are eligible to receive the corona virus vaccine in Peru, including Peruvians and foreign residents. Of this amount, about 10.4 million (38.2%) have received at least one dose of the vaccine and 8.3 million (30.3%) are fully vaccinated with two doses⁵. Multiple “*Vacunatones*” (vaccination clinics) have been set up, with weekend and extended hours to facilitate vaccination access. However, vaccination hesitancy is strong in Peru, due to misinformation and biased reporting in the media.



In terms of the environment, the recent Air Quality Life Index (AQLI) published by the Energy Policy Institute of the University of Chicago has concluded that Lima has the worst air quality among all cities in Latin America. Poor air quality, in addition to high humidity (which can reach 100% relative humidity) and the COVID-19 pandemic, puts Lima residents at high risk of respiratory diseases, including COVID and non-COVID diseases.

After concluding its *pro tempore* presidency of the Quito Process in May of this year, and after a change of government, it has been rumored that former foreign minister Héctor Bejar's proposal to withdraw from the Lima Group may be reconsidered by the new administration. The Lima Group was established in 2017 as a platform for the regional coordination in response to the Venezuelan refugee and migration crisis, with representation from most countries in Latin America.

⁴ Data La República 2021; <https://data.larepublica.pe/avance-vacunacion-covid-19-peru/>

⁵ Módulo de Inmunizaciones HISMINSA, August 31



2. STUDIES / SURVEYS



FOOD SECURITY'S COMPARATIVE ANALYSIS TRENDS IN THE CA4 DRY CORRIDOR BETWEEN 2020-2021

 MARCH -
APRIL 2021
Published: July 2021

> The comparative analysis was carried out under the ECHO-funded project called "Maximizing the impact of humanitarian assistance in the Dry Corridor by improving the generation and dissemination of FNS data in CA4 countries".

 The main objective of this study is to identify trends related to food and nutrition security.

METHODOLOGY



The study compares the food and nutrition insecurity in over a six month period between 2020 and 2021:



The minimal sampling size used both surveys:

35 SURVEYS per municipality

100 MUNICIPALITIES distributed across the dry corridor

• FIRST SURVEY:
From September to December 2020



8,266
HOUSEHOLDS



3,902 at baseline and 4,364 in the second data collection round

• SECOND SURVEY:
March to April 2021



El Salvador, Guatemala, Honduras and Nicaragua.

RESULTS AND CONCLUSIONS



The results show that FNS conditions deteriorated across the region over the last half year:

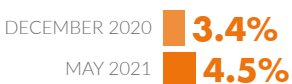
• % experiencing mild food and nutrition insecurity



• % experiencing moderate food and nutrition insecurity



• % experiencing severe food and nutrition insecurity



IN DECEMBER 2020

87.7% of the population surveyed were experiencing some level of food and nutrition insecurity



BY MAY 2021

89.8% of the population surveyed were experiencing some level of food and nutrition insecurity



Based upon an estimated population of 40 million across the dry corridor, this means that approximately **35 million people** are experiencing some level of food and nutrition insecurity.



Food expenditures as a proportion of household expenditures have also risen during the same period.



At the regional level, 35% of the families use **75%** of their income in food items. This data differs from the one collected in december 2020, when the families amounted to 29%. In the case of Honduras, the percentage amounts to 50% of the population.

[YOU CAN FIND THE FULL REPORT HERE](#) 






COLOMBIA

MULTI SECTORAL NEEDS ASSESSMENT: GUAVIARE AND CÓRDOBA

AUGUST 2021
Ongoing


> We led and accompanied the data collection for the Multisectoral Needs Assessment (MSNA), supported by REACH.

 The MAIN OBJECTIVE of this assessment is to provide representative, clear and reliable information on the multisectoral needs of the country's most vulnerable communities.

> This input will be used to inform the country level Humanitarian Needs Overview (HNO) as well as the Humanitarian Response Plan (HRP).

METHODOLOGY


 Sampling of internally displaced persons, indigenous & Afro-Colombian ethnic groups, and hosting community members.

 This data collection was part of a coordinated national data collection effort supported by the humanitarian community working in the country. This includes data collection by other participating stakeholders.

 By September, **3,838** PEOPLE have been interviewed.

>  **17** DEPARTMENTS across the country.

To ensure the representativeness of the exercise in our target areas:

 **2** DATA COLLECTION TEAMS were deployed to Córdoba and Guaviare departments. > In the case of Guaviare, **121** SURVEYS were collected in three municipalities; for Córdoba **37** SURVEYS were undertaken in Montería municipality

 The survey's final result are expected at the end of September 2021.

 Joint data collection exercises improves coordination across actors for more relevant assistance provision, informs evidence-based and target group-based decision-making, and increases overall aid effectiveness.





PERU

MULTISECTORAL STUDY ON REFUGEES AND
MIGRANTS FROM VENEZUELA LIVING IN
METROPOLITAN LIMA

MARCH 2021

MAIN GOAL:
To know the socioeconomic situation of refugees and migrants from Venezuela who reside in the metropolitan area of Lima during the COVID-19 pandemic.

>

SECONDARY GOAL:
To Compare the socioeconomic situation of Venezuelan migrants and refugees residing in metropolitan Lima in 2021 with the conditions reported by the same population in 2019.

METHODOLOGY



Focus group discussions, key informant interviews, qualitative and quantitative surveys



20 DISTRICTS of metropolitan Lima



3,925 FAMILIES of Venezuelan origin were sampled. The multisectoral survey investigated the socioeconomic, demographic, health, income generation, and social services situations of migrants and refugees.

RESULTS

• SOCIOECONOMIC SITUATION



In March 2021, the average household income was **977.17 SOLS** (USD\$ 237).



Average pre-pandemic household incomes were **1,329.51 SOLS** (USD\$ 323).

A decrease of more than a quarter (-26.5%). It was also found that households spent approximately 44.7% of household income on food.



Only **21%** of Venezuelan migrants worked in the formal economy, where their labor rights are protected.



79% worked in the informal economy, where there are no protection safeguards in place.



74.6% of the surveyed households were classified as food insecure (including moderate and severe categories).



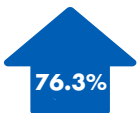
26.5% Decrease of migrant household incomes since the start of the pandemic.



44.7% of migrant household incomes that were used for food purchases in the last month.

• FOOD SECURITY

From migrant household:



76.3% of respondents experiencing moderate or severe food insecurity, according to the FIES scale⁶.



Increase in number of households reporting severe food insecurity (at least one person in the household experienced hunger) according to the FIES scale.



Consumed cheaper or less preferred foods (rCSI⁷).



85.6% Worry about not having enough food due to lack of money in the last month (FIES).



49.1% Were without food at least one day, due to lack of money (FIES).



75.9% Had to reduce portion size of meals (rCSI).



57.3% reduced the number of daily meals eaten (rCSI).

⁶ FIES (Escala de experiencia de inseguridad alimentaria): <http://www.fao.org/in-action/voices-of-the-hungry/fies/es/>

⁷ rCSI: Reduced Coping Strategies Index



● HEALTH



82%
Of migrants without health insurance.



68%
Of households that are overcrowded.



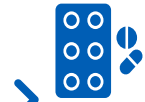
76%
live in homes with only one room.



75%
pregnant migrant women in without health insurance.



31.2%
did not receive pre-natal check-up



37.5%
did not receive iron supplementation.

In the context of the COVID-19 pandemic, in Peru:



Health care service use also declined.



61.9%
did not receive childhood vaccinations



65.1%
did not participate in growth monitoring (weight and height)



49.5%
did not receive iron supplementation.



44%
of adult migrants were tested for COVID-19 infection.



41%
of adult migrant respondents reported having two symptoms of COVID-19.



71.3 %
of migrants or their family members with COVID-19 did not receive medical attention at health centers.



22.8 %
of migrants think that someone in their family had COVID-19 in the last year.

There is also evidence of the emotional toll caused by the pandemic on migrants and refugees from 2019 to 2021. This issue has been seen across all age groups in terms of their perceived levels of sadness, stress, hyperactivity and/or anxiety.



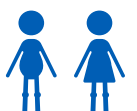
- In 2021, 33.1% of people over 15 reported health struggles, while in 2019 the percentage amounted to 23.3%
- In 2021, 45.4% of children under 15 reported mental health struggles. The data in 2019 amounted 27.5%.

CONCLUSIONS



When comparing the situation of migrants and refugees in 2019 and in 2021, important changes were found in certain indicators such as the reduced coping strategies index (rCSI). Data on this indicator reveals a more critical situation in 2021 due to the hardships of the pandemic which has resulted in less food consumption and a higher proportion of households using negative coping strategies to make ends meet in 2021.

The severity of the situation is reflected in the respondent's perceptions about their weight loss-- **50%** of the people surveyed and a third of their daughters and children under 5 years of age indicated that they have lost weight.





3. INNOVATION

CENTRAL AMERICA

As part of our health-related interventions in Guatemala, community-level emergency plans are being implemented to reduce maternal and newborn mortality. This approach engaged local communities in improving access to health services. In support of this approach, the Ministry of Health is establishing local health committees, which include midwives, volunteer health promoters and community leaders.

These kinds of activities are not well operationalized, they not present a consistent follow up as no one from the community contributes and knows how and why to implement them when emergencies arise. To encourage community participation and leadership, we created a simplified process that empowers communities to develop basic plans. These plans are displayed in visible place in the community for validation and accountability purposes. This form can be easily and regularly updated, according to the necessities, and it can be circulated in the local language of Ch'orti, so that members of this ethnic group feel recognized and included in the process, and acquiring plan's ownership.

These plans include basic information about the roles and responsibilities of specific community members, the resources available for emergency transportation, and how to access them within the community, for example in the event of a maternal health emergency.

Español/Chorti

PONIENDO EN MARCHA EL PLAN

¿Quiénes pueden transportar emergencia en esta comunidad? / ¿L'chi' ab' nab' 'Ukeshab' e' ajmakab' 'tama e' marbar' in'?

COMUNIDAD/COMUNITY:

<p>¿Cómo se llama al ch'at'?</p> <p>¿Tuk' ukob' 'a e' Aj'ech' ch'omont'?</p>	<p>¿En dónde lo encontramos?</p> <p>¿T'yo ka' h'el'?</p>	<p>¿Cuál es su número de salud?</p> <p>¿T'i n' u' Tak'mar' e' Paj'ib'?</p>	<p>¿Qué tipo de vehículo tiene?</p> <p>¿Tuk' Ch'omont' t'ach'ar' u'men' (P'icca)?</p>	<p>¿A qué horas transporta /mones'?</p> <p>¿Tuk' Jaj'ek' 'in' q'et'?</p>	<p>¿Cuánto cuesta el viaje de ida y vuelta?</p> <p>¿L'yo' 'a' h'el' ab'ch'ap' 'in' y' w'ar'?</p>
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Comisión comunitaria de salud y reducción de mortalidad materna y del recién nacido/a

Español/Chorti

PLAN DE EMERGENCIA COMUNITARIO

COMUNIDAD: _____ FECHA DE ELABORACIÓN: _____
 MONEDAS: _____ PATAN TAMA CHERINAYAJ: _____
 FECHAS DE MONITOREO: _____ RESPONSABLES: _____
 PATAN TAMA U'W'ENABE: _____ AJ'EK'CH'ARBE: _____

<p>¿Qué mascotas tenemos?</p> <p>¿Tuk' ukob' nos' h'ot'es?</p> <p>(Cause del Problema)</p>	<p>¿Qué vamos hacer?</p> <p>¿Tuk' nos' ka' 'ch'?</p> <p>(Acciones)</p>	<p>¿Cómo lo vamos a hacer?</p> <p>¿K'ach'o nos' ka' 'ch'?</p> <p>(Actividades y roles)</p>	<p>¿Quiénes lo haremos?</p> <p>¿Ch'ot' 'n'ar' nos' ka' 'ch'?</p> <p>(Responsables)</p>	<p>¿Cuándo lo haremos?</p> <p>¿Tuk' ukob' 'in' nos' ka' 'ch'?</p> <p>(Fecha)</p>
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Comisión comunitaria de salud y reducción de mortalidad materna y del recién nacido/a

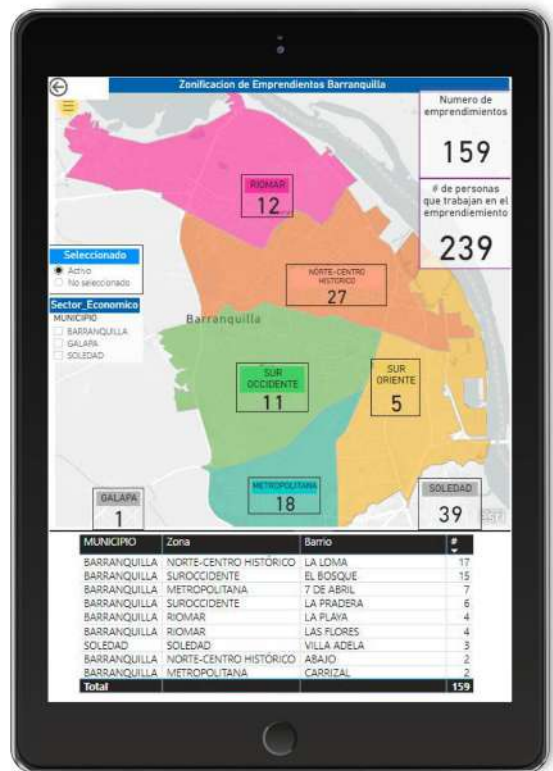
COLOMBIA

CREATION OF INTERACTIVE DATA VISUALIZATION TOOLS FOR COMMUNITY ENGAGEMENT AND FOLLOW UP

Digital tools have strengthened our use information. Using the Power BI platform, we are able to generate dynamic graphics and accurate views of our progress, which facilitates analysis and decision making by project management staff. For example, in the graphic on the right, we present the baseline survey results for our AIDS project in Barranquilla, which main objective is to strengthen the entrepreneurial capacity of migrant populations through vocational training and experience.

The dashboard created for this project contains information on the location of the neighborhoods and the number of businesses therein, the economic sector to which they are engaged, characteristics of the migrant entrepreneur, family composition and a description of their businesses.

At the Colombia country office level, regional team capacities are being strengthened to increase the use of such digital tools through a series of trainings and courses focused on the management and use of Power BI. This technology diffusion strategy has allowed us to generate the information most needed by the national and local humanitarian community such as the GIFMM, the humanitarian clusters, relevant forums, etc.



POWER BI platform visualization, 2021.

PERU

In the second and third quarters of 2021, we worked closely with our government counterparts, to promote not only the inclusion of our data on Venezuelan migrants and refugees in the MINSA databases, but also the broader consideration of this data for more evidence-based decision-making, both at the host community, and migrant and refugee community levels.

This data is also helping to promote dialogue between migrants, CENAN, civil society groups, and international actors, and has helped to raise awareness about issues such as chronic malnutrition, acute malnutrition, and anemia among Venezuelan children treated in Peruvian health facilities. Some data findings include:

- Acute malnutrition is affecting 1 out of 20 children under two, and the risks are affecting 1 out of 10 children;
- Chronic malnutrition affects 1 out of 19 children, with 1 out of 5 children at risk, particularly those of and under the age of 12 months
- Anemia affects at least 1 out of 5 children. Anemia is more frequent in younger children and is predominantly mild in intensity.

In short, acute malnutrition rates are increasing in Venezuelan children under five residing in Peru, and action is needed to mitigate its further deterioration. Acute malnutrition had largely disappeared in Peru, to the point that MINSA did not have even have an active protocol for its detection and treatment, is testament to how quickly the health and nutrition of children of Venezuelan origin is deteriorating in the current circumstances.



4. TESTIMONIALS

CENTRAL AMERICA



I've learned things about nutrition that I wasn't aware of [...] Now I can teach everything I've learned to my relatives at home"



SAYRA FLORES DE BIHMONA
Waspam, Nicaragua

Action against Hunger-led consortium has created a series of videos documenting the testimonies of the participants in its ECHO-funded project entitled: "CA-4 Food Security: Response to the needs of the most vulnerable communities affected by the prolonged food crisis and recurrent droughts in the Dry Corridor of Central America and the population affected by ETA & IOTA".

One of these testimonies is given by Sayra Flores from Bihmona, Waspam, a Miskito indigenous area of Nicaragua. Sayra lives in a remote area that is afflicted by structural poverty. It is also an area that was severely hit by hurricanes ETA and IOTA, which destroyed all of the infrastructure in their paths, greatly increasing the already existing vulnerabilities of the local population in this area. In this video, Sayra tells us about his participation in the community "Field Schools" that focus on improving the nutritional status of families, what she has learned, and how she has applied what she has learned at home. A total of 168 mothers from the area have also participated in these same workshops.



[THE FULL TESTIMONY CAN BE FOUND HERE](#)

PERU



[...]We want it to be sustainable over time. We know that training and awareness projects require a greater effort. But I am convinced that investing in children is essential for the future."



HERNÁN QUISPE
Nutritionist from Action Against Hunger

It is very difficult to access to the community of Camaná. There is no adequate road to enter the community and the journey by river is arduous and long. According to Hernán Quispe, nutritionist from Action Against Hunger: "50% of children under 5 years of age suffer from anemia", a worrisome, unsurprising, prevalence rate, considering the main source of food is cassava and banana and for infants, *masato*. There is a lack of diverse foods within the community, since the supply of products is expensive and has become even more due to the COVID-19 pandemic which has disrupted supply chains, and increased prices. There is also a lack of drinking water, sewage systems and electricity.

Working in Camaná, Action Against Hunger Peru aims to work with the community "to reduce anemia in children under 5 years of age by 20%" through a variety of approaches, including private sector engagement. Anemia was already an issue before COVID-19, but now it is threatening the health and well-being of future generations.

Our team works in Camaná to ensure adequate nutrition, promote hand washing and safe water consumption. "We don't want this to end when we are gone. We want it to be sustainable over time. We know that training and awareness projects require a greater effort. But I am convinced that investing in children is essential for the future."

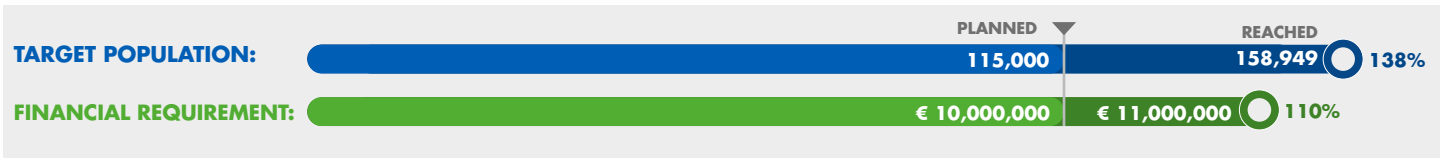
[THE FULL TESTIMONY CAN BE FOUND HERE](#)





5. ACHIEVEMENTS BY MISSION

CENTRAL AMERICA



WATER, SANITATION AND HYGIENE

- 16,192** People reached through hygiene promotion campaigns
- 16,200** People trained on WASH
 - 122** Sanitation facilities rehabilitated/constructed (57,671 people reached)
 - 47** Water points rehabilitated/constructed (53,948 people reached)
- 11,735** Hygiene Kits distributed (46,584 people reached)
- 2,436** Water filters, eco-filters and tanks delivered (17,773 people reached)
- 37** Handwashing facilities built/rehabilitated (1,720 people reached)



FOOD SECURITY AND LIVELIHOODS

- 15,014** People trained in food security and livelihoods strategies
- 15,381** People received food assistance
- 51,276** People received multipurpose CASH transfers or vouchers
 - 150** People received CASH/Vouchers for productive initiatives and/or fixed expenses
 - 984** People received agricultural supplies
 - 9,163** People supported with guidance and/or training on employment and/or entrepreneurship



HEALTH AND NUTRITION

- 12,335** People reached through malnutrition prevention interventions
- 9,170** People provided with Technical advice on nutrition and health
- 5,442** People supported with Psychosocial support consultations
- 32,413** People trained on prevention of COVID-19
 - 902** Health workers, promoters and volunteers trained
 - 3,129** People screened for malnutrition
 - 3,108** People supported with Personal Protective Equipment (PPE) for COVID-19 prevention
 - 4,478** People received COVID-19 prevention supplies
 - 2,041** Child care kits delivered (4,912 people reached)
 - 2,085** Health supplies distributed
 - 8** People monitored for malnutrition
 - 3,778** People sensitized in Sexual and reproductive health and gender-based violence
 - 881** People sensitized on healthy nutrition and good childcare practices



DISASTER AND RISK MANAGEMENT

- 351** People trained in disaster risk reduction and management



INTERVENTION ANALYSIS



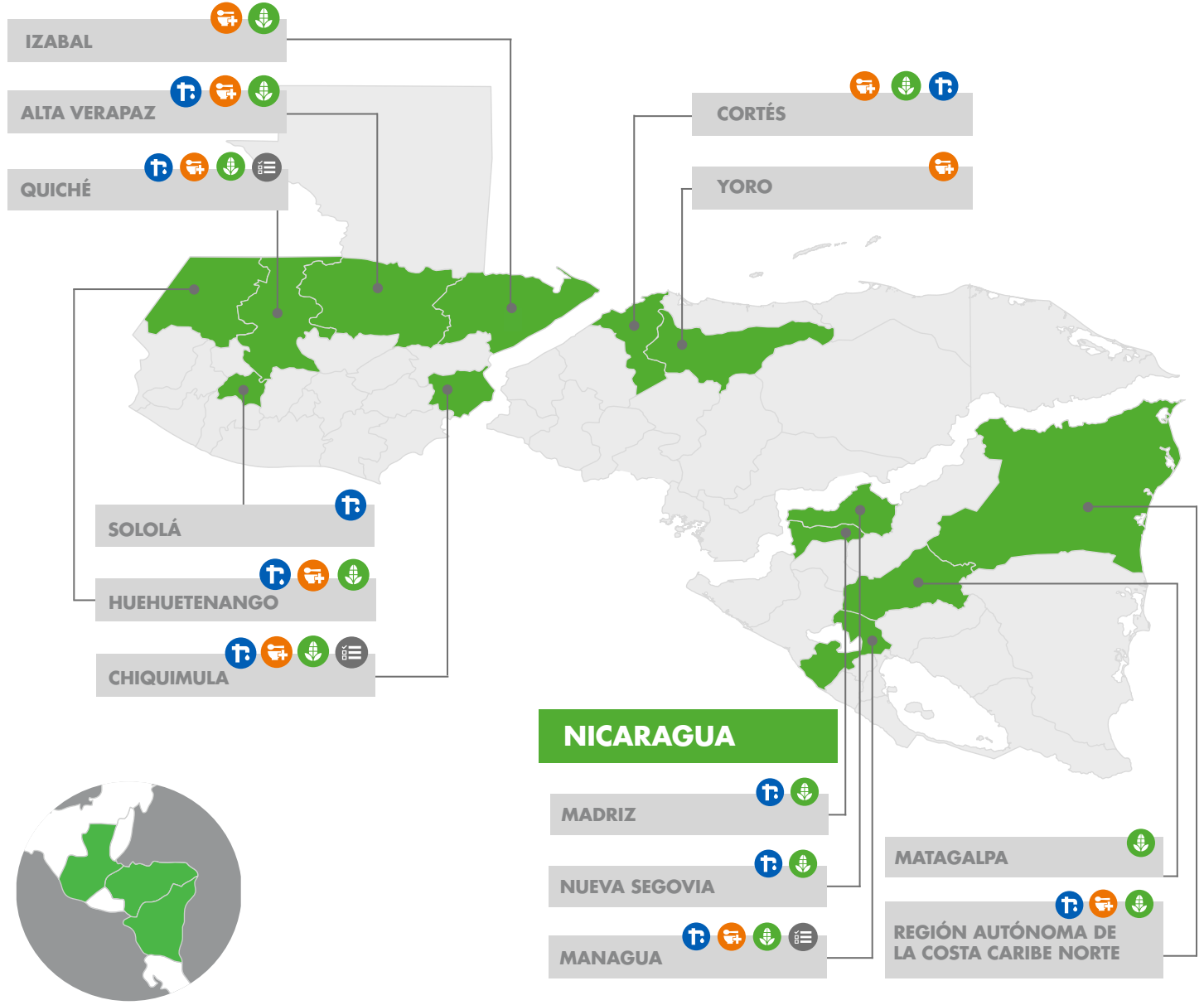
In response to the migration flows, Central American mission has started two projects in the last month focused on improving the living conditions of people on the move. One project provides humanitarian assistance to returned Honduran migrants with the support of UNICEF while the other, implemented with the assistance of UNHCR, links the assistance with reintegration strategies that aim to build the professional development of these groups.



ACTION AREAS AND PEOPLE REACHED BY SECTOR

GUATEMALA

HONDURAS



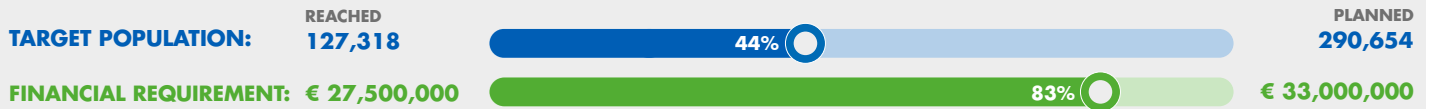
54% ARE WOMEN	46% ARE MEN	6,8% ARE CHILDREN UNDER 5	254,34 TONS OF FOOD DELIVERED
1.281.634,52 € CASH DELIVERED IN EUROS	13 ACTIONS IN DEPARTMENTS	23 PROJECTS UNDERWAY	137 STAFF MEMBERS

OTHER RELEVANT INFORMATION

Unfortunately, the pandemic is affecting the AAH team as well. Even though most of the AAH team is vaccinated against COVID-19, they are front-line workers and therefore are exposed to many that are unvaccinated. This stress, and the occasional quarantining when possible exposure happens, can slow down implementation in some areas. While this is unfortunate, those living in the targeted communities are much more vulnerable to the pandemic due to their inadequate access to the health services, and the high costs of medicines in the country.



COLOMBIA



WATER, SANITATION AND HYGIENE

- 8,959** People reached through hygiene promotion campaigns
- 1,935** People trained on WASH
- 6** Sanitation facilities rehabilitated/constructed (1,139 people reached)
- 842** Water points rehabilitated/constructed (2,092 people reached)
- 6,122** Hygiene Kits distributed (13,543 people reached)
- 1,504** Water filters, eco-filters and tanks delivered (5,548 people reached)
- 3** Handwashing facilities built/rehabilitated (40 people reached)
- 440** Shelter Kits delivered (589 people reached)

FOOD SECURITY AND LIVELIHOODS

- 29,843** People received food assistance
- 21,094** People received multipurpose CASH transfers or vouchers
- 390** People received CASH/Vouchers for productive initiatives and/or fixed expenses
- 504** People received agricultural supplies
- 632** People supported with guidance and/or training on employment and/or entrepreneurship

HEALTH AND NUTRITION

- 6,939** People reached through malnutrition prevention interventions
- 728** People reached by infection, prevention and control actions "WASH FIT/IPC COVID-19 strategy"
- 7,815** People provided with Technical advice on nutrition and health
- 3,174** People receiving assistance to access to public services
- 8,754** People supported with Psychosocial support consultations
- 1,807** People assisted in Sexual and reproductive health
- 933** People supported with outpatient consultations
- 8,813** People screened for malnutrition
- 600** People supported with Personal Protective Equipment (PPE) for COVID-19 prevention
- 70** Health supplies distributed
- 638** Pregnant and breastfeeding women, and children treated for malnutrition
- 624** People monitored for malnutrition
- 7,526** People sensitized in Sexual and reproductive health and gender-based violence
- 13,560** People sensitized on healthy nutrition and good childcare practices

DISASTER AND RISK MANAGEMENT

- 9,256** People trained in disaster risk reduction and management
- 98** Non-food shelter-related items distributed
- 1,952** People reached by the rehabilitation and/or construction of infrastructures for emergency mitigation and response

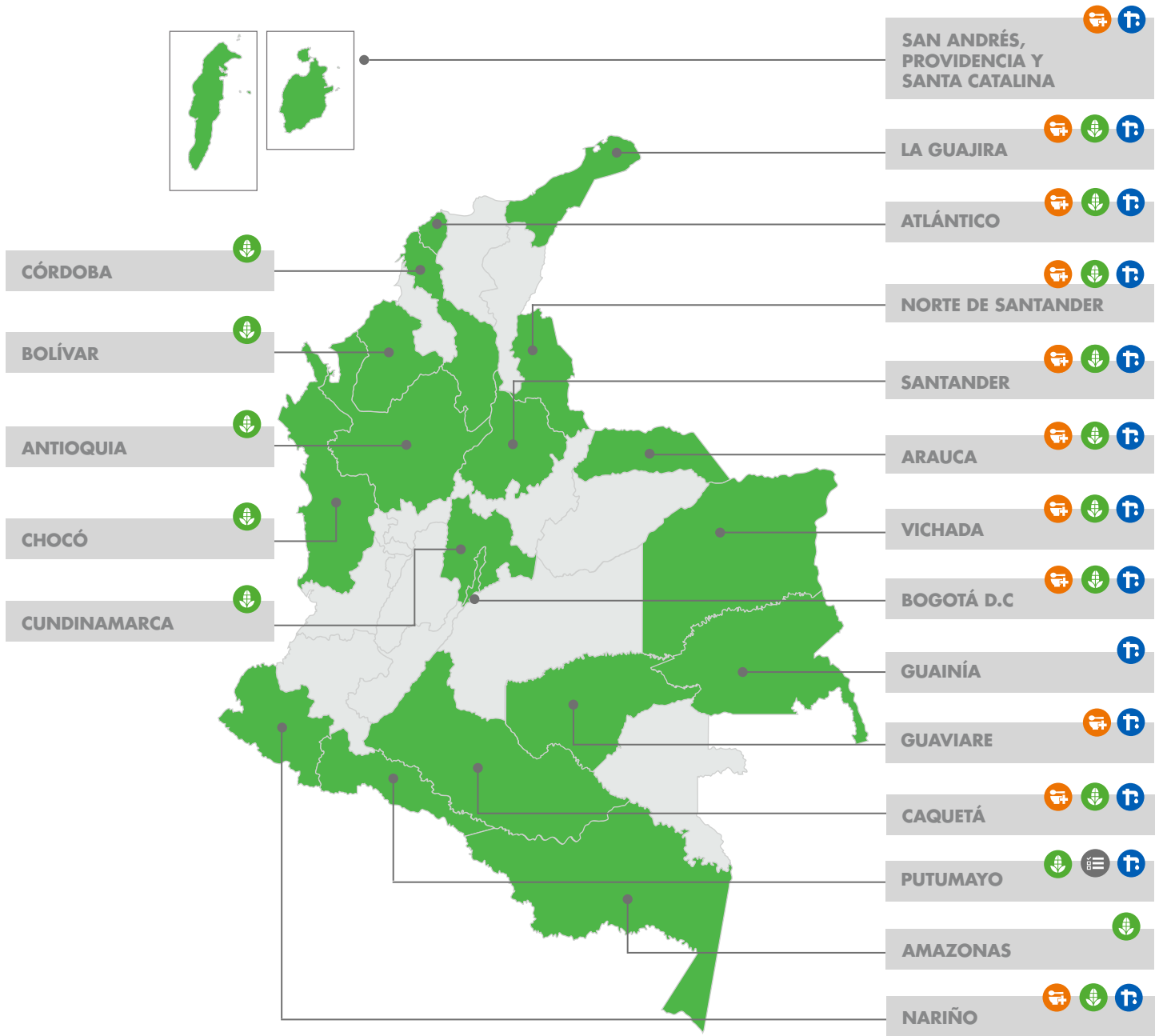
INTERVENTION ANALYSIS



In response to an increase in the number of communities affected by organized armed groups, the office continues to provide humanitarian assistance through multisectoral approaches to those most in need. In terms of migrant and refugee populations. We continue to focus on strengthening and supporting their livelihoods capacities and opportunities, health and nutrition, psychosocial well-being and access to hygiene products.



ACTION AREAS AND PEOPLE REACHED BY SECTOR



58%
ARE WOMEN

42%
ARE MEN

21.4%
ARE CHILDREN UNDER 5

140.4
TONS OF FOOD DELIVERED

4,127,460 €
CASH DELIVERED IN EUROS

19
ACTIONS IN DEPARTMENTS

24
PROJECTS UNDERWAY

316
STAFF MEMBERS

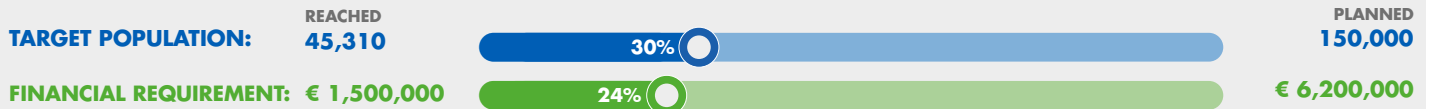
OTHER RELEVANT INFORMATION



Access to some municipalities in the eastern Orinoco and southern Amazon regions has been limited due to organized armed groups whose actions make it impossible, at times, to provide services to those most in need. In terms of health, we are redoubling our vaccination and prevention measures at the team level to avoid transmission to those we seek to assist.



PERU



WATER, SANITATION AND HYGIENE



- 2,575** People trained on WASH
- 19** Sanitation facilities rehabilitated/constructed (21,266 people reached)
- 2,056** Hygiene Kits distributed (8,036 people reached)
- 13** Handwashing facilities built/rehabilitated (21,183 people reached)

FOOD SECURITY AND LIVELIHOODS



- 407** People trained in food security and livelihoods strategies
- 15,138** People received food assistance
- 33** People received CASH/Vouchers for productive initiatives and/or fixed expenses
- 3,246** People supported with guidance and/or training on employment and/or entrepreneurship

HEALTH AND NUTRITION



- 25,746** People reached by infection, prevention and control actions "WASH FIT/IPC COVID-19 strategy"
- 488** People receiving assistance to access to public services
- 4,510** People supported with Psychosocial support consultations
- 300** People trained on prevention of COVID-19
- 190** Health workers, promoters and volunteers trained
- 48** People screened for anaemia
- 94** People screened for malnutrition
- 197** Child care kits delivered (197 people reached)
- 3,039** People sensitized in Sexual and reproductive health and gender-based violence
- 2,484** People sensitized on healthy nutrition and good childcare practices

DISASTER AND RISK MANAGEMENT



- 292** People trained in disaster and risk management
- 1** Non-food shelter-related items distributed
- 772** People trained in emergency shelters management
- 35** Community-based organizations strengthened
- 5** Refugee/Migrant-based organizations strengthened

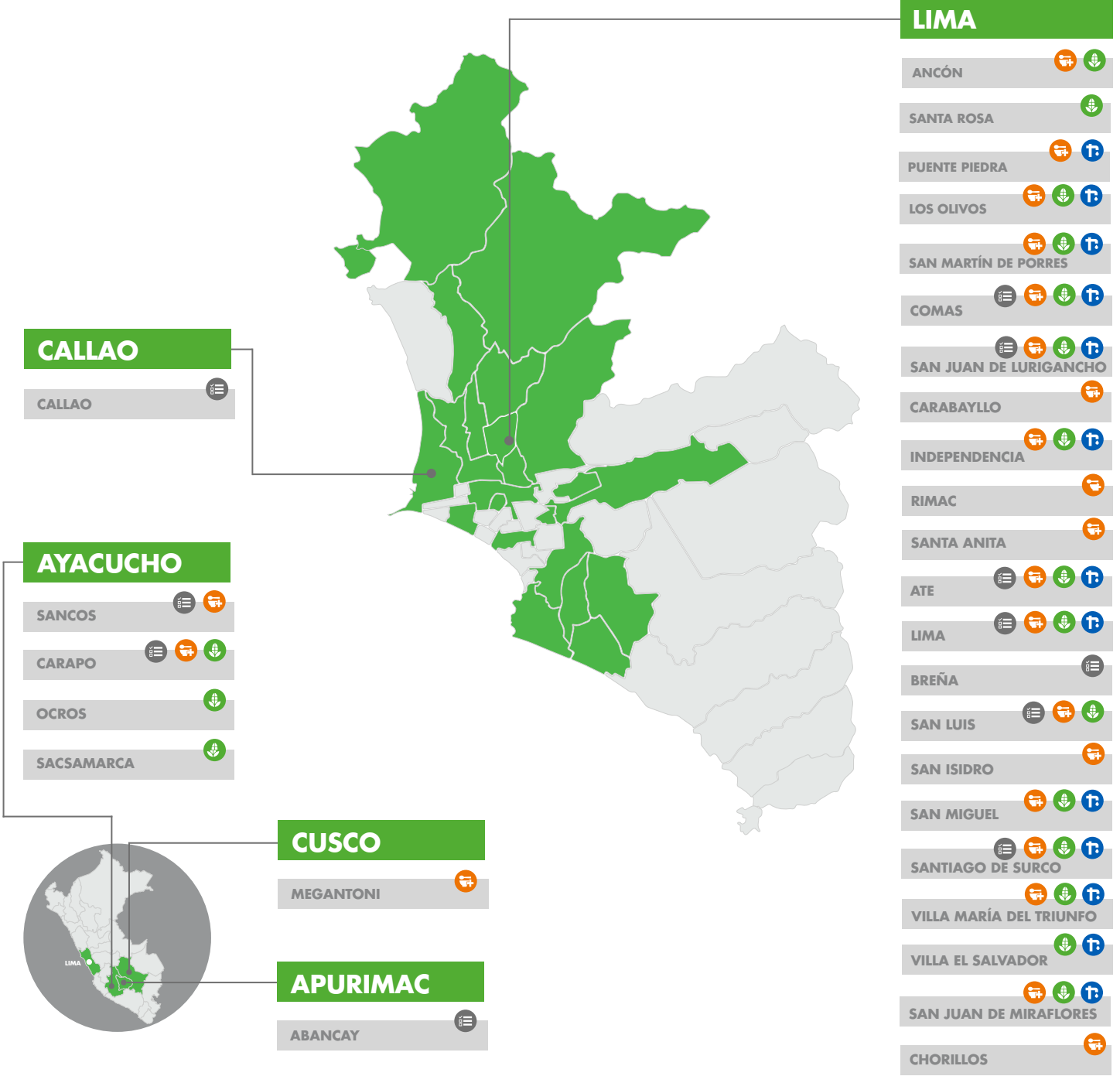
INTERVENTION ANALYSIS



The devaluation of the local currency, the rise in prices, and the continuing political and economic insecurity have increased the needs of the most vulnerable populations in country.



ACTION AREAS AND PEOPLE REACHED BY SECTOR



58%
ARE WOMEN

42%
ARE MEN

21%
ARE CHILDREN UNDER 5

119
TONS OF FOOD DELIVERED

4,070 €
CASH DELIVERED IN EUROS

ACTIONS IN
30 DISTRICTS
IN 4 DEPARTMENTS

09
PROJECTS UNDERWAY

39
STAFF MEMBERS

OTHER RELEVANT INFORMATION



We are prepared to respond to a variety of emergencies, as we are currently doing helping vulnerable groups to access water, or to improve their access to other basic necessities. Our presence is maintained in rapid response interventions to emergency situations, supporting the vulnerable population to help them facing water shortages or the increase in the price of food and gas.



6. REGIONAL COVERAGE

JANUARY - AUGUST 2021

WATER, SANITATION AND HYGIENE



- 46,305** People reached through hygiene promotion campaigns
- 20,757** People trained on WASH
- 163** Sanitation facilities rehabilitated/constructed (116,987 people reached)
- 895** Water points rehabilitated/constructed (113,320 people reached)
- 26,635** Hygiene Kits distributed (95,558 people reached)
- 3,940** Water filters, eco-filters and tanks delivered (23,321 people reached)
- 53** Handwashing facilities built/rehabilitated (22,943 people reached)
- 440** Shelter Kits delivered (589 people reached)

239,244
PEOPLE
REACHED

FOOD SECURITY AND LIVELIHOODS



- 15,421** People trained in food security and livelihoods strategies
- 14,0728** People received food assistance
- 72,370** People received multipurpose CASH transfers or vouchers
- 573** People received CASH/Vouchers for productive initiatives and/or fixed expenses
- 1,488** People received agricultural supplies
- 13,344** People supported with guidance and/or training on employment and/or entrepreneurship

158,490
PEOPLE
REACHED

DISASTER AND RISK MANAGEMENT



- 9,899** People trained in disaster risk reduction and management
- 99** Non-food shelter-related items distributed
- 772** People trained in emergency shelters management
- 35** Community-based organizations strengthened
- 5** Refugee/Migrant-based organizations strengthened
- 1,952** People reached by the rehabilitation and/or construction of infrastructures for emergency mitigation and response

13,474
PEOPLE
REACHED



6. REGIONAL COVERAGE

JANUARY - AUGUST 2021

HEALTH AND NUTRITION

32,337 People reached through malnutrition prevention interventions

26,474 People reached by infection, prevention and control actions
"WASH FIT/IPC COVID-19 strategy"

16,985 People provided with Technical advice on nutrition and health

3,662 People receiving assistance to access to public services

18,875 People supported with Phsycosocial support consultations

33,041 People trained on prevention of COVID-19

1,577 Health workers, promotoros and volunteers trained

8,184 People assisted in Sexual and reproductive health

11,448 People supported with outpatient consultations



749 People screened for anaemia

25,859 People screened for malnutrition

3,715 People supported with Personal Protective Equipment (PPE) for
COVID-19 prevention

6,030 People received COVID-19 prevention supplies

4,677 Child care kits delivered (4,912 people reached)

2,155 Health supplies distributed

14,609 Pregnant and breastfeeding women, and children dewormed

2,102 Pregnant and breastfeeding women, and children treated for malnutrition

632 People monitored for malnutrition

18,639 People sensitized in Sexual and reproductive health and
gender-based violence

28,611 People sensitized on healthy nutrition and good childcare practices

151,258

PEOPLE
REACHED


6
COUNTRIES

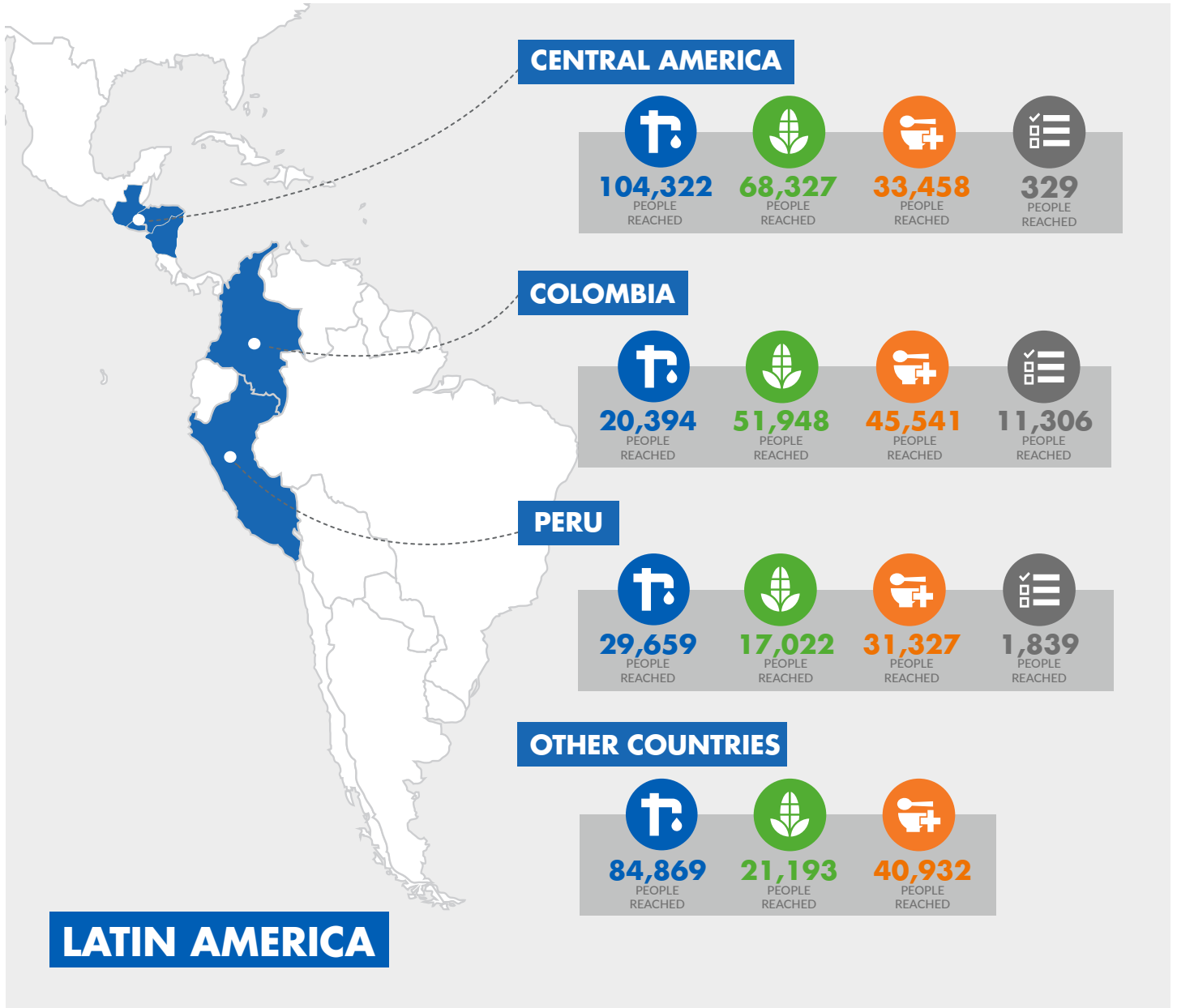

64
PROJECTS
UNDERWAY



520
STAFF MEMBERS



6. REGIONAL COVERAGE

GEOGRAPHIC COVERAGE JANUARY - AUGUST 2021



 **56%**
ARE WOMEN

 **44%**
ARE MEN

 **14.5%**
ARE CHILDREN UNDER 5



403,767 TOTAL PEOPLE REACHED TO DATE IN 2021

Check out our

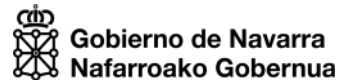
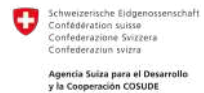
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