



MARCH 2025

L A T I N A M E R I C A

ANNUAL REPORT 20 24



CENTRAL AMERICA



GUATEMALA

In Guatemala, during 2024, we implemented both humanitarian and development interventions in the territories where we are present, with a people and community-centered approach. Through **mobile brigades**, we provided health and nutrition care, water, sanitation and hygiene, protection, mental health services and psychosocial support, as well as food and nutrition security. These actions reached almost 47,000 people in the departments of Chiquimula, Huehuetenango, Alta Verapaz, Jalapa and Sololá.

In sectoral terms, our intervention supported: 9,104 people in the Food Security and Livelihoods sector, 30,740 people in the Health and Nutrition sector, 6,746 people in the Water, Sanitation and Hygiene (WASH) sector and 205 people in the gender and protection sector.

We conducted nutritional evaluations of 13,166 people, mostly children under five years of age, as well as pregnant and lactating women, to detect **acute malnutrition early**. As part of our intervention, we also delivered nutritional supplements and micronutrients to both the local populations and migrants in transit through Guatemala. In addition, we provided **primary health care**, ensuring access to medicines and services. All health activities are carried out in coordination with the Ministry of Health, and multisectoral and comprehensive approaches

are applied to strengthen systems and communities, promoting resilience. In the area of capacity building, we trained and accompanied **34 young counselors**, who support their communities in the promotion of healthy environments and good nutritional practices within the framework of the window of opportunity of the first 1,000 days, in the municipalities of **Jocotán, Camotán and Chiquimula**.



In the **Guatemalan Dry Corridor**, we continued to work with cooperatives, strengthening 545 small producers and promoting savings and credit associations. We also promoted the creation of microenterprises in **Huehuetenango**, benefiting more than 100 people and fostering local economic development opportunities. In the same area, we implemented a food assistance program through monetary transfers, with

the objective to contribute to improving food security for 1,763 highly vulnerable families.

In the department of **Sololá**, we closed the large **RUK'UX A'** program, with which we were able to serve almost 300,000¹ people in 13 municipalities in the department, and completed the delivery of chlorination systems and supplies to the communities.

During 2024, we worked in the schools of the municipality of Santa Lucía Utatlán, implementing comprehensive water, sanitation and hygiene projects, which contributed to improving health conditions in the community, benefitting 1,545 people.



¹ RUK'UX A' program culminates its intervention in Sololá, Guatemala



HONDURAS

An important part of our work in Honduras has focused on providing a **comprehensive response to the migrant population in transit** through the country (369,258 people officially registered between January and December 2024)², providing primary health care and nutrition services, protection services, housing and food in temporary shelters, mental health services and psychosocial support, education, water, sanitation and hygiene, as well as multipurpose cash transfers.

Within the framework of the LIFE Honduras Consortium, we provided a total of 323,147 services.

During 2024, we also addressed neglected needs related to the impacts of **violence**, including armed and gender-based violence, on children and adolescents by providing multipurpose cash transfers for 1,140 families with children who are victims of violence.

We provided technical assistance to health personnel (1,467 people) in 8 departments of Honduras for the timely identification and treatment of **acute malnutrition**, with a total of 90,584³ children under 5 years of age being evaluated.

In addition, we responded to 2 sudden emergencies that occurred during the year. Within the framework of the **national dengue emergency**, we worked in the areas with the highest prevalence of the disease to mitigate its impact and raise awareness about the elimination of the transmitting mosquito, implementing preventive and educational measures and strengthening local response capacity, reaching more than 37,000 people. We also assisted the **population affected by Tropical Storm Sara** in the northern part of the country with 545 hygiene kits and provided bottled water to 6,750 people.

In terms of **food security** activities, we provided a targeted response to address the most urgent needs of the people affected in the Dry Corridor (11,933 people; 3,225 families) and contributed to the restoration of livelihoods in vulnerable communities (150 enterprises and 122 jobs). In the same area,

we continued to develop a multi-year program to resilience to climate change and strengthen the economic empowerment of rural women associated with cooperatives from a gender-transformative approach (525 beneficiaries).

Finally, at the end of 2024 we began a research project on economic inclusion and territorial development through **circular migration** that links the value chains of red fruits from Honduras and Spain, in which 50 people from the Department of Intibucá are participating.



² <https://inm.gob.hn/estadisticas.html>

³ Indirect beneficiaries were not counted as the activity was carried out through the Ministry of Health.



CENTRAL AMERICA HIGHLIGHT

During 2024, in Central America, we provided humanitarian and development assistance to a large number of people, prioritizing health, nutrition, food security, livelihood strengthening, emergency response and climate resilience in the Dry Corridor.

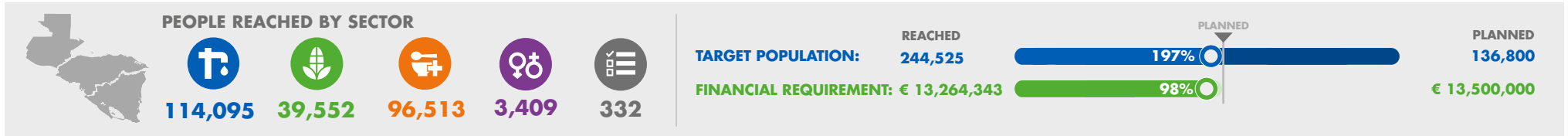
Among our key achievements, we highlighted the **launch of a pilot circular migration project**, boosting economic inclusion by linking the red fruit value chains between Honduras and Spain. This initiative provides economic opportunities for 50 people in Intibucá, primarily women, promoting regulated and safe migration for the communities of origin, strengthening their livelihoods and facilitating their access to international markets.

Another significant achievement was our **response to the national dengue emergency** in Honduras, reaching more than 37,000 people with preventive and educational measures to mitigate the outbreak. We implemented strategies for the elimination of the transmitting mosquito and strengthened local response capacity, ensuring rapid and effective intervention to reduce risks and protect the health of affected communities.





CENTRAL AMERICA RESPONSE IN 2024



WATER, SANITATION AND HYGIENE



- 58,181** People reached with water delivery
- 8,056** People trained in water, sanitation and hygiene
- 53,559** People receiving non-food items
- 6,627** People using basic drinking water services implemented or rehabilitated in communities by Action Against Hunger
- 11** Improved water points with reliable source of water

HEALTH AND NUTRITION



- 7,458** Relevant health stakeholders trained
- 57,955** People with access to primary care, reproductive, maternal, newborn and child health services
- 13,012** People with access to the Supplementary Feeding Program
- 937** People with access to the Therapeutic Feeding Program
- 1,197** People from at-risk or vulnerable groups receiving care focused on Mental Health and Psychosocial Support
- 50,582** People screened for malnutrition
- 4,470** People receiving non-food items
- 25,067** People receiving behavioral change interventions to improve nutrition practices
- 87** People receiving behavior change interventions to improve health practices
- 16,801** People receiving nutritional supplements

FOOD SECURITY AND LIVELIHOODS



- 835** People receiving agropastoral support
- 2,997** People receiving food assistance
- 4,050** People receiving Food Security and Livelihood training (employment promotion and entrepreneurship)
- 129** People receiving other economic support activities (employment promotion and entrepreneurship)
- 83** People receiving cash grants (seed capital, savings and credit groups)
- 33,459** People receiving cash transfers

GENDER AND PROTECTION



- 3,409** People receiving gender-based violence (GBV) training

DISASTER AND RISK MANAGEMENT



- 332** People receiving DRM training



CENTRAL AMERICA

GEOGRAPHICAL COVERAGE IN 2024

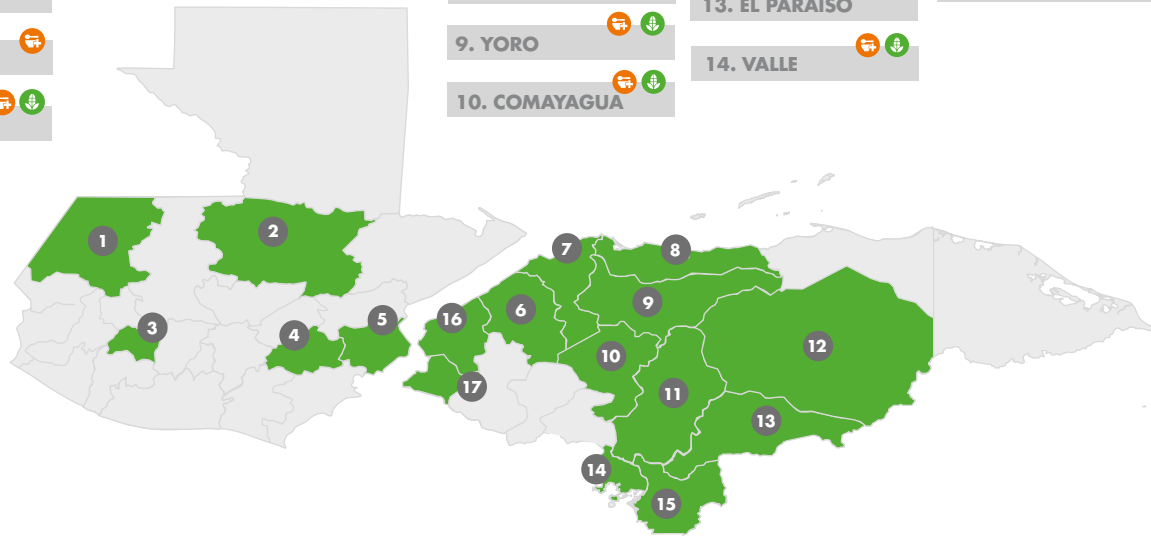


GUATEMALA

- 1. HUEHUETENANGO
- 2. ALTA VERAPAZ
- 3. SOLOLÁ
- 4. JALAPA
- 5. CHIQUIMULA

HONDURAS

- 6. SANTA BÁRBARA
- 7. CORTÉS
- 8. ATLÁNTIDA
- 9. YORO
- 10. COMAYAGUA
- 11. FRANCISCO MORAZÁN
- 12. OLANCHO
- 13. EL PARAÍSO
- 14. VALLE
- 15. CHOLUTECA
- 16. COPÁN
- 17. OCOTEPEQUE



55.4% WOMEN

44.6% MEN

21.6% ARE CHILDREN UNDER 5 YEARS OLD

€ 900,816.42 CASH DELIVERED

ACTIONS IN **21** DEPARTMENTS

20 PROJECTS DEVELOPED

205 PROFESSIONALS

6,022 PEOPLE PARTICIPATED IN ACTIVITIES TO STRENGTHEN ORGANIZATIONS AND INSTITUTIONS

35,304 PEOPLE TRAINED AND SENSITIZED

20 CENTROS DE SALUD APOYADOS CON ASESORÍAS, INSUMOS Y/O REHABILITACIONES



COLOMBIA



During 2024, we met the needs of approximately 92,000 people through programs in Food Security and Livelihoods, Water, Sanitation and Hygiene, Health and Nutrition, and Disaster Risk Management. Our primary objective was to respond effectively in the communities facing the most significant vulnerabilities, particularly those affected by armed conflict, migratory flows, natural disasters, and the lack of access to essential services.

For the assistance of **migrant and refugee populations** in the country, with the [ADN Dignidad program](#), we supported over 49,650 people through cash transfers and socioeconomic inclusion activities. The results of this work were analyzed in an impact evaluation⁴ that measured the long-term effects of the program (18 months after receiving cash transfers), conducted with 3IE and shared with key stakeholders in the country. Among the most notable results is the demonstration of positive outcomes in food security, a reduction in remittance reception and an increase in remittances sent endured over time, as well as greater financial stability for the participants with the greatest needs.

Regarding economic integration, we supported 4,476 people in generating and stabilizing income sources in Colombia. The program includes an Economic Recovery Component (CREA) which allows us to match each participant's technical skills with the labor market, increase participation in labor programs

through public-private partnerships and strengthen their capacities through financial education courses and access to digital wallets.



This year, we also maintained our response in the Darién (the largest South-to-North migration corridor), providing access to health and nutrition for **migrant populations in transit**, with

priority care for children under five, pregnant women, and breastfeeding women in the municipalities of Acandí (North Chocó), and Turbo and Necoclí (Urabá). We ensured immediate medical and nutritional assistance for more than 3,000 people, mitigating the risks of malnutrition, dehydration, and prevalent diseases.

Among the most significant achievements of 2024 in responding to the needs of the most vulnerable **populations affected by armed conflict** in Colombia is our humanitarian response to 35 emergencies triggered by conflict and natural disasters across the country through the [MIRE+](#) consortium. This marks a 40% increase in our rapid response capacity compared to 2023, strengthening our ability to deliver urgent assistance where needed most. At Action Against Hunger (ACF), we led 19 of these interventions, providing critical support in food security and water, sanitation, and hygiene. We reached more than 19,000 people through a comprehensive, multisectoral approach, ensuring that communities facing the most significant hardships receive swift, coordinated, and life-saving humanitarian assistance.

Our work additionally included **early recovery and Nexus** activities in 13 afro-descendant and indigenous communities across the departments of Nariño, Chocó, and Valle del Cauca, areas highly vulnerable to armed conflict. We strengthened food security and supported productive recovery, revitalizing

⁴ [ADN Dignidad Long Term Impact Evaluation](#)



local agricultural production and fostering self-sufficiency among families living in crisis-affected contexts. We ensured access to safe water, sanitation, and hygiene through the installation and rehabilitation of potable water systems and the implementation of training initiatives to prevent waterborne diseases, helping communities build resilience and safeguard their health.

In **Information Management for Humanitarian Monitoring**, we enhanced the use of digital tools through the development of MIREview. This platform integrates technological solutions for monitoring the humanitarian situation and tracking emergencies at the national level. With this innovative approach, data are processed and analyzed in real-time, enabling informed decision-making and ensuring the timely deployment of humanitarian actions where most needed.



COLOMBIA HIGHLIGHTS

Hunger, Conflict, and Peace Initiative: In Colombia, the Hunger and Conflict Initiative⁵ has been implemented since 2022. In 2024, we deepened the analysis of the relationship between conflict and hunger in the country through thematic reports incorporating new social, economic, and conflict-related variables. These include the use of anti-personnel mines, the impact on food security of groups facing heightened protection risks, such as children, and key issues such as livelihoods and illicit crop cultivation.

Additionally, in 2024, we expanded the initiative's conceptual framework by integrating a positive action approach, examining the link between food security and peace. This effort strengthened the dissemination of fieldwork findings and peace-related analyses through exchanges with government actors, academia⁶, and the humanitarian sector. We organized roughly 20 events, exhibitions, and discussions aimed at positioning, analyzing, and co-developing strategies that promote and protect food security for civilians in conflict settings, a crucial tool for peacebuilding and stabilization in Colombia.



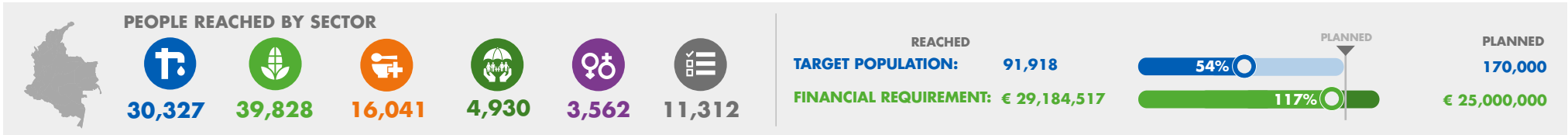
In the **health and nutrition sector**, we highlight our Community-Based Epidemiological Surveillance (VEBC) efforts in La Guajira, implemented in partnership with the National Institute of Health. Through this strategy, we trained 876 people, including 785 women, and prepared 42 community health agents as health sentinels. This initiative strengthened communities' capacity to identify, report and respond to epidemiological outbreaks, ensuring more effective and autonomous surveillance of preventable diseases.

⁵ The Hunger and Conflict initiative (framed in compliance with UN Security Council Resolution 2417 of 2018) makes visible the interaction between violence and food insecurity, raising awareness among different actors at the international and national levels about the interactions and impacts of these elements on the civilian population

⁶ Javeriana University and País Vasco University



COLOMBIA RESPONSE IN 2024



WATER, SANITATION AND HYGIENE



- 12,186** People trained in water, sanitation and hygiene
- 8,950** People receiving non-food items
- 11,661** People using basic drinking water services implemented or rehabilitated in communities by Action Against Hunger
- 1,716** People using basic safely managed sanitation services in the community, including a handwashing facility with soap and water, implemented or rehabilitated
- 17** Improved water points with reliable source of water

FOOD SECURITY AND LIVELIHOODS



- 1,048** People receiving agropastoral support
- 17,462** People receiving food assistance
- 5,557** People receiving Food Security and Livelihoods Training
- 68** People receiving other economic support activities (employment promotion and entrepreneurship)
- 864** People receiving cash grants (seed capital, savings and loan groups)
- 18,632** People receiving cash transfers

SOCIAL PROTECTION



- 4,930** Refugees and migrants facilitated access to social protection programs in host country

HEALTH AND NUTRITION



- 5,115** People with access to primary care, reproductive, maternal, newborn and child health services
- 196** People with access to the Supplementary Feeding Program
- 1,158** People with access to the Therapeutic Feeding Program
- 260** People from at-risk or vulnerable groups receiving care focused on Mental Health and Psychosocial Support
- 4,162** People screened for malnutrition
- 8,359** People receiving behavioral change interventions to improve nutrition practices
- 3,022** People receiving behavioral change interventions to improve health practices
- 1,499** People receiving nutritional supplements

GENDER AND PROTECTION



- 2,223** People receiving gender-based violence (GBV) training
- 1,642** People who receive kits related to Gender Based Violence (GBV)
- 18** People who are referred to specialized GBV services

DISASTER AND RISK MANAGEMENT

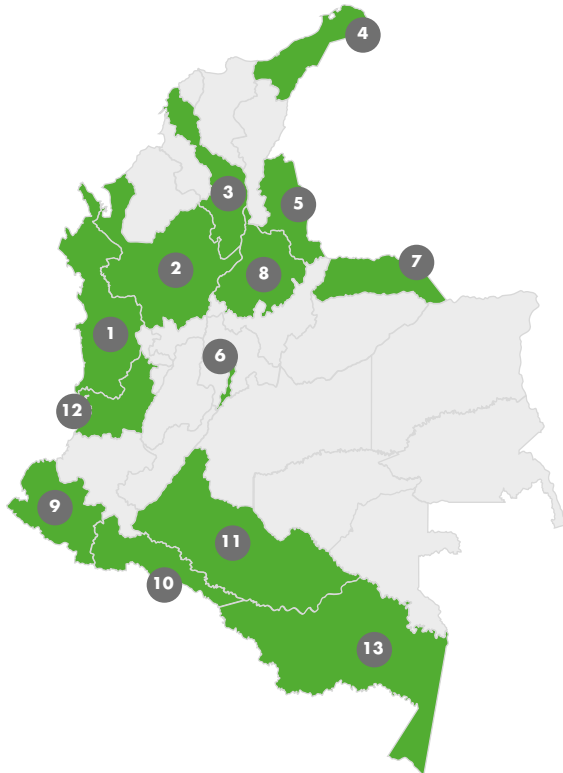


- 2,099** People receiving non-food items
- 9,266** People receiving DRM training



COLOMBIA

GEOGRAPHICAL COVERAGE IN 2024



- 1. CHOCÓ
- 2. ANTIOQUÍA
- 3. BOLÍVAR
- 4. LA GUAJIRA
- 5. NORTE DE SANTANDER
- 6. BOGOTÁ D.C.
- 7. ARAUCA

- 8. SANTANDER
- 9. NARIÑO
- 10. PUTUMAYO
- 11. CAQUETÁ
- 12. VALLE DE CAUCA
- 13. AMAZONAS

53.9% WOMEN | **46.1%** MEN

11.2% ARE CHILDREN UNDER 5 YEARS OLD

€ 3,656,023.92 CASH DELIVERED

ACTIONS IN **13** DEPARTMENTS

15 PROJECTS DEVELOPED

213 PROFESSIONALS

5,154 PEOPLE PARTICIPATED IN ACTIVITIES TO STRENGTHEN ORGANIZATIONS AND INSTITUTIONS

40,457 PEOPLE TRAINED AND SENSITIZED

2 CENTROS DE SALUD APOYADOS CON ASESORÍAS, INSUMOS Y/O REHABILITACIONES



PERU

In 2024, we implemented various emergency response and development projects in Peru, achieving success across several sectors.

In **Amazonas**, we are working on a Disaster Risk Reduction program with the local government of Imaza and the Awajún Autonomous Territorial Government, which has incorporated disaster risk management into their work agenda. Additionally, 19 Emergency Plans were developed within indigenous communities.

In the **Ayacucho** department, where we are engaged in a Community Health and Livelihoods project, we established a pilot training center for health facilities focused on preventive health and community promotion. In the healthcare sector, we worked on preventing anaemia and enhancing the capacities of health and community workers. Meanwhile, we successfully advocated to the Municipality of Santillana to incorporate strategies for preventing and managing violence against women into its work agenda, thereby expanding the impact of awareness-raising and community-strengthening initiatives.

In the Food Security and Livelihoods sector, in the **Cusco** department, we consolidated the Dairy Roundtable by incorporating improvements in cheese production and new marketing opportunities, with the support of the municipality of Acongate. Likewise, with the Ministry of Agrarian Development and Irrigation (MIDAGRI) we developed

promotional opportunities in the media to strengthen the sector's positioning. Additionally, we worked on the brand architecture for corn, dairy products, honey and plantain flour, generating greater market opportunities for local producers.

In the Health and Water, Sanitation, and Hygiene sectors, we continued to provide care for migrant and refugee populations with humanitarian needs in the city of **Lima**. The main actions included the distribution of personal and baby hygiene kits, supplies and service coverage in shelters, family emergency backpacks and cash for access to urgent health care and medications. From a food security perspective, we provided cash and food baskets to the neediest families, strengthened soup kitchens and formed social organizations to improve food distribution.

Our work in the country followed a sustainability approach based on community participation and coordination with local authorities, which was strengthened through training and improvements in infrastructure and equipment.



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PERU HIGHLIGHTS

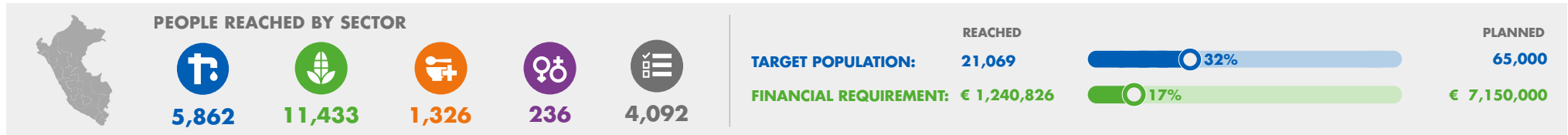
Among the most notable actions in 2024 are the humanitarian responses to crises caused by natural and man-made threats in the **Amazon basin**. One of these was aimed at addressing the **flooding** caused by the Marañón River in the district of Santa María de Nieva during January and February, assisting with basic food security, water, sanitation, hygiene, and health needs through cash distribution, awareness-raising and training to approximately 530 affected people, belonging to Awajún indigenous families.

We also provided a humanitarian response for the **October 3rd oil spill in the Andoas district**, Datem del Marañón province, in the Loreto region, assisting 1,397 indigenous Achuar and Kiwchua people through cash donations to cover their basic needs for food, self-supply of water in contamination-free areas and emergency health needs. The donations were accompanied by awareness-raising and training on the importance of using protective equipment and specific care in the spill areas, drinking safe water and ensuring the health of children and vulnerable groups. Both initiatives involved community participation led by the Awajún Autonomous Territorial Government (GTAA), the National Institute of Civil Defense (INDECI) and the Condorcanqui and San Lorenzo Health Networks.





PERU RESPONSE IN 2024



PEOPLE REACHED BY SECTOR



5,862



11,433



1,326



236



4,092

WATER, SANITATION AND HYGIENE



- 675 People trained in water, sanitation and hygiene
- 5,187 People receiving non-food items

FOOD SECURITY AND LIVELIHOODS



- 269 People receiving agropastoral support
- 7,239 People receiving food assistance
- 308 People receiving Food Security and Livelihoods training
- 49 People receiving other economic support activities (employment promotion and entrepreneurship)
- 3,582 People receiving cash transfers

DISASTER AND RISK MANAGEMENT



- 1,617 People receiving non-food items
- 2,584 People receiving DRM training

HEALTH AND NUTRITION



- 824 Relevant health stakeholders trained
- 341 Persons receiving non-food items
- 438 People receiving behavior change interventions to improve health practices

GENDER AND PROTECTION













- 236 People receiving gender-based violence (GBV) training



PERU GEOGRAPHICAL COVERAGE IN 2024

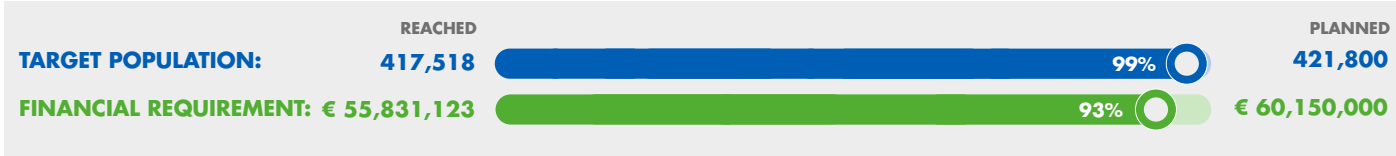


- 1. LORETO  
- 2. PIURA  
- 3. SAN MARTÍN 
- 4. AMAZONAS   
- 5. LIMA   
- 6. AYACUCHO  
- 7. CUSCO 

-  **53.4%**
WOMEN
-  **46.6%**
MEN
-  **9%** ARE CHILDREN UNDER 5 YEARS OLD
-  **€ 127,267.75**
CASH DELIVERED
-  ACTIONS IN **7** DEPARTMENTS
-  **8** PROJECTS DEVELOPED
-  **39** PROFESSIONALS
-  **585** PEOPLE PARTICIPATED IN ACTIVITIES TO STRENGTHEN ORGANIZATIONS AND INSTITUTIONS
-  **4,283** PEOPLE TRAINED AND SENSITIZED
-  **5** HEALTH CENTERS SUPPORTED WITH ADVICE, SUPPLIES AND/OR REHABILITATIONS



REGIONAL RESPONSE 2024



PEOPLE REACHED BY SECTOR



417,518

TOTAL PEOPLE REACHED
JANUARY - DECEMBER 2024



55.6%
WOMEN



44.4%
MEN



17.9%
ARE CHILDREN UNDER 5 YEARS OLD



50
PROJECTS MANAGED



618
PROFESSIONALS



€ 4,684,108.09
CASH DELIVERED



11,835
PEOPLE PARTICIPATED IN ACTIVITIES TO STRENGTHEN ORGANIZATIONS AND INSTITUTIONS



147,884
PEOPLE TRAINED AND SENSITIZED



46
HEALTH CENTERS SUPPORTED WITH ADVICE, SUPPLIES AND/OR REHABILITATIONS



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LATIN AMERICAN PUBLICATIONS

CENTRAL AMERICA

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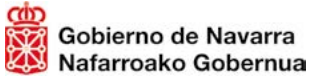
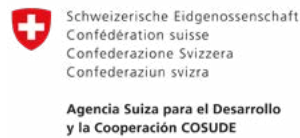
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