

# ANNUAL PROGRESS REPORT

# 2015





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## The Action Against Hunger International Strategic Plan 2010 - 2015

**A**ction Against Hunger International has five main strategic goals in its International Strategic Plan (2010-2015). The first two goals outline the organisation's strategic orientations and the other three are means to achieve these two primary goals, addressing acute undernutrition and responding to humanitarian crises.

### 01 INCREASE...

Action Against Hunger's impact on acute undernutrition, curatively & preventively, especially in young children

### 02 RESPOND...

to and prevent humanitarian crises, address vulnerability & reinforce longer term population resilience to crises

### 03 DEVELOP...

partnerships with local, national & international stakeholders to increase the number of beneficiaries & promote sustainability

### 04 BUILD...

Action Against Hunger's capacity to ensure effective & efficient response to humanitarian crisis

### 05 BECOME...

preeminent as an advocate & reference source on hunger & undernutrition

## Introduction

**A**ction Against Hunger saves the lives of undernourished children. We are at the forefront of innovation and effectiveness in combating undernutrition and in providing support to communities hard hit by humanitarian crises around the world. In 2015, Action Against Hunger assisted a total of 14.9 million people around the world.<sup>1</sup>

### ACTION AGAINST HUNGER'S VISION IS OF A WORLD WITHOUT HUNGER.

To achieve this vision, we promote treatment and prevention of undernutrition around the world. In 2015, the organisation treated a total of 414,592 acutely undernourished people around the world – 96% of whom were children under five years of age. Since 2010, Action Against Hunger has treated more than 2.1 million people.

Our capacity to respond to humanitarian crises has vastly increased in recent years. Since 2010, Action Against Hunger has intervened in 103 humanitarian emergencies around the world. In 2015 we responded to 28 emergencies, including the Nepal earthquake and conflicts in Syria, West and Central Africa, Yemen and Eastern Ukraine. Conflicts represent an immense challenge to a humanitarian organisation like ours. I want to thank and praise our teams working on the ground, close to the threatened populations, for their extraordinary courage and dedication. We are fortunate to have many amazing people working within our charity.

I am honoured yet saddened to pay tribute to Rombek Paul Mori from South Sudan and Moussa Ag Mohamedoun from Mali who lost their lives whilst working for Action Against Hunger last year. Our thoughts are with their families and friends. The security of our teams remains a top priority for us.

Action Against Hunger's interventions continue to improve and adapt based on local needs and challenges, as well as our accumulated experience. As our programmes and activities have scaled up, so have our internal capabilities to support such growth. Our operations are implemented and supported by a team of 7,133 dedicated men and women in 47 country offices, five headquarters, two regional offices and seven logistics centres. 2015 saw the start of operations for Action Against Hunger's country offices in Cambodia and in the Ukraine. In Mongolia, due to significant improvements in the country's nutritional situation, our activities have been handed over to local partners.

Partnerships with local and international actors are indeed an integral part of Action Against Hunger's way of working. In the context of nutrition interventions in particular, collaboration with national Ministries of Health are often essential to ensure effectiveness and sustainability. In 2015, we relied on 754 partnerships around the world, almost 40% of whom were public-sector bodies.

We opened fundraising offices in Germany and Italy in 2014. Since then, we have established a new coordinating "Donor Relations Unit" in Brussels to manage the organisation's relations with the European Union, as well as to oversee engagement strategies with all public donors.

In 2015, Action Against Hunger had a financial turnover of €296 million. We raised €76.3 million from private supporters, and €219.5 million from public donors. 86.4% of these funds went directly to support field programmes and activities around the world.

Action Against Hunger has continued to speak out to present the case that the most vulnerable populations must get better access to nutrition, clean water and security. They deserve an environment where children can grow safely, develop their full potential and fulfil their dreams. In 2015, for the first time, governments around the world agreed to end hunger and undernutrition by 2030. Action Against Hunger worked hard to ensure that a global target and indicator on child acute undernutrition was included into the Sustainable Development Goals. A major success for our global advocacy work.

This report highlights our main achievements and progress made in 2015; and emphasises the massive progress made over the past 6 years. I would like to thank all the Action Against Hunger staff around the world who have contributed to this Annual Progress Report. The Evaluation, Learning and Accountability unit<sup>2</sup> has done a wonderful job leading the process. We continue to improve our internal monitoring systems, hence this report provides the best, most comprehensive information ever published; showing the true reach of our programmes.

Action Against Hunger has achieved much since 2010. We now look ahead to implementing our new 5 year strategic plan. We have ambitious goals for 2020, which will build on the strengths and the great achievements of our organisation over the past years.

**Paul Wilson | Action Against Hunger International Chair**

<sup>1</sup> This figure corresponds to the aggregated number of individuals reached through Action Against Hunger's sectors of interventions.

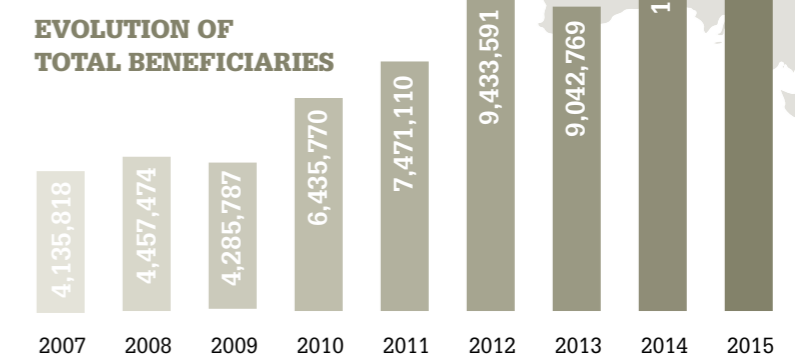
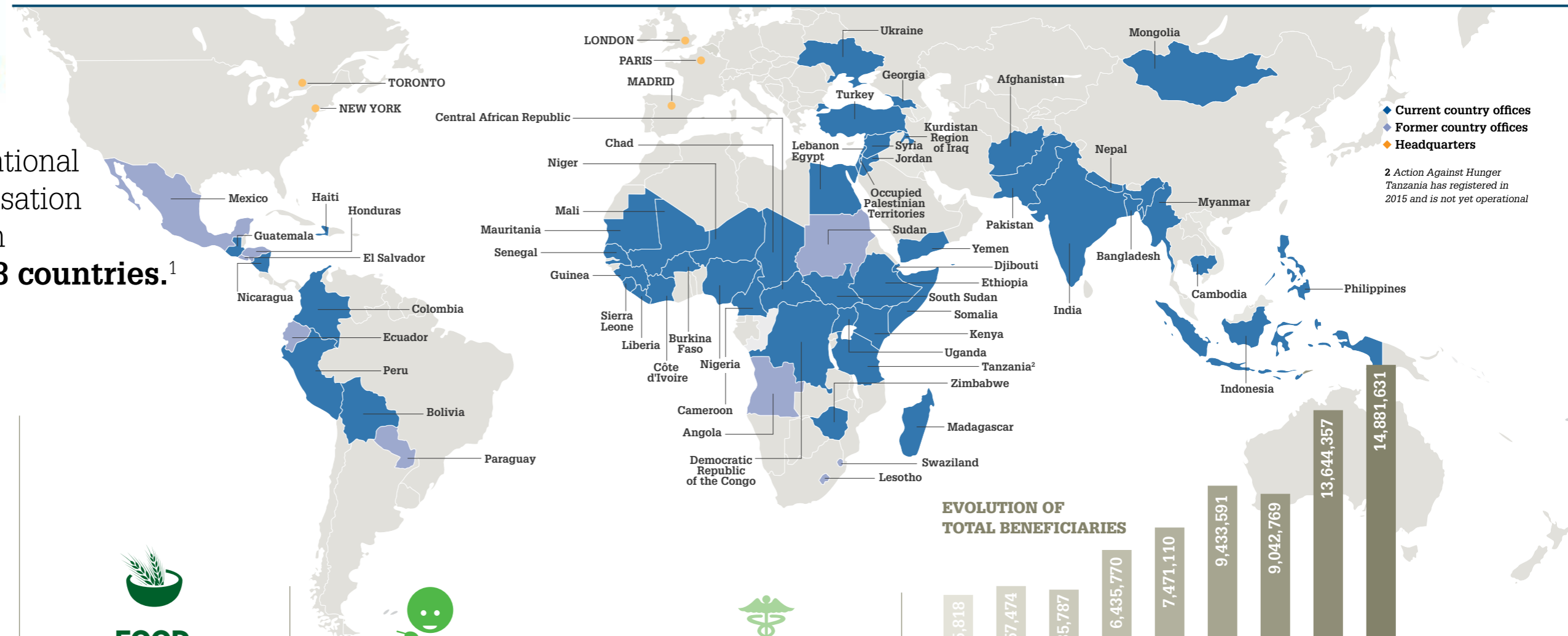
<sup>2</sup> The Evaluation, Learning and Accountability unit is: Mattia Zanazzi, Knowledge and Information Management Officer; Macarena Magofke, Evaluation and Knowledge Sharing Officer; Hannah Wichterich, Evaluation and Knowledge Sharing Officer; Alyssia Allen, Evaluation, Learning and Accountability Intern; Vincent Fevrier, Monitoring and Information Management Intern.



# 2010 - 2015

# 6 years overview

In six years of the International Strategic Plan, the organisation has worked on more than **2,400 projects** across **58 countries**.<sup>1</sup>



## WATER, SANITATION & HYGIENE

**28.4**  
million  
people reached

**6,801,328**  
cubic meters  
of water delivered

**2,188,651**  
hygiene sessions  
held

**408,137**  
of water points improved

**80,094**  
community  
infrastructures  
built or improved



## FOOD SECURITY & LIVELIHOODS

**12**  
million  
people reached

**4,281,518**  
livelihoods kits  
distributed

**323,311**  
metric tons of  
food aid delivered



## NUTRITION

**9.8**  
million  
people reached

Including:

**1,327,470**  
treated for severe  
acute undernutrition

**816,328**  
treated for moderate  
acute undernutrition



## HEALTH

**6.1**  
million  
people reached

**1,181,946**  
health & nutrition  
education  
sessions held



## MENTAL HEALTH & CARE PRACTICES

**4**  
million  
people reached



## DISASTER RISK MANAGEMENT

**1.4**  
million  
people reached

<sup>1</sup> Double counting across the years under consideration for both projects and beneficiaries cannot be excluded. Some figures may be indicative.

# OPERATIONS & BENEFICIARIES

## 2015

**47**  
country offices

**518**  
projects

**14.9m**  
people reached

### RATIO OF PROJECTS BY SECTOR

**17%**  
NUTRITION



**7%**  
HEALTH



**25%**  
FOOD SECURITY AND LIVELIHOODS



**14%**  
MENTAL HEALTH AND CARE PRACTICES



**28%**  
WATER, SANITATION AND HYGIENE



**5%**  
DISASTER RISK MANAGEMENT



**4%**  
OTHER



### BENEFICIARIES BY SECTOR

**1,560,398**  
NUTRITION



**3,005,468**  
HEALTH



**1,909,186**  
FOOD SECURITY AND LIVELIHOODS



**462,868**  
MENTAL HEALTH AND CARE PRACTICES



**7,889,828**  
WATER, SANITATION AND HYGIENE



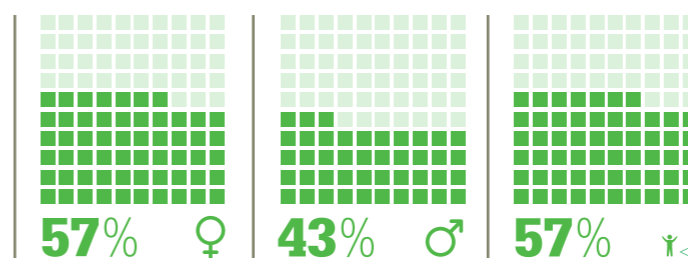
**53,883**  
DISASTER RISK MANAGEMENT



# GOAL 01

## INCREASE...

Action Against Hunger's impact on acute undernutrition, curatively & preventively, especially in young children



# 1,560,398

**TOTAL NUTRITION PROGRAMMES  
BENEFICIARIES**

Sex and Age Disaggregated Data for all sectors is calculated based on figures reported by Action Against Hunger country offices.

### 01.1 TREAT AT LEAST 600,000 ACUTELY UNDERNOURISHED PEOPLE YEARLY BY THE END OF 2015

In 2015, Action Against Hunger treated a total of 414,592 persons through nutrition programmes treating severe acute undernutrition and moderate acute undernutrition. Of these, 96% were children under five years old, almost two thirds of which were treated for severe acute undernutrition. The organisation implemented nutrition programmes in 36 countries through 1,206 health centres and 19 mobile health teams.

The total number of persons reached by nutrition programmes decreased from 430,044 in 2014, a reduction mainly due to the scaling down of post-emergency activities or to difficulties in reporting due to challenging contexts in some country offices. In Action Against Hunger's country office in the Philippines, programmes returned to pre-2014 levels after the end of the Haiyan/Yolanda typhoon emergency response. In Somalia, reporting faces challenges relating to accessibility, security constraints, volatility of the context, high population movement and staff capacity. The office is currently building up capacity and strengthening existing Monitoring and Evaluation systems.

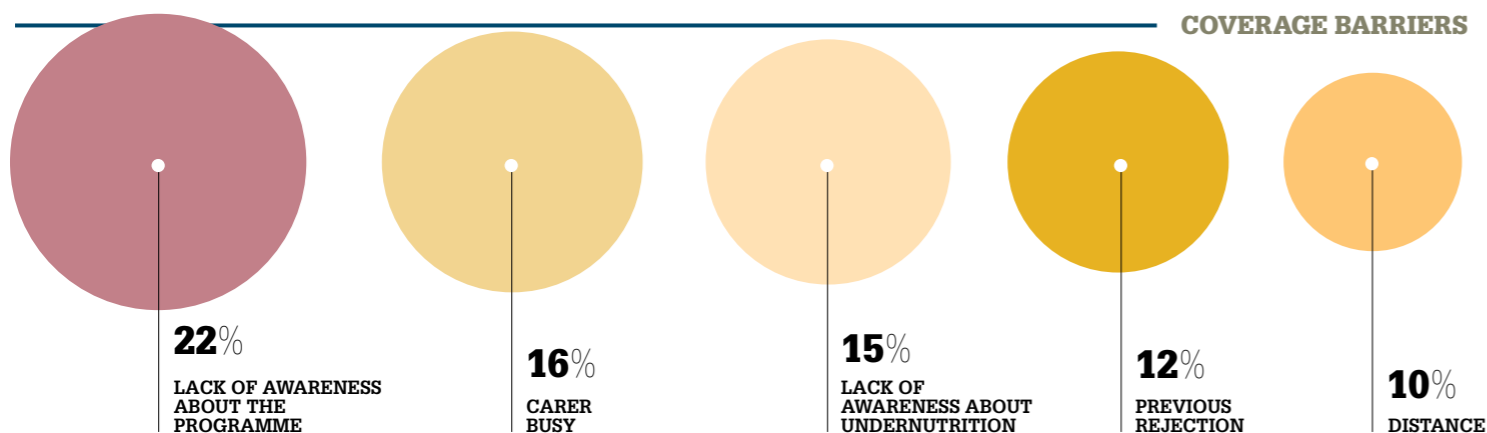
The organisation's community-based management of acute undernutrition projects continued to achieve well above Sphere key standards.<sup>1</sup> In 2015, an average of 80% cure rates was achieved by the organisation. Mortality rates remained limited at 1% of cases, demonstrating the high effectiveness of the treatment. Default rates importantly decreased from 12% to 8%, while the remaining 11% of cases consists of persons that were either non-respondent or transferred to other programmes.

<sup>1</sup> The Sphere Projects sets minimum standards for interventions in humanitarian assistance. Key standards for acute undernutrition management are >75% cure, <10% mortality and <15% default rates.



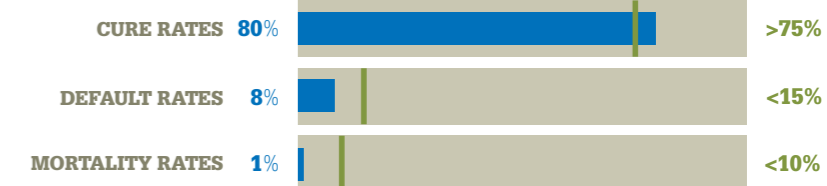
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#### COVERAGE BARRIERS

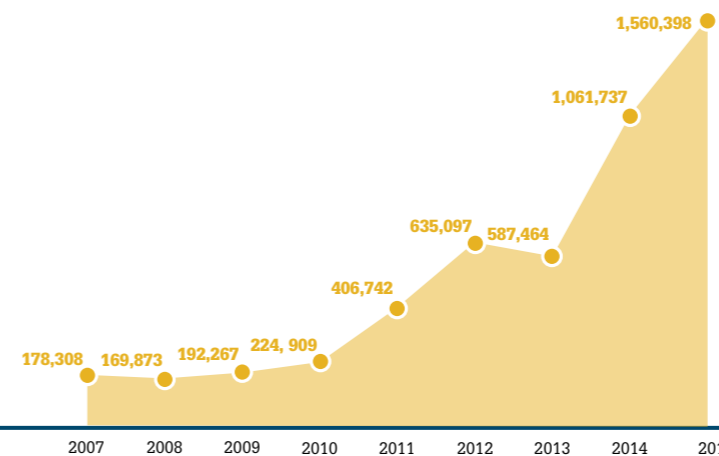


Relapse	4%
Husband / family refusal	4%
Carer sick	2%
Population movement	2%
Ready to Use Therapeutic Food stock breaks	2%
Poor outreach activities	2%
Wrong admission and discharge criteria	2%
Alternative health practitioners preferred	1%
Doesn't think the child is undernourished	1%
Poor delivery of service	1%
Lack of money	1%
Transport cost	1%
Other	2%

#### SPHERE PROJECT KEY STANDARDS



Rates achieved by Action Against Hunger ◆  
Sphere Project Key Standards ◆



**PERSONS REACHED BY NUTRITION PROGRAMMES<sup>1</sup> (OVER TIME 2010-2015)**

<sup>1</sup> Including supplementation activities and blanket distribution of therapeutic & supplementary foods and micro-nutrients.

**TOTAL BENEFICIARIES RECEIVING TREATMENT FOR ACUTE UNDERNUTRITION**

Action Against Hunger's interventions through nutrition programmes vary across countries, as the organisation continues to adapt based on the most pressing needs on the ground.

Therapeutic Feeding Programmes provide treatment to persons affected by severe acute undernutrition, particularly children, to reduce the risk of mortality. In 2015, the organisation reached a total of 263,472 individuals through these programmes. The Sahel region of West Africa represents a focal point of attention for Action Against Hunger, as a combination of factors including demographic pressure, environmental and climate change and political instability have contributed the deterioration of the nutritional situation of vulnerable populations.

In this context, Action Against Hunger's country office in Nigeria supported health workers to treat 52,459 children between 6 months and 5 years old. Nigeria, a country that accounts for an estimated 10% of children affected by severe acute undernutrition globally, represents a strong focus of

the organisation's nutrition programmes. The country offices in Chad and in Niger also treated 25,076 and 18,385 persons respectively.

Supplementary Feeding Programmes are preventively directed towards persons whose nutritional status is at risk of deteriorating into severe acute undernutrition. Action Against Hunger treated 151,120 persons affected by moderate acute undernutrition in 2015, a condition which is often underestimated but potentially affecting a larger population globally.

The Ethiopia country office reached a total of 21,188 persons because of increased activities in Gambella region to provide nutrition support to South Sudanese refugees and host communities, and in Amhara region which has been severely affected by drought due to El Niño weather conditions. The team will continue to monitor the evolution of the situation and scale up its programmes further if needed.

In Action Against Hunger's Pakistan country office, locally produced supplementary food known as "Acam", as well as fortified blend flour rations and oil rations, were distributed to children under five and to pregnant or lactating women in four districts across two provinces, reaching a total of 20,619 persons. In South Sudan, treatment for moderate

acute undernutrition was delivered to 19,340 children under five years of age using Ready to Use Supplementary Food.

**OVERALL NUTRITION BENEFICIARIES 2015**

Action Against Hunger's nutrition programmes also include nutritional supplementation for pregnant or lactating women and the blanket distribution of therapeutic and supplementary foods or micronutrients. In 2015, taking into account all nutrition programmes and activities, the organisation reached a total of 1,560,398 persons.<sup>2</sup>

The blanket distribution of therapeutic and supplementary food significantly decreased from more than 90,000 persons in 2014 to 10,462 in 2015. This is due again to the scaling down of agency activities after the Haiyan Typhoon in the Philippines. Almost the entirety of these distributions occurred in Mali, where Action Against Hunger opened a new base in Timbuktu and scaled up activities to respond to the ongoing food crisis in the area.

While supplementary food distribution decreased, the organisation reached 89,308 persons in 2015 through micro-

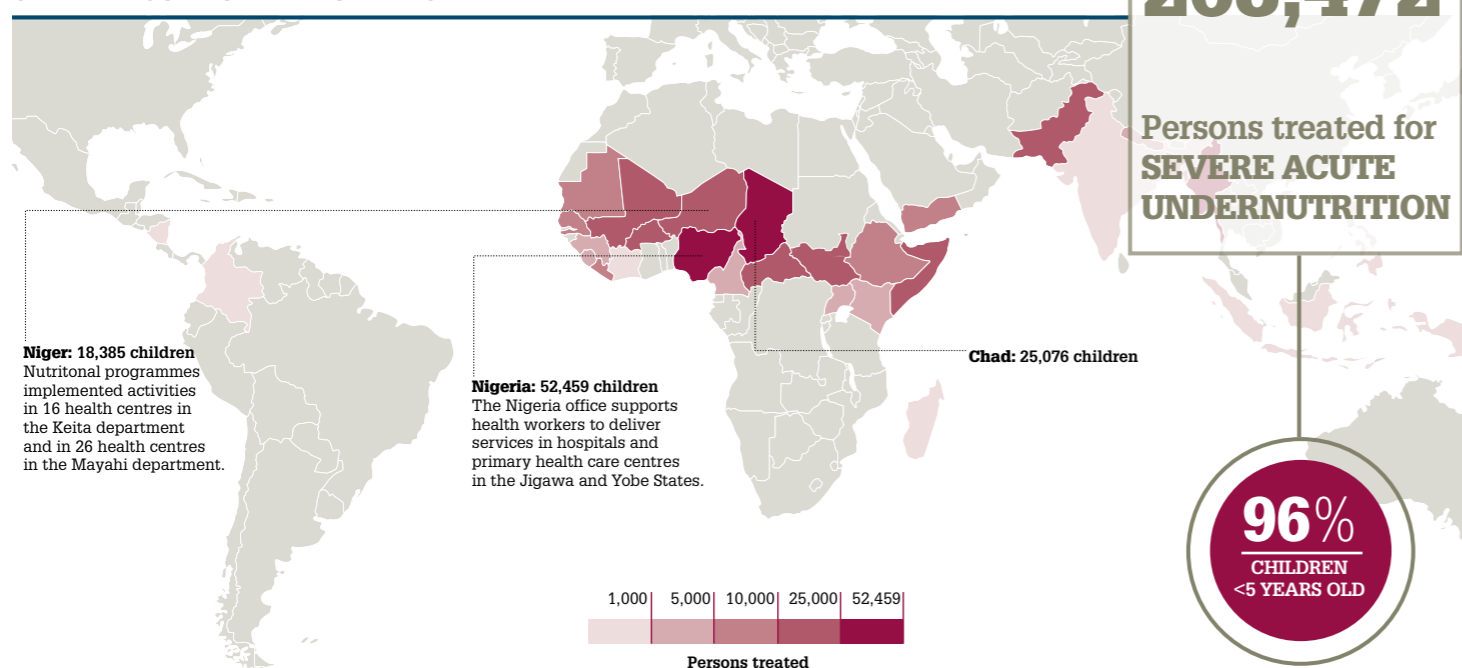
nutrients distribution, compared to 62,412 in 2014. More than 70% of these distributions took place in Pakistan, while the rest took place in Niger and Colombia.

Supplementation activities reached an overall 69,581 persons globally, particularly supporting the organisation's programmes in Ethiopia and Niger. This represents a considerable reduction from the 477,707 persons reached the past year, a reduction caused by a shift in the reporting of activities in Nigeria, where the country office previously reached 333,810 persons through supplementation activities. These activities are now counted under the "health" sector.

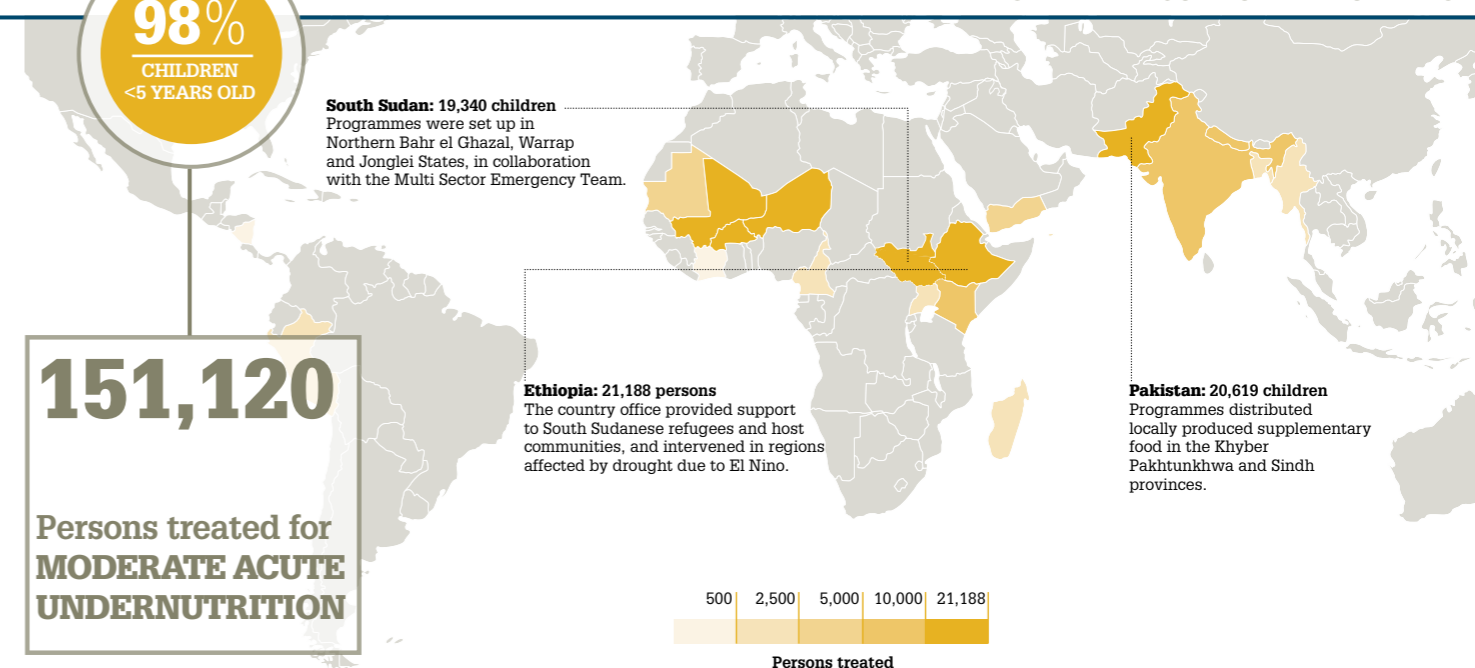
In the Côte d'Ivoire country office, the rehabilitation of twelve health centres in vulnerable urban areas of Abidjan allowed 396,122 persons to enjoy better access to health and nutrition programmes in the country. The Chad country office reached 207,266 beneficiaries, particularly through Reproductive Maternal Newborn and Child Health activities, including curative, preventive and pre- and after-birth consultations. These activities were developed in support of the local health authorities.

<sup>2</sup> The figure includes some beneficiaries reached by health programmes, as some country programmes report on "Nutrition" and "Health" as one sector.

**PERSONS TREATED FOR SEVERE ACUTE UNDERNUTRITION**



**PERSONS TREATED FOR MODERATE ACUTE UNDERNUTRITION**



GOAL  
01

FOCUS ON  
**SAM2020**

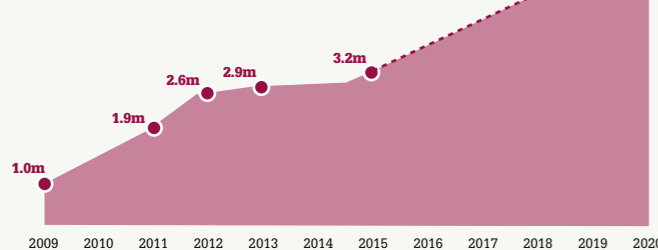
**SAM2020: AN AGENDA FOR SCALING-UP THE MANAGEMENT OF SEVERE ACUTE MALNUTRITION**

In the summer of 2015, Action Against Hunger's International Executive Committee (IEC) commissioned the first of a series of agendas to guide Action Against Hunger's efforts across a range of thematic areas. The first of these agendas focused on scaling-up management of Severe Acute Malnutrition (SAM). At its heart was the recognition that whilst significant efforts have been made in the last decade to increase the number of SAM cases that access treatment and successfully recover, only a small fraction (<20%) of all cases are currently reached by these services. A new objective was set to reach 6 million people by 2020.

The SAM2020 Agenda provides a six point plan for scaling-up management of Severe Acute Malnutrition.

- 01 SAM must be redefined as a public health priority and not simply an emergency problem.** Changing how the world perceives the condition will be critical to how it deals with it in practice.
- 02 Resource mobilisation for SAM globally and nationally must be increased.** Unless new funding streams are identified and greater national financial commitments are made, scaling up of SAM management will remain a challenge.
- 03 The effectiveness and cost-effectiveness of SAM management must be improved.** Whilst the community-based model remains the most effective and cost-effective solution to manage SAM, further operational efficiencies and models should be pursued to facilitate scaling-up.
- 04 Availability and accessibility of SAM management services must be increased.** Introducing community-based SAM management in all high burden countries, and securing national targets for the coverage of these services, are essential to accelerate the scale-up of services.
- 05 The capacity of health staff to manage SAM must be improved.** To mainstream and roll-out services, health staff must be systematically empowered to deliver SAM services as part of their basic services.
- 06 Quality, availability and utilisation of SAM information must be improved.** To launch a coordinated global effort to put SAM management services within reach of all those who need it, we need to maximise the use of SAM information at a global and local level.

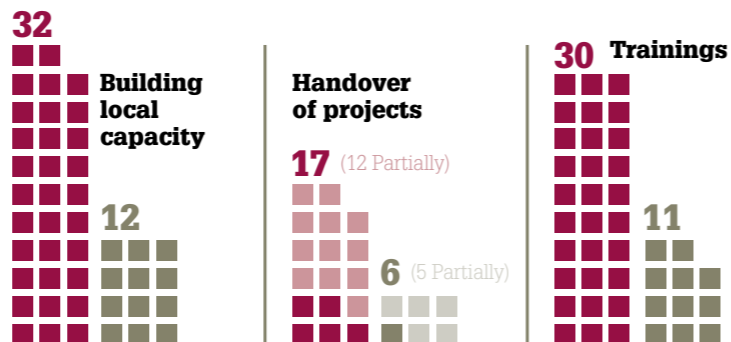
**6 MILLION SAM CASES TREATED ANNUALLY BY 2020**



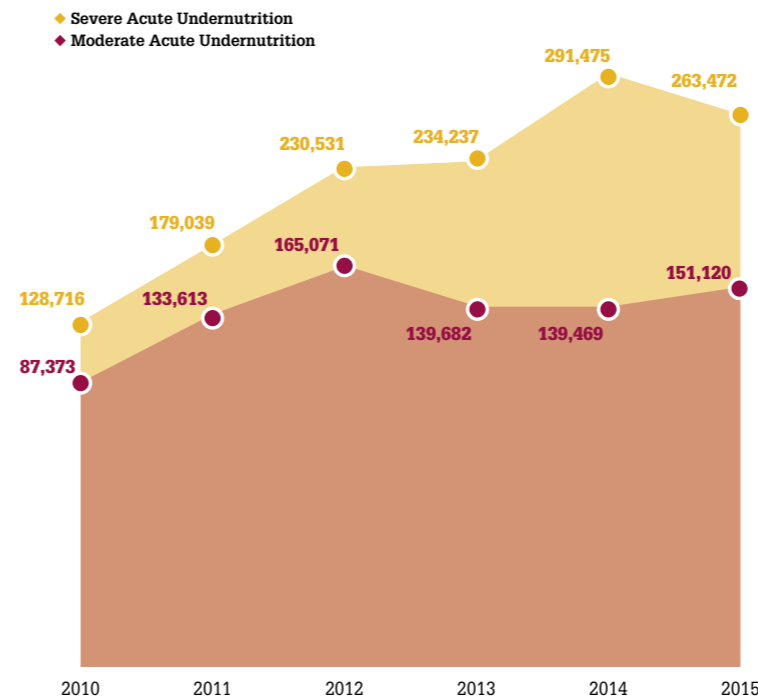
**CAPACITY BUILDING**

Action Against Hunger works to enhance the capacity of in-country partners to treat and prevent acute undernutrition, both through the national Health Ministries or through local NGOs. In 2015, a total of 33 country offices reported building the capacity of local partners and training more than 66,600 persons. Among these country offices, 23 reported partially or completely handing over programme services to these partners. Additionally, 24 country offices reported having direct input into the development or updating of national protocols.

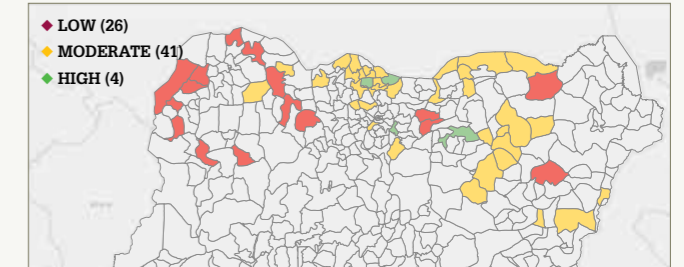
**NUMBER OF COUNTRY OFFICES**



**PERSONS TREATED FOR SEVERE AND MODERATE ACUTE UNDERNUTRITION (2010-2015)**



FOCUS ON  
**NIGERIA**



MAP OF 11 STATES IN NORTHERN NIGERIA SHOWING COVERAGE CLASSIFICATION BY LOCAL GOVERNMENT AREA

**SEVERE ACUTE UNDERNUTRITION IN NIGERIA**

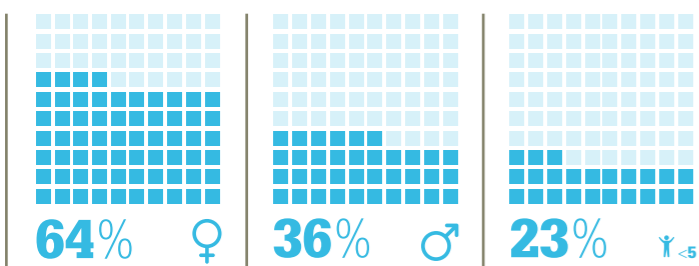
Action Against Hunger has been active in Nigeria since 2010, with a total of 207 staff currently employed. The country suffers from high levels of undernutrition, a critical problem affecting approximately 2 million children in Nigeria. These 2 million children represent an estimated 10% of the Severe Acute Malnutrition (SAM) under five population worldwide.

In 2015, Action Against Hunger released "SAM in Nigeria: Challenges, Lessons and the Road Ahead", a review of the coverage situation of treatment programmes - in the country highlighting barriers and opportunities for better access to nutrition programmes. The report found that, while SAM treatment services, fully integrated with Ministry of Health structures, are located in states with the greatest need, two out of every three SAM cases in Nigeria are still not accessing treatment. This is mainly due to awareness-related barriers about undernutrition, concerning Action Against Hunger's programmes and how they work.

Community Mobilisation Strategies have been found effective in increasing awareness among local population and to improve capacity for service-delivery among health staff. However, they must be combined with a holistic approach to improve accessibility by addressing other barriers faced by the local population. These include constraints caregivers are confronted with, problems with service delivery and geographical (distance) issues.

An additional challenge faced by nutrition programmes relates to improving SAM management information and data quality for cases which do access treatment. Action Against Hunger assessments have found that national figures on the matter have often been inaccurate. Furthermore, problems have arisen with community-based management of acute undernutrition service delivery quality resulting in children being discharged before they reach official criteria, in turn causing increases of relapsing cases.

For all these reasons, it has been found that a more effective SAM treatment in Nigeria will not be about increasing availability as much as improving quality of existing services. In order to achieve this, stakeholders should intensify evidence-based advocacy so that additional resources, staff capacity and information management are secured for community-based management of acute undernutrition in Nigeria.



# 462,868

TOTAL CARE PRACTICES & MENTAL HEALTH BENEFICIARIES

## FOCUS ON SOCIAL SAFETY NETS

## FOCUS ON GUATEMALA

### 01.2 ADDRESS THE UNDERLYING CAUSES OF ACUTE UNDERNUTRITION

Action Against Hunger takes great effort to tackle the underlying causes of acute undernutrition. In 2015, more than a third (36%) of Action Against Hunger's projects worldwide were multi-sectoral, a factor particularly important for the organisation's overall intervention approach. A further 82 projects (21%) included early warning or surveillance systems. In 2015, 3.4 million persons were reached through activities to prevent undernutrition.

Action Against Hunger recognises the importance of Mental Health and Care Practices, particularly addressing mothers and caretakers, to prevent undernutrition. In 2015, more than 460,000 persons were reached through these activities. An additional 3 million people were reached through Health programmes consisting of reproductive, maternal, newborn and child health activities. As in previous years, Action Against Hunger continues to support government health programmes in Nigeria, which accounts for almost 60% of overall health beneficiaries.

The organisation continued to work towards better emergency preparedness and nutrition surveillance systems ensuring better, proactive crisis responses. In 2015, 18 country offices reported having an emergency preparedness and response plan in place or under development. Additionally, 17 country offices ran or supported early warning or nutrition surveillance systems. Of these, 12 offices at least partially incorporated these systems in project and programme design.

In Burkina Faso's Tapoa province, a "listening mechanism"

has been active since 2010 monitoring 200 children between 6 and 24 months old to update nutrition and food security indicators every month. In Sierra Leone, Action Against Hunger has been working closely with health authorities to develop an epidemic surveillance system including Ebola and cholera prevention. A full description of a community-based nutrition surveillance project in Guatemala is available in a "Focus On" article for this chapter.

The SMART methodology is used across the Action Against Hunger country offices to estimate the prevalence of undernutrition and mortality. During 2015, more than half (26) of the organisation's country offices used this methodology. A total of 9 trainings were held during the year, reaching 152 persons.

Nutrition Causal Analyses allow the organisation to identify factors related with child undernutrition, their causes and to identify the most feasible ways to address them. In 2015, these analyses were conducted by Action Against Hunger's country offices in Afghanistan, Cambodia, Ethiopia, Mauritania and Somalia.

### EXPLORING ALTERNATIVE RESPONSES TO CHRONIC VULNERABILITY

A safety net programme provides timely, adequate, predictable, and guaranteed multi-year resource transfers to chronically vulnerable people, helping them meet adequate minimum survival requirements and protecting, and sometimes promoting, their livelihood assets and strategies.

Safety nets are one of the many tools of social protection, which cover a large scope of projects such as social insurance, minimum wage, unemployment benefits. Social safety nets are more frequently being considered as an adequate and sustainable response to chronic vulnerability. Safety nets allow to assist people in extreme vulnerability for which traditional livelihoods support programmes alone are not adequate, and to strengthen the impact of these livelihoods interventions by reducing vulnerability to shocks, and finally to strengthen prevention of undernutrition in the long run.<sup>3</sup>

The 2013 Lancet series on undernutrition highlighted the potential of social transfers to support sustainable reduction of undernutrition. Positive results from social protection programmes in Latin America and in Ethiopia, in parallel to the development of cash based interventions and related methodological and technological innovations, have raised the interest of governments and donors for this type of long-term response. Many countries are engaged in the establishment of social protection policies and programmes.

In the Sahelian context, one person out of six is food insecure and one child out of three is stunted, due to a chronic and seasonal vulnerability exacerbated by recurrent shocks. Humanitarian interventions, in the form of food assistance, have scaled up massively, particularly since the 2012 Sahel Drought Crisis. While this assistance had the merit to save millions of lives, it has become increasingly evident that a more sustainable response is required. In this regard, Action Against Hunger has engaged since 2013 in piloting nutrition-sensitive social safety nets in Burkina Faso (Mam'Out Programme) and in Nigeria (Child Development Grant Programme). Both target pregnant women and children under 2 aiming to sustain them economically, as well as to improve infant and young child feeding during the first 1000 days of life.

Action Against Hunger is currently partnering with CARE, the World Food Programme and the Haiti Ministry of Social Affairs and Labor (MAST) to implement the 4 year project, Kore Lavi, in four departments of Haiti. The Kore Lavi is building a national safety net programme based on food voucher transfers to 18,000 most economically vulnerable households, along with an undernutrition prevention component targeting pregnant and lactating women, as well as 180,000 children under 2 years of age.

In the coming years, Action Against Hunger will continue to develop experience, evidence, and expertise to better understand the challenges of the transition from short term food assistance to social protection. The organisation will also identify opportunities for a more inclusive dialogue, and ensure the integration of nutrition in social protection minimum packages. Action Against Hunger will aim at influencing social protection policies and programmes by using a nutrition lens, promoting the right of most vulnerable populations, and ensuring the inclusion of local civil society.

<sup>3</sup> Refer to Action Against Hunger, 2009, *Hunger Safety Nets. Their role in preventing food insecurity and malnutrition. Position Paper.*

### THE EXPERIENCE OF SENTINEL SITES IN GUATEMALA

Sentinel Sites are an initiative that Action Against Hunger started developing and piloting in Guatemala in 2009. Since then, these sites have become a national priority for the Secretariat for Food Security and Nutrition of the Government of Guatemala. Today, 136 sites have been set up throughout the country with the support of many local and international institutions.

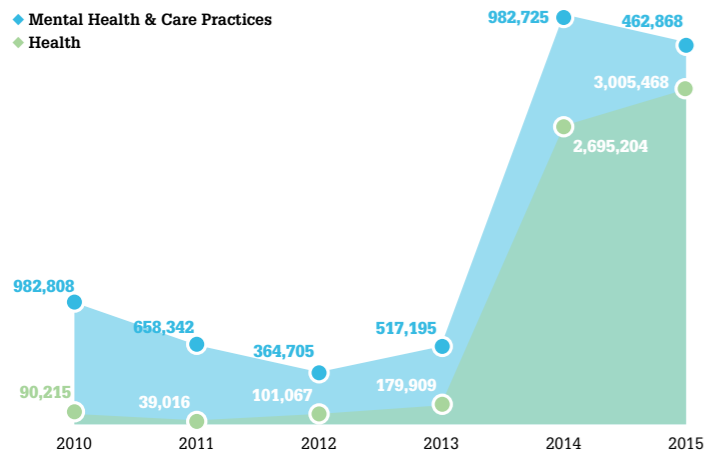
The objective of the Sentinel Sites is to generate relevant information from and for the population at risk of food insecurity. To achieve this, Action Against Hunger has identified several communities representative of larger populations with similar livelihoods. These communities are supported to collect information and generate "warning lights" allowing local and national decision-makers to anticipate and proactively respond to the deterioration of livelihoods, and even deaths, among vulnerable populations during food crises.

To create of a Sentinel Site, Action Against Hunger works with representatives of the selected communities chosen according to their responsibilities. Through trainings, these persons learn how to interpret food security and the community's nutrition situation by observing a series of key variables including the main sources of food and income, production activities, food prices, shortages, infant morbidity and rain levels. This set of information is completed with the local definition of levels for these variables, based on which a gradually worsening food situation can be identified. Each of these key indicators for food security are rated as expected or normal (green), alert (yellow) or emergency (red) level. Three summarising posters or dashboards are elaborated to reflect the information collected by the community sentinel site. These dashboards cover a seasonal calendar, a monitoring calendar and a list of key variables and their critical levels. Communities are also provided a booklet for monthly reporting, which serves to transmit the results to local governments and to the Government of Guatemala.

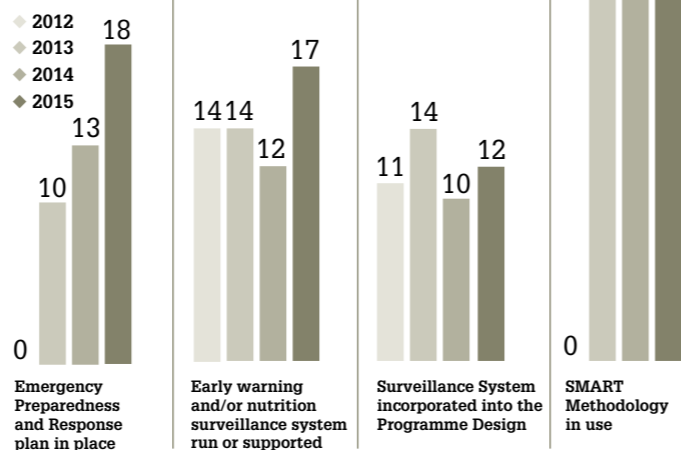
The sites are empowering communities by improving their awareness on issues that affect them. Information is produced and controlled by those who until now were merely the passive victims of drought, crop failure and faced the deterioration in the health and nutrition of children. This information then sets in motion response actions within the communities or through support from government agencies or development entities.

The information gathered through the Sentinel Sites is analysed by the Municipal Commission of Food Security and Nutrition, a crucial body for decision making and coordination of actions in response to an identified situation. The reports from the different sites in the country are then sent to national government and made publicly available through an on-line platform.

### TOTAL PERSONS REACHED BY PROGRAMMES ADDRESSING UNDERLYING CAUSES OF UNDERNUTRITION



### DESIGN OF NUTRITION PROGRAMMING





# GOAL 02

## RESPOND...

to and prevent humanitarian crises, address vulnerability & reinforce longer term population resilience to crises

# 28

TOTAL NUMBER OF EMERGENCIES TO WHICH ACTION AGAINST HUNGER RESPONDED IN 2015

# 103

RESPONSES OVER 5 YEARS (2011-2015)

### 02.1 IMPROVE ACTION AGAINST HUNGER'S CAPABILITY TO RESPOND RAPIDLY TO HUMANITARIAN CRISES

From catastrophic natural disasters, conflict and civil unrest, to spikes in undernutrition rates brought on by drought and floods, Action Against Hunger has in the past five years, consistently and effectively responded to 103 humanitarian emergencies around the world. In 2015 the organisation intervened in 28 such emergencies, 4 more than the previous year. This increasing number of crises globally, particularly addressing flows of refugees or internally displaced persons fleeing from conflict, highlights the importance of the organisation's capability to respond rapidly to humanitarian crises.



NUMBER OF EMERGENCIES TO WHICH THE ORGANISATION RESPONDED IN 2015

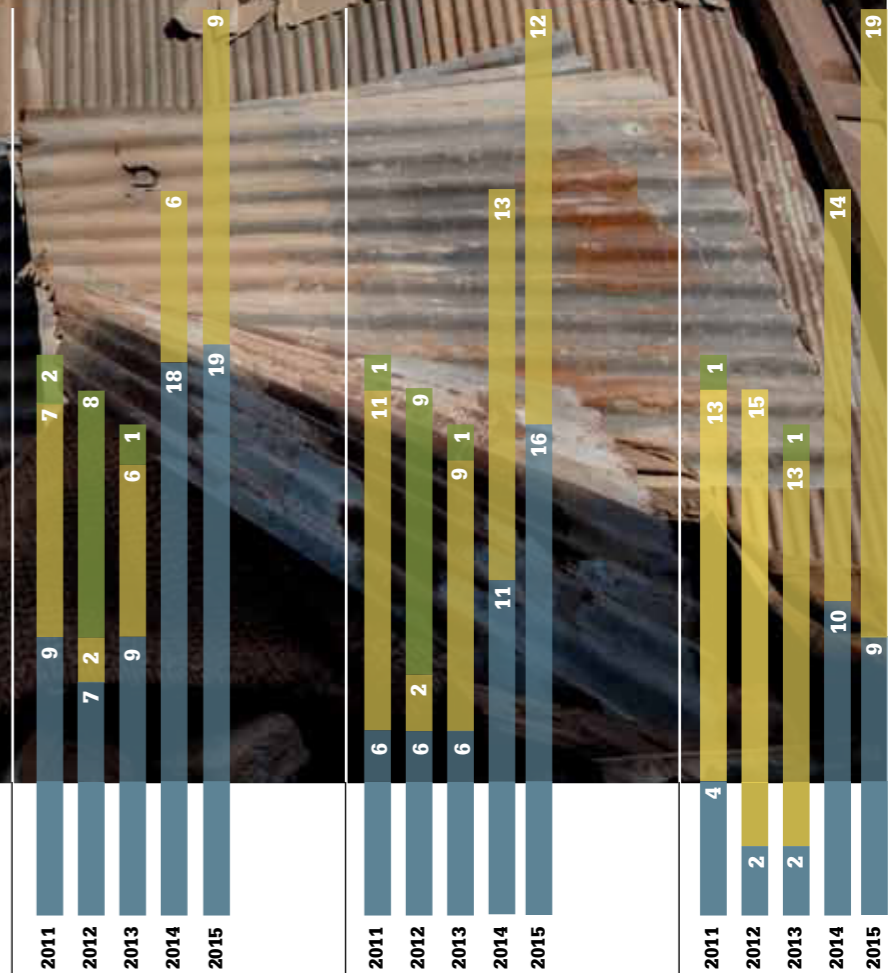


NO ◆  
YES ◆  
NO DATA ◆

NUMBER OF EMERGENCIES WHERE THE DECISION TO DEPLOY WAS MADE WITHIN 24 HOURS

NUMBER OF EMERGENCIES WHERE THE RESPONSE WAS DEPLOYED WITHIN 72 HOURS

NUMBER OF EMERGENCIES WHERE THE EMERGENCY POOL WAS DEPLOYED AS PART OF THE EMERGENCY RESPONSE



GOAL  
02



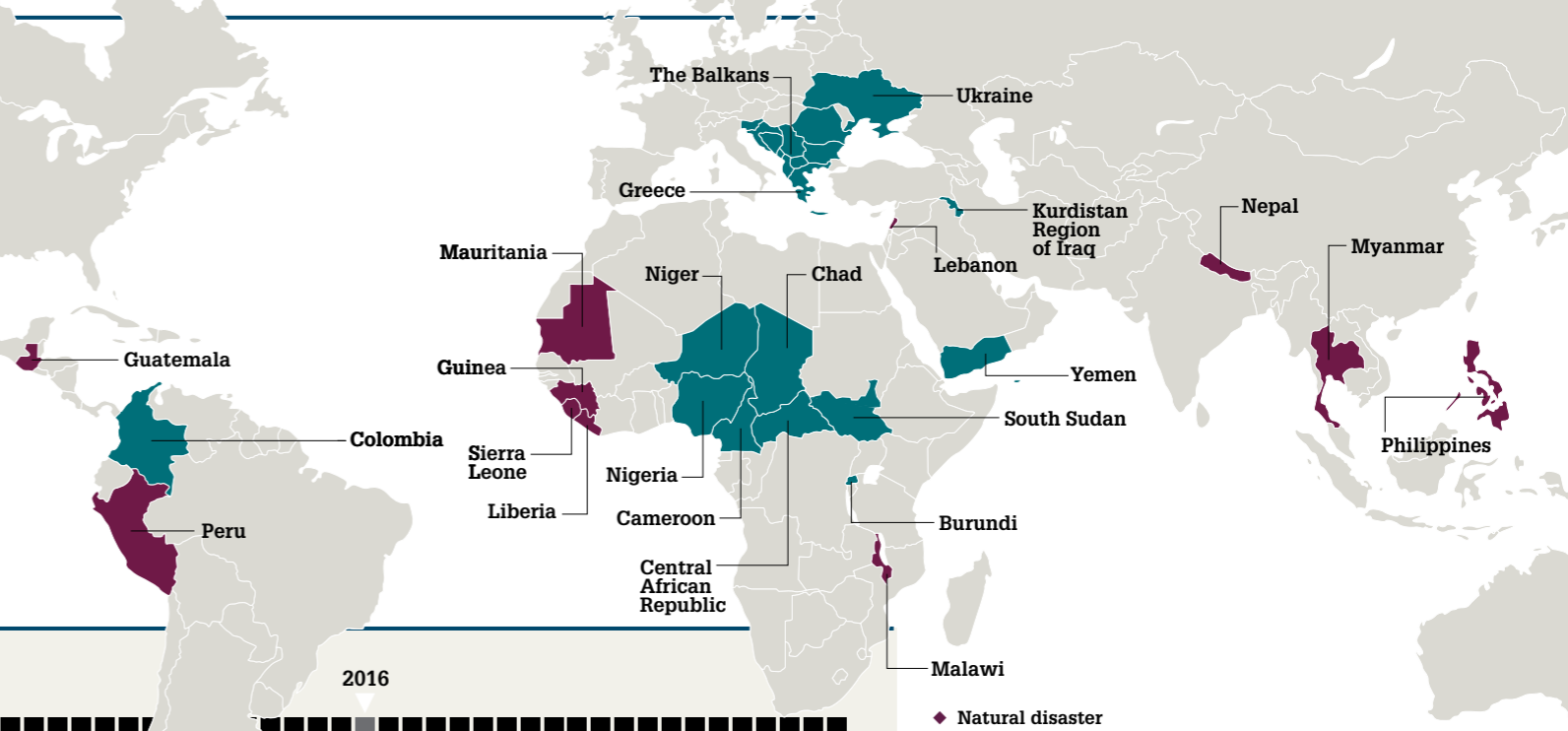
© Andrew Parsons

Action Against Hunger's emergency pool, a team of technical experts, managers and logistics staff able to mobilise in just a few hours, was deployed in response to 19 emergencies, in some cases within the same country. The remaining crises were addressed by the local country offices using existing capacity, including preparedness plans and emergency expertise.

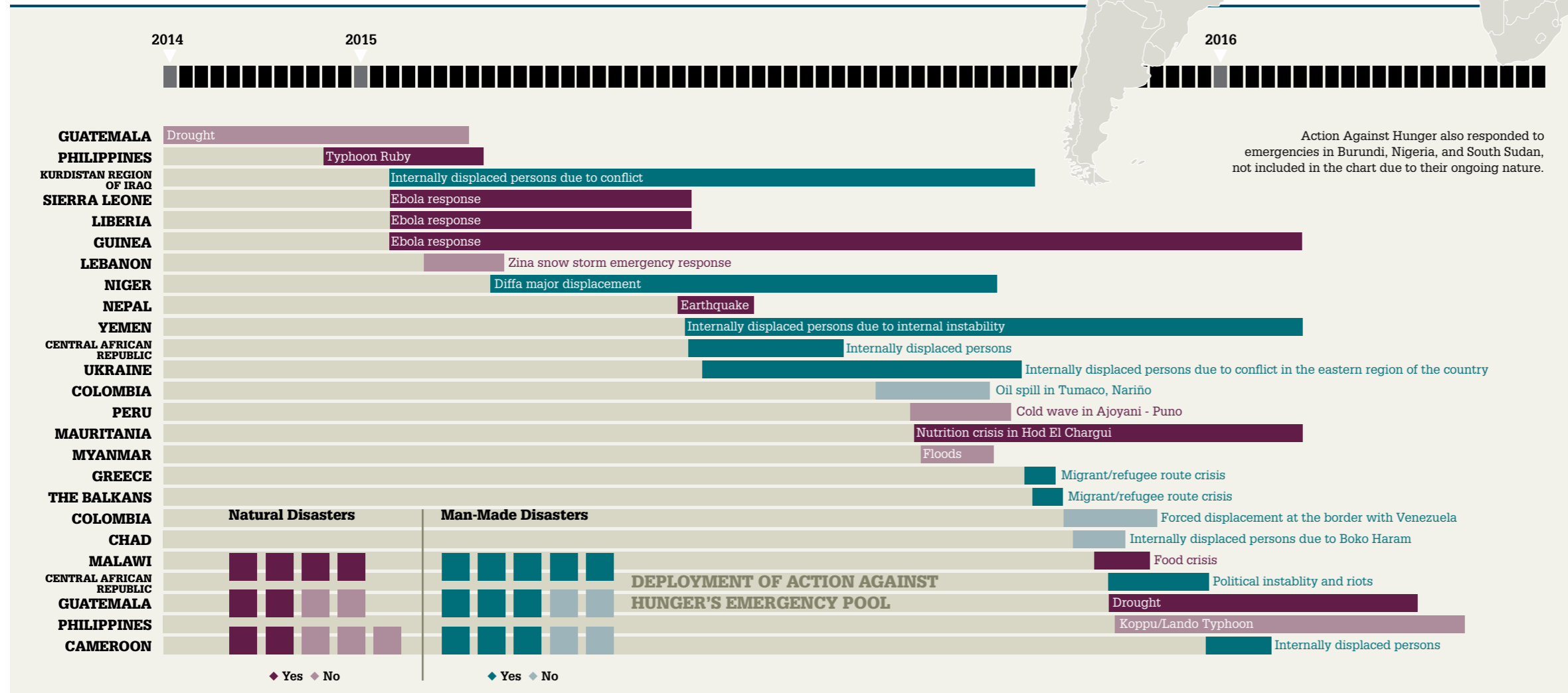
The criteria for a fast deployment is based on multiple factors during the analysis of each emergency: the size of the crisis, impact and life threats, and capacity of the country office or the national stakeholders to respond.

The decision to respond was made within 24 hours for a third of emergencies, while the actual deployment of a response within 72 hours was made in 12 cases.

Several emergencies in 2015 were linked to conflicts resulting in the internal and international displacement of large populations. The presence of Boko Haram in West and Central Africa, has contributed to the forcible displacement of persons in the Central African Republic, Chad, Niger and Cameroon. Conflicts and civil unrest due to political situation and internal strife in South Sudan and Nigeria are ongoing, and have been a factor on population displacements.



DURATION OF EMERGENCIES 2015



Action Against Hunger also responded to emergencies in Burundi, Nigeria, and South Sudan, not included in the chart due to their ongoing nature.

The refugee and migrant crisis affecting Europe, has been fuelled, among other reasons, by the Syrian crisis, and the destabilization of the Middle East by non-state armed actors such as ISIS.

Other emergencies to which Action Against Hunger responded in 2015, included the earthquake in Nepal; floods in Myanmar; typhoons in the Philippines; the continuation of the Ebola crisis in West Africa; and finally the exploratory missions of the European refugee and migrant route crisis in Greece and the Balkans which is ongoing.

Action Against Hunger is committed to improving the organisation's capability to respond to humanitarian emergencies. In 2015, emergency response coordinators from across the organisation gathered in New York City to develop and finalize an Emergency Categorisation Tool which has been adopted as a monthly update tool for emergency analysis and shared with the headquarters. The meeting was followed by a four day workshop in Paris.

The network has continued to mainstream and revise Emergency and Preparedness Response Plans in 2015. New approaches to these plans have been aligned with the Inter-Agency Standing Committee, the principal forum for coordination in the humanitarian sector.

GOAL  
02

FOCUS ON

**EMERGENCY  
MATRIX**

**STRENGTHENING ACTION AGAINST HUNGER'S  
EMERGENCY RESPONSES IN THE FACE OF  
MULTIPLE SIMULTANEOUS CRISES**

**A**ction Against Hunger and other humanitarian organisations are facing an increasing number of complex, acute, and protracted humanitarian emergencies. Emergencies are often regional (i.e. Syrian crisis) or present difficulties to access affected areas (i.e. Iraq). The organisation must cope with these new challenges, as well as human resources scarcity, and adapt to new emergency funding, especially through consortia.

In view of this context, Action Against Hunger has reviewed its emergency management system with the objective of improving response capacity significantly by empowering coordination and cooperation, and by reinforcing the organisation's emergency workforce.

As a first step the organisation has created a follow up system, the "Emergency Matrix", which provides a clear understanding of how Action Against Hunger's operations team sees and rates ongoing or emerging humanitarian emergencies. The analysis is fed by existing external and internal sources (including Action Against Hunger's country and regional offices, UN agencies, and formal and informal INGO emergency networks) in places where the organisation is already operating or considering to operate. The rating is done using 9 indicators divided into the following 3 sets:

- 01 **Situational analysis, covering scale, urgency and complexity of a crisis;**
- 02 **The environment in which the response is deployed or to be deployed with relation to national capacity, security, international community presence & response;**
- 03 **Relevance and feasibility of an Action Against Hunger emergency response with regards to the organisation's mandate and expertise, donor's positions, and risk management;**

This system of categorisation allows the appropriate deployment of resources for emergencies. Emergency teams are in charge of drafting the analysis of each indicator and share it within the group of operations leaders and managers (including Operations Directors, Regional Directors) and external partners. On this basis, once a month, emergencies are reprioritised to manage and reallocate resources accordingly.

**EXAMPLE: SCORING AS PER FEBRUARY 2016**

Country	Score	Country	Score
<b>South Sudan</b>	<b>27</b>	<b>Kurdistan Region of Iraq</b>	<b>22</b>
<b>Syria</b>	<b>27</b>	<b>Niger</b>	<b>22</b>
<b>Nigeria</b>	<b>25</b>	<b>Lebanon</b>	<b>21</b>
<b>Yemen</b>	<b>24</b>	<b>Cameroon</b>	<b>21</b>
<b>Ethiopia (Drought)</b>	<b>24</b>	<b>Somalia</b>	<b>21</b>
<b>DCR</b>	<b>23</b>		
<b>Libya</b>	<b>23</b>	<b>Afghanistan</b>	<b>20</b>
<b>Mali</b>	<b>23</b>	<b>Central African Republic</b>	<b>20</b>
<b>Ethiopia</b>	<b>22</b>	<b>Chad</b>	<b>20</b>

Each indicator can receive a maximum score of 3, and scoring for emergencies ranges from 0 to 27. Low priority crises (0 to 15) are classified as "green", medium priority (16-20) as "orange" and high priority (above 20) as "red".



© William Daniels

FOCUS ON

**EMERGENCY  
ASSESSMENT**

**GOOD ENOUGH HUMANITARIAN  
NEEDS ASSESSMENT**

**A**ction Against Hunger has been at the forefront in responding to humanitarian crises across the world. Due to the rapid pace of events during the early stages of an emergency and the need for a fast response, several dilemmas are encountered throughout the decision-making process. Often, there is a clear trade-off between reaching the best understanding of local needs (with the time and costs this implies) and the need to prepare a rapid response approach with limited information.

A so-called "good enough" approach is based on basic guidelines allowing to ensure a level of accountability towards the local affected population and to measure the programme's effects in emergency situations. To this regard, a reflection on the lessons learned from Action Against Hunger's responses to various emergencies in 2015 reemphasized the importance of undertaking joint needs assessments and integrating the needs' assessment and response strategies.

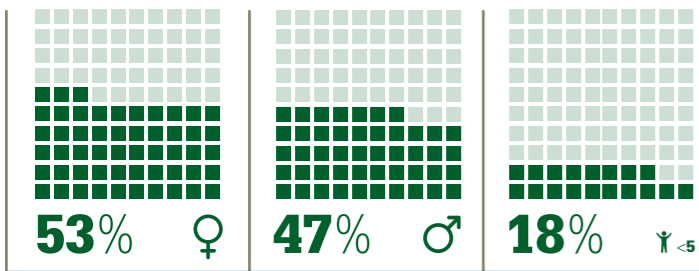
The Nepal earthquake response that took place in 2015 provides a good example of the dilemmas faced during the needs' assessment process and the suitability of an integrated strategy in the emergency response. In Nepal, it soon became clear that the affected population's needs outweighed the need for elaborate assessments and a multi-pronged strategy was devised in line with "The Good Enough Guide"<sup>2</sup>. Assessments were simplified focusing on the community level rather than the household level, and its implementation ran in parallel with aid distributions. The affected population was particularly appreciative of the latter as they experienced "assessment fatigue" during the initial stages of the response when many organisations, including Action Against Hunger, were coming with their own questionnaires to be filled in.

Another interesting needs' assessment was conducted in late 2015 in the Central African Republic, where Action Against Hunger was a partner of the Rapid Response Mechanism<sup>3</sup> coordinated by UNICEF. When conducting a rapid needs assessment as part of this mechanism, enough information must be provided to the humanitarian community in a short period of time after a shock has occurred. One of the keys to success has been the ability to use simple and standardized assessment forms across sectors of intervention and partner organisations. This approach allowed for the humanitarian community to be timely informed of local basic needs for the emergency response planning. Life-saving items and protection activities can be delivered and put in place as soon as possible.

In the coming years, Action Against Hunger will continue to develop experience, evidence, and expertise to better understand the challenges of the transition from short term food assistance to social protection. The organisation will also identify opportunities for a more inclusive dialogue, and ensure the integration of nutrition in social protection minimum packages. Action Against Hunger will aim at influencing social protection policies and programmes by using a nutrition lens, promoting the right of most vulnerable populations, and ensuring the inclusion of local civil society.

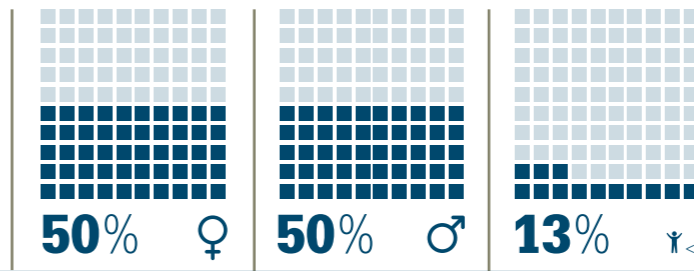
<sup>2</sup> The Good Enough Guide (ALNAP, 2014) is aimed at field staff conducting needs assessments in the immediate aftermath of a disaster. The guide suggests that needs assessments should be wide enough to reflect the situation but narrow enough to be manageable, as well as rapid and simple rather than ambitious/lengthy and complex.

<sup>3</sup> The Rapid Response Mechanism is used in responding to the challenges of aid provision in complex crisis often characterized by sudden and repetitive displacements of civilians due to unpredictable security incidents. This type of response has been carried out so far in the Democratic Republic of the Congo, Central African Republic, South Sudan and Iraq.



# 1,909,186

**TOTAL FOOD SECURITY & LIVELIHOODS BENEFICIARIES**



# 7,889,828

**TOTAL WATER, SANITATION & HYGIENE BENEFICIARIES**

## 02.2 INCREASE ACTION AGAINST HUNGER'S SUPPORT TO THE AFFECTED POPULATIONS & MORE PARTICULARLY TO THE MOST VULNERABLE INDIVIDUALS

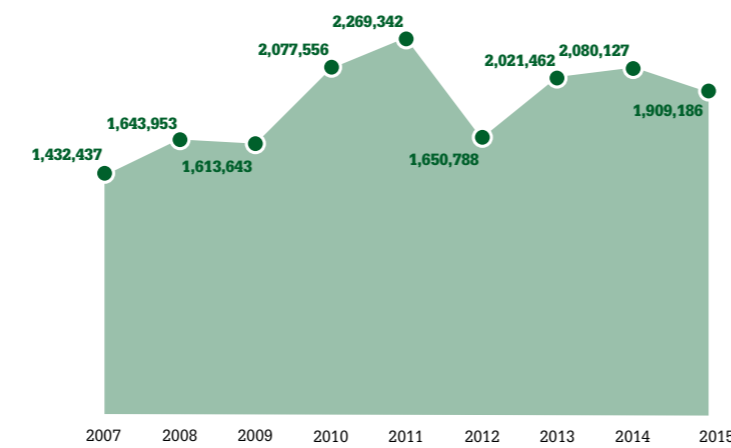
In 2015, Action Against Hunger supported over 1.9 million people through Food Security and Livelihoods interventions, as well as over 7.8 million people through Water, Sanitation and Hygiene interventions across 44 country offices.

Livelihoods activities, and the value of transfers distributed in 2015 in 32 countries amounted to over €82.3 million, with two countries, Lebanon (€44,130,768) and the Kurdistan Region of Iraq (€18,504,080) making up 76% of the total. Overall, over

The number people that benefited from Food Security and Livelihoods activities decreased by 171,000 people (8%), while Water, Sanitation and Hygiene beneficiaries increased by 1.3 million (20%) from the previous year.

In 2015, six countries reported having more than 100,000 people that benefited from Food Security and Livelihoods activities. In Nigeria, the number of people that benefited from these interventions rose by over 85,000 from the previous year due to the increased needs of the populations as a consequence of Boko Haram's activities in the region. Both the Kurdistan Region of Iraq and Yemen had rising beneficiary numbers due to increased needs in the areas caused by ongoing conflict.

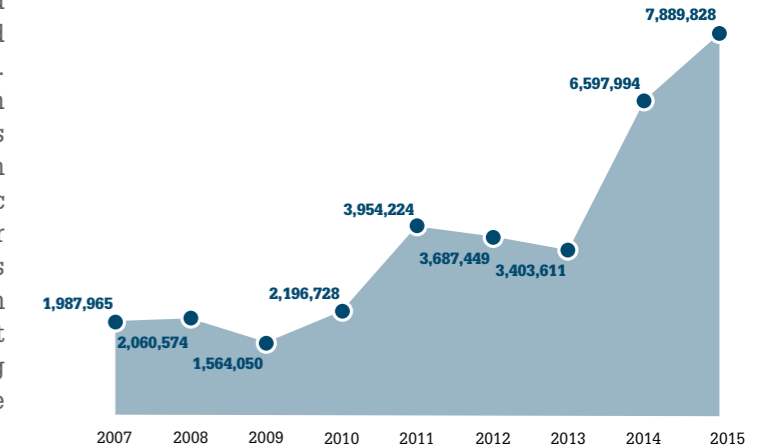
Cash transfers play an important part in Food Security and



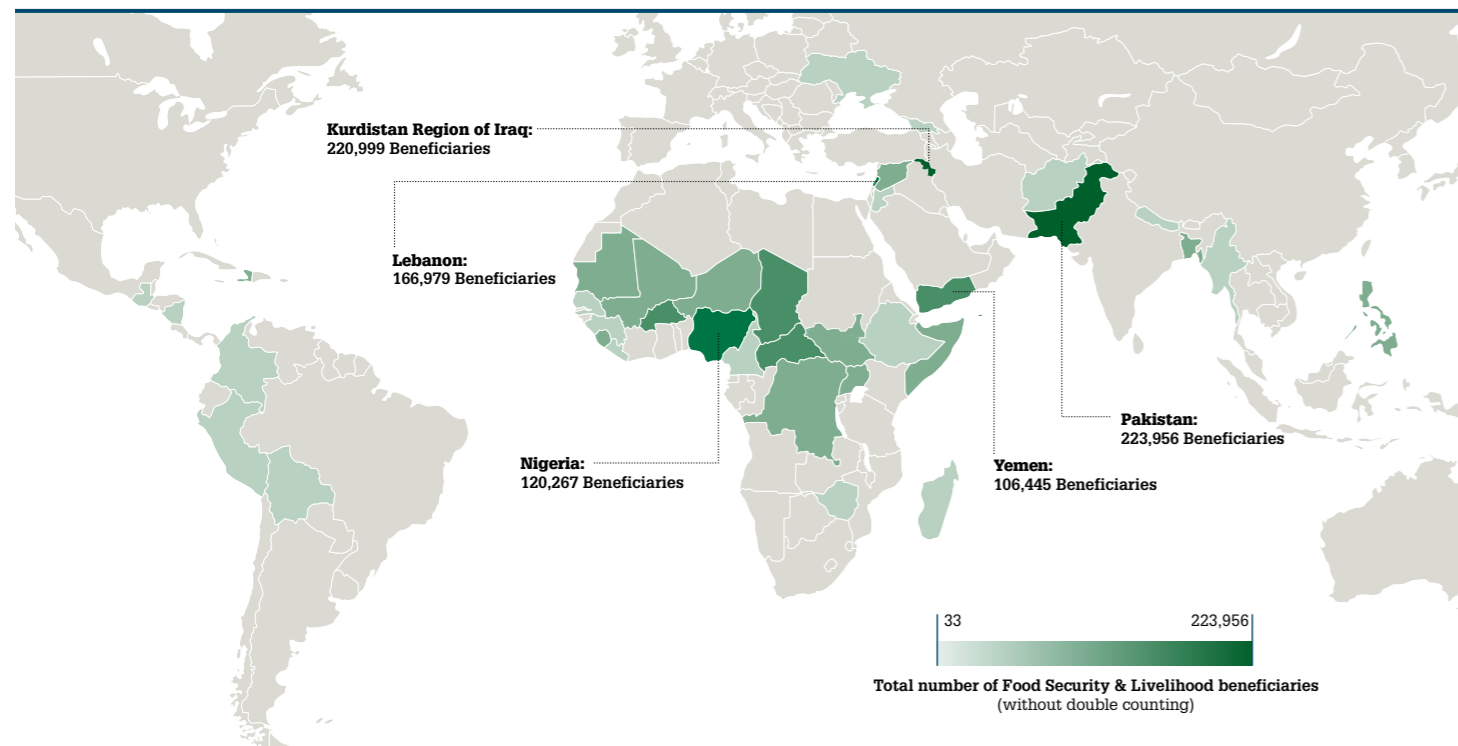
917,000 people benefited from these transfers. Additionally, more than 288,000 people benefited from income generating activities and livestock, fishery, and veterinary interventions. Moreover, Action Against Hunger built 640 community infrastructures (water dams, seedbanks, etc.); conducted 292 Food Security and Livelihoods contextual analyses, assessments and surveillance reports; as well as training over 193,000 people through programmes in 33 countries.

The number of countries where the organisation reached more than 200,000 persons through Water, Sanitation and Hygiene interventions increased from last year from 7 to 10. Mali saw an increase of over 550,000 beneficiaries between 2014 and 2015, due to the Ebola crisis response programmes which were conducted in Kita and Bamako, mainly through hygiene training programmes and the support of 50 Public Health structures. Similarly, Côte d'Ivoire rose to over 840,000 beneficiaries due to large sensitisation campaigns for the prevention of Ebola in collaboration with local health authorities. Syria continues to be the country with the most Water, Sanitation and Hygiene beneficiaries, supporting 1,963,602 persons affected by the ongoing conflict in the country.

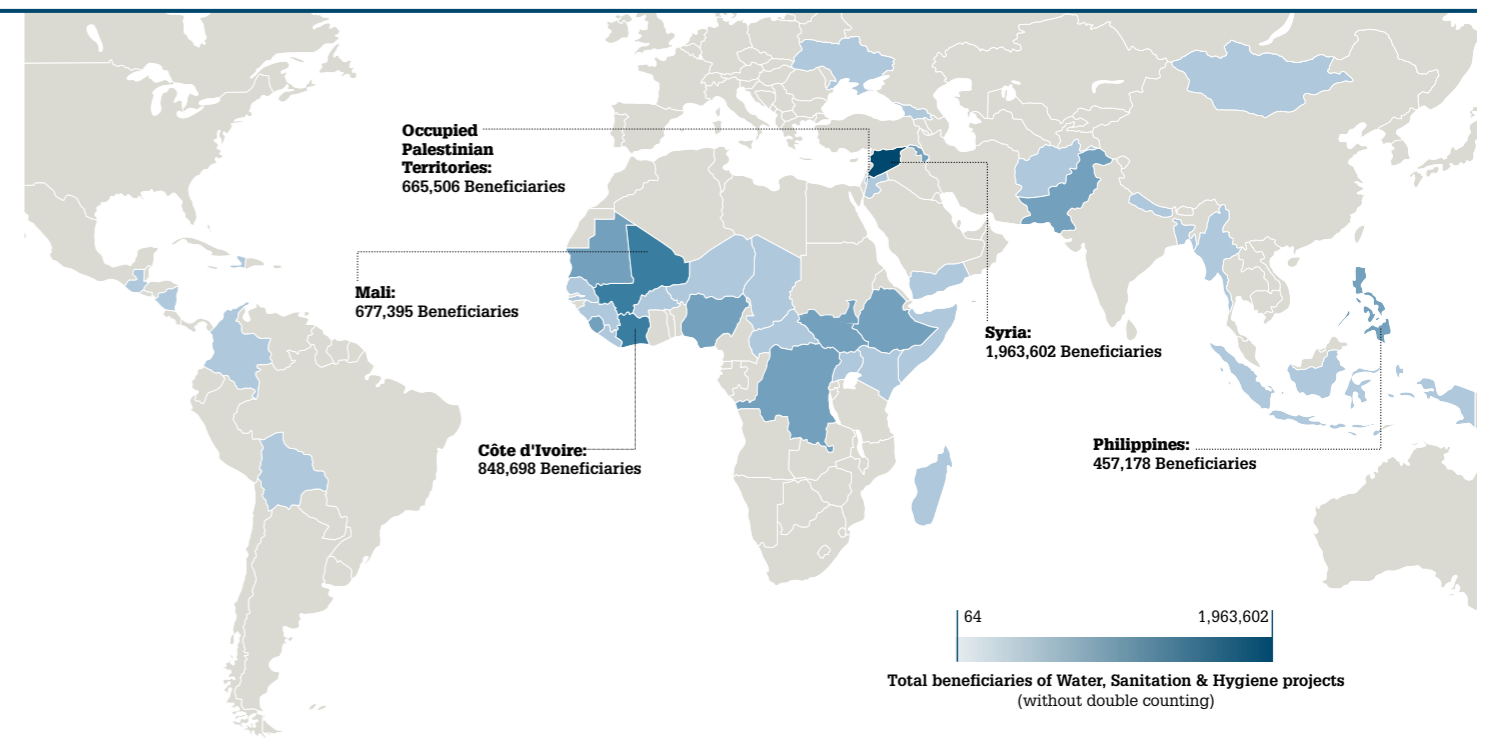
Water, Sanitation and Hygiene activities included the improvement of 23,636 water points (up from 17,665 in 2014). Activities also included the construction of over 61,000 latrines (up from 45,512 in 2014) in schools, health centres, and other places. Finally, Action Against Hunger distributed more than 502,000 hygiene kits and delivered more than 1 million m<sup>3</sup> of water to people in need.

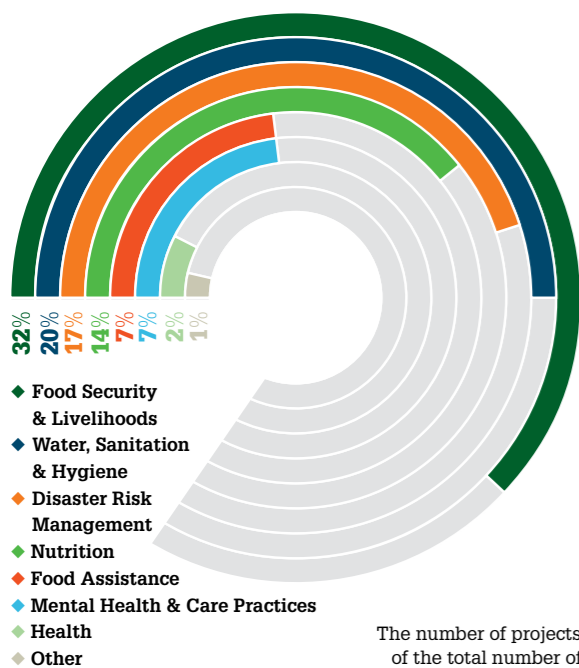


### FOOD SECURITY & LIVELIHOODS BENEFICIARIES



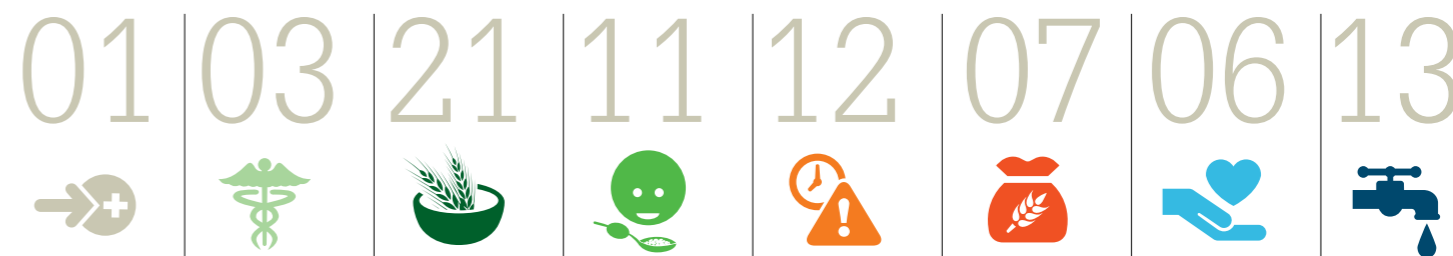
### WATER, SANITATION & HYGIENE BENEFICIARIES





The number of projects as a percentage of the total number of projects in 2015

**DISASTER RISK MANAGEMENT BY SECTOR 2015**



OTHER	HEALTH	FOOD SECURITY & LIVELIHOODS	NUTRITION	DISASTER RISK MANAGEMENT	FOOD ASSISTANCE	MENTAL HEALTH & CARE PRACTICES	WATER, SANITATION & HYGIENE
Nicaragua	Bolivia Indonesia Peru	Bangladesh Bolivia Cambodia Central African Republic Ethiopia Guatemala Guinea Indonesia Madagascar Mali Nepal Nicaragua Niger Occupied Palestinian Territories Pakistan Peru Philippines Senegal Somalia South Sudan Syria	Bangladesh Cambodia Democratic Republic of the Congo Ethiopia Guatemala Indonesia Kenya Mali Mauritania Nepal Philippines	Bangladesh Bolivia Cambodia Ethiopia Guatemala Mali Nicaragua Occupied Palestinian Territories Pakistan Peru Philippines Somalia	Bangladesh Guinea Mali Nicaragua Pakistan Senegal Uganda	Bolivia Ethiopia Indonesia Madagascar Mali Philippines	Bolivia Cambodia Ethiopia Haiti Indonesia Madagascar Mali Nicaragua Occupied Palestinian Territories Palestinian Territories Pakistan Philippines Syria

**COUNTRIES REPORTING DRM MAINSTREAMING BY SECTOR 2015**

**DISASTER RISK MANAGEMENT**

Disaster Risk Management activities are aimed at reducing, accepting or avoiding disaster risk for vulnerable communities. Action Against Hunger advocates for integrated Disaster Risk Management at community level that expands on the humanitarian mandate to help solve world hunger, poverty, and vulnerability to disaster.

In 2015, 27 country offices (57%) reported Disaster Risk Management activities, implemented as stand-alone Disaster Risk Management projects (2), mainstreamed projects (15), or a mixture of both (7).

A total of 152 projects involved Disaster Risk Management as a mainstreamed component in 2015. In Bangladesh, Action Against Hunger implements integrated projects in order to build resilience to disaster and improve nutrition security of vulnerable populations, especially in the coastal belt of Barguna, where populations are vulnerable to cyclones and tropical storms. An intervention programme for resilience and drought preparedness in Nicaragua came to an end in 2015. The work done during this period has enabled the build-up of valuable experience now being systematized and disseminated.

**COUNTRIES IMPLEMENTING DISASTER RISK MANAGEMENT**

**Mainstreamed Projects**

- BURKINA FASO
- CAMBODIA
- CENTRAL AFRICAN REPUBLIC
- CHAD
- DEMOCRATIC REPUBLIC OF THE CONGO
- ETHIOPIA
- GUATEMALA
- KENYA
- MADAGASCAR
- NEPAL
- SENEGAL
- SOUTH SUDAN
- SYRIA
- SOMALIA
- UGANDA

**Stand-Alone Projects**

- MYANMAR
- PERU

**Mixture of Both**

- BANGLADESH
- HAITI
- MALI
- NICARAGUA
- OCCUPIED PALESTINIAN TERRITORIES
- PAKISTAN
- PHILIPPINES

## FOCUS ON

MICRO  
INSURANCEMICRO INSURANCES  
IN THE PHILIPPINES

**L**ow-income households are the most exposed to risks and the least protected against their consequences. The impact of adverse events significantly affects income and consumption in the absence of savings, often forcing households to make harsh choices, such as reducing food consumption, withdrawing children from school or selling productive assets. This jeopardizes their economic and human development, leaving them stuck in a poverty trap as they become reluctant to engage in higher return activities due to the higher risk involved.

As a pilot initiative Action Against Hunger Philippines promoted micro-insurance in its livelihoods project for typhoon-affected households due to its large potential role towards resilience in the face of a disaster. The project used cash transfer programming as the backbone of its activities, facilitating the creation of social protection mechanisms together with the provision of financial assistance. The initiative was anchored on the general micro-insurance principles, but with some modifications to fit to the local context in order to make it more accessible, affordable, simple and flexible to reach low-income households.

In particular, in this project the micro insurance plan provided benefits such as death benefits, permanent disablement or loss of use of a body part, actual medical expenses or emergency cash assistance, among others. Some of the project activities included the identification and monitoring of beneficiaries, making sure beneficiaries were thoroughly oriented on how to process claims on their own. Before the project ended, coordination, monitoring and follow up was handed over to the Cebuana Lhuillier insurer, who had previously collaborated with Action Against Hunger, monitoring the number of claimants from the beneficiary plan. By the time the project ended on January 2015, a total of 306 project beneficiary families were enrolled in the micro-insurance programme promoted in targeted areas. By May 2015 a total of 59 claims had been registered and 21 families paid out.

By introducing micro-insurance as a complement to cash transfer programming, the project has contributed to an increased insurance awareness, financial literacy and poverty reduction among beneficiaries. Thus, the recent experience in the Philippines strongly suggests the feasibility of the implementation of a similar initiative in the future in emergency situations, as well as the relevance to systematically promote micro-insurance as an enriched social approach in Action Against Hunger interventions.



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## FOCUS ON

## RESILIENCE

RESILIENCE INTEGRATED INTO ACTION  
AGAINST HUNGER'S PROGRAMMES

**A**ction Against Hunger strives to incorporate Disaster Risk Reduction as well as Climate Change Adaptation into resilience and nutrition security approaches, to support individuals and communities to resist external shocks.

This is notably done by supporting agriculture through programmes, which aim to increase populations' resilience to food crises and prevent undernutrition during and after emergency interventions. Additionally communities' capacities are built to minimize the adverse impacts of climate change. This support aims to improve food security and livelihoods in rural and urban areas, taking into account the needs of populations affected by chronic or seasonal undernutrition after a temporary shock. It provides answers for emergency situations and proposes ways to push towards a sustainable and profitable agriculture allowing farmers to maintain their activity.<sup>4</sup>

Action Against Hunger has developed a multi sector seasonal calendar tool to have a better understanding of nutrition insecurity and the fluctuations of severe acute undernutrition in a given area of operation. This tool is essential for planning seasonally sensitive interventions, enabling stakeholders to identify the times of year in which particular risks are heightened, and to plan accordingly.

In Mali and Niger, the organisation has been working with national governments to develop remote sensing tools monitoring both surface water and biomass. When combined with analysis of movement of pastoral populations, Action Against Hunger's teams are able to assess vulnerability at a regional scale and make an important contribution to early warning in the region.

Households face great difficulties to overcome seasonal income fluctuation without cash. Promoting off-season strategies to boost household food and income generation during periods of scarcity, the organisation has set up health gardens in which women grow vegetables in Burkina Faso, Niger and Mauritania. Whilst the primary aim of these health gardens is to boost dietary diversity (particularly of children under 5 years old), participants are also able to generate some additional income in the off-season.

Action Against Hunger is part of a consortium of organisations implementing the global programme "Building Resilience and Adaptation to Climate Extremes and Disasters". This programme aims to support the most at-risk populations, especially women and children, to improve their resilience to shocks and stresses. In Burkina Faso, the programme, funded by United Kingdom Department for International Development, works to improve livelihoods through agricultural capacity building activities and disseminates weather forecasts and related climate information in local languages using text and voice messages and radio. Improved information allows people to anticipate negative effects from climate change.

Moreover, the organisation has implemented Disaster Risk Reduction projects in ten villages in Bangladesh, establishing a Village Disaster Management Committee and a Women's Committee in each. The project targeted over 4,000 households, most of which composed by poor women or headed by women highly exposed to risks. Success in the programme was apparent when women were able to protect their lives and livelihoods from a cyclone shortly after the programme's end. This became the organisation's benchmark for defining 'resilient communities'.

<sup>4</sup> From ACF strategy for agricultural interventions, 2015.

# GOAL 03

## DEVELOP...

partnerships with local, national & international stakeholders to increase the number of beneficiaries & promote sustainability

# 754

**FORMAL  
PARTNERSHIPS  
IN PLACE**

### 03.1 INCREASE PARTNERSHIP WITH GOVERNMENTS AIMED AT INCREASING COVERAGE AND SUSTAINABILITY

Action Against Hunger's network of partners has continued to grow exponentially in 2015, with formal partnerships totalling a record 754. Five countries made up a substantial share of these partnerships: Mali (88), Bolivia (51), Pakistan (40), Burkina Faso (38), and the Philippines (36).

A continued focus on strengthening partnerships with national and local governments as well as ministries and public agencies, saw the number of this type of partnerships rise from 269 to 291. The number of country programmes that partnered with government stakeholders remained on par with last year at 38, of which 26 involved working with local government and institutions.



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### 03.2 INCREASE PARTNERSHIP WITH NGOS AND LOCAL CIVIL SOCIETY ORGANISATIONS AIMED AT INCREASING ACCESS, SUSTAINABILITY AND FUNDING

Of the 43 countries having reported working with partners in 2015, 33 reported partnering with national or local NGOs, while 32 did so with international NGOs. Partnerships with NGOs remained in the spotlight with national NGOs accounting for 18% of total partnerships, compared to 21% for international NGOs. The number of partnerships with international or national and local NGOs, is on average 4.4 partnerships per country. This past year, 91 projects were implemented with international NGOs in 30 countries, while 82 projects in 31 countries were implemented with national or local NGOs.

Since 2011, Action Against Hunger's partnership with local NGO "Support to Life" has been crucial in responding to the influx of Syrian refugees into Turkey and neighbouring countries due to the conflict in Syria. The partnership was initiated because of the need to operate within both government and opposition controlled areas with no visibility to the organisation. Through multiple projects, Support to Life acted as the project lead, while Action Against Hunger provided technical support. Partnerships such as this one ensure that Action Against Hunger is able to reach all those affected by conflicts and disasters alike, while reinforcing the capacity of local actors.

#### PARTNERSHIPS BY TYPE



GOAL  
03

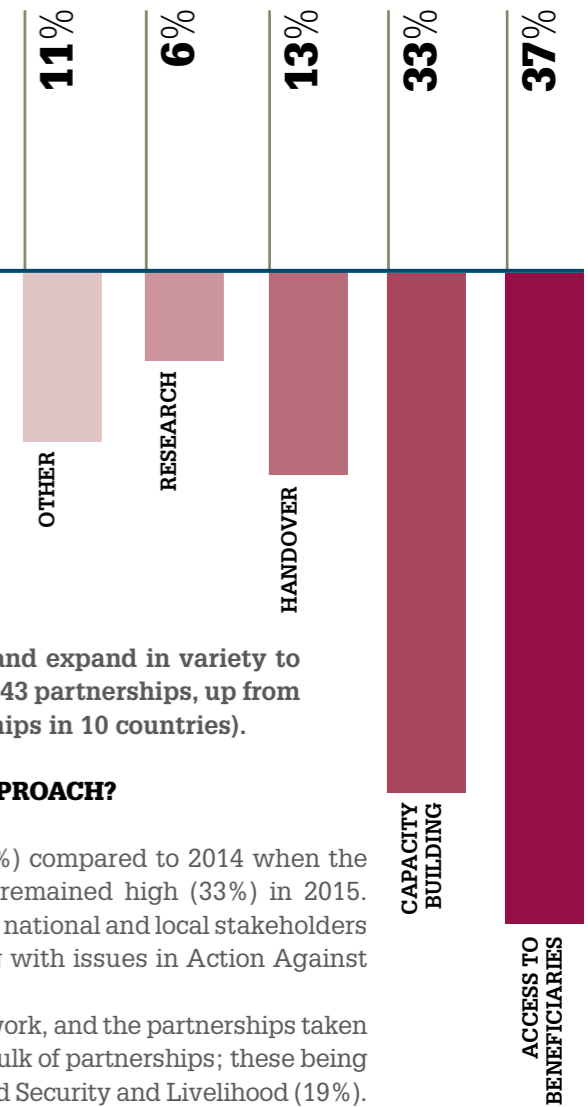
26

CONSORTIA WHERE  
ACTION AGAINST  
HUNGER IS THE LEAD

25

HUMANITARIAN COORDINATION  
INITIATIVES WHERE ACTION  
AGAINST HUNGER IS THE LEAD

PARTNERSHIPS BY PURPOSE



**03.3 PLAY A PROMINENT ROLE WITHIN CONSORTIA & HUMANITARIAN COORDINATION MECHANISMS**

(HQ, national and local levels)

In 2015, Action Against Hunger's participation in international consortia experienced a sharp increase from the previous year, from 52 in 25 countries to 90 in 34 countries. The organisation was the lead agency for 26 of these consortia again a substantial rise from 2014 where the organisation was the lead for consortia in only 13 consortia.



© Sylvain Cherkaoui

In 2015, Action Against Hunger was active in 202 humanitarian coordination initiatives across 39 countries. Action Against Hunger was the lead agency for 25 humanitarian coordination initiatives in the following 18 countries: Bangladesh, Burkina Faso, Cameroon, Democratic Republic of Congo, Ethiopia, Guatemala, Guinea, Kurdistan Region of Iraq, Lebanon, Madagascar, Mali, Mauritania, Myanmar, Nepal, Occupied Palestinian Territories, Philippines, Senegal, and Syria.

**03.4 BECOME AN ESTABLISHED NGO PARTNER OF VARIOUS NON-NGOS, GOVERNMENTS & INTERNATIONAL STAKEHOLDER INITIATIVES**

(e.g. Academia, think-tanks, scientific institutions and private sector organisations)

Engagement with stakeholders on the ground has continued to rise and expand in variety to include more academic institutions, think tanks, and scientific bodies (43 partnerships, up from 39 in 2014). Private sector engagement is also on the rise (74 partnerships in 10 countries).

**WHY DOES ACTION AGAINST HUNGER SUPPORT A PARTNERED APPROACH?**

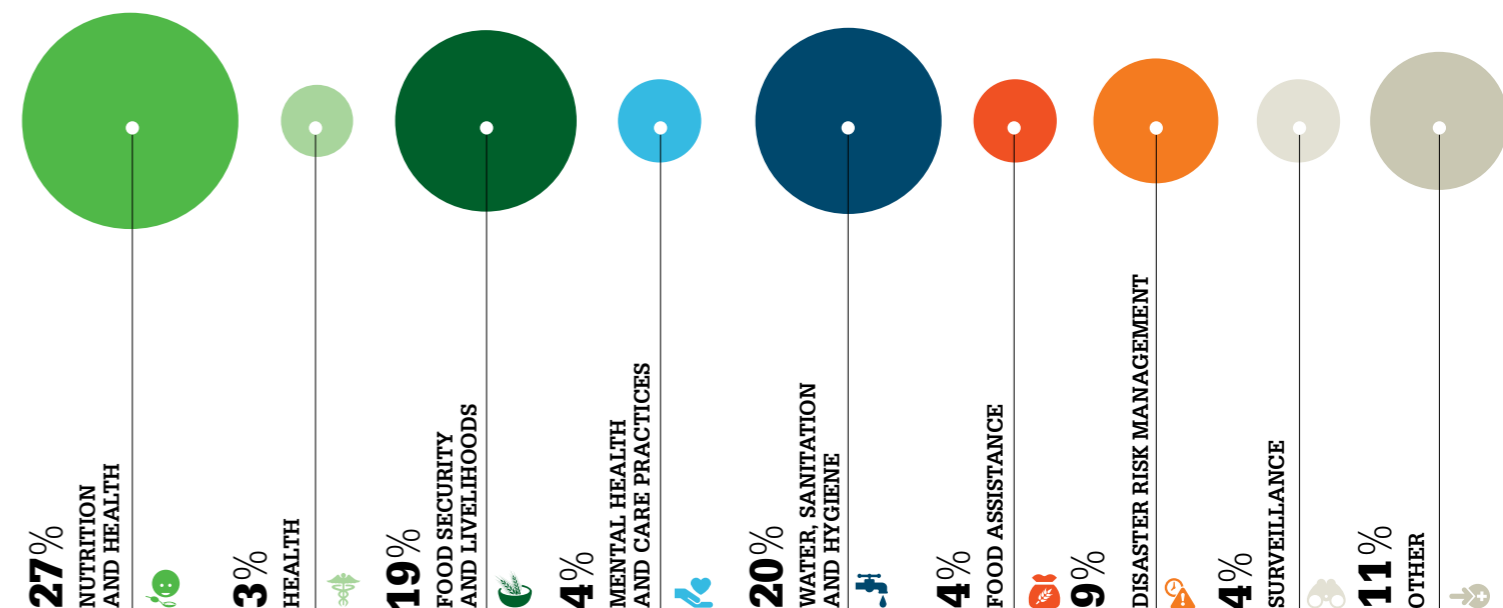
In 2015, the main focus of partnerships was access to beneficiaries (37%) compared to 2014 when the main focus was capacity building. Partnerships for capacity building remained high (33%) in 2015. Meanwhile, 13% of partnerships looked at the transition of programmes to national and local stakeholders through hand-over programmes (97 projects). Research projects, dealing with issues in Action Against Hunger sectors of intervention, accounted for 6% of partnerships.

Working across sectors is an important part of Action Against Hunger's work, and the partnerships taken on in countries of operations reflect this. Three main sectors make up the bulk of partnerships; these being Nutrition and Health (27%), Water, Sanitation, and Hygiene (20%), and Food Security and Livelihood (19%).

	2013	2014	2015
GOVERNMENTS, MINISTRIES & PUBLIC AGENCIES	30	39	38
INTERNATIONAL NGO	27	27	32
NATIONAL OR LOCAL NGO	29	27	34
ACADEMIC, THINK TANKS & SCIENTIFIC BODIES (NATIONAL OR INTERNATIONAL)	18	17	18
PRIVATE SECTOR	8	7	10
OTHER	4	3	10

COUNTRY PROGRAMMES BY TYPE OF PARTNER

PARTNERSHIPS BY SECTOR



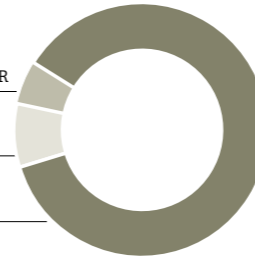


# GOAL 04

## BUILD...

Action Against Hunger's capacity to ensure effective & efficient response to humanitarian crisis

5.3%  
MANAGEMENT & OTHER  
8.3%  
FUNDRAISING  
86.4%  
PROGRAMMING



# €295.9m

ACTION AGAINST HUNGER'S  
BUDGET IN 2015

# +12%

TOTAL BUDGET  
INCREASE

### 04.1 DEVELOP GREATER FINANCIAL SECURITY AND INDEPENDENCE AND SUFFICIENT REVENUE TO ALLOW ACTION AGAINST HUNGER TO INCREASE ITS IMPACT ON THE ERADICATION OF HUNGER AND UNDERNUTRITION

In 2015 Action Against Hunger's total financial activity totalled €295,922,720, growing by 12% compared to 2014. The organisation's commitment to achieving a network-wide budget of €226 million was met in 2014 and surpassed by €69.9 million (31%) in 2015. This consolidates a significant advance towards financial independence and security.

Achieving a public-private revenue split of 65%-35% remains a challenge which the organisation continues to engage. In 2015, public funds remains Action Against Hunger's most important source of revenue, constituting 74% of the total, and this share has been rising since 2013 due mainly to a faster increase in public funding compared to private one. While total private support increased by 3% during the course of the year (from €74.3 to €76.3 million), public restricted funding grew by 16% (from €188.8 to €219.5 million). Private restricted funding increased slightly compared to 2014 (from €10.7 to almost €12 million) and now represents 15.6% of the total private funding.

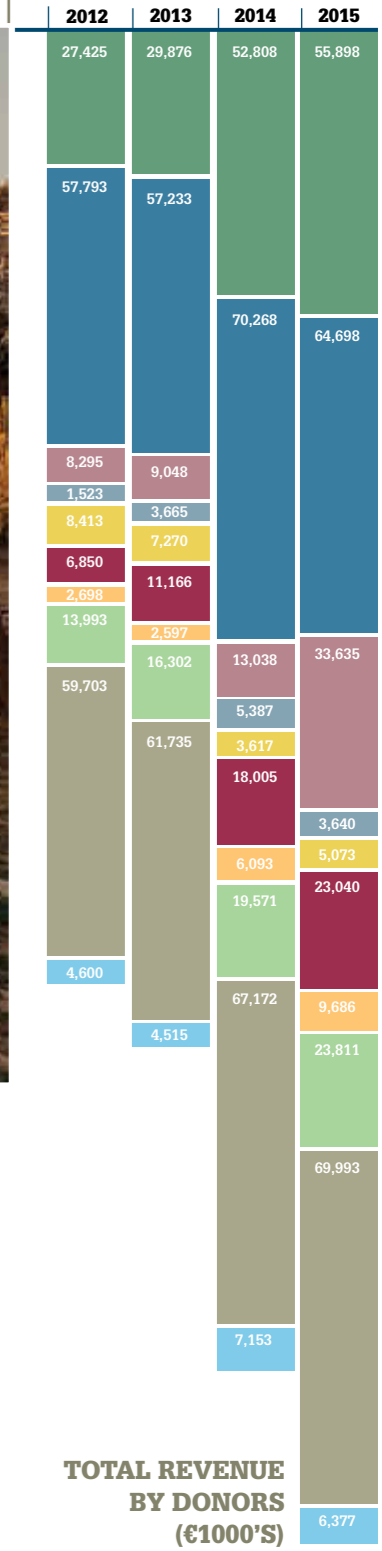
Diversifying funding sources requires a broad portfolio of donors. In 2015 a total of 516,872 individual active donors contributed to the network's revenue – a slight decrease from 2014. For the last 5 years three major types of donors have consistently represented a major share of funding, with varying degrees of contributions: the United Nations (which increased from 12% in 2011 to 19% in 2015), the European Community (maintaining an average of 26% between 2011 and 2015) and private unrestricted grants (decreasing from 33% in 2011 to 24% in 2015). Moreover, in 2015 funds coming from United States public donors increased to 11% of the total revenue (5% in 2014).

Since 2010 the relative weight of the major types of expenses has remained steady across the last five years. In 2015, expenses were directed 86.4% towards programming, 8.3% to communication fundraising and 5.3% to management and general expenses.

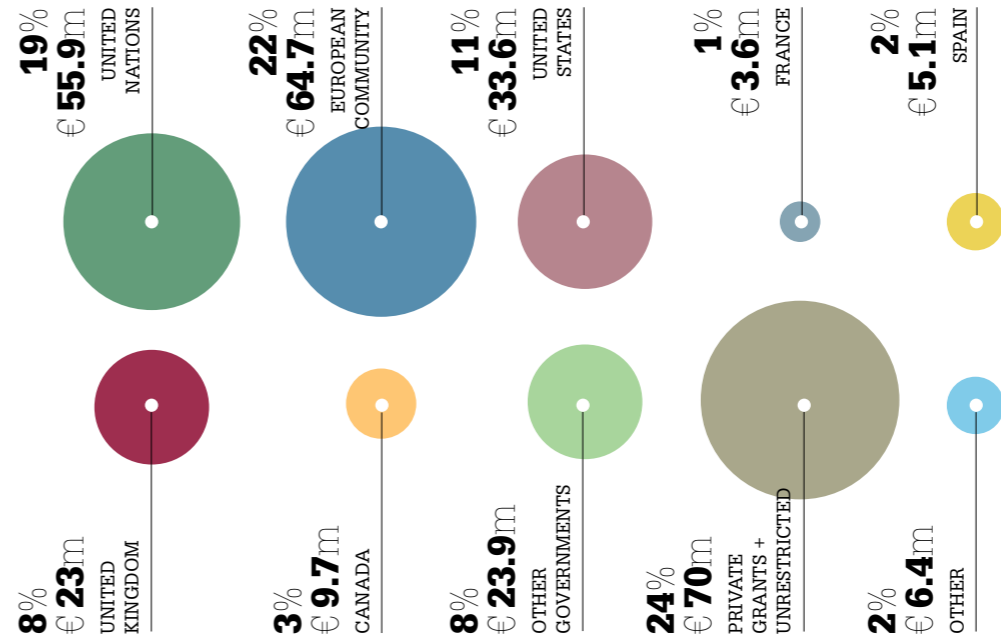
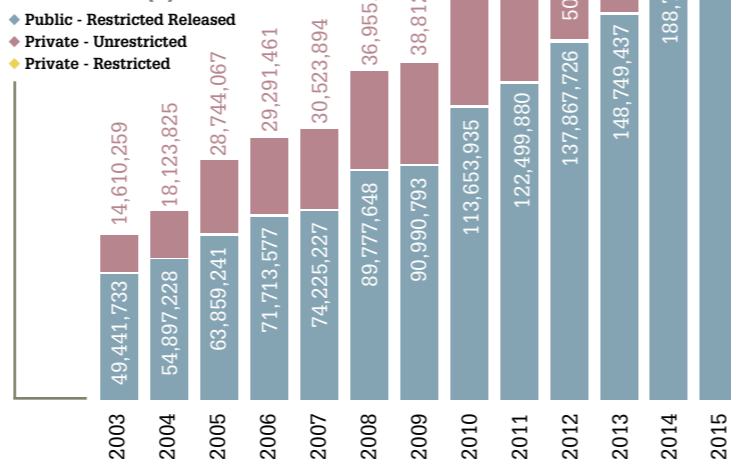


INDIVIDUAL DONORS

BREAKDOWN OF EXPENSES 2015



EVOLUTION OF TOTAL REVENUE (€)

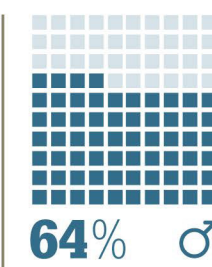
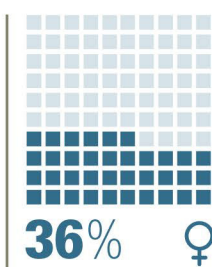


RATIO OF REVENUE BY DONORS 2015

GOAL  
04

7,133  
TOTAL NUMBER OF  
STAFF MEMBERS GLOBALLY

6,552  
TOTAL NUMBER OF  
STAFF IN THE FIELD



AVERAGE PERCENTAGE OF  
ACTION AGAINST HUNGER  
FEMALE AND MALE  
EMPLOYEES GLOBALLY

FOCUS ON  
**GENDER**

**GENDER PRIORITIES**

**A**ction Against Hunger's commitment to gender equality has two main pillars: the institutional and the programmatic commitment. At present, the main efforts for the institutional gender mainstreaming are getting to know where we are in our offices regarding gender-sensitive policies and procedures; and then discussing the best way to move to an enabling environment for gender equality, and to track advances. Programmatically, the main priority is placed at the very the beginning of the project cycle: the needs assessment. The gender analysis aims at incorporating the gender perspective into Action Against Hunger's common tools used while assessing a context. This assessment is done to understand the different roles, and the needs and capacities of women, men, girls and boys, which will be the source of information to provide an adapted assistance. This will avoid negative effects by producing gender sensitive interventions.

**GENDER AND ACTION AGAINST HUNGER**

Since the roll-out of the Gender Policy in 2014, more than 800 Action Against Hunger staff, including 365 women and 438 men, were trained on the Gender Policy & Toolkit.

After much collaboration among staff from all five Action Against Hunger headquarters and its field offices, the gender policy is now in its third phase. This phase of the Gender Agenda seeks to institutionalise and mainstream the Gender Policy & Toolkit into organisational practices while also reinforcing organisational gender capacities through innovation and technology.

Although the main objective of Action Against Hunger is fighting hunger, our interventions have an effect on gender relations. If we do not consider gender strategically enough, we may perpetuate imbalanced power relations and even do harm.

Conversely, if gender and age is considered from the very conception of the project; if we understand the different roles, needs and capacities of women, men, girls and boys, we will offer a better assistance, prevent negative effects such as Gender Based Violence; with a positive and lasting effect, all the while improving the quality of Action Against Hunger's interventions.

To ensure the implementation of the policy, Action Against Hunger has established a twin track approach that focuses on both mainstreaming the policy across all strategies, programmes and projects, as well as taking targeted actions responding to the disadvantages or special needs of vulnerable groups.

**04.2 ENHANCE HUMAN RESOURCES TO ENSURE THAT ACTION AGAINST HUNGER HAS THE MANPOWER & TALENT NEEDED TO ACCOMPLISH THE GOALS AND OBJECTIVES SET OUT**

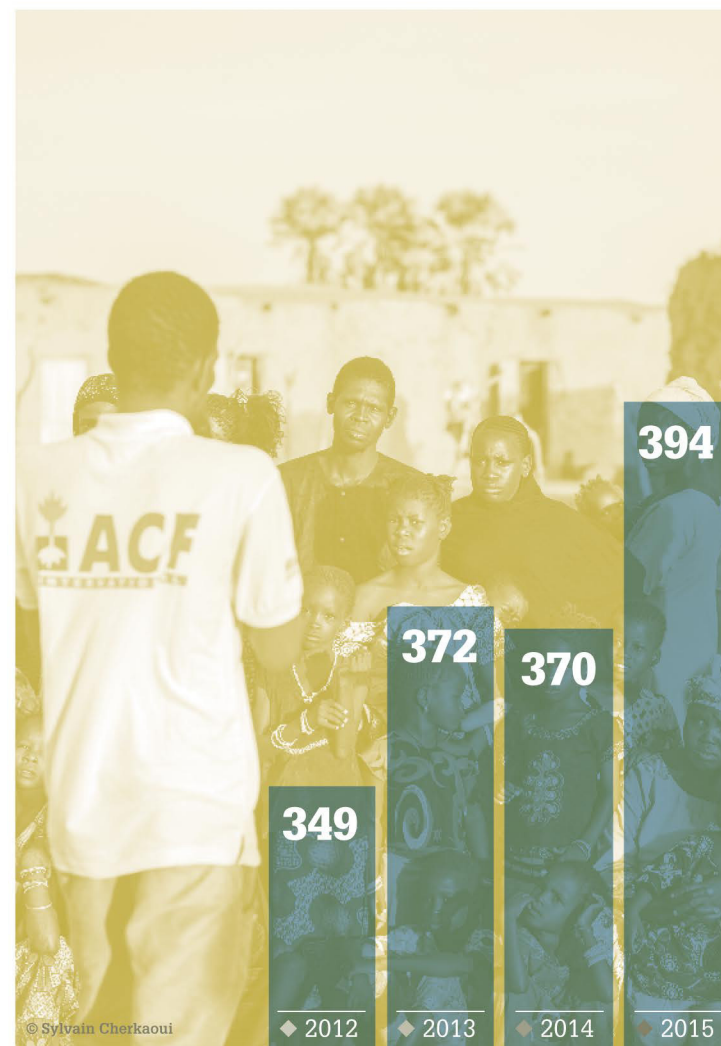
In 2015, Action Against Hunger had 7,133 staff employed globally<sup>1</sup>. Similar to previous years, more than 91% of these are country office staff (6,552) including both national and expatriate staff.

In 2015, Action Against Hunger employed 6,552 persons in country offices, with a ratio of 34% female and 66% male staff. Out of the country offices that employ more than 10 people, the highest female ratios were reported in Djibouti, Myanmar, and Nicaragua. At headquarter level, a total of 394 permanent staff were employed, 24 more people than in 2014. Due to restricted funding sources that tend to encourage the hiring of project-based staff, temporary staff in 2015 accumulated to 187 across the organisation. Among all 581 staff members working in headquarters, 66% were female and 34% were male.

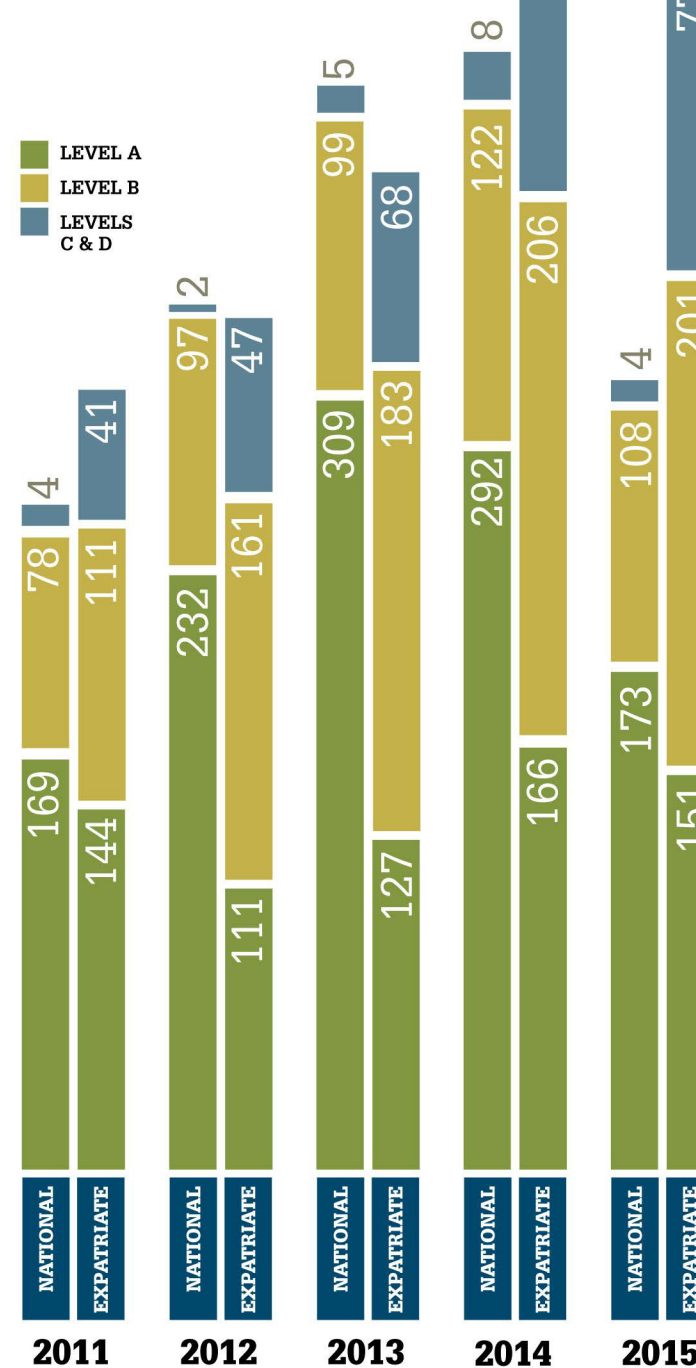
In country offices, the ratio of national to expatriate staff is about 14:1, with national staff representing 93.3% of the total. In 2015, 155 fewer overall management positions were reported, marking a drop from 869 in 2014 to 714. At management levels, nationals made up 53% of level A staff, down from 64% in 2014. The proportion for level B (35%) and levels C and D staff (5%) decreased by 2% and 5% respectively.

The average stay of expatriate staff in Action Against Hunger country offices was 9 months (down from 12 in 2014)<sup>2</sup>, with the briefest being three to five months (Jordan, Iraqi Kurdistan, Central African Republic, and Haiti) and the longest being 17 and 18 months (Sierra Leone and Kenya). Level B HR staff members were active in 28 out of 47 countries where Action Against Hunger is present.

**HQ PERMANENT STAFF**



**NATIONALISATION OF MANAGEMENT ROLES**



<sup>1</sup> This includes field staff, as well as temporary and permanent HQ staff.  
<sup>2</sup> Average from the 11 country offices that reported on their averages.  
<sup>3</sup> Counting permanent and temporary staff.

GOAL  
04

€111.1m

TOTAL GLOBAL LOGISTICS  
SUPPLY CHAIN VOLUME

VOLUME OF EXPENDITURE (€) BY  
ACTION AGAINST HUNGER OFFICE  
AND PER BENEFICIARY

04.3 ENHANCE ACTION AGAINST HUNGER'S LOGISTICS SYSTEMS,  
ENSURING ADEQUATE SUPPORT FOR ITS NUTRITION, FOOD, WATER  
AND SANITATION PROGRAMMES

In 2015, logistics continued to be a cornerstone for the operations of Action Against Hunger's country offices. In a year filled with humanitarian crises, the ability to procure and deliver goods to beneficiaries in an efficient and timely manner has been crucial. Through 47 country offices and two regional offices, as well as seven logistic centres, in 2015 the organisation oversaw and managed a global logistics supply chain with a volume of over €111.1 million. This represents an increase of 10% compared to the previous year.

The volumes of supply chain expenditure reflect the changing nature of humanitarian emergencies and their contexts. In 2015, five countries accounted for 28% of the total supply chain volume. Operations in the Kurdistan Region of Iraq continue to represent the biggest portion of the global volume (€8.8 million). The Nigeria office's volume of activity reached €6.5 million, an increase of €4.9 million compared to the previous year, as Action Against Hunger scaled up emergency operations due to conflict in the north eastern region of the country. Additionally, the Occupied Palestinian Territories country office saw a rise of €2.2 million to €4 million due to overall increased programme activities. On the other hand, the organisation's office in the Philippines saw the scaling down of operations after the end of the Haiyan Typhoon emergency. The Pakistan and South Sudan offices also reduced their activities compared to the previous year.

Logistics operations may increase to support the start of new activities, as in the case Action Against Hunger's new office in Cambodia. In the organisation's Peru office, the opening

of new areas of activity and technical assistance projects are leading to initial stage costs which reflect on the supply chain volume per beneficiary in the country.

Despite operating in some incredibly challenging environments for logistics operations like Syria, South Sudan or the Kurdistan Region of Iraq, Action Against Hunger has continued to guarantee a high standard of service over the past 5 years. Across all country offices, the average completion of the Logistics Assessment Table (LAT) in 2015 was 67%. LAT rates at or above 80% were reported in Colombia, Georgia, Kenya, Myanmar, and the Occupied Palestinian Territories. Cambodia, Ethiopia, Sierra Leone, and Syria, by contrast, received LAT scores of below 50%. Syria's LAT score of 42% in particular was due to a very demanding environment with difficulties in access, security and recruitment of staff, rendering the context especially challenging for the delivery of logistics services.

Action Against Hunger is committed to strengthening staff's capacity through training activities. In 2015, Action Against Hunger participated in 25 workshops and trainings, 9 and 6 regional platforms. These activities have included the 'Logistics Coordinators International Workshop Week' and trainings on 'Logistics for Non-Logisticians', logistics cluster, security, as well as an advance course on field humanitarian logistics. Logistics training have also been delivered to country

offices to strengthen local staff capacity. At a regional level, the organisation took part in logistics platforms in Lyon (France), Dubai (United Arab Emirates), and Accra (Ghana).

Action Against Hunger actively participates in existing logistics networks as a global player in humanitarian logistics. In particular, the organisation engages, among others, in the Inter-Agency Procurement Group, the Emergency Telecommunication Cluster, the Réseau logistique humanitaire, NetHope, and the European Interagency Security Forum. The important engagement with the Global Logistics Cluster led to the assignment of an Action Against Hunger logistician to the global cell of the cluster in Rome.

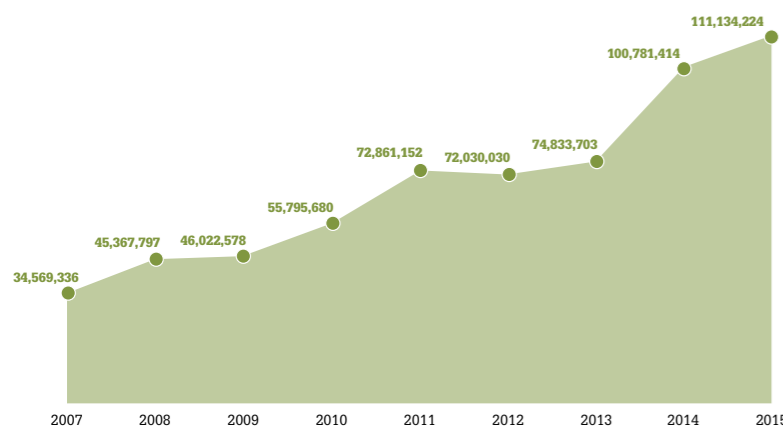
The organisation's logistics departments continue to work towards standard platforms of work for all operations. In 2015, a new platform named 'EchoSign' was implemented in some country offices with a focus on web-based electronic signature and enterprise content management. The system has increased efficiency by reducing the turnaround time and enhanced the audit trail capacity with procurement documentation. Additionally, in the last quarter of the year, a first module of the Supply Chain Software LINK – HQPR for international orders was also implemented in some country programmes.

What is the LAT?

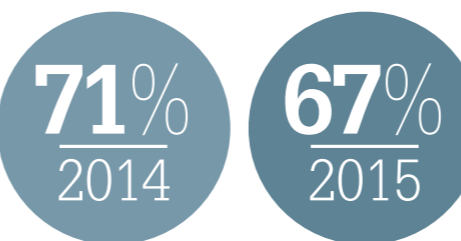
Action Against Hunger uses a set of standardised processes and tools known as "KitLog" to manage and monitor country logistics systems. Implementation of the KitLog is measured in the Logistics Assessment Tool (LAT) through 12 main indicators and 3 transversal indicators that include project funding, supply chain, storage, quality control and many other elements. The LAT allows staff to clearly understand the current situation in terms of logistics procedures and to define relevant action plans. The aggregated average completion rates help to orientate the organisation's strategy and improve support to the country offices.

18.65	KURDISTAN REGION OF IRAQ	8,770,048.77
3.03	NIGERIA	6,532,930.00
7.76	PAKISTAN	5,332,350.00
17.03	ETHIOPIA	5,233,983.65
20.58	CENTRAL AFRICAN REPUBLIC	5,231,707.75
23.39	SOMALIA	4,150,619.83
7.05	CHAD	4,145,596.05
12.77	MAURITANIA	4,050,340.05
5.92	OCCUPIED PALESTINIAN TERRITORIES	4,034,111.12
35.57	MYANMAR	3,975,817.42
8.96	HAITI	3,943,978.08
14.42	YEMEN	3,894,700.72
11.13	SOUTH SUDAN	3,889,870.00
18.05	LEBANON	3,704,900.48
4.44	MALI	3,661,227.44
12.80	SIERRA LEONE	3,657,042.31
7.03	PHILIPPINES	3,607,581.79
9.94	DEMOCRATIC REPUBLIC OF THE CONGO	3,340,420.00
16.73	LIBERIA	2,784,888.54
9.31	BURKINO FASO	2,712,804.47
34.81	COLOMBIA	2,587,417.84
18.42	GUINEA	2,059,716.59
0.95	SYRIA	1,902,130.69
8.99	BANGLADESH	1,863,256.48
13.71	AFGHANISTAN	1,763,419.15
5.18	NIGER	1,679,165.80
15.20	NEPAL	1,487,086.74
13.05	UGANDA	1,306,900.00
17.95	SENEGAL	1,226,102.31
	GEORGIA	1,204,730.23
2.95	KENYA	1,088,660.00
17.22	CAMEROON	878,458.86
15.13	MADAGASCAR	675,817.07
13.91	JORDAN	610,640.25
0.34	CÔTE D'IVOIRE	552,916.25
22.79	GUATEMALA	517,520.55
9.05	MONGOLIA	355,609.64
58.46	BOLIVIA	349,638.23
11.01	DJIBOUTI	328,533.25
15.29	NICARAGUA	324,011.78
	ZIMBABWE	319,895.26
	WEST AFRICA REGIONAL OFFICE	289,565.00
275.39	PERU	276,766.79
36.60	UKRAINE	238,658.58
4.86	INDIA	210,901.91
97.30	INDONESIA	209,487.29
	SPAIN	71,560.00
	EGYPT	68,164.84
	CAMBODIA	32,574.50

GLOBAL LOGISTICS SUPPLY CHAIN  
VOLUME OF EXPENDITURE



AVERAGE LAT COMPLETION RATE



GOAL  
04

304

NUMBER OF INCIDENT CLASSIFICATIONS IN 2015

203

NUMBER OF STAFF RECEIVING SECURITY TRAININGS IN 2015

**04.4 STRENGTHEN THE SAFETY AND SECURITY MANAGEMENT AND CULTURE OF ACTION AGAINST HUNGER**

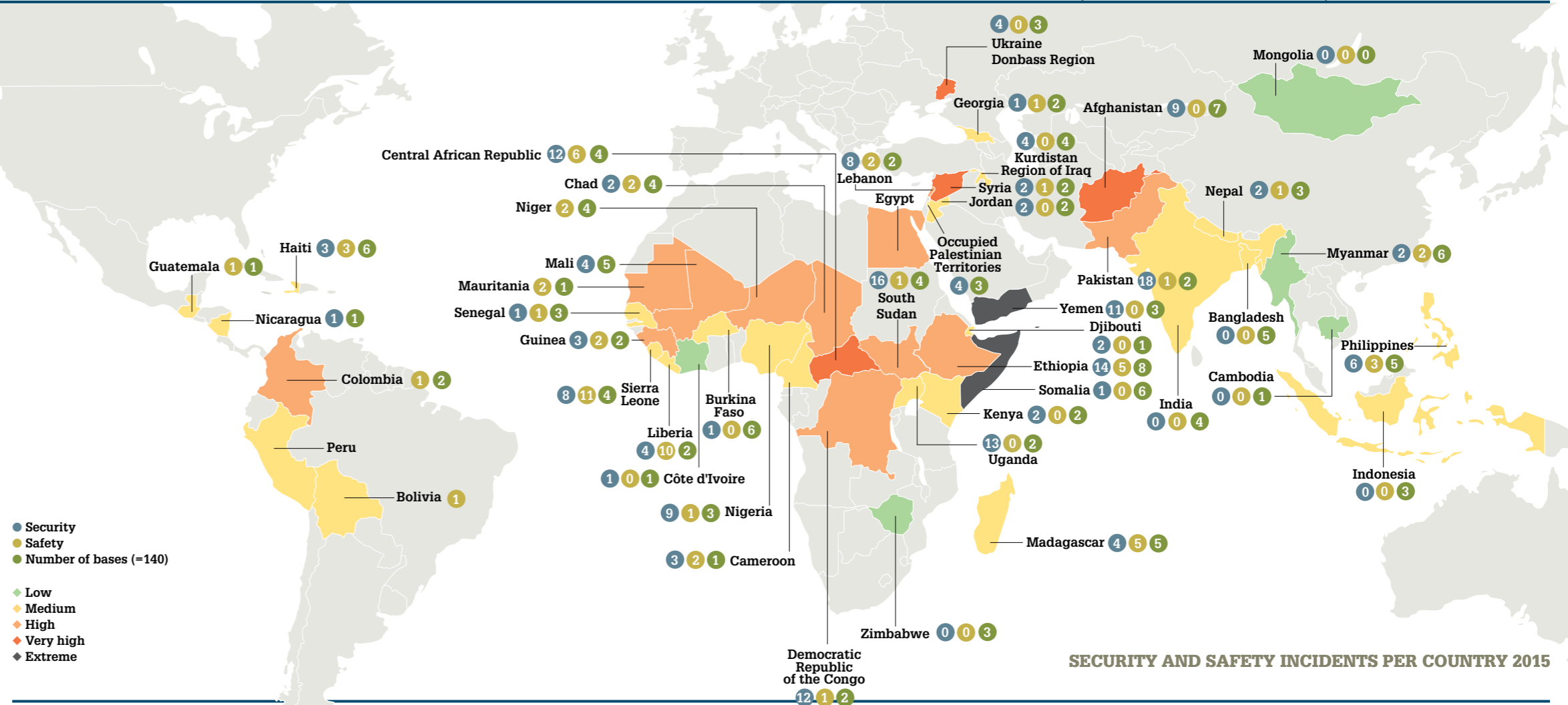
As Action Against Hunger's operations continue to grow, often in fragile and volatile contexts, the safety and security of staff around the world remains a top priority. The organisation's strategy aims particularly at ensuring acceptance in areas of intervention to facilitate safe access for both humanitarian personnel and local beneficiaries. At the same time, an increasing security culture emphasises the importance of staff training and daily security interactions among the organisation's offices. In 2015, incident classifications affecting the organisation's staff grew to 304, compared to 293 the previous year.

Transport incidents contributed to 26% of all the incidents and increased from 66 in 2014 to 80 in 2015. Action Against Hunger plans to create a new "fleet manager" position tasked with working closely on road safety in order to decrease the number of accidents. A study on this issue is planned to take place in 2016.

Security incidents account for 74% of the total, including robberies, which decreased from 60 to 55 in 2015, and threats to Action Against Hunger staff, previously identified as the most common type of incident but registering a large reduction from 67 to 45. Other concerning incidents are arrests and detentions, for which the number doubled to 14, and attacks on Action Against Hunger staff which increased from 6 to 13.

In 2015, two Action Against Hunger staff members tragically lost their lives in South Sudan and Mali, as a consequence of armed robbery and a community-based attack, respectively. The organisation's country offices continue to review security management procedures and take all precautions with the aim of preventing such events from happening again. The organisation also continues to tackle other security matters including shootings and sexual violence.

Context classifications, from "low" to "extreme", are defined by Action Against Hunger's offices according to the general security policy. When the classification reaches the "extreme" level, most of the operations are suspended, the international staff is evacuated, and the local staff stops their activities. As in previous years, the highest number



“ I am honoured yet saddened to pay tribute to Rombek Paul Mori from South Sudan and Moussa Ag Mohamedoun from Mali who lost their lives whilst working for Action Against Hunger last year.

**Paul Wilson**

of incidents have been reported in "high" to "very high" context classifications. Pakistan (18), South Sudan (16) and Ethiopia (14) reported the highest number of security incidents, mainly consisting of assaults, intrusions and robberies. Both Pakistan and South Sudan had been identified as very highly dangerous last year. The number of security incidents also climbed in the Central African Republic (12), and in Yemen (11).

Action Against Hunger takes all security incidents very seriously and continues to work in order to ensure that humanitarian workers are protected and can work in the best conditions even within a difficult context. An updated Security Kit for all country offices was introduced in 2014 containing, among others, security policies and guidelines, security plan templates, incident and crisis management tools, training modules for field teams and good practices briefing notes.

**SECURITY AND SAFETY INCIDENTS PER COUNTRY 2015**

In 2015, the use of the Security Kit, together with an online security database named "SIRO", enabling better incident reporting and trend analysis, have been strengthened in order to systematise reporting and the categorisation of incidents. These tools will ensure reliable data and a more accurate overview of the safety and the security situation across Action Against Hunger country interventions.

In 2015, nine country offices reported providing security workshops, trainings and sensitisations to 203 staff members.<sup>1</sup> An online training "Introduction to security" and three e-learning modules covering personal safety, kidnapping and security management tools have been designed for the network and made accessible to a greater number of humanitarian workers, contributing to reinforce the security culture of our organisation.

<sup>1</sup> Figures reported for security trainings are not comprehensive and do not cover all Action Against Hunger country offices.



DEVELOPMENT ASSISTANCE COMMITTEE CRITERIA RATINGS 2015 Ratings for the criteria range from 1 (poor) to 5 (excellent)

## 04.5 ENHANCE MONITORING, EVALUATION, LEARNING AND ACCOUNTABILITY

In 2015, as in the previous year, all of Action Against Hunger's operational country offices reported using the Activity Progress Report. This is a monitoring tool for monthly reporting from country offices to headquarters on ongoing interventions' activities.

The total number of independent evaluations<sup>1</sup> carried out in 2015 was 28, representing a 26% decrease when compared to the 38 independent evaluations carried out in 2014. Fewer independent evaluations were centrally managed<sup>2</sup> (20 in 2015 as opposed to 29 in 2014), and a slightly fewer amount of independent evaluations were managed in a decentralized way (8 in 2015 as opposed to 9 in 2014). Action Against Hunger's Evaluation, Learning and Accountability team supported a total of 22 centrally managed independent evaluations in accordance with the organisation's Evaluation Policy and Guideline (2011). New approaches and methodologies were introduced in 2015 to better answer evaluation questions. For example the "programme theory" evaluation approach was tested for centralized evaluations, as well as the methodology of the "social integrated value"<sup>4</sup> to assess the social impact of enterprises and economic activities for decentralized evaluations.

Among other initiatives in support of organisational learning, the Evaluation, Learning and Accountability team started following up on 2015 evaluation's recommendations. Moreover, similarly to previous years, the team has prepared the Annual Learning Review 2015 with its three traditional sections; the meta-analysis of Action Against Hunger's project evaluations through the Development Assistance Committee lens' section, the debate and discussion section and the good practice section.

Further steps have been taken in 2015 to institutionalise stronger monitoring and evaluation practices. Action Against Hunger's Multi-Sectoral Monitoring and Evaluation Guidelines were developed to strengthen internal capacities in the implementation of monitoring and evaluation systems, with practical steps to implement monitoring and evaluation in the field. They built off the organisation's Food Security and Livelihoods Monitoring and Evaluation Guidelines (2011). Additionally in 2015, Action Against

Hunger's Evaluation Policy and Guideline (2011) started a participatory updating process lead by the Evaluation, Learning and Accountability team. The final versions of both Action Against Hunger's Evaluation Policy and Multi-Sectoral Monitoring and Evaluation Guidelines are expected to be disseminated and rolled out in 2016.

In 2015, there also seems to be an improvement in the accountability-related mechanisms towards beneficiaries in the field. In particular, 61% (up from 32% in 2014) of Action Against Hunger's operational country offices have reported to have a complaint and response mechanism in place to strengthen accountability towards the affected populations with whom they work. When asked about any other feedback mechanisms for encouraging downward accountability, almost 48% of all Action Against Hunger's operational country offices reported affirmatively (again a relevant increase if compared to the 25% in 2014), where 80% had already a complaint and response mechanism in the first place.



Action Against Hunger's Learning Review 2015

<sup>1</sup> Independent evaluations are carried out by external evaluators who have no previous links to the intervention being evaluated.

<sup>2</sup> Managed by Action Against Hunger's evaluation, learning and accountability team.

<sup>4</sup> This is a methodology introduced by a Spanish consultancy originally known as "Valor Social Integrado".

### TOTAL EVALUATIONS BY YEAR<sup>5</sup>



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## 04.6 ENHANCE INFORMATION SYSTEMS

2015 has been marked by the first ever implementation of the architecture for a truly organisation-wide intranet: the Action Against Hunger "No Hunger Forum" is now setup and ready to host and provide services to all Action Against Hunger staff. This represents the first information systems project involving the whole organisation. 2016 will see an increase in the number of users, and exciting new functionalities will be added to facilitate collaborative work across the organisation and between headquarters and country office staff.

Action Against Hunger's information systems departments support the work of the organisation in a wide range of areas. In close collaboration with technical teams in country offices, and following testing in previous years, the Open Data Kit software has become the standard system for all of the organisation's mobile data collection activities in the organisation's field programmes. A kit for autonomous cash transfer programmes in humanitarian environments named "KACHE" has also been jointly developed and successfully piloted in Mali. This kit is now available for widespread use in the organisation's programmes.

The organisation's human resources capabilities have been strengthened by a Human Resources Information System that has been jointly developed across the organisation. Several functional modules are now deployed to cover, among others, recruitment, performance management and expatriate management.

Action Against Hunger continues to work towards the expansion and rollout of new tools that have been developed and tested and are now ready for international use. SIRO, an integrated system for security incident management, will be deployed in support of multiple headquarters to provide centralized reporting, support and notifications. Nimbus, a cloud-based document archive and retrieval application conceived to automate the financial workflows between missions and headquarter will move from Beta to deployment and see the addition of exciting new features. And SIROCCO, a software designed and developed by Action Against Hunger to manage all internal and external audits recommendations and enabling progress follow-up, has been deployed in some country offices.

The organisation will also continue the implementation of programme information management systems, the main ones in current use being "GESPRE" and "PIMS", with the addition of many country offices to provide real-time grant and project status, data, and metrics to missions, headquarters, donors, and stakeholders while gathering requirements for expansion and increased functionality.

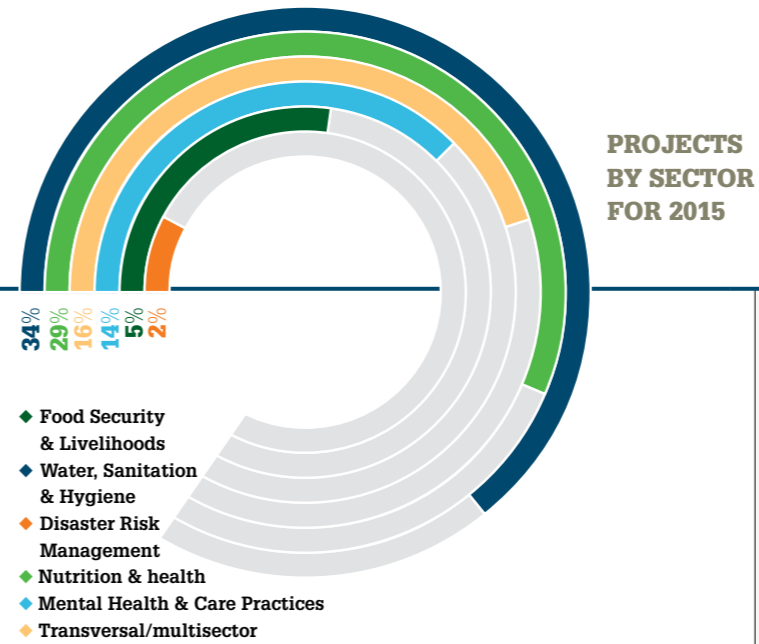
Other ongoing projects such as the Link project covering supply chain management, with a software ready for testing in Nepal, as well as financial and donor management tools will be fully deployed in 2016.

<sup>5</sup> Only years 2014 and 2015 reflect the whole number for centralised and decentralised evaluations carried out. From 2004 to 2013 the figures represent only centralized evaluations.

GOAL  
04

44  
RESEARCH  
PROJECTS IN 2015

62  
RESEARCH  
PARTNERS IN 2015



FOCUS ON  
**RESEARCH UPTAKE**

**04.7 INVEST IN RESEARCH AND DEVELOPMENT**

Research and development represent an increasing investment for Action Against Hunger. In 2015 a total of 44 research projects were ongoing. Projects were grouped by the organisation's sectors of intervention: Disaster Risk Management, Food Security and Livelihoods, Nutrition and Health, Mental Health and Care Practices, and Water, Sanitation and Hygiene. Several projects involved different sectors, a testament to the degree of collaboration within the organisation that highlights the importance of multi-sectoral integration.

The amount of Water, Sanitation and Hygiene research projects saw a tremendous rise going from 8 projects in 2014 to 15 in 2015. As a percentage of total projects, this new focus represents a 16% rise from the previous year to 34% of the total today. Nutrition projects, while still accounting for 29% of overall projects, dropped slightly from 14 in 2014 to 13 research projects in 2015. Food Security & Livelihoods also recorded a drop of 10% in the number of projects undertaken. Multisector projects (7 in total) accounted for 16% of total projects.

Funds invested in research also show an apparent rapid increase from €4.9 million in 2014 to €10.4 million in 2015. This increase, while partly mirroring the increase in research projects, is mainly due to the fact that the project costs reported

for some of the projects cover the entire duration of the project, which can be multi-year. The reported financial data on funds invested in 2015 does not comprehensively cover all ongoing research activities.

Four projects in particular made up 73% (€7.6 million) of the total reported project costs in 2015. These projects are: 'Pastoral monitoring system to support climate change resilience in Sahel project', 'C-Project', 'Research on Food Assistance for Nutritional Impact (REFANI)', and 'Undernutrition Prevention and Treatment through Improved Assessments, Knowledge and Evidence (UPTAKE)'. Nutrition was the focus of three of these programmes, with cash programming being integrated into two of the projects, and the fourth programme being related

to Disaster Risk Management. The remaining 24 projects for which financial information was available totalled €2.8 million and covered all sectors, including several multi-sectoral projects and one project revolving around information technology.

Action Against Hunger actively promotes partnerships to undertake research projects. In 2015, the organisation collaborated with 62 external partners. Academic and Research partners accounted for 71% of all partnerships, increasing from 30 to 44 in 2015. Other categories of partnership included non-governmental organisations (5), private (6) and public sector actors (4), United Nations agencies (2), and one classified as 'Other', because of it being a collaborative structure involving NGOs, Academia and some United Nation's organisations.

**M**ajor donors have recently begun evaluating the impact of research projects to see whether or not the evidence they generate has any influence on substantive changes in policy and practice. However, it takes a considerable amount of time for policy makers and practitioners to incorporate new evidence into their plans<sup>2</sup>. Bearing this in mind, Action Against Hunger and many other organisations have started crafting strategies for research uptake.

Research uptake is the successful utilisation of evidence by key decision-makers in policy and practice. It encompasses all of the activities (producing materials, planning for publications and events, etc.) one executes to ensure that results are used by target audiences. Stakeholder engagement is central to this strategy, and requires continual support from headquarters and field staff over the course of a project's duration. It is believed that stakeholders will be more receptive and interested in using the evidence in their work if they are kept up-to-date on project information and updates through email, phone conversations and social media.

Action Against Hunger has embraced this shift to sharing robust evidence effectively with stakeholders by leading on the Research on Food Assistance for Nutritional Impact (REFANI) Consortium, and the PUR-2- Evaluating the Effectiveness of Safe Drinking water in SAM Treatment Project, both of which include research uptake strategies, the former being more advanced, as its implementation began in August 2015.

REFANI employs a full time staff member who liaises with project partners to identify global stakeholders with whom she can discuss the project. Through these stakeholder conversations, she learns which parts of the project they believe are most applicable to their work. Gathering this information will ensure that, once results are ready, she can prepare research products in a way that is most applicable to them.

In addition to engaging with global stakeholders, REFANI's research uptake strategy also encourages engagement with local stakeholders and beneficiary communities where the research is occurring. For example, Action Against Hunger – Pakistan has already held local stakeholder meetings to discuss the launch of REFANI, and will try to present the results to the same audience in late 2016.

Being one of the leaders who practices research uptake is enabling Action Against Hunger to publicize its research projects widely and ensure the evidence produced is used by key decision-makers in policy and practice.

<sup>2</sup> For further information on the use of evidence in practice please refer to the article, "Translating Scientific Discoveries into Public Health Action".



# GOAL 05

## BECOME...

preeminent as an advocate & reference source on hunger & undernutrition

# 83,914

NEW FACEBOOK MEMBERS

# 23,708

NEW TWITTER FOLLOWERS

### 05.1 ENGAGE SUCCESSFULLY WITH THE WIDER PUBLIC ON HUNGER AND ACUTE UNDERNUTRITION ISSUES

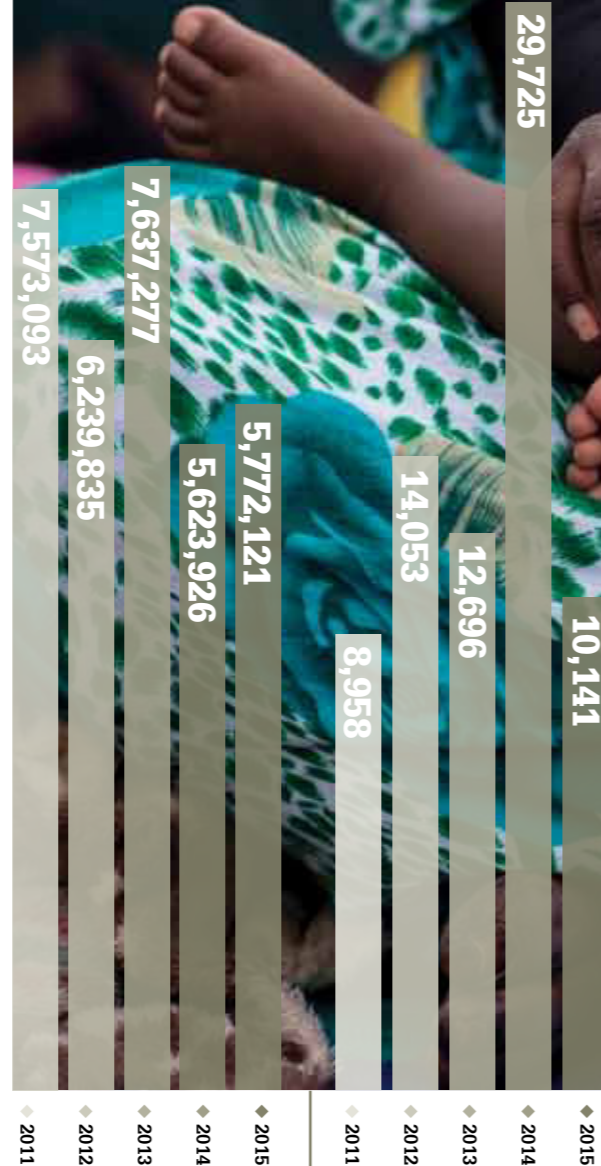
Since 2011 over 30 million people<sup>1</sup> have been reached by Action Against Hunger's continued efforts to successfully engage with the wider public and to raise awareness of undernutrition and humanitarian crises. In 2015, an estimated 5.7 million people were reached by the organisation.

The decrease in people reached compared to 2014, is due to several reasons such as no prospecting or by a reduction in designated communications staff in some countries. Moreover, the systems to measure the organisation's reach have been improved and are more accurate.

Whilst many regular supporters were contacted via electronic and regular mail on various occasions, as in previous years, the general communication channels are continuing to change. The trend towards a growing online community was sustained in 2015, when the number of new visitors to the Action Against Hunger websites increased by over 271,000 and the organisation gained almost 84,000 new Facebook members and more than 23,000 Twitter followers.

In 2015, Action Against Hunger also launched an effective direct response television campaign in Germany and Italy, as well as a comprehensive online campaign on change.org throughout the year. In addition, Action Against Hunger participated in the EXPO 2015 in Milan and organised several successful events and fundraising campaigns around the world such as the "Action Against Hunger Gala", "Love Food Give Food", "Race against Hunger" and "Restaurants against Hunger".

After a peak of media exposures of 29,725 in 2014, media coverage in 2015 slightly slowed down to previous levels. Action Against Hunger's work and activities were featured in radios, newspapers or television including Agence France-Presse, Al Jazeera, Arte Info, BBC Radio, Cadena SER, Corriere della Sera, ESPN Radio, El País, France24, Delicious Magazine, Deutschlandfunk, Il Sole 24 Ore, Independent on Sunday, La Repubblica, La Sexta, Le Monde, National Public Radio, Newsweek, Spiegel Online, The Nation, The New York Times, The Times, TVE and VICE NEWS.

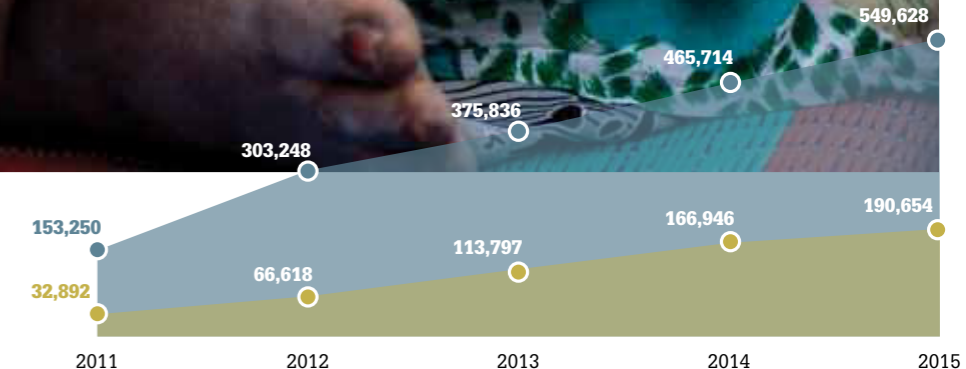


TOTAL PEOPLE REACHED

MEDIA MENTIONS

#### SOCIAL MEDIA REACH

◆ Facebook members  
◆ Twitter Followers



<sup>1</sup> Cumulative total.

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GOAL  
05

“

For the first time, governments have agreed to end hunger and undernutrition by a specific date

**05.2 RAISING THE PROFILE OF NUTRITION AS ONE OF THE MOST COST-EFFECTIVE DEVELOPMENT INTERVENTIONS**

In 2015, the organisation continued to work to influence decision-makers on hunger and nutrition issues. Key achievements included the following:

**Securing nutrition as a global development priority to 2030.**

Nutrition was neglected in the Millennium Development Goals, so a strong goal and targets on nutrition to tackle undernutrition by 2030 were clearly needed in the Sustainable Development Goals. Action Against Hunger was a leading organisation influencing at different levels on the post-2015 negotiation, including lobbying and mobilising civil society and the public as part of the Generation Nutrition campaign. Goal 2 to ‘end hunger, achieve food security and improved nutrition and promote sustainable agriculture’, with a target on both wasting and stunting in children under five years of age, was adopted by world leaders in September 2015 – the first time governments have ever agreed to end hunger and undernutrition by a specific date.

**Ensuring children with the deadliest form of undernutrition are counted in the measurement of the new global goals**

Having a target on child wasting in the Sustainable Development Goals without a commitment that it also be a global indicator would have been disastrous, as what gets measured is far more likely to get done. Action Against Hunger led civil society efforts worldwide to ensure agreement on such an indicator, especially when the Inter-agency and Expert Group on Sustainable Development Goal Indicators proposed a set of indicators that did not include a means to measure wasting progress on the global commitment to end all forms of undernutrition. By October 2015, following sustained lobbying by Action Against Hunger and partners in the Generation Nutrition campaign, a wasting indicator was added to the proposed goals indicators.

**Ensuring severe acute undernutrition is recognised as a public health priority.**

Severe acute undernutrition is a leading cause of child death. Many Action Against Hunger country offices, including Kenya, India and the Philippines, have brought the scale of the issue to the attention of decision makers by hosting and participating in high-level discussions and workshops on severe acute undernutrition. In 2015 the Government of Philippines launched new guidelines on the community-based management of acute undernutrition, an approach enabling community volunteers to identify and initiate treatment for children with acute undernutrition.

**Ensuring nutrition security was recognised and included in broader national policies.**

Since sustainable progress on nutrition will require concerted effort across a variety sectors, it is critical that countries’ various national policies include elements of nutrition security. Action Against Hunger carried out advocacy in Niger and Senegal, which led to the commitment from the President of the Inter-ministerial Committee on Social Protection to

include health, nutrition and food security dimensions in the National Protection Policy following recommendations from Action Against Hunger and partners. Action Against Hunger’s engagement contributed to modifications of some aspects of the policy from an initial narrow focus on food security towards a more important multisectorial approach.

**Making hunger and nutrition a climate issue.**

Since climate change is a key driver of food insecurity and undernutrition, it was critical the Paris Climate Conference recognised the importance of safeguarding vulnerable people’s nutrition in the negotiations. In the period towards and at the 2015 Conference, Action Against Hunger met with negotiators of both allied and opposing countries, observer organisations and the UNFAO, to stress the importance of safeguarding food security in climate change mitigation and adaptation activities. The Preamble of the Paris Agreement included specific mention of food security, stating: “Recognizing the fundamental priority of safeguarding food security and ending hunger, and the particular vulnerabilities of food production systems to the adverse impacts of climate change”.





GOAL  
05

FOCUS ON  
**ACCESS**

**HOW DO WE TRY TO OVERCOME THE ACCESS DIFFICULTIES?**

**A**s an organisation grounded in humanitarian principles, Action Against Hunger faces the need to ensure that humanitarian workers are able to gain access to populations in order to provide basic services. Upholding these principles is a daily challenge in a number of crises around the world.

In conflict and post-conflict areas it is becoming increasingly difficult to maintain impartiality and neutrality. The politicisation of humanitarian aid could mean that some vulnerable groups may be denied access, that funds do not mirror local needs, or that unnecessary administrative burdens might delay authorizations for project activities. Furthermore, often there is confusion between political, military and humanitarian agendas.

In order to overcome these challenges, Action Against Hunger takes actions at the national and international level. At the national level, it ensures emergency responses maximize impartial access based on real local needs, favours direct dialogue with key local stakeholders, partners with national or civil society organisations and maximizes coordination with other humanitarian organisations. At the international level, Action Against Hunger advocates for access using different communication formats, including public campaigns.

Favouring direct dialogue with key actors at the national level aims to achieve acceptance as a key condition to maximize access. It translates into a process involving a sound stakeholder mapping, sometimes including military, local authorities as well as non-state actors, and grassroots level communication and engagement plans. In Yemen the team regularly meets with all parties to share the state and nature of Action Against Hunger's activities. Additionally, in the Central African Republic, project teams maintain



**PARTNERING WITH CIVIL SOCIETY ORGANISATIONS AT THE NATIONAL LEVEL HAS OFTEN BEEN KEY TO ENSURE ACCESS**

close contact with community and religious leaders to build awareness and to gather support for the organisations' work and principles. Radio messaging has also been in some instances actively used to reach communities, using beneficiaries' voices and testimonies.

Partnering with civil society organisations at the national level has often been key to ensure access. In Ukraine, these partnerships have been instrumental to access populations in areas which have limited humanitarian access. It has allowed to focus on capacity building, monitor the ongoing programmes and implement a

community feedback mechanism. In the Central African Republic, these partnerships permitted support to a paediatric centre and other existing structures with large nutrition programmes. They also enabled the implementation of community outreach strategies to ensure health services continuity throughout episodes of violence.

Finally, challenges and obstacles concerning access modalities which cannot be dealt with at local level, can be raised at international level by addressing decision makers through collective or individual meetings or letters. Action Against Hunger's approach is evidenced-based, documented, and grounded in its operational presence in conflict areas. Sometimes, the organisation will publicly denounce obstacles for humanitarian access, which should always be preceded by a risk analysis. This can be country specific or global through the publication of reports or position papers. It can also involve participation in global public initiatives, conferences and forums, like World Humanitarian Summits or the United Nations Security Council's debates.



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FOCUS ON  
**NUTRITION CHAMPIONS**

**SUPPORTING CIVIL SOCIETY NUTRITION CHAMPIONS IN WEST AFRICA**

**T**he political profile of the fight against undernutrition has recently grown, but much remains to be done for translating political commitments into concrete actions. The role of Civil Society Organisations, working closely with local communities, is key to ensure that political commitments at the international level trickle down to the grassroots. Despite progress, these organisations in West Africa face considerable challenges in realizing their ambitions, like lack of technical knowledge and/or financial resources or weak information sharing and cross-country learning, to name a few.

Action Against Hunger's West Africa regional Office is working to address these challenges by supporting a network of West African civil society 'Nutrition Champions' who are driving forward nutrition advocacy in the region. The Nutrition Champions' network was first established in 2011 but was reinvigorated in 2013, thanks to the financial support from the French Development Agency and the Swedish International Development Authority.



**THIS PROJECT FOCUSES ON STRENGTHENING CHAMPIONS' CAPACITIES IN ADVOCACY, ENHANCING ACTION AGAINST HUNGER'S PARTICIPATION AS PART OF CIVIL SOCIETY**

This project focuses on strengthening champions' capacities in advocacy, enhancing Action Against Hunger's participation as part of civil society, especially with Scaling Up Nutrition Civil Society Alliances. Moreover, it aims at developing and harmonizing messages across the region, and supporting or initiating advocacy actions and grassroots movements in order to prioritize the fight against undernutrition

So far Nutrition Champions have implemented advocacy activities in 11 West African countries, focusing on a number of strategic policy issues. For example, they have been active in policy implementation by advocating for free

healthcare in Chad, by defining community-based nutrition guidelines in an epidemic context in Guinea, or by integrating nutrition in sectorial policies in Mali. They have also advocated for governments' accountability vis-à-vis their commitments to fight against undernutrition by organizing public events in Burkina Faso, Senegal and Sierra Leone, or by mobilizing the media in Niger. Finally, they have also mobilised domestic resources for nutrition by producing a lessons-learned video in Nigeria.

The major challenges faced by the Nutrition Champions include accessing information on nutrition budgets, securing financial and human resources for advocacy, or working in alliances. The most interesting good practices identified have to do with the management of the network. Some examples include cross-country peer-to-peer capacity building, the provision of regular online support at the regional level or coming up with tools to strengthen internal and external communication through an internal newsletter or a website<sup>2</sup>, respectively.

With an estimated 4.9 million children at risk of suffering from acute undernutrition in the Sahel in 2016, the role of Nutrition Champions is crucial in garnering greater attention to hunger and undernutrition. A lot has been achieved to date, yet much more needs to be done if aiming at a lasting change. Through its financial and technical support, Action Against Hunger is helping to build this change from the grassroots level, championing the fight against undernutrition and promoting a world free from hunger.

<sup>2</sup> For more information please visit <http://nutritionchampions.org/>



27

COUNTRY OFFICES  
CARRYING OUT  
ADVOCACY ACTIVITIES

33

ADVOCACY OFFICERS IN ACTION  
AGAINST HUNGER'S COUNTRY  
OFFICES AND HEADQUARTERS

## 05.3 DRIVING CHANGE ON GLOBAL HUMANITARIAN ISSUES

The network continued to advocate on humanitarian issues in line with its humanitarian interventions. Key specific highlights include:

### Promoting respect of principled, needs and rights based humanitarian response.

During 2015 Action Against Hunger carried out advocacy around the main crises in countries of intervention especially in conflict and post-conflict crises, including access of the population to assistance and resources.

**SYRIA:** Action Against Hunger and partners developed recommendations on the protection of civilians and improving humanitarian access inside Syria, including reinforcing the rights and situation of Syrian refugees in neighbouring countries. These were disseminated to key decision makers ahead of the UN General Assembly and number of these recommendation were used by Switzerland in the Tripartite talks on Syria with both Syria and Iran.

**YEMEN:** The humanitarian situation in the country worsened throughout 2015, therefore ensuring swift access to those in need is imperative. Action Against Hunger has worked with partners calling the UN Security Council and parties to the conflict to respect international humanitarian law, specifically to lift the de facto blockade that was limiting access to populations in need, and for greater involvement of the international community to better protect civilians. Following this, the UN negotiated measures to ease the blockade, in particular through establishing a UN Verification and Inspection Mechanism system to increase shipments of life-saving commodities to Yemen.

### World Humanitarian Summit.

The World Humanitarian Summit, to be held in May 2016, will propose solutions to our most pressing challenges and set an agenda to keep humanitarian action fit for the future. Action Against Hunger has sought to play a key role in influencing the agenda and outcomes. Action Against Hunger has engaged

in the 2015 processes, including taking a leading role in the Budapest consultations, to ensure a strong outcome for the summit with a reaffirmation of principled humanitarian action to guarantee people in need have safe access to humanitarian aid and to maintain the acceptance, safety and protection of humanitarian workers.

### Protection of Aid Workers Campaign.

Action Against Hunger is providing humanitarian assistance in a number of conflict-affected states, delivering life-saving support to vulnerable communities. Humanitarian aid workers are themselves facing increased risk of violence. In order to enhance protection of aid workers, which is critical to ensure they can continue to provide unhampered humanitarian assistance to those in need, Action Against Hunger continues to call through 2015 for a special rapporteur dedicated to this issue. In both Geneva and New York, Action Against Hunger has been lobbying governments directly, supporting efforts to create media pressure, and launched a public campaign in order to increase support for such a mechanism to ensure stakeholders are scaling up efforts to protect aid workers so they can continue to save lives and alleviate the suffering of those in need.

### Pursuing justice on the Muttur aid workers massacre.

Action Against Hunger's long standing advocacy efforts to bring justice following the 2006 assassination of 17 Action Against Hunger humanitarian aid workers in the Sri Lankan town of Muttur had led an independent international inquiry into serious violations of International Humanitarian Law in Sri Lanka. The resultant Office of the High Commissioner for Human rights international investigation reported in September 2015. It confirmed Action Against Hunger's position that military forces had been involved in the crime and called for a tribunal to be created.

## 05.4 STRENGTHENING ACTION AGAINST HUNGER AND PARTNER CAPACITY AND CAPABILITY TO INFLUENCE

Action Against Hunger continues to grow advocacy capacity and capability for improved future influencing. Progress in 2015 included:

### Increased advocacy capacities at national level.

In 2015 Action Against Hunger significantly invested in growing network and national capacities for advocacy. For the first time, leadership of advocacy, in Madrid, New York, London and Paris headquarters, was managed at director level allowing the formation of an Advocacy International Management Group. Action Against Hunger's country offices have also scaled up advocacy capacity by increasing the number of advocacy officers from 9 in 2014 to 19 in 2015, supported by 14 headquarter advocacy staff. The number of country offices carrying out advocacy had increased from 9 in 2013 to 27 by the end of 2015. As of 2015 more than half of all Action Against Hunger's country offices were engaging in advocacy

An international advocacy workshop was held for the first time in 2015, gathering all Action Against Hunger's international advocacy staff to participate in advocacy training, knowledge exchange and capacity building workshops.

### Developing partnerships.

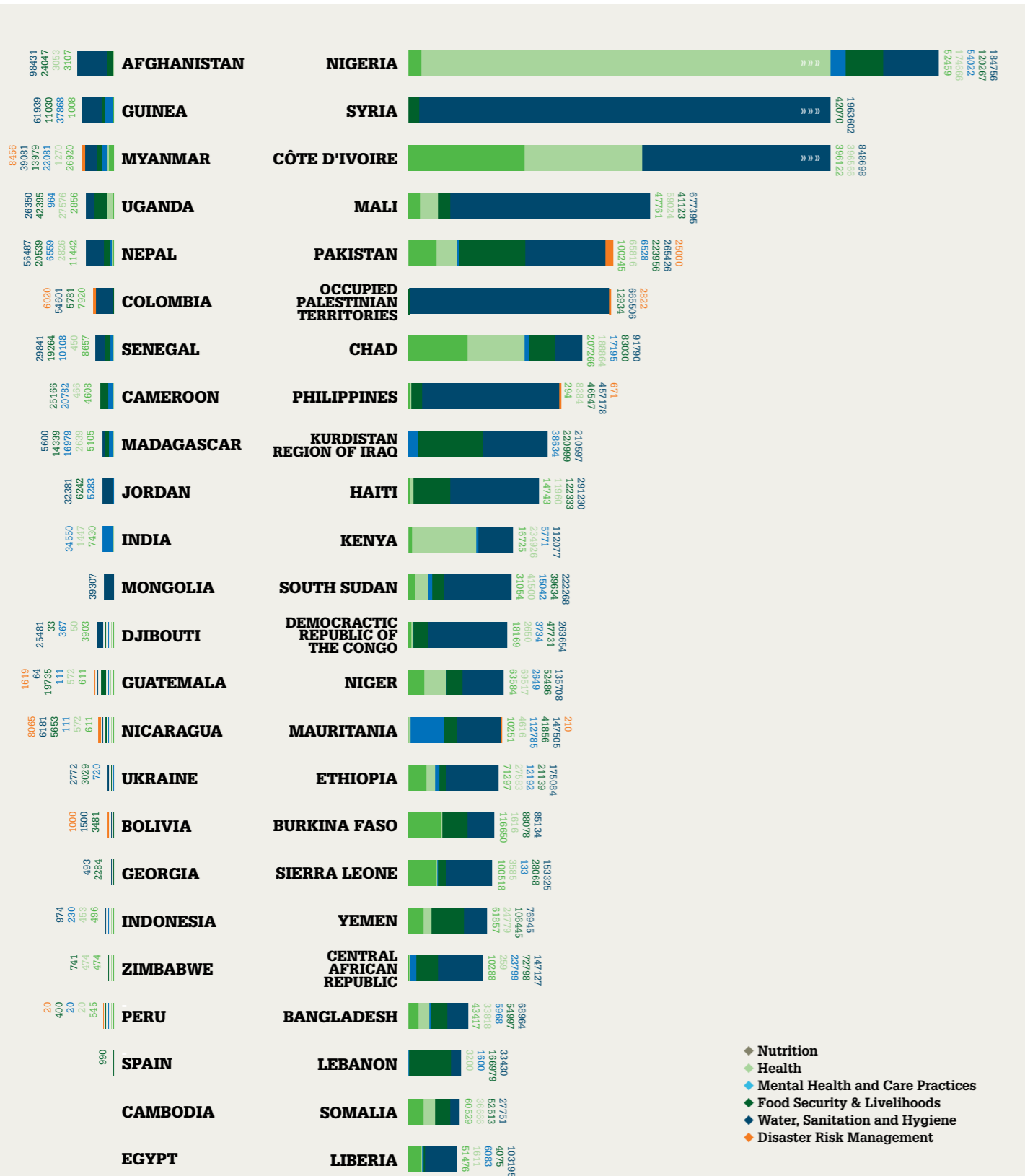
Action Against Hunger is further connecting with civil society organisations as well as nutrition and humanitarian networks to expand our influencing capacity with key messages taken up and also promoted by partners. Over 85 civil society organisations had joined the Generation Nutrition campaign by the end of 2015, supporting Action Against Hunger efforts for scaling up treatment and prevention of acute undernutrition globally, and in 5 different high burden countries (Kenya, Philippines, Burkina Faso, Nepal and India) as well as in a number of HQ countries. Action Against Hunger has also supported the creation of or actively participated into Scaling Up Nutrition Civil society alliances in various country offices (Madagascar, Chad, Haiti, Nepal, Kenya etc). Action Against Hunger was also instrumental in bringing together different organisations to pursue accountability and national commitments around the framework of action agreed at the Second International Conference on Nutrition in 2014. Through 2015 Action Against Hunger continued to take an international leadership role in the Scaling Up Nutrition Movement and the International Coalition on Advocacy for Nutrition among other networks. In addition, Action Against Hunger has also developed and actively contributed to networks working in other relevant issues such as climate change and humanitarian action.



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# ANNEX 01

## INTERNATIONAL BENEFICIARIES BY COUNTRY & SECTOR 2015



- ◆ Nutrition
- ◆ Health
- ◆ Mental Health and Care Practices
- ◆ Food Security & Livelihoods
- ◆ Water, Sanitation and Hygiene
- ◆ Disaster Risk Management

# ANNEX 02

## RESEARCH PROJECTS, PARTNERS & SECTORS

**NUTRITION HEALTH**

- ◆ MANGO  
University of Copenhagen; Center for Disease Control and Prevention; University College of London
- ◆ OptiDiag  
AGROSPARISTECH; Institute of Tropical Medicine Antwerp; University College London; Duke University
- ◆ MAM'Out  
Institute of Tropical Medicine Antwerp; Ghent University; Centre for Disease Control and Prevention; Institut de Recherche en Sciences de la Sante
- ◆ Cost-effectiveness of MAM'Out in Burkina Faso  
AGROSPARISTECH; Ghent University; Institut de Recherche en Sciences de la Santé; Center for Disease Control and Prevention
- ◆ C-Project  
Aga Khan University; University of Bamako; National Institute of Research in Public Health
- ◆ Kwashiorkor mapping  
CMAM Forum; World Health Organisation; UNICEF
- ◆ Analysis of current and future trends in the treatment of SAM  
University of Denver
- ◆ Financing the sustainable scale up of CMAM in high burden country  
International Medical Corps
- ◆ COMPAS – Improving the treatment of Moderate Acute Malnutrition: developing and piloting a new protocol  
International Rescue Committee; London School of Hygiene and Tropical Medicine
- ◆ Effects of a lipid-based nutrient supplement on Haemoglobin levels & anthropometric indicators in children from five districts in Huánuco, Peru  
University of Cadiz; Group for the Analysis of Development (GRADE); National Centre for Food and Nutrition of the Institute of Health (Peru)
- ◆ SAM Photo Diagnosis  
Nutritional Epidemiology Group (EPINUT) of Complutense University of Madrid
- ◆ Development and testing of a simplified, standardised, mid upper arm circumference (ClickMUAC) bracelet for use by mothers and caregivers for the screening of severe acute malnutrition (SAM) at community level  
University of Tampere; Brixton Health; Michigan Tech
- ◆ Malinea Project: Malnutrition and infections among children in Africa  
Pasteur Institute Network; GRET

**WATER, SANITATION & HYGIENE**

- ◆ Water, Sanitation & Hygiene in urban cold climate  
University of Sciences and Technology- Beijing
- ◆ Hydrological study of the Madagascar karst  
Avignon
- ◆ Systematic review of Water, Sanitation and Hygiene humanitarian practices based on 10 Years of capitalisation  
Tufts University
- ◆ Water point management in Burkina Faso
- ◆ Hygiene improvement in health centres in Ivory Coast
- ◆ Urban Water, Sanitation and Hygiene in Guinea
- ◆ Monitoring chlorine production in health centres in Chad
- ◆ CAP survey methodology in Haiti  
Zie – International Institute for Water and Environmental Engineers
- ◆ Water, Sanitation and Hygiene in nutrition principles in Chad  
EOHS
- ◆ Water, Sanitation and Hygiene in urban cold climate in Mongolia: grey water
- ◆ Water, Sanitation and Hygiene in urban cold climate in Mongolia: social marketing  
University of Sciences and Technology - Beijing
- ◆ Water governance study in Djibouti
- ◆ La prise en compte du genre dans les projets d'urgence humanitaire à travers les programmes d'accès à l'eau, à l'assainissement et à l'hygiène  
Paris XIII
- ◆ 3D printing for pump spare parts from recycling in Kenya  
Michigan Tech
- ◆ Sécurisation des communautés exposées et lutte contre les réticences dans le cadre d'une crise de Maladie à Virus Ebola- développement d'une méthodologie de prévention, contrôle et surveillance à base communautaires pour la lutte contre la MVE en Guinée Conakry

**FOOD SECURITY & LIVELIHOODS**

- ◆ Post-harvest management technologies for reducing aflatoxins contamination in maize grain and exposure to humans  
University of Zimbabwe
- ◆ KACHE Project: Increasing the speed, security and impact of aid response through the use and scalability of e-payments for affected population during humanitarian operations  
Red Rose

**MENTAL HEALTH & CARE PRACTICES**

- ◆ Cost effectiveness of FUSAM in Nepal
- ◆ Effect of mental health and care practices prevention project in Bangladesh  
International Centre for Diarrhoeal Disease Research, Bangladesh
- ◆ Assessment tool for breastfeeding  
JHP
- ◆ Walking figures and child development
- ◆ Transmission of trauma from mother to child
- ◆ FUSAM  
International Centre for Diarrhoeal Disease Research, Bangladesh

**MULTISECTOR TRANVERSAL**

- ◆ Stunting in Madagascar  
Michigan University
- ◆ Research on Food Assistance for Nutritional Impact (REFANI)
- ◆ Undernutrition Prevention and Treatment through improved Assessments, Knowledge and Evidence (UPTAKE)  
Emergency Nutrition Network, University College London, Concern Worldwide
- ◆ PUR 2- Evaluating the effectiveness of safe drinking water in SAM treatment  
John Hopkins University; Procter & Gamble
- ◆ TRUST Creating and Enhancing trustworthy, responsible, and equitable partnerships in international research  
University of Central Lancashire (UCLAN); Forum for Ethics Review Committees in India (FERCI); Institut National de la Santé et de la Recherche Médicale (INSERM); Partners for Health and Development in Africa (PHDA); UNESCO; Signosis; FGVA; SAAI; European and Developing Countries Clinical Trials Partnership (EDCTP); Council on Health Research for Development (COHRED)
- ◆ Action Against Hunger Open Data Kit (ODK Project)
- ◆ Quadnut  
Institute of Tropical Medicine Antwerp

**DISASTER RISK MANAGEMENT**

- ◆ Pastoral monitoring system to support climate change resilience in Sahel Project  
SNV Netherlands Development Organisation; Hoefsloot Spatial Solutions (HSS); Orange; Institut d'Economie Rural du Mali (IER); European Space Agency; Geoville; Flemish Institute of Technology; Ministry of Livestock (Mali and Niger); Réseau Bilateral Maroobe

**ANNEX**  
**03** INTERNATIONAL  
PUBLICATIONS 2015



**NUTRITION**

- ♦ Nutrition surveillance in emergency contexts: South Sudan case study
- ♦ Comparison of clinical characteristics and treatment outcomes of children selected for treatment of Severe Acute Malnutrition using mid-upper arm
- ♦ Inconsistent diagnosis of acute malnutrition by weight-for-height and mid-upper arm circumference: contributors in 16 cross-sectional surveys from South Sudan, the Philippines, Chad, and Bangladesh
- ♦ The MAM'Out project: a randomised controlled trial to assess multiannual and seasonal cash transfers for the prevention of acute malnutrition in children under 36 months in Burkina Faso
- ♦ Projet MAM'Out: des transferts monétaires saisonniers et pluriannuels pour prévenir la malnutrition aigüe dans la Tapoa
- ♦ Low-dose RUTF protocol and improved service delivery lead of good programme outcomes in the treatment of uncomplicated SAM: a programme report from Myanmar
- ♦ Action Against Hunger MANGO project- Poster, presentation & flyer
- ♦ Optidiag project- Presentation
- ♦ Coverage of community-based management of Severe Acute Malnutrition programmes in twenty-one countries, 2012-2013, PLOS ONE
- ♦ Measuring coverage at the national level in Mali- Field exchange
- ♦ A single coverage estimator for use in SQUEAC, SLEAC, and other CMAM coverage assessments- Field exchange
- ♦ Global Nutrition Report 2015
- ♦ The Coverage Project: a national partnership for evaluating CMAM services in Nigeria- Field Exchange
- ♦ State of SAM Coverage: An overview from 2013 and 2014
- ♦ What is the bottleneck analysis approach for the management of severe acute malnutrition?
- ♦ The Coverage Project: a national partnership for evaluating CMAM services in Nigeria



**NUTRITION HEALTH**

- ♦ Procesamiento y utilización de alimentos ricos en hierro para la prevención de anemia en niños y niñas menores de tres años en la zona Andina
- ♦ Estrategias comunitarias de grupos de apoyo de madres. Experiencia del programa de anemia NO



**MENTAL HEALTH & CARE PRACTICES**

- ♦ Research priorities to improve the management of acute malnutrition in infants aged less than six months (MAMI)



**WATER, SANITATION & HYGIENE**

- ♦ PhD: A study on sustainable sanitation technologies for vulnerable peri-urban communities in Ulan Bator, Mongolia
- ♦ Support technique et préparation d'une étude hydrogéologique en milieu karstique
- ♦ Sustainable sanitation solutions for peri-urban Mongolia: ways to reduce Water, Sanitation and Hygiene borne hazards and vulnerability
- ♦ Evaluation of a closed-loop sanitation system in a cold climate: a case from peri-urban areas of Mongolia
- ♦ Traditional closed-loop sanitation systems in peri-urban and rural Afghanistan
- ♦ Composting manual for cold climate countries
- ♦ Sustainable sanitation for vulnerable populations in peri-urban areas of Ulan Bator, Mongolia
- ♦ Exploring funding for sustainable sanitation in Mongolia: perceptions from local communities and institutional stakeholders
- ♦ Greywater treatment in peri-urban nomadic communities: a case study on 'greenhouse system' in Ulaanbaatar, Mongolia An assessment of the feasibility of household greywater treatment in water stressed regions in cold climates using 'Ice-Block Units': a case in Ulaanbaatar, Mongolia
- ♦ Innovative composting methods to heighten resource recovery from human faeces without risk to human or environmental health
- ♦ Governance study- Djibouti
- ♦ Community Led Ebola Management and Eradication (CLEME)



**DISASTER RISK MANAGEMENT**

- ♦ Technical Sheet: Response to 2012 food crisis in Sahel (Chad/Mauritania/Niger/Burkina Faso)
- ♦ Participatory risk analysis and integrated interventions to increase resilience of pastoral communities in Northern Kenya



**FOOD SECURITY & LIVELIHOODS**

- ♦ Zimbabwe's smallholder farmers seek to address food security and health risks with air tight storage technology



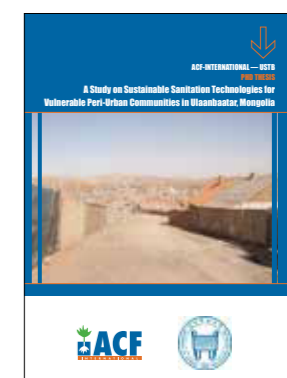
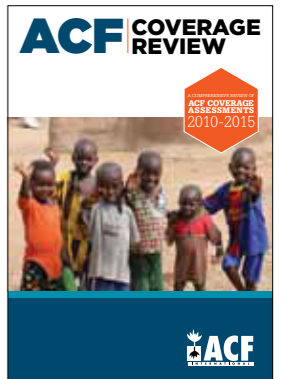
**WATER, SANITATION & HYGIENE**

- ♦ EVD, from cremation to safe and dignified burials in Montserrado County, Liberia
- ♦ EVD, coordinating the WaSH response in Liberia
- ♦ Greater investment in water, sanitation and hygiene is key to the fight against undernutrition
- ♦ "Water, Sanitation and Hygiene-IN-NUT" Programme: Integration of a minimum Water, Sanitation and Hygiene package in undernutrition treatment programmes
- ♦ Appui à la mise en oeuvre de la stratégie du ministère de la santé en terme de prévention et le traitement de la diarrhée avec du Zinc et du Ors dans la commune de Namounou Tapoa, Région de l'Est-Burkina Faso
- ♦ La prise en compte du genre dans les projets d'urgence humanitaire à travers les programmes d'accès à l'eau, à l'assainissement et à l'hygiène
- ♦ Access to emergency sanitation for Pakistani women, a case study in Khyber Pakhtunkhwa, Pakistan- Abstract and Case Study
- ♦ Replicating the sanitation marketing model of the low cost product "Easy Latrine" in Sindh Province, South Pakistan- Abstract and Case Study
- ♦ Water treatment with Chulli improved cooking stove in rural areas of Pakistan- Abstract and Case Study
- ♦ Sécurisation des contacts et mise en place de plans communautaires de prévention et de riposte- Guide méthodologique



**MULTISECTOR**

- ♦ Undernutrition risk factors and their interplay with nutrition outcomes: nutrition causal analysis pilot in Kenya
- ♦ The REFANI Pakistan study—a cluster randomised controlled trial of the effectiveness and cost-effectiveness of cash-based transfer programmes on child nutrition status: a study protocol'



## ANNEX

## 04

LIST OF PARTNERSHIPS  
BY COUNTRY**AFGHANISTAN**

- Afghan Heath and Development Services
- Afghanistan Centre for Training and Development (ACTD)
- Agency for Assistance and Development of Afghanistan (AADA)
- Bakthar Development Network
- Care of Afghan Families
- HealthNet
- Humanitarian Assistance for Development of Afghanistan (HADAF)
- International Medical Corps
- Medair
- Medical Management and Research Courses Afghanistan (MMRCA)
- Move
- Move Welfare Organisation (MWO)
- Organisation for Health Promotion
- Premiere Urgence- Aide Medicale Internationale
- Public Nutrition Department
- Save the Children
- Swedish Committee for Afghanistan (SCA)

**BANGLADESH**

- Bangladesh National Development Programme
- Christian Aid
- Danish Church Aid
- International Centre for Diarrhoeal Disease Research, Bangladesh (ICDDR)
- International Organisation for Migration
- Manab Mukti Sangsta (MMS)
- MuslimAid
- Nazrul Smriti Sangsad (NSS)
- Patuakhali Science and Technology University (PSTU)
- Shushilan
- Social Assistance and Rehabilitation for the Physically Vulnerable (SARPV)
- Social Health and Education Development (SHED)
- Union Council in Barguna
- World Food Programme (WFP)

**BOLIVIA**

- CEPAC Agro-business Center
- Civil Defence Vice Ministry
- Gruppo di Volontariato Civile (GVC)
- Guarani Indigenous University of Bolivia
- Local Government of Guayaramerin
- Local Government of Ixiamas
- Local Government of Riberalta
- Local Government of San Borja
- Local Government of Santa Ana de Yacuma
- Local Health Services
- Ministry of Health- Bolivia
- Tekove Katu Technical School
- UNICEF
- World Vision

**BURKINA FASO**

- Alliance Technique d' Assistance au Développement
- Association d' Appui à la Promotion du Développement Durable des Communautés (APDC)
- Centre for Disease Control and Prevention
- Chant des Femmes
- Christian Aid
- Conseil National de Secours d'Urgence et de Réhabilitation
- Diapaga Health District
- Direction Provinciales des Ressources
- Directions Provinciales de l'Agriculture
- East Health Regional Office
- Fada Health District
- Groupe de Recherche et d'Échanges Technologiques
- Help
- Institut de Recherche en Sciences de la Santé
- Internews
- King's College London
- Met Office
- Municipalities of Intervention

- Office de Développement des Églises Évangéliques
- Oxfam
- Pama Health District
- Schools of intervention
- Service Déconcentré du Ministère de l'Action Sociale
- Société Nationale de Gestion du Stock de Sécurité Alimentaire
- Télévision du Burkina
- Terre des Hommes
- Tin Tua
- Université de Copenhague

**CENTRAL AFRICAN REPUBLIC**

- Agence Nationale de l'Eau et de l' Assainissement
- Centres de Santé
- Complexe Pédiatrique de Bangui
- Danish Refugee Council (DRC)
- Direction Générale de l'Hydraulique
- Médecins Sans Frontières (MSF)
- Ministère de la Santé Publique
- Société des Eaux de la Centrafrique
- Solidarité Internationale

**CHAD**

- Appui Solidaire pour le Renforcement de l' Aide au Développement (ASRAD)
- Association Action pour la Recherche et le Développement du Kanem (ARDEK)
- Délégation Régionale Sanitaire
- Ministère de l'Hydraulique

**COLOMBIA**

- Anglo-Colombian School
- Health Secretary of Putuyamo Department
- Integral Attention and Reparation to Victims Unit (UARIV)
- Link
- Low Putumayo Power Company Foundation
- Municipality of Puerto Leguizamo, Putumayo
- Municipality of Puerto Asís, Putumayo
- Municipality of Tieraalta, Córdoba
- Municipality of Valencia, Córdoba
- Oxfam
- Programme for Peace and Development of Córdoba and Uraba
- Restaurants
- SEPASVI
- Tilata School
- UNICEF
- Unilever Food Solution
- Universidad del Rosario
- University of Boyacá
- University Pontificia Bolivariana

**DEMOCRATIC REPUBLIC OF CONGO**

- Health Zone Central Office
- Livestock, Fishery, and Agricultural Provincial Institute
- Ministry of Planning
- National PRONANUT
- National Rural Hydraulic Service
- Provincial PRONANUT
- Provincial Public Health Division/Inspection
- Water, Sanitation and Hygiene Consortium and Danish Refugee Council (DRC)

**DJIBOUTI**

- Ecologie du Village Association (EVA)
- Egué-Kala
- La Caravane du Développement
- Ministère Agriculture, Eau, Pêche et Élevage- Djibouti
- Ministère de la Santé- Djibouti
- Paix and Laït

**ETHIOPIA**

- CARE
- Cordaid

- Farmer Committees
- GOAL
- International Rescue Committee (IRC)
- Ministry of Health
- Regional and Zonal Agricultural Offices
- Regional Health Bureau
- Regional, Zonal and Local DRR Committees
- Rural Savings and Credit Cooperative (RUSACCO)
- Save the Children
- Water Social Health and Education Development (SHED) Committees

**GEORGIA**

- ENPARD Project Implemented as Partners of a Consortia led by Oxfam including RCDA and Elkana
- LIFE Project Implemented by Action Against Hunger in Partnership with RDPG, Atinati, EFD, and LAG/SPF

**GUATEMALA**

- Alcadía Camotan
- Alcadía de Olopa
- Alcadía Jocotán
- Alcadía San Juan Ermita
- Comité Regional de Recursos Hidráulicos
- Famine Early Warning Systems Network (FEWSNET)
- Gruppo di Volontariato Civile
- Médecins du Monde
- Mercy Corps
- Ministerio d' Agricultura
- Ministerio de Salud
- National Coordination for Disaster Reduction (CONRED)
- Secretaría de Seguridad Alimentaria y Nutricional
- Télécoms Sans Frontières
- Trocaire
- Universidad de Alcalá de Henares
- Universidad de la Cuenca del Plata
- Universidad de San Carlos

**GUINEA**

- Concern
- Department of Feeding and Nutrition
- Ebola Prefectoral Coordination
- Prefectoral Health Directorate
- Regional Health Directorate

**HAITI**

- CARE
- Direction Nationale de l'Eau Potable et de l' Assainissement
- International Organisation for Migration (IOM)
- Ministère de la Sante Publique et de la Population
- Ministère des Affaires Sociales et du Travail
- Oxfam
- World Food Programme (WFP)

**INDIA**

- Centre for Community Economics and Development Consultants Society (CECOEDECON)
- Coalition for Nutrition and Food Security
- Fight Hunger Foundation (FHF)
- Foundation for Mother and Child Health (FMCH)
- Médecins Sans Frontiers
- Ministry of Health- Madhya Pradesh
- Ministry of Health- Rajasthan
- Mumbai Smiles
- Nutrition Mission Maharashtra
- Sion Hospital
- SPHERE
- Tata Institute of Social Sciences
- UNICEF
- Vaagdhara
- Washington University
- Water Aid
- WISH Foundation
- World Vision

**INDONESIA**

- CIS Timor
- District Health Offices- Kupang
- Ministry of Health- Jakarta
- Public Works
- UNICEF

**CÔTE D'IVOIRE**

- Agence d' Aide à la Coopération Technique et au Développement (ACTED)
- Higher Institute of Technology of Ivory Coast (ESCOM)
- Terre des Hommes

**JORDAN**

- Jordan Hashemite Charity Organisation

**KENYA**

- Agence d' Aide à la Coopération Technique et au Développement (ACTED)
- Bayer International
- County Government- Dabaab
- County Government- Isiolo
- County Government- Nairobi
- County Government- Nakuru
- County Government- Tana River
- County Government- Wajir
- County Government- West Pokot
- Intergovernmental Authority on Development (IGAD)
- Kenya Climate Change Working Group
- Kenyan National Government
- Mercy Corps
- Ministry of Health
- Ministry of Planning
- National Drought Management Authority
- Save the Children
- Vétérinaires Sans Frontières (VSF)
- World Health Organisation (WHO)

**LEBANON**

- Arc-en-ciel
- Bekaa Water Establishment
- South Lebanon Water Establishment

**LIBERIA**

- Concern
- EpiCenter
- Ground Water Exploration Inc. (GWEI)
- International Rescue Committee (IRC)
- Ministry of Health
- Ministry of Health, Nutrition Division and Country Health Team
- Oxfam
- Population Services International (PSI)
- TearFund
- WaterAid
- Welthungerhilfe (WHH)

**MADAGASCAR**

- Association Socio-Sanitaire Organisation Secours
- CARE
- Communautés Urbaine d'Antananarivo
- GRET
- Handicap International
- Institut des Métiers de la Ville
- Médecins du Monde
- Mouvement Français pour le Planning Familial
- Plateforme des OSC pour le SUN
- Programme Alimentaire Mondial (PAM)
- Santé Sud
- Service de Santé du District
- Université d' Avignon et des Pays de Vaucluse
- Voahary Salama

**MALI**

- Aide Action Gao
- Associations de Santé Communautaire
- Centre de Santé de Référence
- Centre de Santé de Référence de Bourem
- Centre de Santé de Référence du Cercle de Tombouctou
- Centres de Santé Communautaire
- Communities
- Community Health Association (ASACO)
- Danish Refugee Council (DRC)
- Développement Social, Services de l'Élevage, de l'Agriculture et le Génie Rural
- Direction Nationale de la Santé
- Direction Régionale de la Santé de Tombouctou
- Direction Régionale de l'Agriculture
- Direction Régionale de l'Hygiène et de l' Assainissement
- Direction Régionale du Génie Civil
- District Sanitaire de Ansongo
- District Sanitaire de Bourem
- District Sanitaire de Gao
- Faculté de Médecine
- L'Hôpital Regional de Gao
- L'Institut de Recherche en Santé Publique
- Oxfam
- Partenaires de l'Éducation
- Première Urgence
- Prestataires Réalisation Forages, Aires de Lavage et Puitsard, Électrification CSCOMS, Incinérateurs, Réhabilitation Latrines, Fournisseurs d'Équipement et de Consommables Bureau
- Radios de Proximité
- Red Cross
- Service de l' Assainissement Contrôle des Pollutions et des Nuisance
- Service de l'Hydraulique
- Service du Développement Social et de l'Économie Solidaire
- Troupe Théâtrale
- UNHCR

**MAURITANIA**

- Académie des Sciences, des Arts, des Cultures d' Afrique et des Diasporas Africaines (ASCAD)
- ActionAid
- ADICOR
- Alpha Chapos
- AMEG
- Association Mauritanienne d' Aide aux Malades Indigents (AMAMI)
- Association pour la Recherche et le Développement en Mauritanie (ARDM)
- Association pour le Développement des Populations (ASDEP)
- Association pour le Développement du Guidimakha (ADG)
- Association pour le Développement Intégré de Guidimaghaest (ADIG)
- Au Secours
- Collectivité Local
- Délégation Regional de l'Agriculture
- Direction Régional de l'Action Sanitaire
- Djikké
- Famine Early Warning Systems Network (FEWSNET)
- Food Security Commision (CSA)
- GRET
- Groupe de Rechercher et de Réalisation pour le Développement Rural
- Hôpital de Nema
- Hôpital de SLB
- Hôpital Regional de Sélibaby
- Médecins du Monde
- Ministère de la Santé
- Ministre des Affaires Sociales, de l' Enfance et de la Famille
- Mutuelle Féminine de Solidarité d' Entraide d' Epargne et de Crédit (MFSEEC)
- Programme Alimentaire Mondial (PAM)
- Regional Direction for Health Action Guidimakha (DRAS)
- Regional Direction for Hydraulics and Sanitation (DRHA)
- Reseau des ONG du Gorgol (RONG)
- TENMIYA- Association de Développement
- UNICEF

**MONGOLIA**

- Agricultural University of Mongolia
- District of Ulaanbaatar
- Medical Centre of Songino Khairkhan
- Ministry of Construction and Urban Development
- Ministry of Education and Sciences
- Ministry of Environment and Green Development
- Mongolian Health Environmental Solution and Information Centre
- Mongolian University of Science and Technology
- Press Institute of Mongolia
- River Basin Authorities
- Sentier d' Action Against Hunger
- The District Authority of Bayanzurkh
- The District Authority of Songino Khairkhan
- The Ulaanbaatar City
- The Water Services Regulatory Commission of Mongolia
- The Water Supply and Sewerage Authority of UB City
- Tolgoit CBO
- UNICEF
- University of Science and Technology of Beijing
- Water, Sanitation and Hygiene Action Mongolia

**MYANMAR**

- ActionAid
- CARE
- Help Age
- International Organisation for Migration (IOM)
- Karuna Myanmar Social Services
- Kay Htoe Boe
- Kayah Baptist Association
- Kayah Phuu Baptist Association
- Ministry of Health
- Oxfam
- Plan
- Save the Children
- Solidarité Internationale
- UN Habitat
- Water, Sanitation and Hygiene Cluster

**NEPAL**

- Action for Enterprise
- Alliance for Social Mobilization
- CARE
- Development Project Service Centre
- District Public Health Office- Makwanpur
- District Public Health Office- Nuwakot
- District Public Health Office- Rasuwa
- District Public Health Office- Saptari
- Hellen Keller International
- Integrated Tadi Development Society
- International Centre for Diarrhoeal Disease Research, Bangladesh
- Langtang Area Conservation Concern Society
- Local Initiatives for Biodiversity
- Nepal Water for Health
- Nepal Technical Assistance Group (NTAG)
- PATH
- Research and Development (LI-BIRD)
- Save the Children
- Support Activities for Poor Producers of Nepal
- Tango International
- Voices of Children

**NICARAGUA**

- Alcalá
- Association of Municipalities of Madriz (AMMA)
- CARE
- Mines Advisory Group (MAG)
- Municipality- Macuelizo
- Municipality- San José de Cusmapa
- Municipality- San Lucas
- Municipality- Somoto
- Municipality- Telpaneca
- Municipality- Totogalpa

## ANNEX 04 LIST OF PARTNERSHIPS BY COUNTRY

- Municipality- Yalagüina
- National Autonomous University of Nicaragua (UNAN-FAREM)
- National Risk Management System- SINAPRED
- Plan
- Union de Cooperativas Agropecuarias del Norte de Segovia (UCANS)

### NIGER

- AID
- Demi-E
- District Sanitaire- Keita
- District Sanitaire- Madaoua
- District Sanitaire- Mayahi
- Karkara

### NIGERIA

- Ministry of Local Governments
- Rural Water Supply and Sanitation Agency (RUWASA)
- State Emergency Management Agency (SEMA)
- State Hospital Management Board
- State Ministry of Health
- State Primary Health Care Management Board

### OCCUPIED PALESTINIAN TERRITORIES

- Al Amal Cooperative for Animal Husbandry
- Al-Asdiqaa Association for People of Special Need
- Al-Wedheh Cooperative Association for Livestock Development
- Ar Ramadin Village Council
- Bani Naim Cooperative for Animal Husbandry
- Coastal Municipalities Water Utility
- Future Association for Culture and Development
- Idhna Cooperative for Animal Husbandry
- Khan Younis Agricultural Cooperative Society Ltd.
- Land Research Centre
- Masafar Yatta Cooperative for Animal Husbandry
- Ministry of Agriculture
- Ministry of Education
- Ministry of Labour
- Palestinian Livestock Development Centre
- Palestinian Water Authorities
- Reyada Association for Social Development
- Roles for Social Change Association
- Rural Women's Development Society
- Susiya Cooperative for Animal Husbandry
- The Charitably Future Society
- Tubas Governorate
- Tubas Water Council
- Wesal for Health and Community Development Association
- Yatta Joint Service Council

### PAKISTAN

- Aga Khan University
- Agriculture Department- Sindh
- Coverage Monitoring Network
- Department of Education- KP
- Department of Education- Sindh
- Department of Health and Provincial Nutritional Cell- KP
- Department of Health- Sindh
- District Disaster Management Unit- KP, Charsadda
- District Disaster Management Unit- KP, Dir Lower
- District Disaster Management Unit- KP, Dir Upper
- District Disaster Management Unit- KP, Nowshera
- District Health Department- Sindh
- Emergency Nutrition Network
- Food and Nutrition Technical Assistance (FANTA)
- Harvard School of Public Health
- International Rescue Committee (IRC)
- John Hopkins University
- LHWS Programme as Part of the Planning and Primary Healthcare Unit of Department of Health- Sindh
- Livestock Department- Sindh
- Merlin
- Nutrition Support Programme- Sindh
- People's Primary Healthcare Initiative- Sindh
- Provincial Disaster Management Agency- KP

- Public Health Engineering Department- KP
- Public Health Engineering Department- Sindh
- Save the Children
- TDP Secretariat- KP
- UNICEF
- University of Malakand- KP
- University of Peshawar- KP
- USAID
- World Food Programme (WFP)

### PERU

- Cámara de Comercio, Industria y Turismo Ayacucho
- Centro de Salud de Ajoyani
- Direccion Regional de Salud de Huánuco
- Group for the Analysis of Development (GRADE)
- Instituto Superior Tecnológico Huanta
- Mesa de Concertacion para la Lucha contra la Pobreza (Puno)
- Mesa de Concertacion para la Lucha contra la Pobreza (Ayacucho)
- Ministerio de Desarrollo e Inclusion Social (MIDIS)
- Ministerio de Salud
- Minsur
- Municipalidad Distrital de Huamanguilla
- Municipalidad Distrital de Iguain
- Municipalidad Distrital de Luricocha
- Municipalidad Distrital de Santillana
- Municipalidad Distrital de Ajoyani
- Municipalidad Provincial de Huanta
- Red de Salud Huánuco
- TASA Tecnológica de Alimentos
- Unidad Ejecutora Red de Salud Ayacucho Norte (UERSAN)
- Universidad Nacional Agraria La Molina

### PHILIPPINES

- CARE
- CHD IX
- Department of Interior and Local Government
- Department of Social Welfare and Development
- Department of Social Welfare and Development- Cebuana Lhuillier
- International Organisation for Migration (IOM)
- Jesse Robredo Institute of Governance of De La Salle University
- Kasarian-Kalayaan
- Local Government Unis
- Mindanao Land Foundation Inc.
- MLGU- Antipas
- MLGU- Arakan
- MLGU- Magpet
- MLGU- Matalam
- MLGU- President Roxas
- Municipality of Calinog
- Municipality of Lemery
- Municipality of Pntevedra
- Municipality of San Dionisio
- National Nutrition Council
- Plan
- Provincial Health Office of Capiz
- Provincial Health Office of Iloilo
- Save the Children
- University of the Philippines

### SENEGAL

- Cellule de Lutte Contre la Malnutrition
- Conseil National pour la Sécurité Alimentaire
- Fédération des Associations du Fouta pour le Développement
- Inspection d'Académie de Dakar
- Institut Pasteur de Dakar
- Ministère de la Santé et de l'Action Sociale
- Région Médicale de Saint Louis
- Région Médicale de Matam
- Union pour la Solidarité et l'Entraide-ONG

### SIERRA LEONE

- CARE
- Concern
- District Health Management Team

- Focus 1000
- GOAL
- International Rescue Committee (IRC)
- King's College London
- Ministry of Health
- Oxfam
- Save the Children
- Splash
- Welbodi
- Welthungerhilfe (WHH)

### SOMALIA

- Adventist Development and Relief Agency (ADRA)
- Cadaado
- CARE
- CESVI Onlus
- Concern
- Cooperazione Internazionale
- Danish Refugee Council (DRC)
- El Barde Primary Health Care Organisation (EPHCO)
- Hidig Relief and Development Organisation
- International Rescue Committee (IRC)
- Mardo
- Norwegian Refugee Council (NRC)
- Oxfam
- Puntland Ministry of Livestock
- Save the Children
- Sowelpa
- Wardi Relief and Development Initiatives
- World Vision

### SOUTH SUDAN

- Christian Mission Aid
- Dorcas Aid International
- Hold the Child
- Médecins Sans Frontières (MSF)
- Ministry of Agriculture
- Ministry of Health
- Ministry of Rural Water and Sanitation
- Norwegian Church Aid
- UNICEF
- World Food Programme (WFP)
- World Vision

### SYRIA

- Arab Center for the Studies of Arid Zones and Dry Lands
- Ministry of Agriculture and Agrarian Reform
- Ministry of Local Administration
- Ministry of Water Resources
- Syrian Arab Red Crescent

### UGANDA

- UNHCR
- UNICEF
- Office of the Prime Minister
- Ministry of Health
- AgriNet
- Community Rural Empowerment and Support Organisation (CRESO)
- Postbank Uganda

### YEMEN

- CARE
- Ministry of Public Health and Population
- Norwegian Refugee Council (NRC)
- UNICEF

### ZIMBABWE

- International Rescue Committee (IRC)
- Ministry of Agriculture
- University of Zimbabwe





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