



ACTION AGAINST HUNGER
ANNUAL REPORT 2016



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FOREWORD

Action Against Hunger is continuously developing and evolving in response to humanitarian and undernutrition crises across the globe. Recently, we have put together a new International Strategic Plan to guide us through new goals and provide an improved strategic framework for our work across our global organisation. The 2016-2020 strategy strengthens our work with partners and our approaches to policy and programme implementation. The new strategy is articulated around our ambition to contribute to three major aims: mitigate the consequences of hunger; address the causes of hunger; and change the way hunger is viewed and addressed. To measure our impact, we have selected 5 goals:

GOALS

- 1.** Reduction of mortality in children under five years' old
- 2.** Reduction in prevalence of Chronic and Acute Undernutrition
- 3.** Increase in coverage of programmes to treat Severe Acute Undernutrition
- 4.** Unmet needs within the scope of Action Against Hunger areas of expertise will be covered during emergencies
- 5.** Programme countries' and international community's strategies on undernutrition are improved by our provision of reliable evidence and expertise

We will work together with the international, national and local communities in order to achieve substantial change towards the 2030 Agenda for Sustainable Development and the Sustainable Development Goals (SDGs).

We will take further action to promote gender equality across our operations, contributing to SDG 5: Achieve gender equality and empower all women and girls. Since 2013, we have been working towards an organisational shift that would help us achieve sustainable equality programming. Starting next year, the Annual Progress Report will include specific indicators to measure progress against the commitment we have made in our Gender Policy.

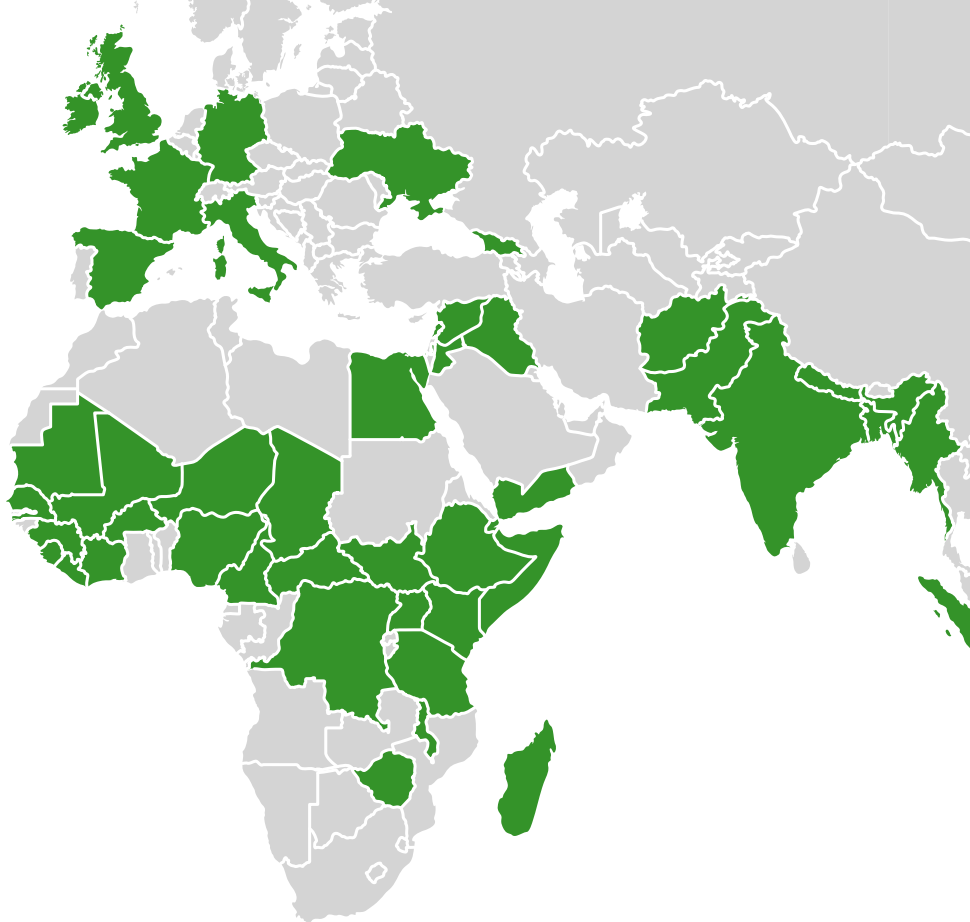
**WE WILL WORK
TOGETHER WITH
OUR PARTNERS
AROUND THE
WORLD TO MOVE
CLOSER TO OUR
VISION OF A WORLD
FREE FROM HUNGER**



**ACTION
AGAINST
HUNGER**

2016

■ WHERE WE WORK



WATER, SANITATION AND HYGIENE



**5.8 MILLION
PEOPLE REACHED**

1,385,196
cubic meters of water delivered

231,903
hygiene sessions held

50,716
water points improved

2,008
community infrastructures
built or improved

FOOD SECURITY AND LIVELIHOODS



**2.6 MILLION
PEOPLE REACHED**

336,545
livelihood kits distributed

61,528
metric tons of food
aid delivered

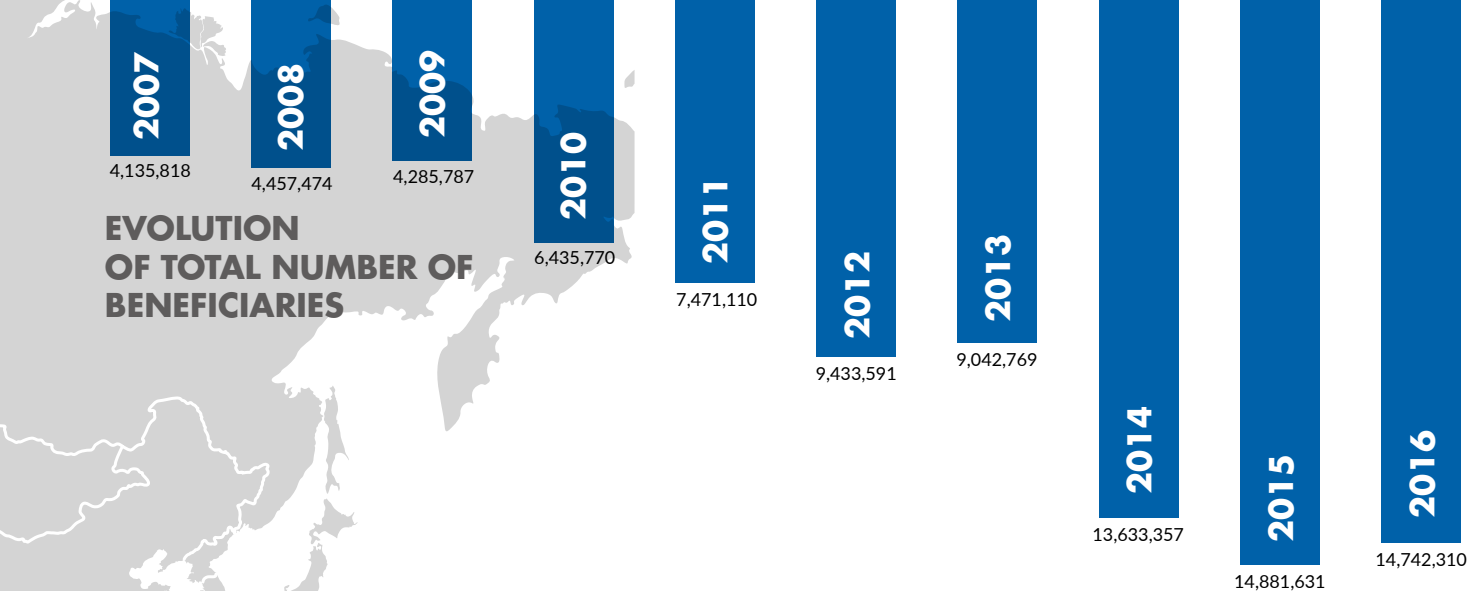


**1.5 MILLION
PEOPLE REACHED**

311,517
treated for severe
acute malnutrition

264,523
treated for moderate
acute malnutrition

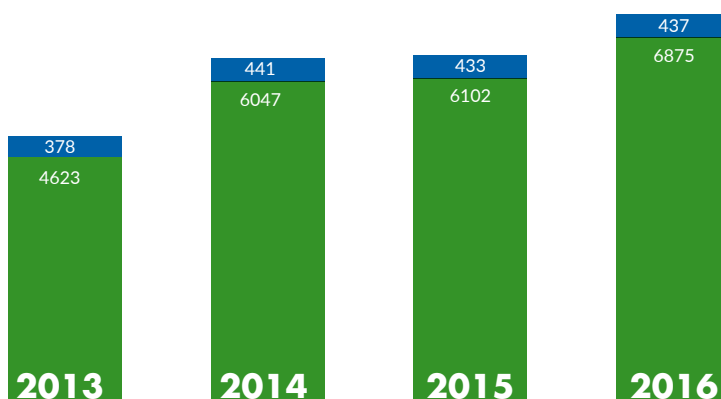
NUTRITION



THERE ARE
7,958
ACTION AGAINST
HUNGER STAFF
MEMBERS
GLOBALLY

INTERNATIONAL
NATIONAL

TOTAL
FIELD
STAFF



3.6 MILLION
PEOPLE REACHED

HEALTH

91,853
health and nutrition
education sessions held

MENTAL HEALTH AND
CARE PRACTICES



930,924
PEOPLE REACHED

DISASTER RISK
MANAGEMENT



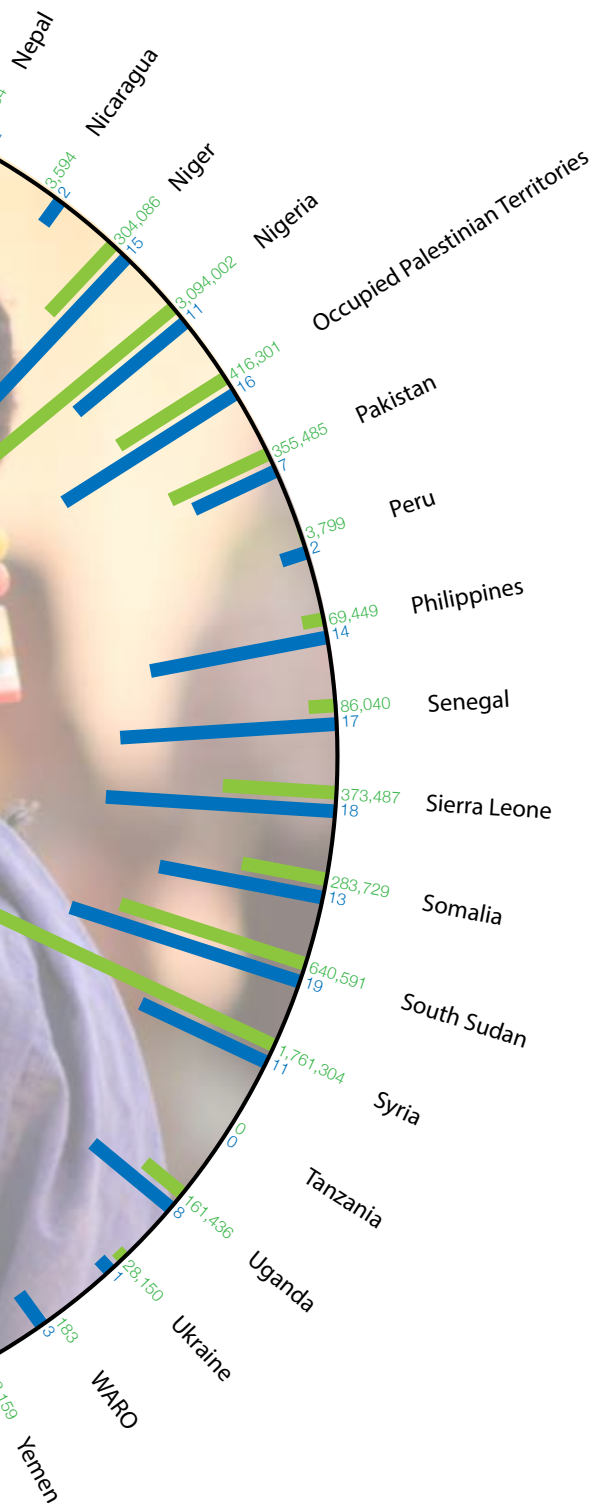
217,635
PEOPLE REACHED

50

COUNTRY AND
REGIONAL OFFICES



487 PROJECTS



**WATER,
SANITATION
& HYGIENE**

25%



NUTRITION

22%



**FOOD
SECURITY &
LIVELIHOODS**

17%



**MENTAL
HEALTH & CARE
PRACTICES**

15%



HEALTH

6%



**FOOD
ASSISTANCE**

6%



**DISASTER RISK
REDUCTION**

5%



OTHER

4%



ACTION AGAINST HUNGER MISSIONS



2016

AFRICA

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BURKINA FASO
CAMEROON
CÔTE D'IVOIRE
DJIBOUTI

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EGYPT
ETHIOPIA
GUINEA
KENYA

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LIBERIA
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MALAWI
MALI
MAURITANIA
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NIGERIA
UGANDA
CENTRAL
AFRICAN
REPUBLIC
DEMOCRATIC
REPUBLIC OF THE
CONGO

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SENEGAL
SIERRA LEONE
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SOUTH SUDAN
CHAD
ZIMBABWE



BURKINA FASO

LOCATIONS

Ouagadougou, Bogandé,
Pama, Diapaga, Fada
N'Gourma

START OF MISSION

2008

NUMBER OF STAFF

182

NUMBER OF BENEFICIARIES

452,859

OPERATING BUDGET

€4,579,890

Burkina Faso is confronted with major challenges: access to jobs, education and health care, and the extensive exposure of rural populations to climate change.

The country is also witnessing strong demographic growth coupled with insufficient economic growth: 57.3% of the population lives on less than one euro per day. Poverty is endemic, with high levels of malnutrition. This is the major cause in 45% of cases of infant mortality, i.e. 29,000 deaths of children under 5 per year.*

In 2016, our teams in the field proceeded with a strategic adjustment, taking into account this context of structural poverty, which is likely to remain the same according to forecasts

over the 2016-2020 period. We have therefore tried to attenuate the consequences of nutrition insecurity, while reinforcing health care systems. To control the weakening of the population, our teams promoted income-generating activities, diversified the means of subsistence and conducted economic recovery programmes. To protect rural populations, we set up activities to prepare for natural disasters and to adapt to climate change.

*State of the World's Children 2015, Unicef



CAMEROON

LOCATIONS

Yaoundé, Batouri,
Bertoua, Maroua

START OF MISSION

2014

NUMBER OF STAFF

98

NUMBER OF BENEFICIARIES

87,068

OPERATIONAL BUDGET

€4,051,240

Owing to its geographic location and economic and political stability, Cameroon represents a prosperous land of exile for its neighbours. Political strife in the Central African Republic as well as the rise of Boko Haram in the Lake Chad region both led to an exodus. In 2016, the Far North region tallied more than 500,000 refugees and displaced people* and, more generally, 7.1 million people are faced with severe food insecurity stemming from this regional crisis. If estimates are accurate, more than 540,000 children will suffer from severe acute malnutrition in 2017.

We have ended the emergency programmes started in the eastern part of the country with Central African refugees and host communities, with the long-term goal of setting up autonomization projects for

these populations and strengthening their livelihoods. Following an escalation in the humanitarian crisis, the Maroua base was opened to operate with health care centres in the district of Tokombere and to help reduce mortality among children under age 5. Support activities for water, sanitation and hygiene have also helped to improve access to clean water and to reduce water-borne illnesses. To respond to the structural issues inherent to the entire Lake Chad region, the comprehensive, integrated programme known as RESILAC, financed by the French Agency for Development, will come into effect in 2017.

*Calculation based on figures from the UNHCR Factsheet - January 2017, Displacement Tracking Matrix - OIM



CÔTE D'IVOIRE

LOCATION	START OF MISSION	NUMBER OF STAFF	NUMBER OF BENEFICIARIES	OPERATIONAL BUDGET
Abidjan, Yamoussoukro	2002	60	477,665	€1,283,520

After a decade of political and military crisis, the Côte d'Ivoire has set itself the goal of becoming an emerging country by the year 2020.

Some positive signs, such as the calm that reigned during the most recent elections, the government's involvement in social cohesion and poverty reduction lead us to feel hope that they will succeed. However, economic precarity remains a real rural problem - 46% in 2015 - thus further increasing the divide in the population.

2016 saw a consolidation of activities focussed on developing institutional and community-based structures, via support for twelve community-based health care centres

(ESCom) in Abidjan. In terms of nutrition and health, we have continued our initiative of free health care for vulnerable groups. The promotion of essential family practices has also been extended within communities. For water, sanitation and hygiene, as well as for risk reduction and disaster mitigation, our teams have collaborated with health authorities to conduct an Ebola virus prevention campaign in the districts of Abidjan and Yamoussoukro.



DJIBOUTI

LOCATIONS	START OF MISSION	NUMBER OF STAFF	NUMBER OF BENEFICIARIES	OPERATIONAL BUDGET
Dikhil, Obock, Tadjourah, Djibouti City (Balbala)	2011	3	6,088	€1,237,480

Djibouti is a country where all regions, except for the capital city, are rural and suffer from desert conditions. As such, it greatly depends on imports and, since 74% of the population lives below the poverty line, imported products are very expensive.

The lack of access to water and the low level of knowledge about hygiene practices both encourage water-borne diseases. Severe malnutrition in children under 5 remains above the critical threshold almost everywhere. To make matters worse, located in the far east of Africa, Djibouti lies on the migratory paths for its neighbouring states, particularly in 2016 with the food crisis in Ethiopia and the worsening of the conflict in Yemen. We have continued our water, sanitation and hygiene activities in order to reduce diarrhoea-causing diseases, which are the leading cause of death in children

under the age of 5. The year 2016 also saw the creation, notably in collaboration with the Ministry of Health, of a diagnostic study of health care systems, aimed at looking ahead to the means to integrate nutrition into future health projects. The fight against poverty and for growth is also a priority. The teams in the field helped to strengthen food security and form agro-pastoral communities with their local partners to enhance complementary food production. The eventual goal is to ensure food diversity and essential income sources.



EGYPT

LOCATIONS	START OF MISSION	NUMBER OF STAFF	NUMBER OF BENEFICIARIES	OPERATIONAL BUDGET
Cairo, Luxor	2015	1	791	€123,429

Egypt is a country characterised by a difficult economic situation. Its strong demographic growth is not being matched with sufficient infrastructures and services.

These social problems, coupled with a large amount of unfarmed land, greatly hinder the country's economic situation. During the last three decades, there has been significant progress in the realm of human development. Nevertheless, there

is still a great deal of inequality in the education and health care sectors. Unemployment is one of the top concerns, with the greatest impact felt by young people and women.

Action Against Hunger implements water, sanitation and hygiene interventions, in particular to prevent diarrhoea-causing diseases in desert regions.



ETHIOPIA

LOCATIONS	START OF MISSION	NUMBER OF STAFF	NUMBER OF BENEFICIARIES	OPERATIONAL BUDGET
Regions of Gambella, Oromiya, Amhara, Somali, SNNPR	1985	557	843,580	€15,367,730

Insufficient rain in 2015 exacerbated by the El Niño phenomenon led to the most severe drought Ethiopia has suffered in recent decades. In early 2016, it was estimated that 10.2 million people were in need of emergency food aid and 2.1 million children and pregnant women were suffering from malnutrition.

As in 2015, Ethiopia remains Africa's leading host country for refugees owing to instability in bordering countries. In December 2016, the total number of asylum seekers and refugees exceeded 793,000 in December 2016, most of whom originating from South Sudan and Somalia.

In 2016, our teams strengthened assistance to refugees in the camps and entry points on

the borders, conducting activities to prevent, detect and treat undernutrition, as well as providing nutritional and psychosocial support for pregnant and nursing women. In response to the nutrition emergency situation, we support government efforts in fighting undernutrition in children under 5. Finally, our teams continued with restoration programmes for the subsistence of vulnerable populations and for greater resilience of pastoral and agro-pastoral populations facing droughts (risk prevention included).



GUINEA

LOCATIONS	START OF MISSION	NUMBER OF STAFF	NUMBER OF BENEFICIARIES	OPERATIONAL BUDGET
Labe, Conakry	1995	41	528,428	€1,882,918

Guinea is gravely affected by poverty and today, the country is slowly recovering from the after-effects of Ebola.

mission was ended in October 2016, owing to a lack of funding.

Although the country has managed to halt the spread of this epidemic, containing its consequences definitively remains a major challenge. After the end of the epidemic, and after 20 years of work in the country, this



KENYA

LOCATIONS	START OF MISSION	NUMBER OF STAFF	NUMBER OF BENEFICIARIES	OPERATIONAL BUDGET
Nairobi, West Pokot, Tana River, Isiolo	2002	29	217,934	€1,817,641

Kenya boasts one of the most dynamic economies in Eastern and Central Africa and has been considered a middle-income country since 2015. However, it is still facing major challenges due to unequal distribution of wealth and high poverty rates.

and to work with partners to provide similar service in Mandera County. We also worked with local organisations and with the West Pokot county government, to improve their ability to respond to undernutrition crises. Throughout 2016, we maintained and reinforced our leading position in nutrition security in Kenya, by contributing to optimal performance of systems throughout the territory.

In 2016, we conducted a long-term development programme, while playing a key role in the humanitarian response to drought-related emergencies. As a member of the Consortium on reinforcement of preparation and capabilities for emergency response, we are helping the Ministry of Health of Isiolo County to increase its capacity to intervene in the nutrition sector



LIBERIA

LOCATION

Montserrado, Bomi,
Grand Cape Mount

START OF MISSION

1990

NUMBER OF STAFF

52

NUMBER OF BENEFICIARIES

72,772

OPERATIONAL BUDGET

€2,724,840

While the official eradication of the Ebola virus in June 2016 was a great victory, Liberia remains one of the poorest countries in the world (177 of 188 according to the HDI*). 83.8% of the population lives below the poverty line (\$1.25 per day), and 94% of workers are poor (less than \$2 per day).

Because of low agricultural production (crops and livestock) and low income in households, Liberia has suffered from chronic food insecurity since the civil war, despite economic progress. Health care systems are also difficult to relaunch, and the Ebola epidemic has proved that the health care system is still too weak. Finally, the flight of donors after the end of the epidemic reduced the resources available both to the state and NGOs, slowing down the country's recovery. In 2016, Action Against Hunger focused its intervention on rebuilding through

economic and agricultural recovery projects (5,000 beneficiaries), and through psycho-social support for people stigmatised for their disease. In nutrition, the mission has supported teams from the Ministry of Health for screenings and treatment of acute malnutrition, while nine support centres for severe acute malnutrition have been established in Gbarpolu County. Finally, for water, sanitation and hygiene, over 90 latrines and 60 water points have been restored, particularly in schools and health centres. Overall, more than 5,000 people have benefited from water, sanitation and hygiene activities.

* Human Development Index



MADAGASCAR

LOCATION

Antananarivo,
Bongolava, Itasy,
Betioiky, Tuléar

START OF MISSION

2011

NUMBER OF STAFF

114

NUMBER OF BENEFICIARIES

42,809

OPERATIONAL BUDGET

€2,228,150

Madagascar is one of the poorest countries in the world: over 70% of the population lives on less than one dollar per day. The last political crisis (2009 to 2013) has had a very negative impact in the fields of the economy and health.

Moreover, between 1980 and 2010, the country suffered 35 cyclones and floods, five periods of severe drought, five earthquakes and six epidemics. This vulnerability has been intensified by the increase in migration to large cities, the deterioration of road infrastructures and very poor safety conditions. In 2016, certain villages exceeded the overall acute malnutrition emergency threshold (15%) established by the WHO; 850,000 people needed immediate humanitarian aid, while 330,000 are now in a phase of urgent food

insecurity.

The integrated programme on water, sanitation and hygiene, on mental health and infant care practices and on food security has been completed and transferred to local partners. The reinforcement project for health care systems, started in 2015, continues; after a diagnostic phase, health care support activities are in place. In addition, to respond to the nutrition insecurity situation declared in 2016, emergency programmes have been launched in the South, with the priority placed on acute undernutrition support and access to drinking water.





MALAWI

LOCATIONS	START OF MISSION	NUMBER OF STAFF	NUMBER OF BENEFICIARIES	OPERATIONAL BUDGET
Luwani	2016	73	336,036	€5,241,650

The Malawi Vulnerability Assessment Committee (MVAC) estimated that over 6.5 million people are in need of food assistance, a 129% increase compared to the previous year.

The situation highlights the necessity to intervene in the medium and long terms to reinforce the resilience of the population and enable the country to recover from recurrent climate shocks (El Niño).

In 2016, we responded to the emergency

situation, as we saw so many people impacted by the extreme drought and poor harvests.

In the long term, programmes on food security and livelihoods must provide various resources to people impacted by climate conditions.



MALI

LOCATIONS	START OF MISSION	NUMBER OF STAFF	NUMBER OF BENEFICIARIES	OPERATIONAL BUDGET
Kayes, Gao, Bamako, Kita, Tombouctou	1996	315	408,715	€9,064,912

Several years after the beginning of the conflict, in 2012, security is still very fragile, and society has remained seriously impacted. The proliferation of armed groups has significantly reduced the percentage - now 69% - of people living below the poverty line.

The political and socio-economic instability of the North has made food insecurity worse. Conflicts, climate conditions, and more generally, poverty are its main causes. Even though 2016 was a very good harvest year, over 2 million people were victims of food insecurity.

Action Against Hunger works to respond to the most urgent needs of the population, especially regarding nutrition, health and food security, while also addressing structural problems. Security issues render access to populations very difficult for humanitarian workers. The weakness of institutions and significant decreases in funds allocated to charities working there are also amongst the most urgent problems to resolve.



MAURITANIA

LOCATIONS

Sélibabi, Bassikounou,
Nouakchott

START OF MISSION

2007

NUMBER OF STAFF

221

NUMBER OF BENEFICIARIES

317,223

OPERATIONAL BUDGET

€7,900,000

Pastoralism and subsistence agriculture are the main means of subsistence for inhabitants, and climate change their main problem. That is why they are vulnerable: seasons are unpredictable and climate conditions devastate their resources.

These uncertain harvests and poor access to imported goods separate populations from their means of subsistence. Conflicts in neighbouring Mali have increasingly encouraged thousands of people to cross the border. At the start of 2016, according to the UNHCR, over 50,000 Malians found refuge in Mauritania, mainly in the Mberra camp.

These refugee populations are in an extreme state of deprivation, especially regarding food. We have intensified our programmes on nutrition and health, food security and livelihoods as well as water, sanitation and hygiene in these border regions, especially in Hodh el Chargui, despite the absence of local authorities.



NIGER

LOCATIONS

Niamey, Tahoua,
Maradi, Diffa

START OF MISSION

1997

NUMBER OF STAFF

256

NUMBER OF BENEFICIARIES

493,105

OPERATIONAL BUDGET

€8,116,895

Over the past decades, Niger has faced severe climate crises, especially shortages and irregular precipitation. We were able to observe episodes of political, food and nutritional instability, for example in 2005, 2010 and 2012.

In addition, Niger remains the poorest country in the region. Recently, it suffered conflicts with Mali and Nigeria, between which it is located, and which caused continuous flows of refugees. This leads to a great difficulty regarding their means of subsistence in the Diffa zone. This is a zone which

is characterised by chronic food and nutrition insecurity. Water installations and health infrastructures are very precarious, and hygiene conditions are uncertain. This region has welcomed over 240,000 refugees from Nigeria, escaping the violence of Boko Haram.

Action Against Hunger is working with these populations first through water, sanitation and hygiene programmes.







NIGERIA

LOCATIONS

Abuja, Jigawa State,
Yobe State, Borno State

START OF MISSION

2010

NUMBER OF STAFF

344

NUMBER OF BENEFICIARIES

3,195,504

OPERATIONAL BUDGET

€15,242,693

Since 2012, Nigeria has been facing the devastating effects of Boko Haram, striking the North-East region of the country: 2.4 million people have been displaced, and over 14 million have been directly impacted*. The crisis is intensified by high rates of undernutrition, poor water quality and/or insufficient access, as well as poor sanitary conditions.

We have been operating here since 2010. The organisation has since played a major role in improving nutrition security in the North. In 2016, we intensified our operations following the declaration of an emergency from the Borno government. We opened a new office in Monguno in order to provide immediate help.

With our partners, we distributed food to displaced people and host families, provided essential sanitation and hygiene items, and brought additional food support to children under age 5 and pregnant and nursing women. To respond to urgent humanitarian needs confronting populations in the North-East, while maintaining our commitment to improving nutrition security in the long term, we favour a multi-sector approach.

* HPR 2017



UGANDA

LOCATIONS

Kampala, Adjumani,
Kaabong, Kiryandongo,
Gulu, Nwoya, Amuru,
Omoro, Yumbe

START OF MISSION

1995

NUMBER OF STAFF

118

NUMBER OF BENEFICIARIES

244,568

OPERATIONAL BUDGET

€2,868,015

In July 2016, an intensification of conflict in South Sudan has led to an unprecedented influx of refugees. Despite enormous pressure on resources and local infrastructures, the government welcomed a great number through its «open border» policy.

Currently, about 800,000 people have found refuge there. At the height of the conflict, the country could welcome close to 4,000 refugees a day. The Bidi Bidi camp, in the Yumbe district, welcomes the most in the world. In its heart and near Adjumani, we launched an emergency intervention programme to respond to refugee needs in the short and longer terms. In partnership with the UNHCR and the government, in host communities and in camps, we support health centres in prevention, diagnosis and treatment of severe malnutrition,

and raise awareness about good care and food practices for mothers and nurses. We also make sure that refugees and host communities have access to drinking water and sanitation. Our teams are building wells and are installing drilling sites to provide sustainable sources of drinking water, and they raise awareness among communities about suitable sanitary practices. We are also working in the arid region of Karmoja to help farming and pastoral communities improve their food security and their income, and to develop their resilience in the face of hunger.



CENTRAL AFRICAN REPUBLIC

LOCATIONS

Bangui, Bossangoa,
Bouar, Sibut, Bangassou

START OF MISSION

2006

NUMBER OF STAFF

316

NUMBER OF BENEFICIARIES

229,332

OPERATIONAL BUDGET

€9,463,850

The series of conflicts that the CAR has been experiencing since 2013 has caused numerous population movements and an unprecedented humanitarian crisis. In 2016, over 2.3 million people - or half the country - needed immediate humanitarian aid.* Among them, we counted 462,554 refugees** and 450,000 people displaced internally. While a fresh outlook is appearing with the democratic election of a new president, the situation remains very worrisome because of recurring violence impacting both the population and humanitarian aid staff.

In 2016, Action Against Hunger continued its operations against undernutrition, especially through screenings and treatment of the disease in 17 therapeutic nutritional units and three hospitals. In mental health and infant care practices, we support distressed patients/patients in psychological pain in health care

structures. In terms of food security, teams are leading programmes to revitalise the market, by developing «cash for work» projects for vulnerable households and to revitalise agricultural activity. In water, sanitation and hygiene, 70 water points, 45 school latrines and 1,230 family latrines have been built, while drilling teams are deployed throughout the country, to facilitate water access. A rapid response programme helps deliver humanitarian aid reduces emergencies and the vulnerability of populations.

* According to HRP (Humanitarian Response Plan)

** According to UNHCR



DEMOCRATIC REPUBLIC OF THE CONGO

LOCATION

Kinshasa, Kasai,
Nord-Kivu, Sud-Kivu,
Bandundu

START OF MISSION

1996

NUMBER OF STAFF

134

NUMBER OF BENEFICIARIES

347,550

OPERATIONAL BUDGET

€6,259,070

Between 1998 and 2002, the Democratic Republic of the Congo (DRC) has been the centre of «Africa at War,» which has caused the deaths of 5.4 million people (violence, famine, diseases). In 2006, the first multi-party presidential election took place.

However, hope was tarnished by instability in the five Eastern provinces, the theatre of a durable conflict between two regional ethnic groups - armed by neighbouring countries - and government forces. Consequently, the humanitarian situation is very complex. In total, over 1.8 million people have had to move. Currently, 23 % of children suffer from undernutrition and 70% of the population needs assistance. In 2016, facing eleven nutritional crises, we have continued our emergency programmes. We worked with the Ministry

of Health to reinforce health care systems in Kasai province. We trained agents to improve their ability to respond to food crises, and tried to integrate diagnosis and treatment of severe undernutrition in primary health centres.

In the provinces of North Kivu and South Kivu, we built wells to give populations access to drinking water and protect them from water-borne diseases such as cholera. We also raised awareness on good hygiene practices. We distributed, food, emergency items, and shelter items to displaced communities.



SENEGAL

LOCATIONS

Matam, Podor, Louga
and Dakar

START OF MISSION

2012

NUMBER OF STAFF

144

NUMBER OF BENEFICIARIES

217,356

OPERATIONAL BUDGET

€3,612,492

Senegal is one of the most stable countries in Africa and the second economic power in western Africa, behind the Ivory Coast. Nevertheless, poverty impacts 46.7% of the population, i.e. 6 million people.

Nutrition is one of the primary problems, and humanitarian aid is increasingly necessary. In 2016, populations of the north and east of the country have been impacted most by natural disasters such as droughts, with a rate of acute malnutrition exceeding the nutritional emergency threshold established by WHO, in regions such as Saint-Louis, Matam, Tambacounda and Louga. Every day, Action Against

Hunger assists authorities on nutrition and health, as the main objective is to face this food crisis still affecting the Northeast of the country. In parallel, the mission develops additional operations in order to improve the resilience of populations on the one hand, and to limit the consequences of climate change, on the other.



SIERRA LEONE

LOCATIONS

Freetown, Moyamba,
Kambia

START OF MISSION

1991

NUMBER OF STAFF

202

NUMBER OF BENEFICIARIES

295,159

OPERATIONAL BUDGET

€5,477,990

Sierra Leone remains a very economically unstable country. A non-controlled urbanisation phenomenon has led to anarchical city growth, conducive to acute malnutrition and diarrhoeal diseases. Ebola has hit the country hard due to population movements: 14,122 impacted, including 3,955 deaths.*

In January 2016, a few months after the effective end of virus transmission, Sierra Leone experienced a reappearance in the disease. 49.8% of the population is in a situation of food insecurity, which represents an increase in food insecurity of almost 5% since 2010. Low agricultural productivity, low income levels, a lack of infrastructure, and reduced access to services (education, health, water and sanitation) underlie a high prevalence in food and nutrition insecurity.

To fight sustainably against Ebola, Action Against Hunger has restored or built water, sanitation and hygiene installations in government hospitals and health centres, and has participated in a water chlorination programme for 700,000 people. The mission has also supported different infrastructures for the control and reduction of disease transmission risks. In nutrition, teams are raising awareness on good practices around communities, treating and preventing undernutrition in the 70 peripheral health units and 32 care units.

* Numbers as of 31 December 2015



SOMALIA

LOCATIONS

Coordination team based in Nairobi: El Barde, Hudur, Tie-glow, Eyl, Garowe, Mogadishu (on periphery), Afgooye

START OF MISSION

1992

NUMBER OF STAFF

161

NUMBER OF BENEFICIARIES

219,266

OPERATIONAL BUDGET

€5,133,850

In Somalia, 2016 was marked by major climate shocks, exacerbated by the El Niño phenomenon. In fact, over 5 million people have needed humanitarian assistance. Among them, over a million were internally displaced; another million people faced a food crisis and 300,000 children under age 5 suffered from acute malnutrition, 50,000 for whom it was severe.

With the conflicts, forced expulsions and climate effects, close to 400,000 people found refuge in makeshift shelters in the capital city. In October, however, the first parliamentary elections in 32 years took place, putting the country on the track to political stability. The rapid response team, authorised to intervene within 72 hours in case of small and medium-sized emergencies, was consistently asked to help in 2016. The mission was able to

respond to 17 situations of this type, which, once resolved, it entrusted to another organisation for long-term aid. Regarding undernutrition, interventions with mobile centres and clinics enabled us to support 84,000 children under 5 and pregnant women. Programmes to reinforce food security in pastoral and agro-pastoral communities, which are very sensitive to climate change, have been conducted with 75,000 people, supported by projects for water (re-establishing access to drinking water), sanitation and hygiene, restoring ten wells (60,000 beneficiaries).



FOCUS ON THE REGIONS

REGIONAL OFFICES

WEST AFRICA REGIONAL OFFICE

Action Against Hunger has been working in West Africa since 1983 and currently has eleven operational country offices and a regional office. In 2015 4,619,713 people across the region were reached through our range of programmes.

West Africa is subject to a seasonal hunger gap, as well as frequent and recurrent emergencies. While the former requires long-term development strategies, the latter demands immediate relief actions.

To deliver both and achieve a sustainable impact Action Against Hunger's approach in West Africa is to tackle systematic peaks of nutritional vulnerability and structural vulnerability to undernutrition, while building capacity to respond to emergencies and advocating for community and government ownership and commitment.

MIDDLE EAST REGIONAL OFFICE

Action Against Hunger created the Middle East Regional Office in 2013 to respond to the extraordinary humanitarian challenge the region poses: it is the stage for multiple protracted crises and has the world's only Level 3 UN classified emergencies (Syria, Iraq and Yemen).

The office aims to bring extra support to our eight missions in the Middle East, and to interact more efficiently with regional stakeholders including donors, UN coordination bodies, regional organisations and local civil society.

The Regional Office's common approach aims to tackle the underlying causes of hunger through tailored and multi-sectorial interventions; accessing highly vulnerable areas and improving our operational capacity; ensuring the transfer of technical knowledge and capacity; and implementing innovative solutions and effective natural resources management.

SOUTH SUDAN

LOCATIONS

Juba, Alek, Malualkon

START OF MISSION

1985

NUMBER OF STAFF

220

NUMBER OF BENEFICIARIES

580,433

OPERATIONAL BUDGET

€8,803,516

Throughout 2016, the humanitarian context has not stopped deteriorating. This crisis has been exacerbated by the increase in violence during the month of July. Numerous people have thus had to abandon their houses and flee to neighbouring countries or other regions of South Sudan.

Action Against Hunger is one of the two actors in emergency nutrition. To face this crisis, we have strengthened our Multi-sector Emergency Team (MET) and our Surveillance and Evaluation team (SET). To increase our ability to provide emergency nutrition operations in zones that need it, we deployed an extra MET.

Our SET team is conducting rigorous nutrition evaluations to quantify the prevalence of acute malnutrition in populations at risk. We are currently responding to urgent humanitarian needs of populations in four states: Jonglei, North Bahr el Ghazal, Warab and Central Equatoria (Juba). We are reaching over 349,500 people through our programmes (nutrition, food security and livelihoods, water and sanitation). Our Multi-sector Emergency Team is responding to a widespread food crisis.



CHAD

LOCATIONS

N'Djamena, Mao, Moussoro, Baga Sola

START OF MISSION

1982

NUMBER OF STAFF

262

NUMBER OF BENEFICIARIES

411,207

OPERATIONAL BUDGET

€10,238,070

In Chad, the seriousness of the humanitarian situation is explained by several factors: high infant mortality rate, nutrition insecurity, insufficient health care coverage, instability and security risks, fluctuating movements in population and recurring natural disasters. Moreover, the country is also affected by the regional conflict, shaking the Lake Chad basin. The violent terrorist group Boko Haram threaten Chad.

These disturbances have disrupted the situation for inhabitants of the region, and displacements, internally and externally, have massively increased. In 2016, in Grand Kanem, we implemented primary health care programmes for children under age 5 and reproductive programmes for pregnant and nursing women. These are accompanied by a psychosocial follow-up in nutritional units. To restore food security, a development of rain-fed agriculture, storage capacities and support

in livestock production continued and was completed. Activities in water, sanitation and hygiene have enabled us to provide villages with water points and households with hygiene kits. Advocacy activities have been implemented, especially around reinforcement of civil society, in order to improve the health care and nutrition situation of women and to significantly reduce mother-child mortality. Finally, the Baga Sola base was opened to urgently operate via water, sanitation and hygiene projects with refugee and displaced populations, and we have also prepared the launch of a psychological care project for adults and children, as well as psycho-education sessions.



ZIMBABWE

LOCATIONS

Harare, Masvingo,
Manicaland

START OF MISSION

2002

NUMBER OF STAFF

13

NUMBER OF BENEFICIARIES

4,955

OPERATIONAL BUDGET

€378,050

The drought caused by El Niño has affected Zimbabwe, seriously accentuating the vulnerability of populations and affecting their nutrition and livelihoods. A state of emergency was declared in February 2016, and we estimated that 2.8 million people were impacted by food insecurity in the first quarter.

These numbers have increased during the year: in the fall, we estimated that 4.1 million people would be affected during the inter-season period (January to March 2017). The impact on water resources was also significant.

In the past, the country has lived through several peaks in water-borne diseases. In October 2016, authorities declared a cholera and typhoid alert due to weak water supply and sanitation systems in Harare and other cities. In November and

December, an increase in cases of typhoid was reported.

In 2016 we pursued, in partnership with the University of Zimbabwe, the implementation of our research project «Cultivate Africa,» for which the objective is to reduce the contamination of corn kernels by aflatoxin and exposure to people. In addition, in the autumn, we launched two emergency drought response projects, in partnership with local NGOs. Activities included the distribution of coupons, awareness raising in households on good food practices, training sessions and restoring water points.



FOCUS ON OUR AREAS OF EXPERTISE

RESEARCH ACTIVITIES

SAM PHOTO DIAGNOSIS APPLICATION PROJECT

Action Against Hunger and EPINUT are collaborating on this project for the development of an innovative and easy-to-use diagnostic tool based on Geometric Morphometric techniques and mobile phone technology (with the use of photos) in order to assess the nutritional status of children under five years.

C-PROJECT (iCCM)

Scaling up the treatment of Severe Acute Malnutrition (SAM) by Community Health Workers (CHWs) in Mali. The aim of the study is to test whether a low level of supervision of

CHWs is enough to ensure quality management of SAM by comparing three different models in three districts of Mali.

RESEARCH ON FOOD ASSISTANCE AND NUTRITIONAL IMPACT

To strengthen the evidence base on the nutritional- and cost-effectiveness of cash and voucher-based food assistance programmes, as well as identify the mechanisms through which this effectiveness is achieved.

MANGO STUDY

It has been found that children in the process of recovery from Severe

Acute Malnutrition, who are treated as outpatients, gain less weight than expected. This may be because malnourished children in the process of recovery may need less therapeutic food than currently provided. This study tests this theory by giving children treated as outpatients less therapeutic food to see whether they still gain the weight.

MODELLING EARLY RISK INDICATORS TO ANTICIPATE MALNUTRITION

To develop, test and scale up models to improve the prediction and monitoring of undernutrition in countries that experience frequent climate and conflict related shocks.

MIDDLE EAST

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IRAQ
JORDAN
LEBANON
SYRIA

33

OCCUPIED
PALESTINIAN
TERRITORIES
YEMEN





IRAQ

LOCATIONS

Erbil, Dohuk, Ninewah,
Diyala, Mossoul

START OF MISSION

2013

NUMBER OF STAFF

237

NUMBER OF BENEFICIARIES

479,441

OPERATIONAL BUDGET

€10,616,690

Combats between Kurdish forces and Jihadist forces of the Islamic State (ISIS) caused the displacement of hundreds of thousands of people and a serious worsening of the humanitarian situation. The launch of military operations aiming to take back Mosul in October 2016 accentuated the phenomenon. At the end of 2016, OCHA estimated that there were about 3.1 million people displaced in Iraq and 11 million people needing humanitarian aid over the past year (food assistance: 2.9 million; lack of livelihoods: 4.7 million; limited access to water: 8.3 million).

In the context of great political, ethnic and religious tensions, we have supported Syrian refugees, internally displaced people and host communities. Our teams favour a multi-sector approach, combining all

their fields of expertise. Programmes have been implemented on food security and livelihoods, including distribution of rations and food coupons, money transfers, training in agriculture (over 198,000 beneficiaries); water, sanitation and hygiene, including installation of water points and networks, sanitation structures and latrines, and waste management (over 265,000 beneficiaries); and mental health and infant care practices, including emergency psychological support, women/men/children group sessions, and individual follow-up (over 14,000 beneficiaries).



JORDAN

LOCATIONS

Irbid, Azraq,
Ruwaished

START OF MISSION

2013

NUMBER OF STAFF

97

NUMBER OF BENEFICIARIES

124,808

OPERATIONAL BUDGET

€3,973,700

The recent influx of refugees, especially Syrians, has exacerbated structural weaknesses in the country. We have estimated the number at 650,000, 15% of whom live in camps. Only 25% of Syrian refugees living in host communities receive regular help and 86% are affected by food insecurity (twice as much as in 2014).*

Moreover, 70,000 people remain stuck at the Northern border of the country, in the hope of finding refuge in Jordan. The challenge is therefore to provide basic livelihoods. Action Against Hunger has established solid bases in the country, which have enabled operational efficiency for food security and water, sanitation and hygiene. The mission, for the moment,

does not focus on nutritional needs but rather on the resilience of communities inside camps. Three new operation zones were opened in 2016: in camps, with Syrian refugees; in the city of Ruwaished, to improve public infrastructures such as hospitals and schools; and in the city of Azraq, where we provide our support for waste management. By the end of the year, a five-year strategy was implemented, setting guidelines for assistance to refugees and for development.

* 2015 numbers



LEBANON

LOCATIONS
Beirut, Zahlé,
Tyr

**START OF
MISSION**
2006

**NUMBER OF
STAFF**
135

**NUMBER OF
BENEFICIARIES**
242,047

**OPERATIONAL
BUDGET**
€7,210,855

Over 5 million Syrian refugees have had to flee their country because their lives are at risk. Lebanon has welcomed 1.5 million people, as well as 280,000 refugees of Palestinian origin, making it the country with the world's greatest concentration of refugees.

Lebanon is also characterised by difficult legal formalities, and this greatly affects access to work. As a result, joining the job market is very complex, not only for refugees, but also for local populations. 52% of Palestinian refugees and 10% of Lebanese people are under the extreme

poverty threshold.

Action Against Hunger's interventions mainly target these populations, focusing on food security and livelihoods as well as access to water, in order to give them basic resources to live decently.



SYRIA

LOCATIONS
Damascus,
Hassaké

**START OF
MISSION**
2008

**NUMBER OF
STAFF**
36

**NUMBER OF
BENEFICIARIES**
1,761,304

**OPERATIONAL
BUDGET**
€5,042,593

For six years, the humanitarian situation has been in a dramatic state. During the past few years, the conflict between rebels and the government has caused terrible atrocities against the civilian population: 13.5 million people are in need of humanitarian aid. Among them, 4.9 million are refugees and 6.6 million are internally displaced.

Syria, where the war does not seem close to an end, presents one of the most complex human crises in today's world. Basic services

as well as primary means of subsistence are limited. Action Against Hunger has been able to reach very sensitive zones such as Aleppo and Hassake, with water, sanitation and hygiene and livelihoods interventions for displaced populations.



OCCUPIED PALESTINIAN TERRITORIES

LOCATIONS

Gaza, Hebron,
Jerusalem

START OF MISSION

2002

NUMBER OF STAFF

56

NUMBER OF BENEFICIARIES

416,301

OPERATIONAL BUDGET

€5,786,613

The situation in the Gaza Strip has been in constant decline since the beginning of the war in 2014. Accordingly, after ten years of embargo, this zone now has no access to natural resources, basic services or income opportunities.

Economic and military pressure from Egypt and Israel further weakened government control. Water is 100% contaminated, and the unemployment rate is one of the highest in the world. In the West Bank, the humanitarian context is far from ideal, being characterised by severe

restrictions and limited access to water, inadequate housing and a lack of means of subsistence. However, the expansionist policies of the colonies and demolitions are increasingly frequent, which prevents access to victims. In 2016, Action Against Hunger mainly focused on its water, sanitation and hygiene and food security activities, as well as advocacy, in zones where access to clean water is difficult.



YEMEN

LOCATIONS

Hajjah, Hodeida, Abyan,
Lahj

START OF MISSION

2012

NUMBER OF STAFF

210

NUMBER OF BENEFICIARIES

202,757

OPERATIONAL BUDGET

€7,074,480

Yemen is facing a serious humanitarian crisis. The situation has considerably deteriorated since the Houthi insurgency and the start of the military action «Decisive Storm» led by the international coalition under the leadership of Saudi Arabia in March 2015. While humanitarian access has been greatly reduced, 18.8 million people still need assistance, 14 million are in a situation of food insecurity and 4.5 million suffer from undernutrition.

Despite difficult access, in 2016, we spread our integrated emergency programme to the governorates of Hodeida, Hajjah, Abyan and Lahj. We have also implemented emergency response plans consisting of supporting populations in nutrition, health and care practices, especially support for acute malnutrition; food security and livelihoods, by direct distribution of food

or money and/or food coupons; and water, sanitation and hygiene (promotion and distribution of kits) by rehabilitation of water points and latrines. Health personnel training has also been delivered. In 2016, a cholera epidemic started. We launched an emergency operation on water, sanitation and hygiene and have opened, in collaboration with local authorities, a centre for disease treatment. 32,000 people benefited from our programme to fight cholera in Hodeida.





ASIA

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AFGHANISTAN
BANGLADESH
CAMBODIA
INDIA

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INDONESIA
MYANMAR
NEPAL

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PAKISTAN
PHILIPPINES



AFGHANISTAN

LOCATIONS

Kaboul, Balkh,
Samangân, Ghor,
Helmand

START OF MISSION

1995

NUMBER OF STAFF

275

NUMBER OF BENEFICIARIES

142,475

OPERATIONAL BUDGET

€4,729,510

In 2016, armed conflicts intensified. A political crisis, opposing the national assembly and the government, as well as the presence of ISIS, has aggravated the situation.

A sad record has been reached: 11,500 civilian victims in 2016 compared to 3,545 in 2015, a significant increase in the number of children killed (+24%) and close to 530,000 people displaced (OCHA). In 2016, close to 614,000 Afghan refugees left Pakistan to return to their country, and we expect an additional 1 million refugees in 2017. In general, 9.3 million people needed humanitarian assistance and 1 million children were malnourished. Afghanistan was spared from climate shocks but, following the violent earthquake (7.5 in magnitude) in October 2015, the Province of Badakhchan is still struggling to rebuild.

In response, we have implemented several integrated projects on nutrition and health, water, sanitation and hygiene, and food security and livelihoods. In Kabul, we have restored water networks and raised awareness among populations regarding hygiene and nutrition. We also deployed mobile clinics to treat children under 5 who are impacted by severe acute malnutrition. In the province of Ghor, our teams have conducted multi-sector projects in support of health centres and among communities.



BANGLADESH

LOCATIONS

Dhaka, Sirajganj,
Cox's Bazar, Satkhira,
Barguna

START OF MISSION

2007

NUMBER OF STAFF

228

NUMBER OF BENEFICIARIES

236,246

OPERATIONAL BUDGET

€5,291,930

Despite a switch in 2015 to the category of «intermediate income, lower section*» countries, large food production and an increasing economic growth rate, about 31.5% of the population still lives under the poverty line.

Likewise, Bangladesh is one of the countries most impacted by climate disasters (on average 8 per year). In 2016, about 470,000 people were displaced and close to 4 million were impacted by torrential rains and landslides. In addition, Bangladesh remains the main reception country for Myanmar, since, according to official and unofficial numbers, between 32,000 and 500,000 Rohingya refugees are pouring into the country. In 2016, we responded to three major emergencies: Cyclone Roanu, floods in the Northwest and the flow of refugees. In partnership with different local and international organisations, we are pursuing the prevention and treatment of

acute malnutrition, as well as support for refugees, in official and makeshift camps. This includes interventions in nutrition and health, mental health and infant care practices, and water, sanitation and hygiene. In the Satkhira district, we are still deploying an integrated programme for food security and nutrition. In parallel, our teams continued their activities in risk reduction (strengthening of the resilience of communities and authorities in the face of disasters) and their support to authorities in the fight against acute undernutrition.



CAMBODIA

LOCATIONS
Phnom Penh,
Preah Vihear

**START OF
MISSION**
2013

**NUMBER OF
STAFF**
26

**NUMBER OF
BENEFICIARIES**
11,142

**OPERATIONAL
BUDGET**
€601,372

In some regions of Cambodia, undernutrition slows down the growth of almost 44% of children. In the province of Preah Vihear, the purpose of our multi-sector programmes is thus to improve the resilience of populations in the face of nutrition problems. Our interventions aim to offer communities a range of sustainable solutions in order to develop autonomy (by building vital skills), solid partnerships and tools.

In 2016, the analysis of nutritional causes and the participative analysis of vulnerability and capacities in the Choam Ksant district and the province of Preah Vihear have been finalised. Results have demonstrated that key factors of undernutrition were inadequate sanitation,

and poor knowledge of care and nutritional practices for babies and children under age 5. Based on this, an innovative three-year programme that addresses immediate and underlying causes will be conducted. In partnership with Google, we have developed two interactive digital games (mobile apps installed on tablets) that our teams and partner communities use to raise awareness among children, mothers and care givers regarding nutrition, sanitation and hygiene.



INDIA

LOCATIONS
New Delhi,
Rajasthan, Madhya
Pradesh, Mumbai,
Maharashtra

**START OF
MISSION**
2010

**NUMBER OF
STAFF**
81

**NUMBER OF
BENEFICIARIES**
53,961

**OPERATIONAL
BUDGET**
€619,870

With a population of 1.2 billion inhabitants, a high life expectancy and literacy rate, and improved health conditions, India is now the world's fourth largest economy.

However, in very poor regions such as Uttar Pradesh, which has as many inhabitants as Brazil, the rate of mother and child mortality is comparable to that of the poorest countries. Of 165 million children under 5 worldwide who suffer from a delay in growth, close to 60 million live in India. According to our studies, the main causes of juvenile undernutrition are, among others, the poor nutritional condition of pregnant and nursing women, lack of access to health centres and poor psychosocial support.

With our operational partner, the Fight Hunger Foundation, we continued our programmes in the states of Rajasthan,

Madhya Pradesh and Maharashtra. To significantly fight against undernutrition, thousands of children are subject to a diagnosis, and if applicable, treatment (in cases of severe and moderate acute malnutrition). In parallel, distribution of hygiene kits, prevention projects and reinforcement programmes for hospital personnel have supported the interventions in progress. Finally, advocacy campaigns have been launched, mobilising public opinion and ensuring that undernutrition remains on the government agenda.



INDONESIA

LOCATIONS

Jakarta, Nusa Tenggara
Timur & Aceh province

START OF MISSION

1998

NUMBER OF STAFF

31

NUMBER OF BENEFICIARIES

25,449

OPERATIONAL BUDGET

€636,770

Despite very strong economic growth in the last few years, corruption and a lack of infrastructure are still present in the most distant regions.

The El Niño phenomenon causes frequent drought periods in certain areas. Last year, the Nusa Tenggara Timur province, in the east of the country, suffered a 50% decrease in available water, causing poor harvests and diarrhoea epidemics.

In 2016, we continued our collaboration with the Indonesian Ministry of Health in order to conduct a community support programme on acute malnutrition (PCMA). Screenings, admission and treatment of severe acute malnutrition are an integral

part of the project. Considering the water situation in the East and in regions impacted by El Niño, field teams have launched an emergency intervention, which includes the distribution of hygiene kits, water filters and money. Finally, a multi-sector project came to an end in December 2016, once food security and livelihoods for rural groups in two villages had been reinforced.



MYANMAR

LOCATIONS

Yangon, Kayah State,
Rakhine State

START OF MISSION

1994

NUMBER OF STAFF

595

NUMBER OF BENEFICIARIES

83,136

OPERATIONAL BUDGET

€6,974,830

In transition since its progressive opening to foreign investment, Myanmar remains fragile: conflicts, displacements, statelessness and violations of human rights. Development remains insufficient and regional inequalities are significant.

The country is vulnerable to natural disasters (cyclones, tsunamis, floods) and experienced the effects of the climate phenomenon, El Niño, from February to June 2016.

Our operational strategy is three-pronged: treat and prevent acute malnutrition in children under age 5 and pregnant and

nursing women in the State of Rakhine; reduce the impact of natural disasters on exposed coastal communities of Sittwe; and respond to the chronic needs of populations. In the State of Kayah, our teams have supported local development and the management of natural resources, in order to reinforce the food security of vulnerable communities.



NEPAL

LOCATIONS

Katmandou, Saptari,
Makwanpur, Rasuwa,
Nuwakot

START OF MISSION

2011

NUMBER OF STAFF

84

NUMBER OF BENEFICIARIES

188,418

OPERATIONAL BUDGET

€3,565,970

Nepal is also recovering from the terrible earthquake of April 2015 (9,000 dead and 100,000 hurt), which was immediately followed by a four-month economic blockade that caused great harm. Several regions are increasingly affected by poverty, food insecurity and/or undernutrition.

The poverty rate is higher in mountainous regions (42.3 %) than in the urban hills (8.7 %) and children under age 5 show worryingly late growth rates. However, the relative political stability and the adoption of a new Constitution, which is more conducive to equitable socio-economic transformation, provide real hope.

In 2016, we continued our programme initiated in 2011 to reduce the mortality rate in children under age 5 in the Saptari

district. Likewise, the response to the 2015 earthquake – a multi-sector intervention covering shelter, water, sanitation and hygiene, and psychosocial support – was extended in 2016 and, in order to improve efficiency, we have joined forces with four local organisations. In addition, we are part of a multi-partner consortium over the 2015-2018 period, in six districts, which supports the resilience of vulnerable communities, especially through the diversification of subsistence and nutritional support for pregnant or nursing women and young children.



FOCUS ON OUR AREAS OF EXPERTISE

DISASTER RISK MANAGEMENT

In 2016, Action Against Hunger carried out 111 projects related to disaster risk management in 28 countries. A look at evaluations undertaken by Action Against Hunger, focusing on disaster risk management either directly or indirectly, provided evidence to demonstrate that AAH's work is in line with its resilience strategy.

In Pakistan, the evaluation commended Action Against Hunger for having a comprehensive approach covering six categories on the Disaster Risk Reduction continuum: prevention, mitigation, community capacity building, evacuation preparedness, rescue preparedness and relief preparedness.

While Action Against Hunger promotes community-based disaster risk management, there is a need to promote resilience analysis as part of the needs assessment package. In regards to disaster risk management, 51% of total beneficiaries of disaster risk management stand-alone projects were from selected 'high-burden' countries, accounting for 110,745 individuals.

Action Against Hunger is achieving mainstreaming of disaster risk management within its projects, rather than have them as stand-alone. This past year, 40% of projects in high burden counties were mainstreaming disaster risk management, compared to 29% for the rest of country offices.

PAKISTAN

LOCATIONS

Islamabad, Dadu,
Ghotki, Khairpur,
Matiani

START OF MISSION

2005

NUMBER OF STAFF

365

NUMBER OF BENEFICIARIES

395,539

OPERATIONAL BUDGET

€6,818,518

As a result of conflicts, undernutrition and population displacement are two of the humanitarian challenges that we face in Pakistan. Despite growing operational difficulties, we maintained a strong presence in the provinces of Khyber Pakhtunkhwa and Sindh in 2016.

In partnership with the European Union and the Ministry of Health, we have completed a four-year programme that aimed to improve nutritional conditions for children under age 5, and pregnant and nursing women in Sindh. During the implementation of this programme, we worked with 41 trade union committees to provide therapeutic treatments, trained health agents and strengthened the capacity of local health centres. District health care authorities have now taken over. To fight against the vulnerability of people and to reinforce

the long-term resilience of displaced communities in Khyber Pakhtunkhwa, we are conducting integrated programmes on water and sewage treatment, nutrition and food security, and subsistence. We are also managing operational research programmes, with the purpose of assessing money transfers' effectiveness on the reduction of the prevalence of undernutrition.



PHILIPPINES

LOCATIONS

Manila, Zamboanga,
Cotabato, Cataduanes
and Tuguegarao,
Masbate, Tandag

START OF MISSION

2000

NUMBER OF STAFF

81

NUMBER OF BENEFICIARIES

513,074

OPERATIONAL BUDGET

€2,724,161

For several years, the Philippines have suffered from armed conflict between the government and various separatist groups. In Mindanao in particular, the city most impacted by this conflict, thousands of people have been forced to leave, leading to greater humanitarian needs.

In 2012, the government and the Moro Islamic Front were able to end this armed conflict and re-establish peace. Nevertheless, impacted communities and disadvantaged population groups, with limited access to basic services, remain in a vulnerable situation.

The Philippines is also characterised by its geographic situation and risks of related

natural disasters. Typhoons, storms, floods, tsunamis, earthquakes, volcano eruptions, landslides and droughts are the most common phenomena. They are key contributing factors to numerous human, material and economic problems.

In order to fight against the consequences of these climate conditions, Action Against Hunger has implemented water, sanitation and hygiene programmes, as well as food security and livelihoods programmes.





LATIN AMERICAN & THE CARIBBEAN

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BOLIVIA
COLOMBIA
EQUADOR

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GUATEMALA
HAITI
NICARAGUA
PERU





BOLIVIA

LOCATION	START OF MISSION	NUMBER OF STAFF	NUMBER OF BENEFICIARIES	OPERATIONAL BUDGET
Camiri, La Paz, Beni, Cochabamba, Potosí	2000	8	5,981	€608,389

The international context is not favourable to Bolivia, which has the largest indigenous population in the Americas, at two-thirds of the population. The country's GDP has decreased and the reduction in poverty and inequality has stagnated.

Since 2016, the State has approved the national plan for 2016-2020 economic and social development. Its main objective is to reduce extreme poverty (to within 10-17%)

In 2016, Action Against Hunger pursued

several food security and risk management activities in the department of Beni and improved the nutritional situation in Potosí and Cochabamba.



COLOMBIA

LOCATIONS	START OF MISSION	NUMBER OF STAFF	NUMBER OF BENEFICIARIES	OPERATIONAL BUDGET
Bogota, La Guajira, Nariño, Putumayo, Córdoba	1998	57	71,418	€3,016,151

For the first time in fifty years of internal armed conflict, generations of Colombians – accustomed to living with violence – see that peace is closer than ever. The conflict has left 260,000 people dead. However, even today, 4.9 million people are in need of humanitarian aid and 7 million are living in exile as a result of the violence. Colombia is the country with the highest number of displaced people in the world.

The government says the country needs about ten years to deal with the harms of

the conflict. Success will depend above all on social investment, especially in rural areas.

Action Against Hunger's priority in these isolated areas is food security and livelihoods interventions.



EQUADOR

LOCATIONS

Esmeraldas

START OF MISSION

2016

NUMBER OF STAFF

—

NUMBER OF BENEFICIARIES

259,942

OPERATIONAL BUDGET

€897,847

The economic condition has clearly improved in the past ten years, with the poverty rate going from 44.6% to 22.5% of the population (2014). However, despite a relatively low unemployment rate (less than 5%) instability persists, particularly in rural regions and among indigenous populations.

In April 2016, the regions of Esmeraldas and Manabi were hit by a 7.8 magnitude earthquake, leading to the deaths of 663 people, with over 6,000 injured and 80,000

displaced, and considerable damage. Our Spain and Colombia emergency teams were mobilised.

Since then, we have implemented water, sanitation and hygiene mechanisms, so that households have access to drinking water. A food and nutrition security programme has also been deployed for affected people.



GUATEMALA

LOCATIONS

Zacapa, Chiquimula,
Jutiapa, El Progreso,
Escuintla, Guatemala

START OF MISSION

1996

NUMBER OF STAFF

13

NUMBER OF BENEFICIARIES

22,712

OPERATIONAL BUDGET

€1,061,608

Guatemala has made significant progress in the fight against acute malnutrition : the infant mortality rate has fallen from 8% to less than 3% in 2016.

In 2014 and 2015, the country experienced long periods of severe drought that affected much of the country. This has affected the most vulnerable populations and, in fact, the level for food security has declined. To cope with this, water, sanitation and

hygiene programmes aimed at improving the provision of water have been implemented.



HAITI

LOCATIONS

Port-au-Prince,
Gonaïves,
Bombardopolis, Port-
de-Paix

START OF MISSION

1985

NUMBER OF STAFF

460

NUMBER OF BENEFICIARIES

329,060

OPERATIONAL BUDGET

€12,549,260

Haiti tried to become more politically stable in 2016 by organising elections. However, climate-related uncertainty persists, from natural disasters to hazards brought by the El Niño phenomenon. In October 2016, cyclone Matthew struck the country, killing nearly 600 people and affecting more than 2 million. By 2016, 1.5 million people were food insecure and another 220,000 lived in camps.

2016 is the penultimate year of the Kore Lavi program, in partnership with Care and the World Food Program (WFP). Its primary objective is to improve social protection to combat food insecurity food insecurity by promoting the consumption of local products. The livelihoods of 90,000 victims

of the cyclone have been strengthened, notably through the distribution of food stamps and money. At the same time, 97,000 pregnant and nursing mothers and children were offered nutrition, health and healthcare strengthening support. Finally, following the resurgence of the cholera epidemic, emergency and prevention activities in water, sanitation and hygiene were carried out, including the distribution of kits, sensitization and improving access to drinking water.



NICARAGUA

LOCATIONS	START OF MISSION	NUMBER OF STAFF	NUMBER OF BENEFICIARIES	OPERATIONAL BUDGET
Somoto, Managua	1996	5	3,594	€207,370

Nicaragua is making great efforts to ensure that a large proportion of its population does not live below the poverty line.

Climate conditions are a determining factor: in the last four years, harvests have been very bad and malnutrition is a serious problem, affecting more than 17% of the population. In addition, the political situation does not prioritise humanitarian projects, which has a major impact on health.

Our efforts are aimed at addressing climate

change, improving the living conditions of communities, including food security and livelihood programs, and creating opportunities for young people.



PERU

LOCATIONS	START OF MISSION	NUMBER OF STAFF	NUMBER OF BENEFICIARIES	OPERATIONAL BUDGET
Huánuco, Huanta, Lima, Ajoyani	2007	8	4,644	€112,051

Over the past twenty-five years, Peru has made great strides in eradicating poverty, hunger and inequality.

About 4 million Peruvians escaped extreme poverty. And, in the same period, 1 million children under the age of five no longer suffer from chronic malnutrition. Similarly, the infant mortality rate rose from 55 to 15 deaths of children under 1 year old per 1,000 births. Today, extreme poverty is part of the political agenda, and the government is mobilizing to address it.

Moreover, climate conditions do not favour

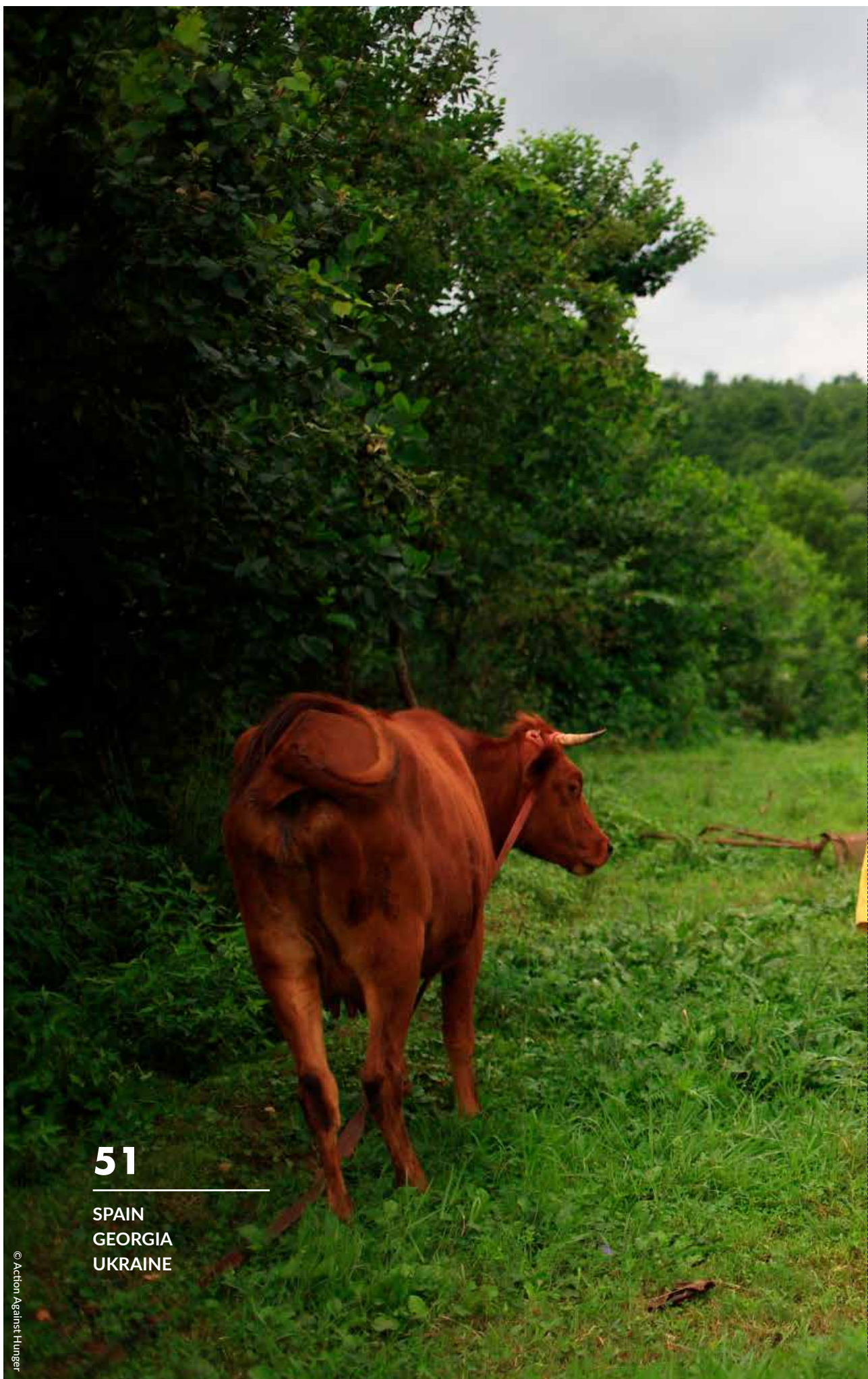
of the population: the El Niño phenomenon affects a large part of it. In order to limit its effects, Action Against Hunger implements food security and livelihoods programmes for victims.



EUROPE

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SPAIN
GEORGIA
UKRAINE





SPAIN

LOCATIONS

Madrid, Pamplona,
Barcelona, Zaragoza,
Castellón, Murcia,
Seville, Malaga, Toledo,
Cáceres & La Corona

START OF MISSION

2013

NUMBER OF STAFF

59

NUMBER OF BENEFICIARIES

2,281

OPERATIONAL BUDGET

€2,853,436

Despite progress in 2016 and a 10% drop in the unemployment rate, employment remains one of Spain's main concerns, with more than 4 million people unemployed.

In line with the action plan launched in 2013, we have developed a programme to help those struggling to enter the job market to find a job or start a business. The objective is to strengthen the people's knowledge and technical skills. In 2016, we

were able to help double the number of individuals compared to the previous year.



GEORGIA

LOCATIONS

Gali, Tbilisi and
Sukhumi

START OF MISSION

1994

NUMBER OF STAFF

33

NUMBER OF BENEFICIARIES

2,754

OPERATIONAL BUDGET

€1,877,433

In Georgia, the extension of the «unresolved situation» has prevented any improvement in the economy sector, exacerbating tensions between populations.

Moreover, the dependence of Russia's budgetary support on Abkhazia puts the separatist region in a vulnerable position because of the fall in international oil and gas prices and the devaluation of the ruble.

Action Against Hunger has been able to successfully implement interventions aimed

at improving the employability of people, a very relevant approach in a middle-income country like Georgia, especially given the structural unemployment that exists there.



UKRAINE

LOCATION
Kiev, Severodonetsk

START OF MISSION
2014

NUMBER OF STAFF
30

NUMBER OF BENEFICIARIES
28,150

OPERATIONAL BUDGET
€1,611,860

Three years after the beginning of the conflict in the East, there have been about 10,000 deaths and 3.8 million people in need of humanitarian aid. Access to basic services remains a worrying problem that organisations, blocked by those embroiled in conflict, are finding it increasingly difficult to resolve.

Shortages of water and medicine are a daily occurrence and vulnerable segments of the population - elderly, disabled and chronically ill people - are the first victims. The psychological impact on the civilian population is disastrous, and more than 2 million people today need medical assistance. In the government area, Action Against Hunger has allocated a monthly amount to certain beneficiaries, corresponding to a basic basket of goods

covering their food, medical and hygiene needs. Action Against Hunger also provides water, sanitation and hygiene assistance and products, as well as technical and material support to communities with damaged water and heating systems.

Support for people traumatized by conflict is provided by psychologists and social workers. Action Against Hunger, with the support of other organizations, has also engaged in advocacy to ensure that international humanitarian law is respected.



FOCUS ON OUR AREAS OF EXPERTISE

TECHNICAL INNOVATION

With respect to innovation, in Georgia the country office successfully piloted and adapted the employment methodology "Employment Shuttles", for which the adaptation process produced the documented practice in the form of a methodological guide to be further utilised by Action Against Hunger, as well as by different partners and stakeholders.

In Djibouti, the country office continued the development of their "Social Marketing Applied to WASH" initiative aimed at boosting the entrepreneurial and commercial sector to enable the majority of Balbala's population to get improved latrines in their homes.

The West Africa Regional Office has rolled out the use of Open Data Kit (ODK), a mobile data collection platform, for their field programmes. Additionally, the office has launched Geographic Information Systems (GIS) training to country offices in Mali and Niger.

EMERGENCIES

Throughout 2016, Action Against Hunger responded to 27 emergencies globally. In most instances, our emergency pool is deployed to respond or provide a surge capacity to country offices to ensure the needs of those affected are met. Out of the 27 emergencies, the emergency pool was deployed to 17 countries in 2016.

HAITI
GUATEMALA

ECUADOR

MALI
CHAD

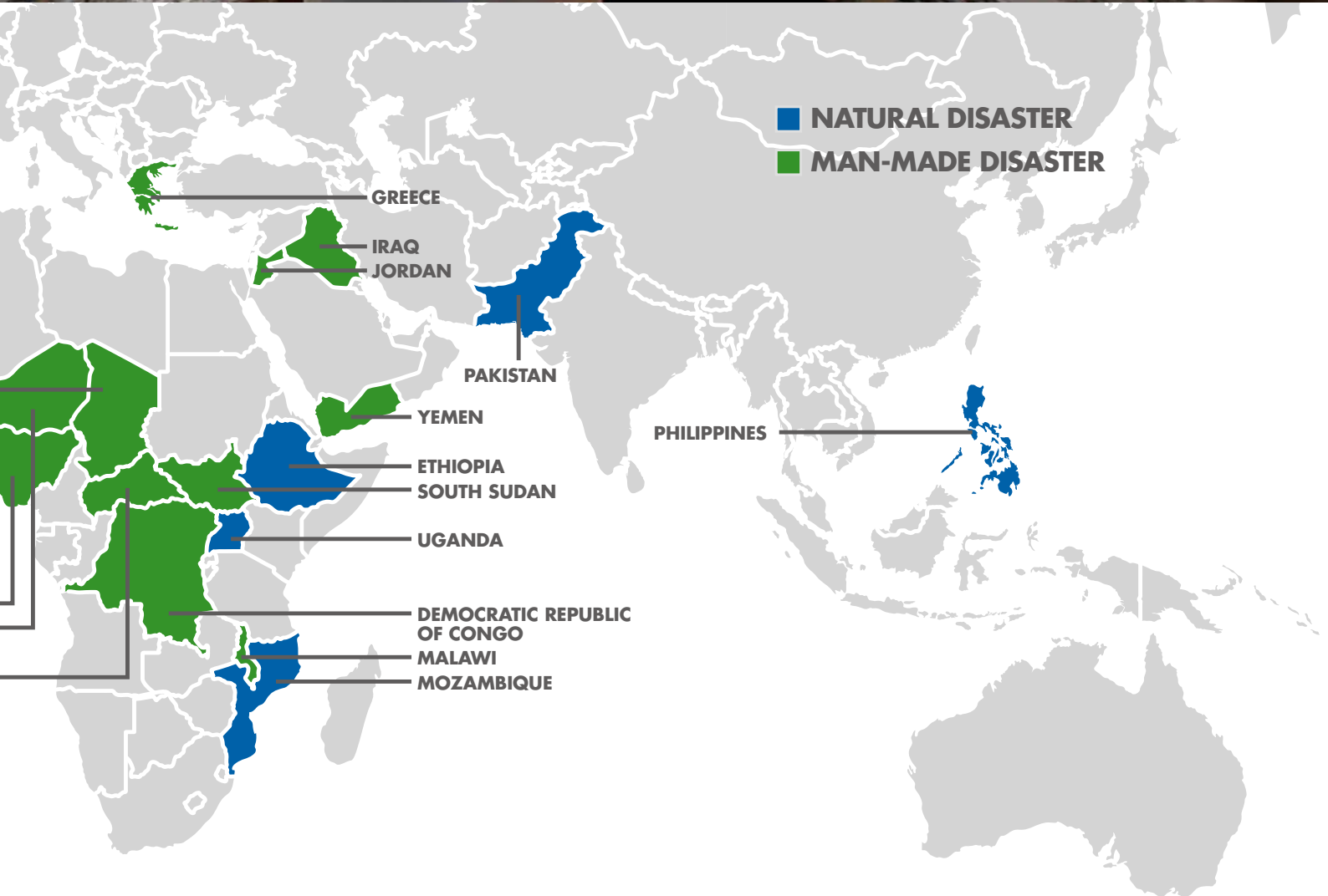
NIGERIA
NIGER

CENTRAL
AFRICAN
REPUBLIC

Map: Countries where Action Against Hunger responded to emergencies

The year saw multiple large scale emergencies due to armed conflict as well as the occurrence of natural hazards. In Yemen, the protracted crisis due to continued violence has led to the deployment of the emergency pool members from various technical sectors of the organisation, including Water, Sanitation and Hygiene, Nutrition, and Health among others. In

Central Africa, the effect of the Nigerian crisis around the Lake Chad region continues to be felt in surrounding countries. Activity by Boko Haram in and around the Lake Chad region has led to the displacement of thousands of people, leading to not only a refugee and internally displaced crisis, but a food insecurity crisis as well. This has led to emergency pool members



being deployed in Chad, the Central African Republic, Niger, and Nigeria to undertake Water, Sanitation and Hygiene, as well as Nutrition and Health programmes.

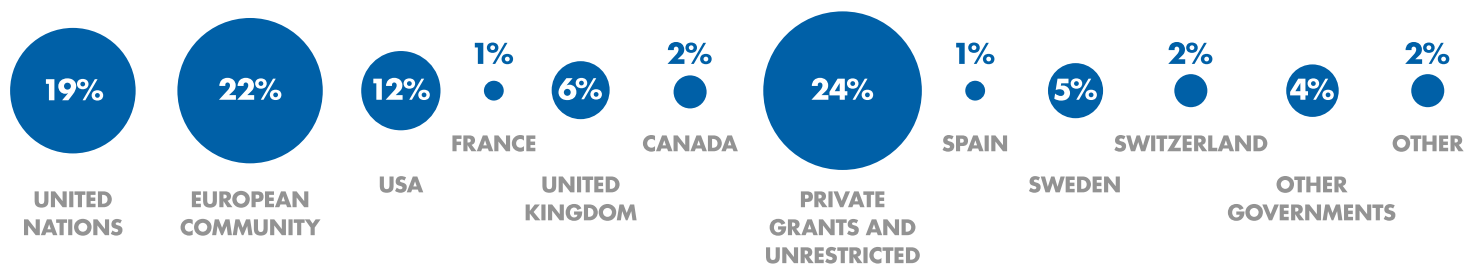
In regards to emergencies caused by natural hazards, the emergency pool was deployed in 50% of cases. The year saw deployments in

Ethiopia and Mozambique due to the effects of the El Nino drought, a deployment to Ecuador in response the earthquake affected populations of Esmeraldas and Manabí, and a response in Haiti due to the effects of Hurricane Matthew. The emergency pool's ability to deploy within hours of an emergency is an asset for Action Against Hunger.

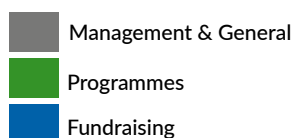
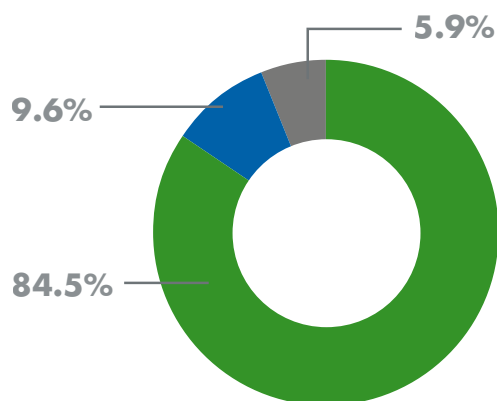


FINANCE

RATIO OF REVENUE BY DONORS 2016



BREAKDOWN OF EXPENSES 2016



€307.6 M
ACTION AGAINST
HUNGER'S BUDGET
IN 2016

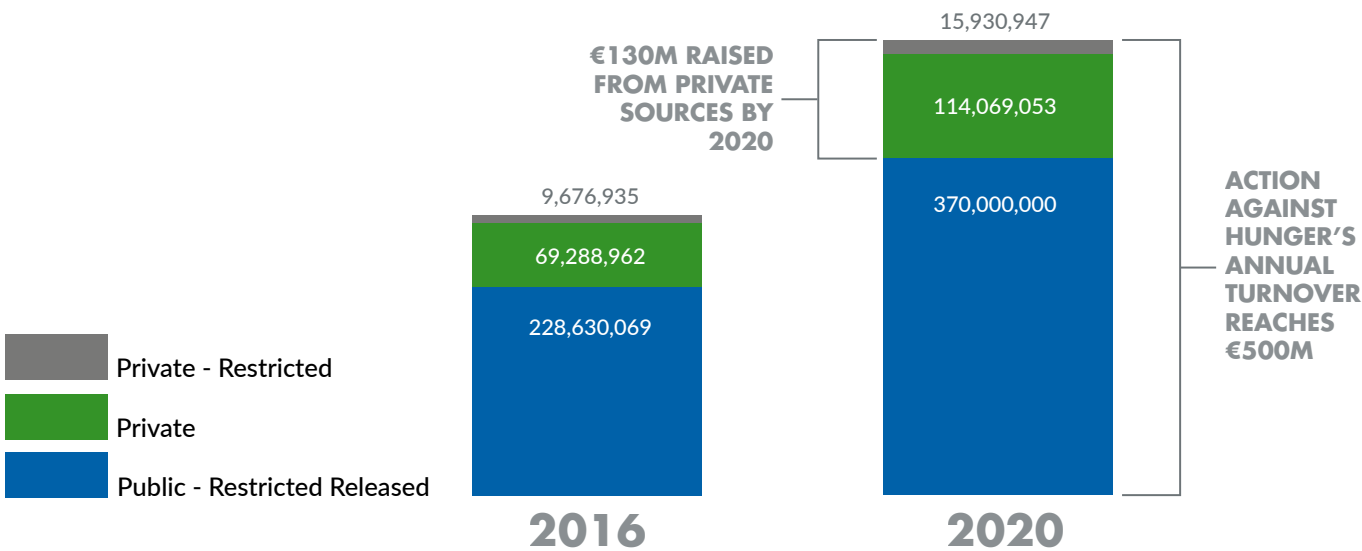
+4%
TOTAL BUDGET
INCREASE

Action Against Hunger has made important efforts to adapt to a rapidly evolving environment for funding humanitarian activity. This shift is far from done as the share of private investments in the sector will continue to rise over the coming years. To thrive in this landscape, Action Against Hunger will strengthen its innovative and engaging approach to private partnerships, whilst improving its involvement with public actors.

Action Against Hunger will strive to increase its total revenue by 63% between 2016 and 2020, from €307.6 million to €500 million. Our organisation is shifting its approach so it can raise as much as €130 million from private sources by 2020, which will continue to represent 26% of its total expected revenue. This double challenge —increasing both the total revenue and maintaining the revenue from private sources at a constant rate— requires a strong fundraising strategy geared toward our commitment to sustainable impact.



ACTION AGAINST HUNGER INTERNATIONAL - FINANCIAL ACTIVITY



Simultaneously, a strong involvement with government donors and multilateral organisations will be upheld. By 2020, Action Against Hunger will fundraise €370 million from public funds, representing a 62% increase from 2016 levels, where the organisation secured more than €228.6 million. Today, the European Community and the United Nations Agencies are our major public donors, contributing to 22% and 19% of our fundraising respectively. The United States and the United Kingdom are our two largest government contributors, representing 12% and 6% each, with all other governments combined committing to 14% of Action Against Hunger's funding.

In 2016, the share of our expenses dedicated to programmes activity was 84.5%, with 9.6% channelled toward fundraising activities. This reflects Action Against Hunger's investment in its fundraising capacities around the world, which is crucial to achieve a core goal of our 2020 strategy: to establish new fundraising income streams and markets outside our traditional working environments.

Despite such distributions remaining largely unchanged from previous years, Action Against Hunger fully assumes the unpredictability of current political and economic events. We will strengthen our resilience by optimising the use of resources and establishing efficient cost recovery and cost effectiveness systems across all our operations.

ALL FINANCIAL INFORMATION REPORTED IS PRELIMINARY, AS RESULTS FROM FINAL AUDITS ARE YET TO BECOME FULLY AVAILABLE.

INNOVATION, RESEARCH AND LEARNING

Action Against Hunger invests heavily in innovation, research and learning, as we strive to explore more efficient and effective ways to undertake our work, as well as researching new methods to address undernutrition. In 2016, 31 research projects were undertaken in a variety of sectors, with the majority being related to nutrition and health (42%), such as the 'C Project' looking at coverage and community management of acute undernutrition, to projects assessing the availability and market for ready to use therapeutic food. To undertake these projects, we strive to work with an abundance of partners, ranging from those in academia and other NGOs to those in the private sector. In addition to undertaking research, Action Against Hunger has published 31 times in 2016, regarding topics such as a nutrition surveillance in Burkina Faso to the mental health of humanitarian workers and the links available to those workers and therapists.

In the case of innovation, in Georgia, the country office successfully piloted and adapted the employment methodology "Employment Shuttles", for which the adaptation process produced the documented practice in the form of a methodological guide to be further utilised by Action Against Hunger, as well as by different partners and stakeholders. In Djibouti, the country office continued the development of their "Social Marketing Applied to WASH" initiative aimed at boosting the entrepreneurial and commercial sector to enable the majority of Balbala's population to get improved latrines in their homes. The West Africa Regional Office, has rolled out the use of Open Data Kit (ODK), a mobile data collection platform, for their field programmes. Additionally, the office has launched Geographic Information Systems (GIS) trainings to country offices in Mali and Niger.

WHERE DO WE WANT TO BE BY 2020?

Research and innovation are a pillar of Action Against Hunger's current international strategy. Together with increasing learning from our programmes, they constitute a virtuous cycle for strengthening our technical expertise and better position ourselves in every context in which we work, with special attention to the improvement of practical approaches to prevent and treat undernutrition.

This is why by 2020 at least 2% of our operational volume will be dedicated to research and development. We firmly believe that sustained

investment will lead to more effective and impactful research. In order to do so, increased funding will be matched by more comprehensive research strategies: at least 90% of our research projects will have a comprehensive and resourced uptake strategy. And because nutrition is our core priority, special attention will be given to track Action Against Hunger's performance according to a Nutrition Security Index. By 2020, the Index will be completed and in use to track at least 50% of our programmes.



OUR GOVERNANCE

Action Against Hunger is a global movement of people working towards a world without hunger. We believe that by working together we can help provide malnourished children and their families with healthier futures.

Action Against Hunger is made up of six sister organisations in the UK, France, the USA, Spain, India and Canada.

Our global efforts save hundreds of thousands of lives each year, but millions of malnourished children remain in need of life-saving treatment

and support. We believe that every child should have access to the basic nutritious food they need to survive, unlock their potential and build their own futures. And we believe our programmes will have a better impact if we collaborate closely, share human resources, logistics, technical expertise and capacity, and develop the best structures and systems to operate in a professional and transparent manner.

On a global level, we coordinate our activities and make joint decisions.

ADVOCACY

ADDRESSING THE DRIVERS OF HUNGER

The advocacy function at Action Hunger, encapsulates several of our aims laid out in the International Strategic Plan for 2016-2020, particularly that of addressing the causes of hunger and that of changing the way hunger is viewed and addressed. It does so through engaging in collective efforts that address the root causes including poverty, conflict, inequality, climate change, poor governance and insufficient political will. Our advocacy draws legitimacy and credibility from our operations in the field, research, and our direct work with communities in a variety of contexts.

In 2016, the Ise-Shima Progress Report was published analysing the G7's accountability on development and development-related commitments, regarding various topics such as health, water and sanitation, education and food security, which are all drivers of the battle against hunger. Action Against Hunger advocacy worked diligently to ensure that some of our key messages were integrated in the first common financial accountability framework, which came out of this report. Other initiatives by Action

Against Hunger led to the integration of nutrition in the ECOWAS Regional Agricultural Investment, Food Security and Nutrition Plan (PRIASAN); and finally our advocacy work led to nutrition being one of three pillars of the French Development Agency's strategy on food security.

With climate change now playing such a negative role on food security and nutrition, some of the initiatives undertaken in 2016, have included following up on the role of food security and agriculture in climate negotiations, particularly after food security was added in the Paris climate accords. A significant achievement for Action Against Hunger this past year has been the work undertaken regarding the impacts of El Nino and the lack of preparedness of the response of the humanitarian system regarding this. We participated in the international debates on this topic, in part due to our position paper, which overall has led to an increased global pledge to cover the needs of those affected by such a phenomenon. Progress will continue to be made in our advocacy addressing the drivers of hunger.

ADVOCATING FOR COUNTRIES EMBROILED BY CONFLICT

The advocacy team launched a campaign on Yemen to alert on the deterioration of the humanitarian situation, the impact of the ongoing conflict on the population, and an attempt to push P5 countries to act on finding a resolution to the conflict there by stopping arms sales to the armed coalition, and to relaunch peace talks. This included several published advocacy pieces on updates and the dissemination of key messages ahead of high level discussions between France and Saudi Arabia; and it involved approaching French and European Members of Parliament, in an attempt to influence the European Parliament resolution on the humanitarian situation and the need to stop arms sales from the European Union countries.

Regarding the situation in Iraq, considering the acute crisis, and in preparation to the battle for Mosul, it was important to ensure that impediments to aid were raised and addressed. To do so, the advocacy team

wrote and disseminated a report regarding issues to access and acceptance in Ninewa governorate, aimed at high-level members of government. Additionally, an advocacy strategy was developed around the Mosul offensive; key messages were disseminated along with regular updates on the impact of the offensive, particularly ahead of high-level donor meeting in Brussels in December of 2016.

Similar advocacy has been undertaken for other countries affected by conflict such as Ukraine, Syria, the Lake Chad Basin, the Central African Republic and Afghanistan, among others. Disseminating regular updates regarding the situation on the ground ensures that crises are not forgotten and remain on the agendas of donors as well as governments, in hopes of leading to additional funding and resolute and comprehensive action to end the suffering.



LOGISTICS

In 2016, logistics teams of Action Against Hunger continued to play a crucial role in our operations across the globe. The ability to procure and deliver goods to beneficiaries in an efficient and timely manner is critical, particularly in a year with continued humanitarian crises and natural disasters. Throughout our country and regional offices, in addition to our logistic centres, the organisation managed a global supply chain with a volume of over € 112 million, of which five countries accounted for 30%.

Action Against Hunger uses the Logistics Assessment Tool (LAT), made up of various indicators such as project funding, storage and quality control, among other, which allows staff to understand the current situation in terms of logistics procedures and to define relevant action plans. The aggregated average completion rates help orientate the organisation's strategy and improve support to the country offices. Across the organisation in 2016, the average completion rate of the LAT was 68%. Yemen reported a LAT of 38%, due to a very demanding environment posing challenges to access, security and recruitment, inhibiting the full delivery of logistics services. The rest of the organisation had LAT completion rates of 50% or more, with 16 countries registering rates above 70%.

In regards to trainings, a programme of 170 hours focusing on humanitarian logistics was undertaken, with three trainees now deployed to the field and 2 at headquarter level. Other trainings were held, such as one in Cameroon for the Central Africa region, and one in Thailand for the Asia region. Our organisation's capacity was also increased through participating in conferences such as the Health and Humanitarian Logistics conference at Georgia Tech and the Aid4 conference in Nairobi. Beyond trainings, standardised platforms are another component that helps grow the organisation's logistics capacity. In 2016, we successfully tested a platform for fleet management in Senegal and Colombia, with the platform being deployed to other countries in 2017; we piloted a system for electronic signature across the supply chain workflow; we deployed the first module of LINK in several countries, and completed the definition of information system for tracking the supply chain in emergencies, with this system continuing to be developed and piloted in 2017.



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FOR FOOD.
AGAINST HUNGER
AND MALNUTRITION.

FOR CLEAN WATER.
AGAINST KILLER DISEASES.

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

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

FOR CHANGING MINDS.
AGAINST IGNORANCE AND
INDIFFERENCE.

FOR FREEDOM FROM HUNGER.
FOR EVERYONE. FOR GOOD.

FOR ACTION.
AGAINST HUNGER.

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