**Key Findings**

**Total Beneficiaries:**
- **17,257** Children reached with lifesaving nutrition and health programs.
- **140,768** People reached by WASH interventions.
- **15,533** Beneficiaries of our food security and livelihoods programs, including cash transfers and DRR.

**Budget:** $6.1 M

**Staff:** 157

**Donors:** ECHO, EU, UNICEF, USAID

**Mandate and Mission**

Action Against Hunger has been operating in Haiti since 1985. Due to its geographic location, Haiti is very exposed to natural disasters such as hurricanes, drought, earthquakes and floods. However, the country’s capacity to respond to catastrophes is very limited, thus making it highly vulnerable. In 2018, heavy rains and a magnitude 5.9 earthquake in October affected thousands of people in the North-West and Artibonite Departments. Haiti’s socio-economic situation, aggravated by depreciation of the local currency and rampant inflation, continues to drive chronic food insecurity. According to EMMUS VI(2016-2017), 4% of children are acutely malnourished, 22% suffer from chronic malnutrition and 10% are underweight. This year, we focused on improving the implementation of our development projects while maintaining our capacity to respond to emergencies.

**Strategic Objectives**

**Objective 1:** To improve access to and quality of health services for children & PLWs

**Objective 2:** To prevent undernutrition and promote resilience of nutritionally vulnerable women, men, girls and boys.

**Objective 3:** To identify and anticipate nutritional risks.
Objective 1: To improve access to and quality of health services for children & PLWs

Increasing detection and early presentation

We are prioritizing interventions that identify children suffering from acute malnutrition earlier, resulting in those children getting treatment faster. Early detection of acute malnutrition can decrease mortality and morbidity of children with severe acute malnutrition (SAM) and reduce program costs.

We do this through

- **11,676** Children screened in their community by CHWs, lead parents or guardians
- **264** Health and Nutrition education sessions

Increasing availability and accessibility of treatment

We are reinforcing the capacity of health care providers (incl. Community Health Workers) and local government partners to improve the effectiveness, cost-effectiveness and coverage of services for the management of acute malnutrition in order to reach more children who are in need of treatment.

- **6** Mobile/Satellite teams for treatment
- **80%** Cure rate for children diagnosed with Moderate Acute Malnutrition (MAM)

Improve health and nutrition information systems for effective decision making

We are working in collaboration with local partners to strengthen existing methodologies for collecting nutritional data, and how to improve on those methodologies. Furthermore, we are reinforcing the national health management information systems (or other information systems) to more efficiently analyze and utilize data to trigger actions or shifts in nutrition programming to ensure that interventions are reaching those most in need.

- Provide technical support to manage the minimum package of health interventions through advocacy
- Training Ministry of Public Health and Population (MSPP) staff and local NGOs

Objective 2: To prevent undernutrition and promote resilience of nutritionally vulnerable women, men, girls and boys.

Increase disaster and seasonal resilience for nutrition

Environmental shocks and high seasonal fluctuation impact undernutrition rates so building resilience for nutrition is crucial. Action Against Hunger support the capacity of household and communities to minimize the impact of shocks and stresses on the GAM rate or to quickly return to the pre-disaster situation.

- Respond to emergencies by reinforcing the technical capacity of communities, promotion of village saving and loans mechanism et development of revenue-generating activities
- **3,425** Beneficiaries of resilient livelihood measures

Protect the 1000-day window

The 1000-day window refers to the period of time between conception and the child's 2nd birthday and is a crucial time for the healthy development of a child. We therefore promote a package of interventions that target this critical window. These interventions range from water and sanitation activities to promoting optimal infant and young child feeding practices to diversifying diets of pregnant and lactating women, promoting of micronutrient-rich foods, and advocating for the availability of micronutrients in health centers and posts (iodized salt, AK1000).
Optimize Household Decision Making for Nutrition

The multi-causal nature of acute malnutrition in our program areas can be linked to three key factors: access to food, care practice and environmental health. These elements interact in a dynamic relationship; linking household decision making, available resources (including livelihood assets or water/sanitation assets) and knowledge (including hygiene and infant care practices) to influence household nutrition security.

Identify context-specific drivers

The precise and accurate identification of context-specific drivers is a critical priority for Action Against Hunger – one that allows us to design programs that most effectively and sustainably address undernutrition from its root causes. In practical terms, Action Against Hunger identifies context-specific drivers through our work on Link Nutrition Causal Analyses (LinkNCAs).

Predict & quantify increases in nutritional risk

We seek to encourage early actions that prevent nutrition-related crises. However, existing early warning systems rely upon increasing levels of moderate and severe acute malnutrition warn of an impending crisis. Therefore, in reality, these systems actually provide ‘late’ warnings for undernutrition. We believe there’s a better way to predict nutritional risk, so we are refining our existing systems and piloting a ‘new’ approach through MERIAM predictive modelling.

Our Niche: Social Protection

Since 2015, the Integrated Food Security Phase Classification (IPC) shows that 70% of the Haitian population is in chronically food insecure with 20% of the population in Nord-Ouest and Haut Artibonite in severe chronic food insecurity (phase 4). Following recurrent shocks (natural disasters and political instability), IPC predicts a deterioration of the situation in 2019. Through our social protection programs, Action Against Hunger seeks to support the most vulnerable households who suffer from economic insecurity and lack the means to provide for their basic needs.

Social protection is the combination of public policies, programs and systems that help poor people and households reduce their socio-economic vulnerability, strengthen their capacity to face shocks, and improve their rights and social status. Special attention is paid to households with children with MAM and pregnant and lactating women, thereby reinforcing support for the first 1000 days. We are putting in place an inclusive social protection structure (along with the Ministry of Social Affairs and Labor) based on access to local food products and support to economic activities by:

- Strengthening the agriculture sector to increase supply and revitalize the added value of these players while ensuring the inclusion of vulnerable households and the conservation of natural resources.
- Creating jobs and reinforcing food and nutritional security, as well as livelihoods.
- Taking an inclusive approach: the most vulnerable are partnered with the least vulnerable and non-beneficiaries within VSLA (Village Savings and Loans Associations) while preserving the dignity of vulnerable people.
- Using Vouchers increases our capacity to cater to a greater number of vulnerable households and reduces delays in the payment and deployment mechanism.