



RMRP 2023 • 2024

NUTRITION

2023

2024



PEOPLE IN NEED

↑ 3.9% ↓ 41.1%

1.72 M

1.80 M

↑ 26.3% ↓ 28.8%



PEOPLE TARGETED

↑ 0.0% ↓ 38.4%

200.9 K

223.1 K

↑ 28.0% ↓ 33.5%



PIN PERCENTAGE

12.3%

12.2%



TARGET PERCENTAGE OF PIN

11.7%

12.4%



TOTAL REQUIREMENTS

\$13.84 M

\$11.03 M



RMRP PARTNERS:

25

SECTOR LEADS: UNICEF

KEY FIGURES BY PLATFORM

	2023				2024				
	Icon 1	Icon 2	Targeted In need	Icon 4	Icon 1	Icon 2	Targeted In need	Icon 4	
BRAZIL	65.0 K	10.5 K	16.1%	\$1.38 M	68.5 K	4.7K	6.8%	\$869.1 K	4
CHILE	172.4 K	2.4 K	1.4%	\$519.2 K	187.2 K	2.6K	1.4%	\$541.8 K	1
COLOMBIA	1.20 M	114.8 K	9.6%	\$4.36 M	1.25 M	149.9K	12.0%	\$3.85 M	12
ECUADOR	131.6 K	8.6 K	6.5%	\$3.16 M	133.1 K	8.6K	6.4%	\$2.54 M	6
PERU	156.8 K	65.0 K	41.4%	\$2.01 M	166.3 K	59.5K	35.8%	\$1.71 M	9
CARIBBEAN	13.2 K	7.6 K	57.4%	\$1.53 M	13.4 K	7.8K	58.5%	\$541.5 K	4
CENTRAL AMERICA & MEXICO	85.0 K	5.3 K	6.3%	\$275.0 K	87.2 K	5.3K	6.1%	\$300.0 K	2
SOUTHERN CONE	33.1K	5.9 K	17.8%	\$267.1 K	35.6 K	8.8K	24.8%	\$278.1 K	3

SECTOR OVERVIEW

The Nutrition Sector will continue to respond to the needs of the population groups most vulnerable to malnutrition: children under 5 years of age especially children under 2, adolescents (particularly girls) and pregnant and lactating women who are at heightened risk of malnutrition or who are already facing malnutrition in countries affected by mixed movements of refugees and migrants.

The capacity at the national level to provide essential nutrition services varies greatly across the 17 countries of the R4V response. In recent years, the number of countries with nutrition activities in the RMRP has increased from six in 2021 to eight in 2022. In 2023-2024, R4V partners have included Nutrition activities in 11 countries.⁸

The Nutrition Sector will focus on three response priorities in 2023-2024:

1. Ensuring access to nutrition services/interventions by qualified and trained personnel:

Nutrition Sector partners will identify and address the most pressing nutrition needs of vulnerable populations through nutrition interventions to prevent, identify and treat malnutrition (acute malnutrition, stunting and micronutrient deficiencies, such as anemia). R4V partners will identify vulnerable refugees and migrants most at-risk of malnutrition, as well as those in affected host communities, to ensure they receive adequate nutritional care. Activities include:

- Nutrition counselling and micronutrient supplementation for pregnant and lactating women to support their nutritional needs and prevent anemia and/or other forms of malnutrition. A special focus will be given to pregnant adolescents, who have very high nutrient requirements and deficiencies that can lead to early cessation of growth and increased risks for newborns.
- Infant and young child feeding counseling and support sessions will be provided to caregivers of children under 2. Topics include feeding infants exclusively with breastmilk or replacement milk, and feeding solids to children 6-23 months.
- Micronutrient supplementation in children 6-59 months to fortify children's food with vitamins and minerals to prevent micronutrient deficiencies, as well as energy-protein supplementation to prevent malnutrition in children in-transit.
- Timely identification, referral treatment and follow-up until recovery of children under 5 with acute malnutrition.

2. Understanding and assessing the nutrition situation of vulnerable groups:

The Sector will support nutrition assessments among vulnerable groups to understand the nutrition situation of refugee and migrant settings, nutrition risks, and sectoral needs. Other vulnerable groups will be considered in the assessments, such as children 5-9 years old, adolescents (10-19 years) or older people (women and men over 65 years), to have broader scope of nutrition risks and needs.

3. Advocating for stronger prioritization of nutrition interventions as life-saving interventions for refugees and migrants from Venezuela:

The Nutrition Sector will work on strengthening its communication and advocacy on the nutrition risks and needs of vulnerable groups and host communities and the importance and life-saving impact of nutrition interventions, which is often not visible or understood.

The two main response modalities include i) direct assistance for vulnerable groups most at-risk of malnutrition; and ii) strengthening country-level capacities at five different levels:

- A. regular trainings for healthcare staff and frontline workers regarding the delivery of quality nutrition interventions;
- B. support local authorities with increasing staffing of additional nutrition experts to support host government nutrition responses;
- C. strengthening the technical response capacity of nutrition partners, including interlinkages and reinforcement of AAP, PSEA, environment, centrality of protection and gender considerations;
- D. capacity development targeting national nutrition partners regarding all aspects of the nutrition response, including knowledge-sharing among countries,⁹ in countries implementing nutrition activities for the first time; and support local authorities to enhance their nutrition programmes, which will be provided through elaborating or updating nutrition guidelines and protocols in emergency response with a view to bridging the humanitarian and development nexus.

The Nutrition Sector will also employ CVA as a modality coupled with nutrition counselling. The Sector will provide specialized nutrition supplies to deliver nutrition interventions (anthropometric equipment, ready-to-use therapeutic and supplementary foods, micronutrient tablets or powders); implement social and behavioural change strategies at the community level; strengthen communication and advocacy tools/tactics; and conduct nutrition assessments, either through nutrition screening exercises or standardized methods, such as nutrition surveys.

Stronger coordination with other Sectors will be sought to ensure their interventions contribute, even indirectly, to prevent the deterioration of the nutritional status of population groups vulnerable to malnutrition among refugees and migrants from Venezuela and affected host communities; for example, through the prioritization of vulnerable groups to malnutrition in sectoral interventions, and the identification and referral of vulnerable groups to nutrition-specific interventions.¹⁰ The Nutrition Sector has identified the Health, Protection, WASH and Food Security Sectors as priority Sector partners in that regard.

[8] Bolivia, Brazil, Chile, Colombia, the Dominican Republic, Ecuador, Guyana, Panama, Peru, and Trinidad and Tobago will have active nutrition responses for refugees and migrants from Venezuela in 2023-2024; Chile and Panama having incorporated a Nutrition Sector as part of their 2023 - 2024 RMRP.

[9] In countries that have no nutrition response or nutrition capacities (Argentina, Aruba, Costa Rica, Curaçao, Paraguay, Uruguay), the Nutrition Sector will engage with R4V national platforms to explore opportunities for the inclusion of nutrition activities.

[10] Introduction to the R4V Nutrition Sector: <https://www.r4v.info/en/document/introduction-r4v-nutrition-sector>