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© Save the Children Peru

Country card

Peru



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HI Team and intervention areas

HI PERU, in the Latin America Program, has 13-7 staff members.

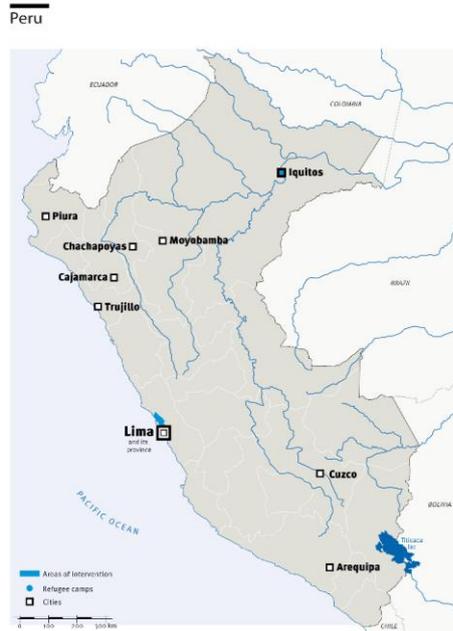
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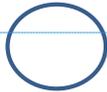
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General data of the country

a. HI internal classifications of the country context

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Level of violence	Operations Director Focus	Health Focus	Positioning Focus	Emergency Focus
Low	Standard No focus	NO	NO	NO

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ba. General Data

DATA	Peru	Bolivia	Belgium
Population	33.5	11.8	11.5
IHDI	0.78	0.72	0.93
Gender-related Development Index	0.957	0.945	0.974
Maternal Mortality	88	155	5
GINI Index	42.8	42.2	27.4
Population within UNHCR mandate	2.529	810	42.168
INFORM Index	4.7	4.2	1.9
Fragile State Index	67.63	74.97	27.10
Public social protection	5.5	10.2	29.2
Net official development assistance received	629.6	1116.1	0

be. Humanitarian law instruments ratified by the country

Humanitarian law instruments	Status
Mine Ban Treaty	Ratified on 17/06/1998
Convention on Cluster Munitions	Ratified on 26/09/2012
UN Convention on the Rights of Persons with Disabilities	Ratified on 30/01/2008

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cd. Geopolitical analysis

1. Social/cultural/demographic elements

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Peru is a very heterogeneous country, with a varied geography and great socio-economic and ethnic inequalities. In spite of being considered an upper middle-income country, the high levels of inequality are due to structural causes, registering severe problems of social exclusion, discrimination and poverty. After a prolonged economic crisis that led to hyperinflation and generalized recession, neo-liberal economic policies were applied in Peru that drastically reduced the presence of the state and the social sector, encouraged private investment by reducing all types of regulations and rights, and led millions of people to try to survive through various forms of precarious work and self-employment. In the last decade, on average, the economy has grown by about 6.6% per year.

According to UNDP statistics, Peru and Ecuador are countries with high human development, while Bolivia and Paraguay maintain medium human development.

2. Political context

Peru, in line with most of its neighbours, was governed during the 1970s by a military dictatorship (1968-1980). However, the return of free elections did not imply a pacification of social relations. In fact, in 1980, a Maoist guerrilla group (~~the Shining Path~~ ~~Sendero Luminoso~~) took up arms. This was followed by years of terror during which ~~the this guerrilla group Sendero~~ was responsible for exactions and massacres of thousands of peasants and attacks in Lima. The response of the armed forces ~~was~~ equally violent. Alberto Fujimori came to power in 1990 and remained in power until 2000. In addition to his neoliberal economic policies, his mandate is characterized by a great repression of the guerrilla (especially by stimulating, as in Colombia, self-defence groups, a kind of paramilitary structure). Although the conflict that left more than 70,000 dead in the Fujimori decade is considered almost pacified - punctual terrorist acts are still taking place today - the president has been accused of serious human rights violations. After his exile, he was succeeded by Alejandro Toledo, the first democratically elected indigenous president.

In 2011, Ollanta Humala, founder of the Peruvian Nationalist Party (left) was elected in the second round in front of Fujimori's daughter. Despite his left positioning and the fact that he enjoyed the support of other regional left-wing leaders as Luiz Inácio Lula da Silva (Brazil) he did not change so much the liberal orientation of the economy. Peru has been plagued by enormous corruption scandals in the past few years, leading among other things to the resignation in 2018 of former President Pedro Pablo e.caruyvels@hi.org 5

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Kuczynski (PPK). He was replaced by his vice president, Martin Vizcarra, who will serve his term until 2021. Vizcarra has made the fight against corruption his priority in light of the many politicians involved in recent scandals involving the Brazilian construction firm Odebrecht, and under pandemic COVID-19 context, during the first semester of 2019. This year, former President Alan Garcia committed suicide as he was facing many corruption charges.

During the year 2020 Peru had not only economic and health effects due to the pandemic COVID-19 situation, also there was a political crisis in the country after continuously disputes between Congress and mandate of President Vizcarra.

Congress filed a second vacancy request against President Vizcarra for alleged "moral incapacity", leading to Mr. Manuel Merino, at that time President of Congress, to assume the presidency of the Republic of Peru. This situation was a displeasure for the great majority of the country, citizens dissatisfied with the actions carried out came out to protest in different parts of the country, with a particular participation of young Peruvian people. Unfortunately, these protests turned into very violent clashes between citizens and the police, where there was excessive use of force, resulting in the death of two young people.

Given the events that occurred in the country, President Merino had to resign in less than a week. Then, in November 2020, Mr. Francisco Sagasti was sworn in as President of the Republic by constitutional succession, in his capacity as President of Congress, in order to complete the 2016-2021 period in a transitional mandate. In parallel, the effects of the COVID-19 pandemic continued in the country and near the next election process in July 2021.

Up to recently presidential election process on July 2021, there were a lot of candidates. In the first round, there were five candidates who were leading the polls, among them Mrs. Keiko Fujimori, daughter of former President Alberto Fujimori, who had previously tried her application and was negative result for her. The results of the first round gave as winners of this first match Mrs. Keiko Fujimori and Mr. Pedro Castillo, member of the Peru Libre Party (left), who until now was unknown to most of the country. Finally, the country became polarized between these two options and candidates, being the winner and being President Pedro Castillo for the period 2021-2026.

The current political situation, turmoil, progressive restrictions on the exercise of human rights and high levels of corruption and violence in Venezuela, as well as an on-going deterioration of socio-economic conditions and increasing humanitarian crisis inside the country, have led to an internal crisis that has generated significant movements of persons to neighbouring countries and beyond.



Starting 2014, about 5 million Venezuelans have left Venezuela, particularly over the past two years. Peru has been particularly affected by the influx of Venezuelan nationals with a significant increase in 2018-2019 (currently there are approximately 829,708 Venezuelans migrants in Peru).

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Humanity & Inclusion is part of the organizations involved in assisting the Venezuelan population and the host community, as well as in strengthening other humanitarian actors to make their response more inclusive of people with disabilities. The humanitarian needs of migrants and the host community have increased with the COVID-19 pandemic.

e. Analysis of the disability situation

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Representation and Understanding of Disability	
Statistics and data on disability	<ul style="list-style-type: none"> According to the national statistics institute (2017 INEI national cense), 3'051.612 people lived with a disability in Peru (10,4%), which is not so far from the WHO estimate of 10-15% and can reflect flawed data. 25% of the Peruvian population with disability reaches a level of secondary education (45% for the population without disability); 70% is literate (against 95% for the population without disability); and the average monthly income of the PwD for 2016 was 256\$, while the average of the person without disability reached 394\$.
Attitudes and social representations of disability	<ul style="list-style-type: none"> In addition to the absence of specific policies throughout most of legislation, there are social practices of invisibility and discrimination against persons with disabilities, with women being the most affected. In general, persons with disabilities are at the margin of the country's development processes and do not have a voice of their own in political debates. In front of them, an existentialist vision prevails over a vision of rights.
Legal and political framework	
Application, monitoring and evaluation of the CRPD	<ul style="list-style-type: none"> The Convention on the Rights of Persons with Disabilities (CRPD) was ratified in 2008; and the Inter-American Convention for the Elimination of All Forms of Discrimination Against Persons with Disabilities was ratified in 2003 In 2015, IDA realized a follow-up mission to the recommendations of the CRPD Committee with a series of observations.
Integration of Disability into	<ul style="list-style-type: none"> The First Plan for Equal Opportunities for Persons with Disabilities (PIO-2003-2007) expressed the will to establish a policy to address the

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<p>national laws and public policies</p>	<p>exclusion experienced by persons with disabilities. In 2012, a new General Law on Persons with Disabilities was adopted and the Equal Opportunities Plan for Persons with Disabilities for the Decade 2009–2018 was approved.</p> <ul style="list-style-type: none"> In 2012, the General Law on Persons with Disabilities No. 29.973 was adopted and a real change was introduced in the approach to the rights of persons with disabilities based on equality and non-discrimination. Article 3.2 of the law since 2012, in Peru, the law requires public companies to include 5% of PcD and private companies to include 3% of them, but despite this, 77% of them are outside the labor market. Up to June 2021 the National Multisectoral Policy on Disability for Development by 2030 (PNMDD) was approved in Peru through D.S. 007-2021-MIMP. The National Council for the Integration of Persons with Disabilities (CONADIS) in Peru was one of the organizations leaders in the proposal process.
<p>Barriers and Facilitators of Access to Services</p>	
<p>Disability and Citizenship</p>	<ul style="list-style-type: none"> All these legal and normative instruments share the same deficiencies: scarce participation of civil society and absence of a real evaluation of the above, disassociation with the set of public policies, lack of own budgets and/or items in the budgets of the sectoral ministries. Making disability visible to the authorities continues to be a major challenge. The 2012 General Law on Persons with Disabilities states that the rights of persons with disabilities are interpreted in accordance with the principles and rights contained in the Universal Declaration of Human Rights, the CRPD and other international human rights instruments ratified by Peru.
<p>Social protection and access to services</p>	<ul style="list-style-type: none"> Social protection, in particular access to health services and in particular for women is limited. Although workers on the formal market (a minority) have increased their affiliation to the health system (from 45% to 85% between 2002 and 2012), coverage of the population as a whole remains limited. Only 30% of the insured population has access to public systems based on contributions from workers and employers. Persons with severe disabilities and in poverty conditions receive a subvention “Contigo” which represents 90\$ every 2 months
<p>Main stakeholders in the field of disability</p>	
<p>Structure of DPOs</p>	<ul style="list-style-type: none"> There are 154 associations of persons with disabilities registered with the CONADIS, most of them are local and focus on a specific disability. A lot of these associations are very small, most are disorganized and there is no Federation grouping them.

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- There are very few INGOs with a disability focus, present in Peru, Bolivia and the connection between them is not formalized. Punctual actions mark their relationships.
- There is an unformal network of PDOs and NGOs advocating for rights with about 40 members since 2016: “Mesa Derechos y discapacidad”

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f. Description of exposure to mine/weapon and emergency risks in the areas covered + continuum/contiguum related issues

Exposure to armed violence

Latin American and Caribbean states register amongst the highest levels of armed violence and victimization, even in the near total absence of major armed conflicts, with a regional homicide rate several times higher than the global average.

In 2017, the homicide rate in Peru was 7.8 homicides per 100,000 inhabitants, the highest rate since 2011. Between 2010 and 2017, 937 women were murdered and 1172 attempted murders occurred on women. According to a 2014 survey, 32.3% of Peruvian women were victims of physical violence by a spouse or partner, and 11.9% of women experienced it in the last 12 months.

The exact number of Peruvians trafficked is unknown. However, the statistics that the State handles regarding trafficking are 5793 complaints from 2009 to 2017.

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Vulnerability to natural disasters & climate changes

Peru is the Latin American country most affected by natural disasters. Between 1970–2009, a total 105 droughts, floods, mudslides, frosts, earthquakes and volcanic eruptions caused 74,000 deaths and affected 18 million people, more than in any other country in the region. Additionally, in the periods 1982–83 and 1997–98 the El Niño phenomenon caused estimated losses of \$6.8 billion, while the Pisco earthquake in 2007 caused damages in excess of \$2 billion. In 2017, Peru was affected by devastating flood and landslides as a consequence of El Niño climate phenomenon which left 92 dead and 235,000 people affected, 27,000 houses destroyed or damaged, and 11,700 hectares of ruined crops in Cusco, Ayacucho, Puno, Huancavelica and Huánuco.³

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Peru is a country with very high seismicity. Over the past 400 years, it has been hit by at least 30 major earthquakes. In 2007, a magnitude 8.0 earthquake struck the southern coast, killing 520 people, collapsing thousands of homes and buildings, and

³<https://www.iadb.org/en/news/news-releases/2010-09-23/peru-to-reduce-natural-disasters-vulnerability-with-idb-assistance%2C8004.html>

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severely damaging health and education infrastructure. Water resources are one of the country's main development concerns. Climate change, deforestation, and watershed degradation exacerbate concerns by increasing the effects of flooding and droughts. These conditions contribute to water scarcity and pollution, which limit water for drinking, agriculture, and other uses. Peru is also exposed to recurring hazard risks from tsunamis in coastal regions, volcanic eruption from the country's 15 active volcanoes, and landslides in valleys and mountainous areas.²

The National Institute of Civil Defense (INDEC) and the National Center for Estimation, Prevention and Reduction of Disaster Risk (CENEPRED) are public organizations that respectively advise and propose to the government the regulations with technical input and administrative processes of reactive management, and coordinate, facilitate and supervise the formulation and implementation of the National Policy and the National Plan for Disaster Risk Management in the risk estimation, prevention and reduction processes, as well as reconstruction.

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g. Overall analysis of HI sectors of intervention in the context

Service Sectors of intervention	Global analysis
Physical and functional Rehabilitation	<ul style="list-style-type: none"> Amendment to the General Health Act eliminated the outdated approach to rehabilitation and replaced it with a right of access to health benefits and services on an equal footing with others Core human resources in the health/rehab sector are insufficiently trained to operationalize health policies. Insufficient availability of rehabilitation services and early detection programmes, particularly in rural and remote areas, and the limited scope of rehabilitation and treatment for children with disabilities within universal health insurance. There is no national strategy for rehabilitation
Prevention & Health: SRH Sexual and Reproductive Health and Rights	<ul style="list-style-type: none"> Only 45% of women in Peru have planned for their pregnancy 55% of women who have a partner use modern family planning methods (70% in the LAC region) In Peru, 13 out of every 100 adolescents between 15 and 19 years of age are mothers or are pregnant for the first time. These results show an increase in the prevalence of adolescent pregnancy, from 12.7% to 13.4% between 2016 and 2017. Women with disabilities are more vulnerable to forced abortions and sterilizations, STIs and early pregnancy Abortion is not legal in Peru

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² <https://www.gfdrr.org/peru>

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<p>Prevention & Health: MCH Maternal, Newborn and Child Health</p>	<ul style="list-style-type: none"> Maternity mortality rate (x 100M live births) is 68 (2015) while in Latin America the average is 92. Maternal mortality passed from 769 deaths in 1997 to 325 in 2016, representing a decrease of 42%. Child mortality rate (less than 5 years old) for 1000 live births is 19 (2016) 93% of births were attended by skilled health personnel in 2018 	<p>Formatted: Not Highlight</p> <p>Formatted: Highlight</p> <p>Formatted: English (United States)</p>
<p>Prevention & Health: Mental Health and PSS Psychosocial support (MHPSS)</p>	<ul style="list-style-type: none"> There is no stand-alone law on mental health in Peru Government spending on mental health as a % of health spending is 0.27% Low human resources available for mental health: 0.7 psychiatrists per 100,000; 6.08 nurses per 100,000; 0.2 social workers per 100,000; 5.06 psychologists per 100,000 	<p>Formatted: Not Highlight</p> <p>Formatted: Not Highlight</p> <p>Formatted: Highlight</p> <p>Formatted: Highlight</p>
<p>Prevention & Health: Road safety Safe and Inclusive Mobility</p>	<ul style="list-style-type: none"> Peru does not have a National Road Safety Strategy Formal audits are not required for new construction projects and there are no regular inspections of existing road infrastructure The WHO estimated rate of traffic fatalities per 100 000 population is 13.9 In 2017, there were 2,826 road traffic fatalities reported in Peru Disregard for traffic laws combined with the dangerous road conditions makes driving particularly dangerous. Drunk driving, bad conditions of vehicles, speed and tiredness are main causes of accidents Poor care system for victims of accidents: medical, social and legal 	<p>Formatted: Not Highlight</p> <p>Formatted: Not Highlight</p> <p>Formatted: Highlight</p> <p>Formatted: Highlight</p> <p>Formatted: English (United States)</p> <p>Formatted: English (United States)</p>
<p>Protection against abuse and violence and abuse (GBV)</p>	<ul style="list-style-type: none"> Prevalence of physical/sexual violence by partner: 33% Intimate partner violence is the most common form of GBV in Peru According to the World Health Organization, 49% of ever-partnered women (women who had been married, lived with a man, or had a regular sexual partner) in Lima and 61% in Cusco reported physical violence by a partner at some time in their life. 69% of Peruvian women said they had suffered from some form of physical violence in their lives. Between the years 2010 and 2017, 837 women were murdered in Peru while another 1,172 murder attempts were made during the period. A 2015 study found that in about 81% of the cases of attempted femicide, no measures were taken by authorities to protect the survivor, and 24% of women who turned to the justice system for help were later murdered by the very men from whom they had sought protection. Prevalence of child marriage: 22% Gender Inequality Index Rank: 86 Peru has a National Plan on Gender-Based Violence 2016-2021 (pays specific attention to PwD) 	<p>Formatted: Font: Nunito</p> <p>Formatted: Highlight</p> <p>Formatted: Highlight</p>



	<ul style="list-style-type: none"> ➤ In September 2015, Peru's Congress passed the Law No. 30364 that provides for comprehensive measures to prevent and punish violence against women. The law builds on existing judicial measures to protect women at risk, and mandates the creation of shelters to provide temporary refuge from abuse. 	
Inclusive Education	<ul style="list-style-type: none"> ➤ 40,5% of PwD have access to primary education ➤ Only 11,4% of PwD access graduate institutes and universities ➤ The Peruvian government is changing paradigm and choosing more and more to promote inclusive education. They have a plan on special education and inclusive education with targets until 2021 for inclusive education. 	<p>Formatted: Highlight</p> <p>Formatted: English (United States)</p> <p>Formatted: Not Highlight</p>
Livelihoods Economic Inclusion	<ul style="list-style-type: none"> ➤ 77% of PwD are unemployed, which is triple the employment level of persons without disabilities. ➤ Since 2012, in Peru, the law requires public companies to include 5% of PwD and private companies to include 3% of them. ➤ PwD are inadequately prepared, informed and trained to enter the workforce; this is especially true for young people, women and the extremely vulnerable. In fact, they have limited resources to access existing services (whether vocational training, social service or guidance) and these services are not prepared to assist these people. 	<p>Formatted: Not Highlight</p> <p>Formatted: Highlight</p> <p>Formatted: English (United States)</p>
Disaster Risk reduction (DRR) & Climate Change Adaptation	<ul style="list-style-type: none"> ➤ Peru is highly vulnerable to disasters according to the Peruvian government, 60% of the population is in a situation of vulnerability in the face of disasters ➤ Peru is located in a highly seismic zone, and is exposed to tsunamis, extreme climatic events (El Niño), flooding, and else. The Andean zone is highly vulnerable to climate change. ➤ There is low involvement of organizations representing vulnerable groups in DRR ➤ There are no measures in place to include PwD in strategies for climate change adaptation, DRR and the inclusion of accessibility in infrastructure and evacuation routes and the provision of information related to DRR including Braille, sign language and alternative modes and formats of communication taking into account the Sendai Framework for DRR. ➤ On March 2021, a National Policy for Disaster Risk Management to 2050 was approved in Peru through D.S. No. 038-2021-PCM. Up to date the National Disaster Risk Management Plan (PLANAGERD) is in the process of updating for the next period. 	<p>Formatted: Highlight</p> <p>Formatted: English (United States)</p>
Habitat & Infrastructure Shelter and Non- food items	<ul style="list-style-type: none"> ➤ There is a technical norm for accessibility for persons with disabilities and older adults greater in Peru (A.120) ➤ Guidelines for info accessibility in public institutions were adopted in 2009 ➤ 74% of the population lives in a "qualitative deficit" in terms of housing 	<p>Formatted: Highlight</p> <p>Formatted: English (United States)</p>

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Peru is a leader in the region in terms of improvement and investment to infrastructure (according to the CAF)

Risk-related issues

Institutional and political instability: following elections, new authorities have been elected recently and there should be some stability for the next year or so. Political scandals of corruption have shaken the country in the past months, and more scandals could emerge. In September 2020, political instability and the battle between the executive and the legislature reached new heights as the coronavirus epidemic killed more people than anywhere else in the world as a proportion of the population (more than 30,000 deaths). Peruvian President Martin Vizcarra escaped impeachment as his opponents in parliament failed to muster enough votes to overthrow him for "moral incapacity". During the current government (left), led by President Pedro Castillo, the country continues to be uncertain about the decisions it may make due to not clear signals to ensure democracy and his presumed relations with extreme left groups of people in the past.

Security issues: the most critical security issues are related to earthquakes (elevated probability – elevated impact) and road accidents. In addition, Peru presents high/medium level of robbery and theft in the cities and violence with people in different situations. One aspect to highlight is that due to the level of migration in the country, many cases of discrimination and xenophobia can be observed, especially to refugees and migrants from Venezuela. Finally, you must be taken careful forwith traffic accidents when travelling in the cities.

Unfavorable environment for civil society organizations: there is no issue in terms of acceptability or unfavorable environment for CSOs.

Financial issues: the funding is quite limited in Peru and relies on two donors at this point (USAID/BHA & ECHO). In order to develop the program, several new donors will have to be approached. However, the financial risk is minimal as the structure of the program is light and covered by institutional funds. Currently, given the uncertainty due to the political context, the exchange value of PEN to USD has risen and, therefore, the price of various items and basic products.

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Summary of HI presence in the country

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Peru has just joined the new HI Latin America Regional Programme since 2020, while remaining under a common managerial management with Bolivia. The first HI project in Peru started in 2018, with Lima now being the hub for the Regional Inclusive Disaster Risk Management Program (GIRD) involving six countries in the region, including Colombia. A second project was launched mid-2020 to assist vulnerable Venezuelan migrants and host communities, with a strong focus on Inclusive Humanitarian Action. Up to date HI Peru is managing 4 projects financed by USAID/BHA & ECHO including one new intervention zone in Iquitos, Loreto (amazon region). Within the framework of the new Regional Strategy 2020-2024, new sectors could be addressed by HI in Peru, in socio-economic development and/or health.

Main achievements of the programme (2021)

<p>Disaster Risk Reduction & Climate Change Adaptation (DRR)</p>	<p>So far, the inclusive DRR project has achieved to:</p> <ul style="list-style-type: none"> ✓ Carry out a Regional Gap Analysis of inclusive DRR based on 6 national baselines (with diffusion during a Regional Workshop) ✓ Train 125-40 people on inclusive DRR ✓ Offer technical assistance to 6 DRR or vulnerable group organizations on inclusion ✓ Set up 6 National and 1 Regional Inclusive DRR committees involving a multitude of actors Systematization of 12 inclusive practices for Disaster Risk Management 2 Inclusive Community Preparedness and Responses Plan elaborated with participation of most at risk groups 01 Guide for the elaboration of inclusive and accessible digital IEC materials, in process of approval by the national DRM entity responsible for disaster preparedness and response Strengthen 2 DRR national entities in inclusion and protection (INDECI-CENEPRED) Support the national IDRMM Committee and elaborate recommendation for inclusive response to COVID Elaborate regional Guidelines for IDRMM with 4 countries (Perú, Colombia, Bolivia and Ecuador) HI elected with RIADIS to coordinate the regional network Red GIRD-LAC
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MIGRATION Inclusive Humanitarian Action

~~84 Individual Protection Assistance provided (August 2021 – 2nd Phase)~~

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~~36 people have received a total of 288 sessions on Mental Health and Psychological attention~~

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~~18 people have received a total of 325 sessions on Physical Rehabilitation~~

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~~17 persons with disabilities have received mobility kits~~

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~~35 external referrals to other humanitarian organizations~~

✓ ~~50 Individual Protection Assistance provided~~

✓ ~~5 trainings on Inclusive Humanitarian Action provided to Humanitarian Actors~~

✓ ~~1,600 vulnerable migrants and host communities' members provided with food kits (Feb 2021 – 1st phase)~~

✓ ~~1,600 vulnerable migrants and host communities' members provided with Hygiene and protection kits (Covid 19) (Feb 2021 – 1st phase)~~

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✓ ~~300 families (approximately 1,200 people) will benefit from the distribution of the kits (Feb 2021 – 1st phase)~~

✓ ~~482 inhabitants who will make use of the hand washing stations (Feb 2021 – 1st phase)~~

~~10 members of government authorities, civil society and community leaders trained in prevention and protection Covid 19 (Feb 2021 – 1st phase)~~

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Overview of ongoing projects

Sectors where HI conducts projects and focus on beneficiaries and operational partnerships

Main sectors of intervention and project title	Objective of project in the sector	Main activities	Beneficiaries	Final Beneficiaries	Partners	Location	Dates of beginning and end of the project and Donors
Humanitarian Response to COVID-19 Situation	Address the most urgent needs of vulnerable populations, particularly people with disabilities and the elderly, affected by the COVID-19 health crisis, and contribute to the prevention of the virus in Peru	<p>Distribution of food kits and hygiene kits to the most vulnerable households</p> <p>Dissemination of Covid-19 prevention awareness materials in communities</p> <p>Implementation of hand washing stations</p> <p>Supply of personal protective equipment against COVID-19 for health personnel and authorities/partners</p> <p>Training sessions on prevention and</p>	<p>300 families (approximately 1,200 people) will benefit from the distribution of the kits.</p> <p>482 inhabitants who will make use of the hand washing stations.</p> <p>10 members of government authorities, civil society and community leaders trained in prevention and</p>	3,268 inhabitants of La Ensenada neighborhood (Puente Piedra)	Lima Municipality Mara-a Mara	Lima, La Ensenada	Luxembourg MOFA April 2020 – September 2020

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		protection measures against COVID-19 for partners	protection Covid-19				
Inclusive Disaster Risk Reduction & Climate Change Adaptation	Improve and disseminate inclusive disaster risk management Framework in 6 countries of Latin America in order to increase protection and resilience of most-at-risk groups including persons with disabilities, women, older people and indigenous people, before, during and after natural disasters.	2 pilot innovative projects implemented in Peru and Paraguay.	42 persons people from intergovernmental institutions, regional networks, national and sub-national governmental bodies, disabled people organizations, older people's representations, indigenous organizations and women's representations from national and regional levels and communities.	650 persons people from intergovernmental institutions, regional networks, national and sub-national governmental bodies, disabled people organizations (100), older people's representations (32), indigenous organizations (65) and women's representations (325) from national and regional levels and communities.	UNDRR, ECHO LAC, RIADIS, RED GIRDD-LAC, GNDR, RIADIS, ONG Inclusiva, Practical Action Perú, ASB, CBM, RED CROSS, INDECI, MCLCP, CODIP, Kipu Llaxta, Asociación Mano a Mano	Peru, Paraguay, Chile, Bolivia, Ecuador, Nicaragua	10 USAID/BHA: From 01/10/2017 - 12 to 31/12/2021 USAID ECHO: From 01/04/2019 to 31/07/2021
Inclusive Disaster Risk Management in Natural Disaster Prone Areas: an Innovative Approach to Including Most at Risk Groups		Capacity building of National Disaster Risk Management Offices on protection and inclusion approaches					
		Training of Trainers on preparedness and response to disaster with inclusion and protection approaches.					
		Design and dissemination of friendly and accessible Information, Education and Communication tools related to inclusion and protection in Disaster Risk Reduction.					
			4,645 people			Perú Colombia	

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		<p>EC tools related to inclusion and protection in DRR.</p>	<ul style="list-style-type: none"> • 1,600 people for ongoing activities • and 3,045 people for pandemic mitigation needs 			
<p>BHA Extension activities: Pandemic Mitigation – B Safe Bolivia</p>		<ul style="list-style-type: none"> • Protection, mental health and psychosocial support and livelihood activities for vulnerable persons with disabilities to reduce risks associated with the pandemic– COVID-19. 	<ul style="list-style-type: none"> • 2,767 women and 1,878 men. 			<p>08-12-2021</p>
		<ul style="list-style-type: none"> – Strengthen the capacities of health professionals and humanitarian partners for more inclusive risk management and response to the specific needs of persons with disabilities. 				<p>9-month extension to BHA contract BHA 23/09/2021-31/12/2021</p>
		<ul style="list-style-type: none"> • Strengthen the capacities of health professionals and humanitarian partners for more inclusive risk 				

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<p>Equities Preparación Inclusiva Respuesta Efectiva</p>		<p>social vulnerability considering populations with disabilities, women and youth, gathering field experience.</p> <ul style="list-style-type: none"> • Improvement of roads and access to communities. • Training of public and private actors in protection, gender and inclusion issues. 				
		<p>TOT Training of Trainers.</p> <ul style="list-style-type: none"> • Strengthen the protection and gender perspective at the national level. 				

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	<u>Support and physical and functional rehabilitation (including provision of assistive devices) for Persons with Disabilities and people with psychosocial distress.</u>		<u>2075</u>				
	<u>MHPSS and physical and functional rehabilitation (including provision of assistive devices) for PwD – Persons with Disabilities & people with psychosocial distress.</u>	<u>230</u>	<u>690</u>				
		2,215 vulnerable migrants, host communities members and humanitarian actors.	5,200 vulnerable migrants, host communities members and humanitarian actors.				

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