

## **MALTESER INTERNATIONAL AMERICAS**

Year in Review 2022





### **Letter from** the Director

2022 was a record-breaking year for MI Americas and the global Order of Malta family – **purely because of you and your support.** Now, nearing our tenth anniversary at MI Americas, I can't help but reflect on all of the progress we have made together and all the lives we have changed for the better.

Your commitment to championing our work has allowed us to scale our assistance to those worst affected by crises and emergencies, all while delivering essential developmental support, **making communities more resilient** through medical aid, food nutrition and security, and water, hygiene, and sanitation.

**Ukraine, of course, led the story this year.** The human toll it has taken is unlike any we've seen in Europe since World War II. Many are no longer with us. Millions have fled their homes, some never to return. But despite the tragedy, I am incredibly grateful for the unwavering support our Order of Malta network continues to provide to anyone needing shelter, a warm meal, medical support, and all other critical interventions along their journey.

As the war continues, we are reminded of the devastating and sometimes invisible impact displacement has around the world, particularly on the poor and the sick. The protracted refugee situation in Colombia, where MI Americas has been working since 2014, has seen millions of Venezuelans seek refuge in recent years due to the economic and political crisis in their home country. In Haiti, the situation continues to be increasingly dangerous – and many are fleeing from security-affected areas to safer, rural areas. Even in New York City, we have noticed the influx of migrants and refugees at our flu clinics for the unhoused. The shelter systems are overwhelmed, and we are seeing individuals with a range of mental health issues that need attention and care.

These situations highlight the dire consequences of displacement on vulnerable populations, and the urgent and continued need for humanitarian assistance and protection. But despite all of this, together we're finding hope and ways to sustainably help the most vulnerable along their journeys, whether they're on the move, or trying to make a home in a new place.

What makes our work so special is our Catholic background and the values we live by every day, especially our humanity. Our capillary networks touch the lives of **millions of people** in ways that many organizations cannot, and **this is only possible through your generosity.** I am profoundly encouraged by the solidarity that you've demonstrated in standing with those most in need over the past ten years in the Americas, and nearly 70 years worldwide. **Thank you.** 

Humbly,

Ravi Tripptrap

Executive Director, MI Americas

# MALTESER INTERNATIONAL AMERICAS 2022 IMPACT REPORT



PEOPLE SERVED

623,803



**COUNTRIES ACTIVE** 

6



**REFUGEES SUPPORTED** 

56,010



HOSPITALS AND HEALTH FACILITIES SUPPORTED

15



WOMEN RECEIVING PRE-AND POST-NATAL SUPPORT

4,689



**CHILDREN SUPPORTED** 

96,641



MANGROVES AND TREES PLANTED

68,085



MENTAL HEALTH CONSULATATIONS

74,375



**MEDICAL PATIENTS** 

136,171



**DRINKING WATER ACCESS** 

12,860

# MALTESER INTERNATIONAL GLOBAL IMPACT

Throughout the world, Malteser International is active in 36 countries. Through your tireless support, we've had a direct impact on over 4.3 million people, with **positive knock-on effects for over 16.1 million individuals.** 



**COUNTRIES ACTIVE** 

36





2

# **Giving Hope** on the Frontlines in Ukraine

Since the start of the war in February 2022, Ukraine has experienced a humanitarian crisis of unprecedented proportions in recent history, causing massive displacement among the most vulnerable populations. The ongoing conflict has resulted in a dire situation where innocent civilians, including women, children, the elderly, and persons with disabilities, have been forced to flee their homes in search of safety, leaving behind their possessions, livelihoods, and loved ones.

With Malteser International and our vast Order of Malta network, we were one of the first entities on the ground supporting those most in need, whether that be on the front lines in the eastern Donbas region –where our programs date back to 2014 – or meeting the millions who fled west at the train station in Lviv, where we have been present since the 1990s. In the critical moments from the start of the war and when the large-scale aid arrives, when casualties are mounting and those affected don't know where to turn, many found the eight-pointed cross of the Order of Malta and Malteser International, and found their way to safety.

The impact of the war on displacement in Ukraine cannot be overstated. According to the United Nations High Commissioner for Refugees (UNHCR), as of 2023, more than 2.4 million Ukrainians have been internally displaced, while another 1.4 million have sought refuge in neighboring countries. This staggering number of displaced persons is a stark reminder of the devastating consequences of armed conflict on civilian populations, and our responsibility as humanitarians to save lives through action and human dignity.

Those affected have had to flee with little to no resources, enduring extreme hardship and trauma. In this period of extreme upheaval, displaced children



are often deprived of education. The elderly and people with disabilities face additional challenges in accessing basic services such as healthcare, shelter, and sanitation, putting their health and well-being at risk.

As a result of the war, hospitals have seen record numbers of patients who require prostheses and rehabilitation services due to war injuries. In order to help these people and provide them with high-quality prostheses, Malteser International has joined forces with multidisciplinary partners and jointly set up an aid program for patients with war injuries. Working with local partners, we are strengthening the technical capacity of Ottobock's prosthesis workshop with all the equipment, tools and materials necessary for prosthesis production.

### **KEY ACHIEVEMENTS TO DATE:**



PEOPLE PROVIDED WITH PSYCHO-SOCIAL SUPPORT



HOT MEALS DISTRIBUTED TO IDPs



18,500

480,000

# Therapy Through Play for Ukraine's Children

Similarly, children, deprived of the safety, comfort, and routine of home, need to find some sense of normalcy to alleviate the trauma of displacement.

Since mid-November, three mobile teams have been working in and around Lviv, Ivano-Frankivsk, and Beregova in western Ukraine, providing mental health support to displaced children and young people. The project is run by Malteser International and Johanniter International Assistance – the international aid services of the Order of Malta worldwide and of the Johanniter Order in Germany. The teams are staffed by the Ukraine Relief Service of the Order of Malta.

To support the psychological wellbeing of children affected by the war in Ukraine, our mobile center in Lviv offers a "toy therapy room" where children can choose a stuffed animal to talk to about their worries.

"In the therapy room, I often notice that children pick dogs because they had to leave their own dogs behind and miss them terribly. Some children choose something soft and cuddly, which they can hug. A lot of children need a hug right now," says Elena Roman, psychologist at Malteser Ukraine.

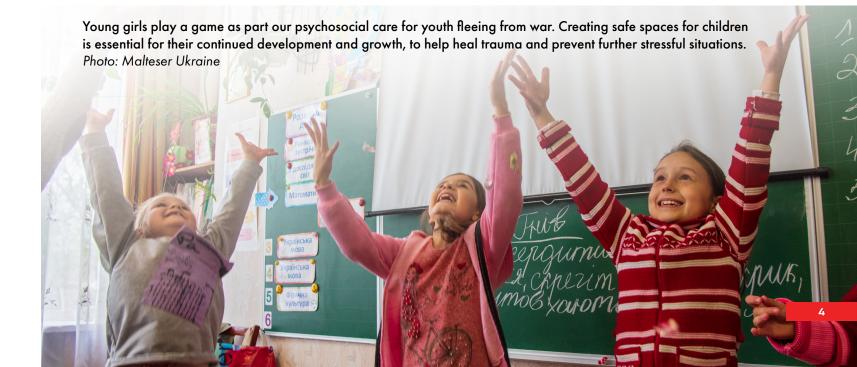
The mobile center also offers art and musical therapy

and engages with children through games and play. While the mobile center was intended to improve the psychological wellbeing of children, adults often request psychological counselling too. Our psychologists help them reduce stress levels and equip them with life-saving resources.

"This project is important because it will help heal the invisible wounds that this war has left on hundreds of thousands of children and young people," said H.E. Fra' Alessandro de Franciscis, Grand Hospitaller of the Sovereign Order of Malta.

"I am very pleased to see all of us joining forces to fulfil our mission to help people in need. It is a sign of unity, which is needed now more than ever. When the world is divided by conflict and uncertainty, it is all the more important that we Christians stand firmly as one family behind the cross, and shoulder to shoulder with those who need our support."

The impact we have had, and continue to have in Ukraine, is one of our biggest support efforts to date, and one we have never been more committed to continuing. While displacement is a theme we work with around the world and in the Americas, the stories of Ukrainian resilience will never be forgotten.



# A Conversation with Jelena Kaifenheim, MI Americas' Regional Program Director

Kaifenheim reflects on MI Americas' growth in the region over the past ten years and the invisible crises that continue to affect it.

Q: Since 2014, the Colombia-Venezuela portfolio has grown to be our largest in the region. As you developed it from its infancy, take us through how that came to be, the timeline, and also the major issues you're still seeing.

In 2014, our first point of entry was the Colombian association of the Order of Malta which was conducting small social projects and medical missions in northern Colombia. From here, we started with a very small health project focused on Indigenous populations in the Sierra Nevada, near Santa Marta.

As we started talking to affected communities, we rapidly noticed that there was a huge need to support the ongoing peace process in the country and the unfulfilled promises for rural development. So apart from health, we also started working on rural development, agroforestry, food security, as well as adaptation to climate change which has been a cross-cutting issue throughout our programs since then.

Jelena Kaifenheim started at Malteser International in 2008 working in various positions and functions. Between 2010 and 2011, she was deployed to Haiti as a country administrator and later project manager for MI's national cholera response. In 2012, she became regional program director for the Americas, growing the portfolio from small, individual projects to programs in 6 different countries.

### Q: Can you elaborate on "unfulfilled promises" relating to the peace process?

The Colombian peace process has been a very complex process, promising substantial rural development to conflict-affected rural populations, but simply not delivering. Many of these populations were displaced by the armed conflict from what were initially very fruitful, thriving ecosystems that they knew how to cultivate, where they had built their lives and homes for generations. They were forced to flee internally into drier areas and lost everything they had in the process. Here, without any support, they had very little potential for creating sustainable economic opportunities for themselves.

Even though there continues to be the presence of armed groups and ongoing internal displacements around the country, the peace process started in 2016. There has been a definite stabilization of the area as a result, which has allowed us to start and maintain our development work.



### Q: How would you say the peace process has informed our work since it's started?

Overall, the ultimate goal of our work in Colombia is to support the peace process, and every individual project we have contributes to that. Being able to provide basic needs, supporting individuals to generate their own incomes (livelihoods), facilitating access to national healthcare structures, building social cohesion, increasing food security and nutrition, as well as mental health access to heal from the collective trauma they've all faced – these are all components of well-rounded, holistic programming which will hopefully contribute to lasting peace. So, building on the small project in 2014 in the Sierra Nevada, we continued to expand into the Magdalena and La Guajira departments.

La Guajira is one of Colombia's poorest departments and has one of the highest mortality rates of children under 5 due to malnutrition. Some of the indicators in Indigenous communities are comparable to South Sudan. It is a major invisible crisis that is happening in a pretty developed country.

From there, we continued to grow our health programming because rural and Indigenous communities face a tremendous lack of access to the Colombian national healthcare system.

**2018** – By 2018, when the Venezuela crisis came, we were simply the best-positioned organization to deliver aid in the north because we had developed deep knowledge

### BACKGROUND ON THE ON-GOING COLOMBIA CRISIS:

The Colombian conflict began on May 27, 1964, between the government of Colombia, far-right paramilitary groups, crime syndicates, and far-left guerrilla groups fighting each other to increase their influence in Colombian territory. Some of these groups included the Revolutionary Armed Forces of Colombia (FARC), the National Liberation Army, and the Popular Liberation Army.

On June 23, 2016, the Colombian government and the FARC rebels signed a historic ceasefire deal, bringing them closer to ending over fifty years of conflict. The same month, President of Colombia Juan Manuel Santos received the Nobel Peace Prize for his efforts to end the country's over five-decadeslong civil war. A revised peace deal was signed and unanimously approved the following month by the House of Representatives, a day after the Senate also gave its backing.

Thankfully, there was a dramatic fall in violence after the signing of the peace accords with FARC in 2016. However, in recent years non-state armed groups and criminal organizations have expanded their presence in various regions of Colombia, which makes our work all the more vital.



SERVING THE COLOMBIAN AND VENEZUELAN POPULATION.



**PEOPLE SERVED** 

488,014



**HEALTH FACILITIES** 

6



LIVELIHOODS IMPROVED

1,390



TREES PLANTED

35,800



**PREGRANT WOMEN RECEIVING CARE** 

4,505



**PATIENTS RECEIVING** MEDICAL TREATMENT

136,060



MANGROVE **SEEDLINGS PLANTED** 

3,750



**MENTAL HEALTH CONSULATATIONS** 

11,473

and understanding of the communities there. This allowed us to provide a differential approach – one that is in line with the cosmological vision, beliefs, and traditions of the Indigenous people – and make our intervention strategies truly impactful.

2020 – This laid the groundwork for the large health program we have now and also allowed us to be best-positioned to help rural and Indigenous communities during the COVID-19 pandemic.

At the beginning of the pandemic, due to fear, misinformation, and lack of trust with the outside world, most indigenous communities completely closed themselves off from outsiders. The only reason we were able to provide response and preparedness activities here is because of the years of trust that we had established.

That played a fundamental role in getting Indigenous populations, and also Venezuelans often living in overcrowded informal settlements, access to basic needs during the first year or so of the pandemic.

2021 – At this time, we started to scale up,

focusing on integrating marginalized rural, Indigenous communities as well as Venezuelan refugees and migrants into Colombia's healthcare system.

We started a multi-actor partnership program, MAP-Salud, which brings all national and local health stakeholders, including private sector health actors, to the table in La Guajira. The goal here is to create accountability and strengthen health governance, which also includes a strong advocacy component at the community level for their right to health.

#### Q: How does MAP-Salud work?

It works at different levels. One is on the community level: we support communities to better organize themselves to claim their rights and voice their concerns in a way that will be heard by their counterparts within the system. This is particularly important for Indigenous communities as they selfrepresent themselves within these local structures. The other component is to **create spaces for** dialogue: setting up round tables for actors from

### DISPLACED **PERSONS REACHED WITH:**

**MEDICAL TREATMENT** 

49,593

TRAININGS AND WORKSHOPS

1,966



**HOUSING SOLUTIONS** 



**MENTAL HEALTH SUPPORT** 

14,458



The 2018 Venezuelan crisis began in early January due to high levels of hunger by desperate Venezuelans. Hundreds of protests

**VENEZUELA CRISIS BACKGROUND:** 

and looting incidents occurred throughout the country within the first couple of weeks of the year. By late February, there were also protests against the

Venezuelan presidential elections, in large part because several opposition leaders were banned from participating. In March, the government began to crack down on military dissent, arresting dozens of high-ranking officials.

In recent years, Venezuela's healthcare system has faced widespread shortages of basic health products, medicines, and a lack of water. This has been further compounded by the COVID-19 pandemic.

different levels - Indigenous community leaders, local government leaders, as well as healthcare representatives from both the state and the private section – to come together and discuss. Getting everyone to the table was already guite a big achievement and there's definitely been positive feedback from every level on the mechanisms that are being established.

Q: Working at this level - both with local leaders as well as within national structures - how do changing national policies impact our work? In other words, how does the political context in which we operate impact our operations and program design?

They have a very strong impact on our work in the health sector. When there are political changes, it also means changes in leadership staff of state actors, which often means restarting negotiations, re-signing of contracts. New leaders need time to settle in and and receive a full handover from their predecessors, it creates a lot of uncertainty. At the same time, working at this structural level means

having a stronger, more long-lasting positive impact in the lives of the people we're working to support.

Regarding the ETPV (Estatuto Temporal de Proteccion para Migrantes Venezolanos), this was directed at taking individuals out of irregularity and into formality by giving them access to healthcare, education, work permits, etc. Irregularity exposes vulnerable persons even more to discrimination, violence, trafficking, and all sorts of transgressions, and many of the individuals we work with have faced similar circumstances. Supporting vulnerable persons to access the ETPV is an important element of our work.

### Q: How does mental health programming come into play?

Overcoming mental trauma is a very important part of supporting the peace process, and another aspect of our work which we have been strengthening in recent years. In 2021, we built the first ever mental health center in La Guajira where people can access psychological and psychiatric services. Here too, we take a very

holistic, comprehensive approach. We not only provide mental health consultations by trained psychologists to individuals, but we also have a community-based approach to address collective trauma.

Collectively, they've all faced displacement – whether internally or between Colombia and Venezuela – many have experienced or internalized the armed conflict.

Only with a holistic approach can a community come together and really address these kinds of wounds to even think about lasting peace.

Q: Let's pivot to Haiti. Of course, our theme for this year has been displacement, and on the surface, this may be less of an issue in Haiti, but the unprecedented levels of violence that we're seeing might be changing that.

Displacement is, in fact, a huge issue in Haiti because of the violence and the gangs. In the capital, we've seen a large internal displacement in security-affected areas.

The capital has become a war zone in everything but name. The control of armed groups and gangs in the capital and the surrounding areas has really exploded in recent years. Before there were just a few active groups, now it's somewhere between 250 or 300 armed groups operating across the capital alone.

#### And the rate of kidnappings is extremely high.

It is affecting our ability to operate, so we unfortunately had to partially close down our projects in Cite Soleil, at least temporarily. The urban slum has become inaccessible due to the violence, but we're striving to continue to provide support by any means possible, e.g. continuing to support beneficiaries of small animals or family garden via WhatsApp.

It's a very difficult environment and it's very hard to



### **HAITI'S FOOD CRISIS:**

Ever since the assassination of President Jovenel Moise in 2021, violence and political instability have plagued Haiti. In addition, that same year, the country was hit by a massive earthquake that caused thousands of deaths and injuries. Armed gangs control a majority of the capital city, Portau-Prince, making it difficult to transport goods and deliver services. Disease is also adding to the crisis. A shortage of drinking water combined with the first cholera outbreak in three years coincides with the collapse of Haiti's health system. In addition, soaring inflation and impossibly high food prices make it very difficult for many in Haiti to be able to afford basic meals. There is also a high dependence on imports for basic food staples. According to the World Food Program, around 80 percent of the population is currently reducing the size and number of main meals they consume.

understand why the international community has largely dropped out. The Haiti problem is not a problem caused by Haiti.

### Q: Despite all of these challenges, how are we still supporting Haiti?

In the rural areas, we have a strong partner approach working through national implementing partners and given the presence of many years there, there's a lot of trust of the communities that creates a very stable working environment.

Our mangrove project – which is designed to increase livelihoods while also increasing resilience to environmental changes in coastal communities – continues to grow, and last year resulted in the planting of nearly 25,000 new mangrove trees while creating new livelihood opportunities for over 700 families.

We, nonetheless, have to contextualize that after years, Haiti is still in an extreme food crisis. According to the IPC, it's in phases 4 and even 5 in some areas of the country, so the situation keeps worsening both in terms of access to

food and healthcare, and the security situation is only compounding that.

The food crisis is also aggravated by extended periods of drought, recurring hurricanes, unsustainable agricultural practices, loss of fertile land, deforestation, erosion, etc. It's really a plethora of various factors that are culminating in the difficult context we, and other humanitarian actors, find ourselves in. Most of these issues, however, stem from the political, social, and economic instability (see side bar) that has overwhelmed the country.

# Q: To wrap up, what is something we'll be focusing on in our future programming?

Women's empowerment and ensuring equal participation. We've really homed in on this at a strategic level, more so than years prior, and we want to continue incorporating these wherever possible.

One great example of this is the Terapeutas Populares approach that was developed in Colombia. They are community-based female lay counsellors that work towards overcoming mental trauma and strengthen prevention and response to various forms of violence.

We're quite proud of the work here because you're anchoring healing in the communities themselves, you're strengthening networks between women for exchange for overcoming trauma. And female empowerment has become a stronger cross-cutting issue for us across all of our programming, be it in health, protection, or in food and nutrition security and agriculture.

Here we've focused on really including women into productive systems and building productive systems operated by women's associations, working on building new women's associations for inclusion into the labor market, because there's a very unequal inclusion in the labor market at the moment.

# **Growing Hope in Haiti:** Fritzner Augustin's Inspiring Journey to Agricultural Self-Sufficiency

Fritzner Augustin, a farmer from Petit Trou de Nippes, Haiti, had always struggled to make a living. With limited access to resources like water, fertilizers, and agricultural training, he found it challenging to grow crops and provide for his family.

However, his life changed when he learned of Malteser International Americas' food security project, implemented by AHAAMES, and made possible by the German Federal Foreign Office.

Through the program, Fritzner received training on good agricultural techniques with continuous assistance from agronomists. He also received seeds, natural fertilizers, and water for watering his garden. With this support, Fritzner created an exemplary garden, one of the best among the individuals who participated in the trainings. He grew bananas, sugar cane, various types of peppers, eggplants, papaya, potatoes, tomatoes, okra, pumpkin, and more – many of the nutritious food that have become difficult for average Haitians to have access to due to the continued rise in inflation and insecurity in the country.

From his successful harvest, he was able to sell the fruits of his labor which helped him provide for his family and other people in need. The success of this harvest was not only material, yes, more income is essential to his survival, but it also brought him a great sense of pride and satisfaction.



"Today, because of the drought that ravages Haiti, I should not have had this beautiful garden," says Fritzner. "But, thanks to this project, I have water to tend to my garden, and I can grow crops to feed my family and earn an income. I am more than grateful."

Fritzner's only concern is that the project will end one day, and he hopes that many more people will benefit from it. He wishes that Malteser International Americas will continue to support farmers like him and help them build a better future for themselves and their families. Thanks to this kind of sustainable programming, Fritzner and his family are on the right track towards a better and more secure future.



Words by Stéphane Romuald Blanc

### YOUR IMPACT IN **HAITI**



EOPLE SERVED

135,000



**HEALTH FACILITIES** 

9



MENTAL HEALTH CONSULATATIONS 62,843



LIVELIHOODS IMPROVED

2,319



SAFE DRINKING WATER

12,250



PREGRANT WOMEN SUPPORTED

181



**CHOLERA RESPONSE KITS** 

1,500



MANGROVE SEEDLINGS PLANTED 25,000



3,545



**WATCH** <u>a day in the life</u> for Fritzner Augustin Jr., Fritzner Augustin's son, as he walks us through his fields, and discusses his future hopes.

# Welcoming Migrants in New York City – Flu Clinics & Food Banks

The migrant crisis has driven rates of homelessness in New York City sky-high.

Those arriving are increasingly vulnerable, disoriented, and in need of support. As winter set in, MI Americas and its partners on the ground helped vaccinate 90 individuals against the seasonal flu in late October.

Thanks to amazing volunteers from the Order of Malta American Association, we held two clinics, at the St. Francis Breadline and Fifth Avenue Presbyterian Church, both in our community of Midtown Manhattan.

Since 2020, we've partnered with the St. Francis of Assisi church, to deliver vaccines to their guests for the Breadline – their soup kitchen which serves nearly 300 people daily – and has been running for 85 years.

Fr. Cavoto, KMOb, of the St. Francis of Assisi church, believes in the importance of the church in this great time of need, especially for children and families, for whom the church has a special place. Reflecting on the readiness of Franciscans to help the poor and the vulnerable, Fr. Cavoto says, "it's not only important work, it's our life," one that Franciscans share with the Order of Malta.

"St. Francis was very inspired by what he saw Blessed Gerard doing in Jerusalem."

With the migrant crisis swelling New York City's shelter system, the individuals finding themselves here – a city with a complex bureaucracy even for a native English speaker – are overwhelmed and need more support than we can imagine.

Speaking with Christine Boyle, Director of Outreach and Mission at Fifth Avenue Presbyterian Church

(FAPC), where we hosted the second flu clinic says, "there's a whole new level of fragility in the population we serve."

Many struggle with very basic essentials like finding appropriate housing, or ensuring they have enough food for themselves and their families. Struggles with mental health and addiction are also common. 70% of the population FAPC serves is in the shelter system and nearly 30% lives in subsidized housing.

In this precarious state, individuals are forced to make impossible choices: with the little money they have, do they pay their rent or do they put food on the table?

This is what it means to be food insecure.

Thus, many choose to come to FAPC and soup kitchens like it. "A Place at the Table," FAPC's soup kitchen which operates every Monday and Wednesday, began as a parishioner-led initiative in 2020 and now serves over 100 people each day. They're part of a tripartite Ecumenical Outreach program along with St. Patrick's and St. Thomas.

Reflecting on the importance of coming together in times of great need, Ms. Boyle says,

"It's less about what we believe in and more about whom we serve. The holy family were asylum seekers – this narrative is part of biblical history and it is our duty to support them."

Asylum-crisis here reminisces of the crisis in Venezuela. Migrants and refugees have been fleeing Venezuela for many years, and it's one of the main themes in our work in Colombia, and along the border with Venezuela.

Nearly 7 million have left their country since the beginning of the crisis in 2018, making it the second largest external displacement crisis in the world, according to UNHCR.

Their arrival to New York City is testament to the conditions they face and reminds us of our duty in supporting the most vulnerable.





**MEXICO** 



**PEOPLE SERVED** 

693



**CHILDREN BENEFITTING** FROM FOOD NUTRITION



THE ELDERLY





**PEOPLE SERVED** 

118



**MOTHERS SUPPORTED** 

**62** 



**NEWBORN CHILDREN SUPPORTED** 

**60** 



Strengthening Emergency Preparedness in The Bahamas. IDEA Relief is a Bahamian NGO that coordinates the deployment of rapid response teams to areas affected by natural and man-made disasters in the Bahamas. IDEA Relief facilitates medical support, search & rescue transport, and supply chain logistical support for the Government of The Bahamas, NGO's, and private citizens in the impacted areas of Abaco Island during such disasters. Still reeling from the devastation of Hurricane Dorian in 2019, MI Americas partnered with IDEA Relief in early 2022 to strengthen island-wide disaster relief capacity through the training of its staff in the use of Emergency Response Kits to prepare and respond effectively after a disaster using worldwide best practices for incident reporting and communication.

### YOUR IMPACT IN

# PERU, MEXICO, AND THE BAHAMAS

Helping Pregnant Women and Mothers in Mexico. Working with the Order of Malta Mexico, our work in Mexico City focuses on keeping HIV-positive pregnant women healthy, in order to prevent transmission to their infants. Here, Order of Malta Mexico provides the pregnant women and mothers with nutritious food throughout their pregnancies, as well as safe spaces with psychologists for the women to discuss the issues they are confronted with. Photo: Orden de Malta Mexico



### **Soup Kitchens Feeding** Families in Peru. Malteser

International Americas supports some of Lima's poorest residents through the San Juan Bautista soup kitchen, which serves families with young children. The soup kitchen is run by our local partner Malteser Perú and has adapted its services by delivering food items such as milk, lentils, flour, oil, sugar, oats and soap to the families in need that rely on the kitchen for nutrition. Photo: Malteser Peru



# Dariannys: My only choice was to migrate

### Forced to leave home, Dariannys walks us through her story in her own words

When children and adolescents must leave their homes and countries, the hardships they often face can deeply mark their mental health, altering their behavior and even shifting how they perceive reality.

Like most teenagers who have had to emigrate from Venezuela because of the country's interlinked crises, the life of 16-year-old Dariannys Gonzales changed forever when she was brought to an unknown place.

In 2017, her family decided to leave their home in Venezuela for Colombia, where they sought a better life. It was mid-December when they arrived in Riohacha, the dusty capital of the department of La Guajira. Her family was full of hope and anticipation.

However, 10-year-old Dariannys could not

understand why she had been forced to leave her home behind, or why she had needed to say goodbye to family and friends. Upon arriving in Colombia, she felt extremely lonely, sad and heartbroken, fearing for her future, for her ability to continue her education, and for her well-being.

"I didn't get used to being in this country, I didn't leave my house, I didn't socialize with my neighbors. I lived locked up because I missed what my life was like in Venezuela, I missed being close to the people I loved," Dariannys said.

Some time later, as a teenager, she was able to start attending an educational center where at last she established a comfort zone. Here, she could interact with children of her age and could engage in one of the activities that she is most passionate about: learning.

However, that happiness generated by going to school lasted only a few months. Dariannys had to give up this space she had found soon after because her parents determined they could no longer afford to pay for her studies at the center.

Devastated, Dariannys returned to the isolation of before, living once again in what felt like a world full of sadness and loneliness. Despite her distress, she was unable to seek any type of psychological support because she did not have the temporary protection permit that would allow her to have access to the health system in Colombia.

#### A moment of relief

Some time later, MI Americas' mobile health brigade arrived in the Cardón Guajiro neighborhood where Dariannys lives. MI Americas' staff were working on a program financed by the Bureau of Population, Refugees and Migration (PRM) of the United States Department of State. This program offers medical, psychosocial care and delivery of medicines to Venezuelan migrants, refugees and Colombian returnees who do not have access to health.

When the health brigade arrived, Dariannys managed to receive psychosocial care, a space of security and freedom that allowed her to calm herself and address the accumulated feelings that prevented her from developing her life in a normal and healthy way. She says that it was a relief for her to receive the care she needed after such a long time.

The treatment she received from the medical team allowed her to once again feel alright.

"I needed to vent, I wanted to talk to someone, I wanted to get out everything I had repressed and share it in the consultation with the psychologist. I felt heard and it was a great relief for me. In addition, I received medical attention and was given medicine."



MI Americas, through psychosocial support, prioritizes the mental health of those Venezuelan migrants who are in a state of vulnerability or a situation of stigmatization, discrimination, exclusion, or lack of access to quality services and support. This is provided through safe spaces for dialogue and listening. In this way, we seek to promote socio-emotional and psychological well-being in this population, and ensure access to psychosocial care.



### SUPPORTERS AND PARTNERS

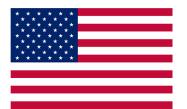
**Thank you!** Our work is only possible with the generous support of our donors and the collaboration of our partners on the ground as we make a concerted effort to work with the communities in which we work. From institutional donors, private foundations, individual donors, community fundraising efforts, as well as the many Order of Malta Associations who mobilized their time and resources in support of Malteser International Americas in 2022 - together, we're creating lasting change. **Here are just a few of our supporters and partners we work with:** 





























### A SPECIAL **THANK YOU** TO:

Abrahams-Kelly Family Aktion Deutschland Hilft Amandine Freidheim, DM

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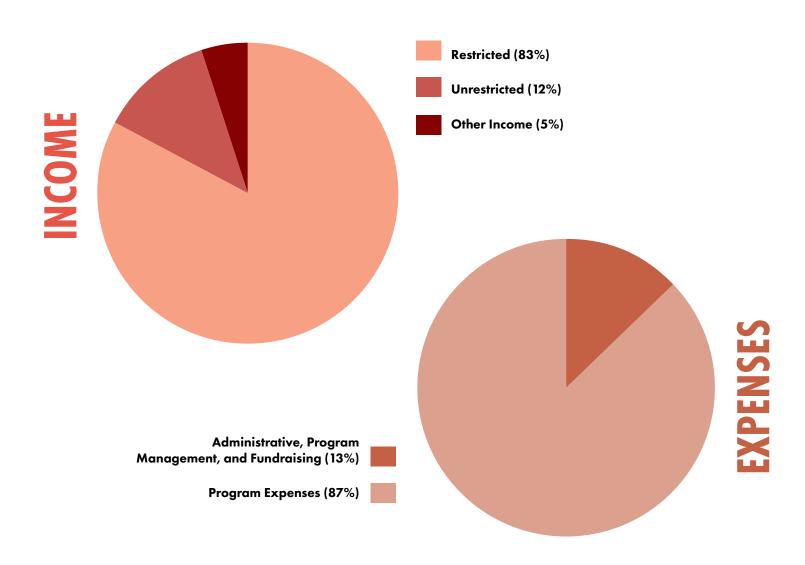
We are especially grateful to everyone who created and participated in community fundraisers to support our work for the most vulnerable. From all of us at MI Americas and the people we serve, thank you.

# **FINANCIALS**

#### Income† \$13,207,902

Restricted \$11,016,136 Unrestricted \$1,599,793 Other \$591,974

Expenses *			\$12,492,669
Administrative (5%)	\$651,731	Colombia (65%)	\$8,130,604
Fundraising (2%)	\$310,476	Ukraine (15%)	\$1,864,352
Program Management (6%)	\$751,924	Haiti (4%)	\$472,153
		USA (1%)	\$77,381
Venezuela, Syria, Kenya, Philippines, Germany, Peru, and The Bahamas (2%)			\$234,049



<sup>†</sup> Malteser International Americas is a legal entity, based in the United States, affiliated with Malteser International e.V (MI) based in Cologne, Germany. The figures you see above are consolidated. In that, they include revenue from European entities (government grants as well as individual donations) which go directly to project countries in the Americas as well as funding from the U.S. government, foundations, companies, and individual donations from North America for projects in the Americas. For full transparency, please visit www.malteser-international.org to access MI's annual report and financials, which includes only German-donor funding for MI Americas.



### Together, we are changing lives.

Your support is feeding growing children, empowering new mothers, and strengthening communities. By helping the most vulnerable, you are helping to build a world with good health and dignity for all.

# Thank you.

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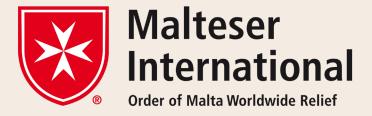
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