

World Vision

ENOUGH
END CHILD HUNGER

HARVESTING RIGHTS

2nd Regional Consultation with Children, Adolescents and Families on Food Security and the Effects of Climate Change

World Vision Latin America and the Caribbean



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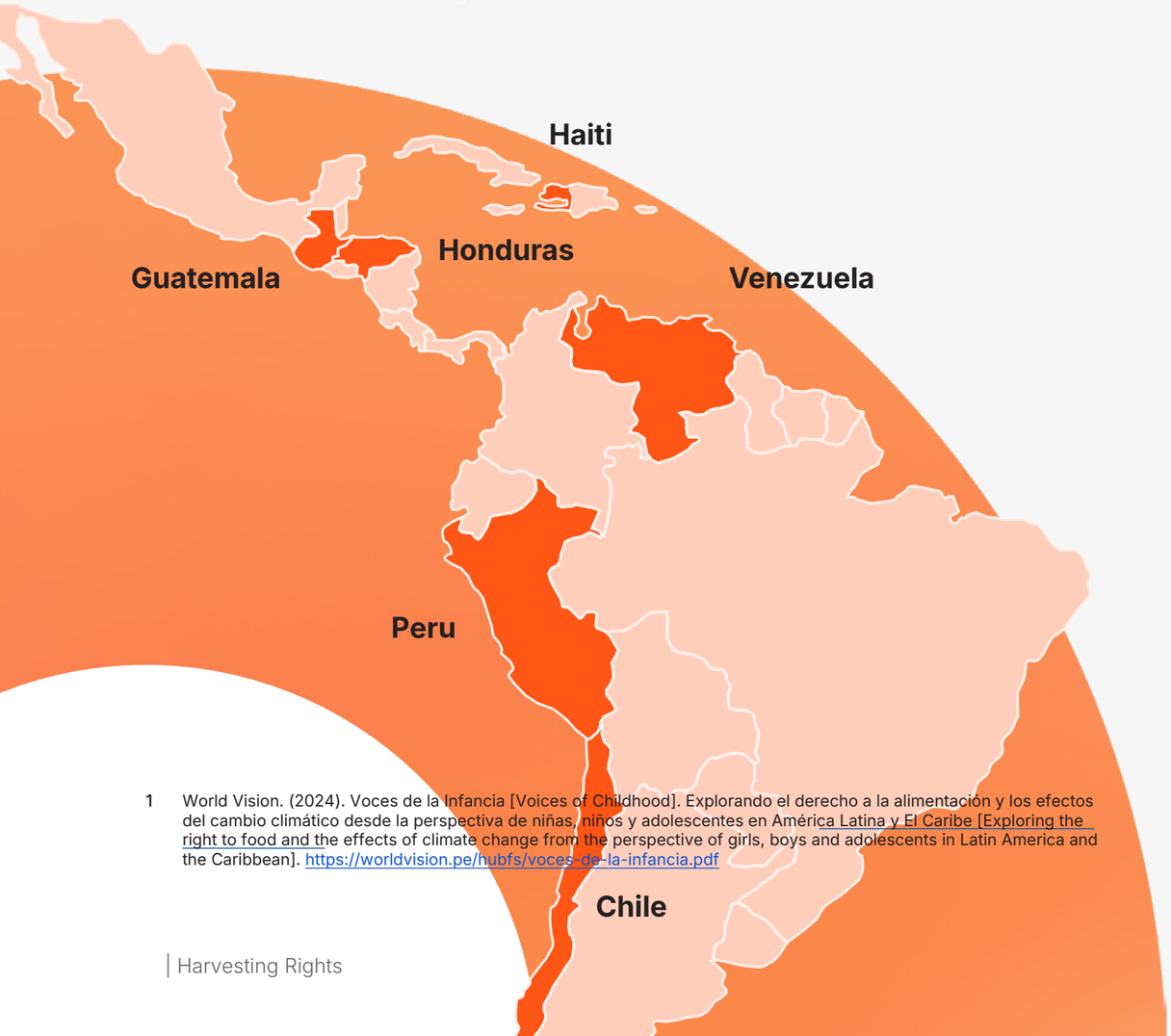
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1. EXECUTIVE SUMMARY

Adequate food is a fundamental right of girls, boys and adolescents (hereafter, "children and adolescents") and a key condition for their development. Within this framework, and as part of the global ENOUGH campaign, in 2026 World Vision carried out its second regional consultation, continuing the first consultation carried out in 2024.[1] The study explored the food situation of children and adolescents and their households, the strategies used to cope with food-related difficulties, and their relationship with climate change, social protection and other risks to children.

Where was it carried out?



1 World Vision. (2024). Voces de la Infancia [Voices of Childhood]. Explorando el derecho a la alimentación y los efectos del cambio climático desde la perspectiva de niñas, niños y adolescentes en América Latina y El Caribe [Exploring the right to food and the effects of climate change from the perspective of girls, boys and adolescents in Latin America and the Caribbean]. https://worldvision.pe/hubfs/voces-de-la-infancia.pdf

Who participated?

3,230 girls, boys and adolescents

Country	%	Gender	%	Ethnicity	%
Chile	5%	Female	54%	Afro-descendant	7%
Guatemala	57%	Male	46%	Indigenous	34%
Haiti	7%	Non-binary / other	0.1%	Mestizo/a	45%
Honduras	14%	Prefer not to answer	0.1%	Other	12%
Peru	13%	**Average age:** 13 years		Prefer not to answer	1%
Venezuela	3%	**Mobility status**			
		In human mobility	4%		
		Not in human mobility	72%		
		Don't know / no answer / not applicable	24%		

5,146 adults

Country	%	Gender	%	Ethnicity	%
Chile	3%	Female	87%	Afro-descendant	4%
Guatemala	36%	Male	13%	Indigenous	26%
Haiti	4%	Non-binary / other	0%	Mestizo/a	56%
Honduras	9%	**Average age:** 38 years		Other	10%
Peru	45%			Prefer not to answer	3%
Venezuela	2%	**Mobility status**			
		In human mobility	4%		
		Not in human mobility	76%		
		Don't know / no answer / not applicable	19%		

What were children and adolescents asked about?
Food experiences
Dietary diversity
Impacts on their lives

What were adults asked about?
Household food insecurity experiences
Barriers to accessing food
Information on household context: resilience, support received, climate shocks

What is the food situation of children and adolescents?

1 in 5 children and adolescents (21%) reported having eaten two meals or fewer the day before the survey. When asked about their experiences during the seven days before the consultation, 14% said they had gone to bed hungry at least once and 9% said this had happened on two or more days.

15% of children and adolescents had insufficient dietary diversity, having consumed foods from three or fewer of the seven groups considered the day before[2]: cereals and tubers, legumes, dairy products, eggs, meat or fish, fruits and vegetables.

54% reported having consumed ultra-processed foods or sugary drinks the day before.

Adult caregivers were asked whether, during the previous six months, they had experienced various situations of food insecurity, such as worrying about not having enough food, being unable to eat healthy and nutritious food, having little variety, skipping meals, eating less than necessary, running out of food, feeling hungry but not eating, or going a whole day without eating. Based on the number of experiences reported, households were classified, for descriptive purposes, as having mild (1–3 experiences), moderate (4–6) or severe (7–8) food insecurity. 73% reported at least one of these experiences; 26% of households experienced moderate food insecurity and 17%, severe food insecurity.

Differences between countries were marked: Haiti showed the most critical situation: 95% of children and adolescents had gone to bed hungry, 95% had eaten two meals or fewer and 77% had insufficient dietary diversity. In addition, 84% of households experienced severe food insecurity. Venezuela also showed significant difficulties, with 44% of households in a severe situation, compared with 22% in Honduras, 16% in Peru, 11% in Chile and 9% in Guatemala.[3]

The food situation was similar between girls and female adolescents, and boys and male adolescents, but differences by age emerged. Adolescents aged 15 to 17 more frequently reported having eaten two meals or fewer the day before than those aged 10 to 14 (25% versus 19%).

The more children and adolescents in the household, the greater the food insecurity. Severe food insecurity increased progressively as the number of children and adolescents in the household increased: 13% in households with one, 16% with two, 22% with three and 23% with four or more.

How do food-related difficulties affect the lives of children and adolescents?

Children and adolescents were asked how often, during the previous six months, they had experienced three situations related to a lack of food or income: missing school because of a lack of food or to help obtain food or income; increasing the time spent working or helping to obtain them; and considering moving or migrating because of these difficulties. 25% increased the time spent working or helping to obtain food or income, 17% missed school and 15% considered moving or migrating, at least once during this period.

2 Descriptive results considering 7 food groups to assess dietary diversity, adapted from the 12-food-group classification proposed by FAO.
3 Data based on descriptive analysis by country, using raw scores obtained from the 8 FIES questions; the Rasch model is not applied; reference period of 6 months.

The impacts varied between countries. In Guatemala (28%), Honduras (32%) and Peru (19%), children and adolescents more frequently reported having increased the time spent working or helping to obtain food or income. In Haiti (54%) and Venezuela (45%), they more frequently reported having missed school because of a lack of food or income.

Although females and males showed similar results on the indicators directly related to food, differences were observed in their everyday impacts. Males more frequently reported increasing the time spent working or helping (29% versus 22% of females) and missing school (19% versus 15%). The impacts were also more frequent among adolescents aged 15 to 17: 40% experienced at least one of the three, compared with 32% of those aged 10 to 14.

The accumulation of impacts also showed an increasing trend according to the number of children and adolescents in the household: while 31% of households with one child or adolescent reported at least one of the three impacts analyzed, this proportion increased progressively to 44% in households with four or more children and adolescents.

What difficulties do families face in accessing food and how do they respond?

Caregivers were asked about the main barriers they faced in accessing safe and sustainable food. High prices were, by far, the most frequent barrier, cited by 88% of families. In addition, almost four in ten faced multiple barriers: 23% identified two and 17%, three or more.

Caregivers were also asked what strategies the household had used during the previous six months when it did not have enough food or money to buy it. The most frequent was eating less preferred or cheaper foods (71%). About four in ten households also reported reducing portion sizes, prioritizing food for children and adolescents, or borrowing food or money to buy it.

Caregivers were asked about the support households had received during the previous six months, including school feeding, cash transfers, food baskets or packages, community kitchens and assistance from faith-based organizations. More than half (56%) had received none of the support asked about. School feeding was the support with the widest reach (32%). In addition, possible gaps in the reach of support were observed: only 40% of households with severe food insecurity received any type of support, compared with about half of those with mild (50%) or moderate (51%) food insecurity.

Aspects of local food systems were also asked about, such as the availability, origin and stability of the food supply. Only half of caregivers (50%) considered that local production or the supply in their community was sufficient to meet food needs, while 47% indicated that there are months or seasons of greater scarcity. In addition, only 12% indicated that mechanisms such as storage, cooperatives or collective purchasing exist in their community.

How does the food situation vary according to human mobility status and ethnic self-identification?

The consultation analyzed the situation of children and adolescents separately according to their human mobility status and their ethnic self-identification. Children and adolescents in a situation of mobility had greater food-related difficulties than those who were not. 18% had gone to bed hungry at least once during the previous seven days, compared with 7% of those who were not in mobility; and 24% had eaten two meals or fewer the day before, compared with 16%.

The differences were even greater in the impacts associated with a lack of food or income. Among children and adolescents in mobility, 37% missed school because of these difficulties, compared with 13% of those who were not in mobility; 37% increased the time spent working or helping to obtain food or income, compared with 24%; and 24% considered moving or migrating, compared with 12%.

Households in a situation of mobility also had higher levels of severe food insecurity (27% versus 12% of households not in a situation of mobility).

Differences were also observed in household food insecurity according to the ethnic self-identification of children and adolescents, although these varied between countries and do not allow a common pattern to be identified for the whole region. In Honduras, 31% of Indigenous children and adolescents lived in households experiencing severe food insecurity, compared with 21% of Mestizo children and adolescents. In Venezuela, this situation affected 71% of Indigenous children and adolescents, compared with 42% of their Mestizo peers. In Guatemala, the proportions were similar between both groups: 8% among Indigenous and 7% among Mestizo children and adolescents.

How are climate shocks related to food-related difficulties?

Households faced multiple climate shocks in a short period. Heatwaves (44%) and droughts (35%) were the events reported most frequently. In addition, almost 3 in 10 households (29%) experienced two or more shocks during the previous six months.

The greater the number of climate shocks, the greater the severe food insecurity: the proportion of households with severe food insecurity increased progressively according to the number of shocks experienced:

None → 10%
1 shock → 19%
2 shocks → 21%
3 or more → 27%

Exposed households also faced greater difficulties in accessing food: among households exposed to shocks, 63% reported effects on their income, compared with 12% among those not exposed. Difficulties in accessing safe water (53% vs. 23%) and disruptions to markets or routes (45% vs. 22%) were also more frequent.

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2. INTRODUCTION

Adequate food is a fundamental right of all girls, boys and adolescents, recognized in the Convention on the Rights of the Child and closely linked to their rights to health, survival and development. Guaranteeing this right means not only that children and adolescents have enough food, but also that they have sustained access to adequate, good-quality food that contributes to their full and comprehensive development. Ending hunger, achieving food security and improving nutrition are central commitments of Sustainable Development Goal 2 (Zero Hunger) of the 2030 Agenda.

Within this framework sits ENOUGH,[4] World Vision's global campaign to help end child hunger and malnutrition. The campaign starts from a central premise: the world produces and has enough food for every child and adolescent to be able to access the quantity and quality of food needed to grow and develop fully; however, economic and social inequalities, difficulties in accessing food and the growing threats associated with climate change continue to put this right at risk.

In this context, in 2026 World Vision carried out the second regional consultation on food insecurity, continuing the exercise carried out in 2024.[5] This second consultation sought to monitor the situation of children and adolescents and to identify possible improvements or deteriorations in the conditions of food insecurity and in the capacity of families and communities to cope with these risks, paying special attention to the growing threats related to climate change.

To this end, the study analyzed the food situation of children and adolescents and the strategies households use to cope with food-related difficulties. It also explored the impacts of climate change, social protection mechanisms and the conditions of local food systems. It further explored how difficulties in accessing food and income can affect other areas of children's and adolescents' lives, such as school attendance, the need to work or help more, and the consideration of migrating or relocating.

The evidence generated seeks to contribute to strengthening school feeding and other social protection mechanisms, as well as to making visible the relationship between food insecurity, climate change and risks to children. It also seeks to strengthen the role of community actors and faith-based organizations, and to guide social protection policies that are sensitive to climate and to inequalities. At the same time, it seeks to provide regional evidence on World Vision's advocacy within the framework of ENOUGH.

4 https://www.wvi.org/es/ENOUGH
5 World Vision. (2024). Voces de la Infancia [Voices of Childhood]. Explorando el derecho a la alimentación y los efectos del cambio climático desde la perspectiva de niñas, niños y adolescentes en América Latina y El Caribe [Exploring the right to food and the effects of climate change from the perspective of girls, boys and adolescents in Latin America and the Caribbean]. https://worldvision.pe/hubfs/voces-de-la-infancia.pdf

3. THE REGIONAL CONSULTATION

Which dimensions of food did this consultation explore?

- Adequate food is a fundamental right of children and adolescents, recognized in the Convention on the Rights of the Child. Beyond being a right, adequate food is fundamental for health, growth and comprehensive development during childhood and adolescence, including physical, cognitive and social development.[6]

- Therefore, understanding the food situation of children and adolescents requires exploring different components of their diet and their experiences of hunger, as well as recognizing that food-related difficulties can have repercussions in other areas of their lives, such as school attendance, responsibilities to contribute to the household, or decisions related to mobility.

- These experiences, moreover, occur in a family, social, economic and environmental context. Household food insecurity, the strategies families use to cope with scarcity, exposure to climate shocks and access to support mechanisms help to understand the conditions in which children's and adolescents' food experiences take place.

- From this perspective, the consultation prioritized information reported directly by children and adolescents about their own experiences, complementing it with information provided by caregivers about the situation and context of the household. Differences by gender, age, ethnic identity and human mobility status were also explored.

- The consultation gathered information from children and adolescents aged 10 to 17, and from adult caregivers.

6 Food and Agriculture Organization of the United Nations, International Fund for Agricultural Development, Pan American Health Organization, United Nations Children's Fund, & World Food Programme. (2026). The state of food security and nutrition in the world 2026: Understanding and addressing the high cost of a healthy diet. FAO.



- What children and adolescents shared:

Their food experiences:	They were asked how many meals they had eaten the day before and how many days they had gone to bed hungry in the last week. These indicators made it possible to directly approximate recent experiences related to the quantity of food and to hunger.
Their dietary diversity	They were asked what they had eaten the day before, considering seven food groups: cereals and tubers, legumes, dairy products, eggs, meat or fish, fruits and vegetables. This information was used to build a dietary diversity score from 0 to 7, where a higher value indicates a greater variety of food groups consumed. To describe the results, consumption of at least 4 of the 7 food groups was used as a reference: • 0–3 groups: insufficient dietary diversity. • 4–7 groups: meeting the reference threshold for dietary diversity.[7]
Intake of processed foods and sugary drinks	They were asked whether they had consumed processed foods or sugary drinks on the day before the consultation.
The impacts on the daily lives of children and adolescents	They were asked whether, because of a lack of food or income during the last six months, they had missed school, increased the time spent working or helping to obtain food or income, or thought about moving or migrating. The three experiences were analyzed both individually and cumulatively.

7 To assess dietary diversity, the 12-food-group classification proposed by FAO was adapted to seven groups. The results are therefore descriptive and not directly comparable with those obtained using the original classification.



- What adult caregivers shared with us:

Household food insecurity – Food Insecurity Experience Scale (FIES)	The eight items of the Food Insecurity Experience Scale (FIES)[8] were used to assess the difficulties households experienced in accessing food in the last six months. These range from worrying about not having enough food to more severe experiences, such as running out of food, feeling hungry and not eating, or going a whole day without eating. The responses were combined into a score from 0 to 8, where a higher value indicates a greater accumulation of food insecurity experiences. For the descriptive analysis of this consultation, scores were grouped as: 0 = no experiences reported; 1–3 = mild insecurity; 4–6 = moderate insecurity; and 7–8 = severe insecurity.
How households responded to difficulties – coping strategies	They were asked how often households had had to eat cheaper or less preferred foods, borrow food or money, reduce portions, reduce adults' consumption to prioritize girls and boys, or reduce the number of meals. These responses made it possible to analyze the strategies families use to cope with a lack of food or of money to buy it.
The conditions surrounding food	Caregivers also provided information on the support received, climate shocks, access to water, changes in prices and in the food supply, and the characteristics of local food systems.

8 This classification is a descriptive approximation of different levels of food insecurity severity based on the raw FIES score, and allows comparison of the patterns observed within the consulted population. To produce official prevalence estimates comparable across countries, FAO's methodology involves additional calibration procedures using the Rasch model and equating to the global reference scale. Food and Agriculture Organization of the United Nations. Food Insecurity Experience Scale (FIES).



Who participated in the consultation?

A total of 3,230 children and adolescents between 10 and 17 years of age participated directly in the consultation and provided information about their experiences and perceptions. 54% were female and 46% male, while a very small proportion identified as non-binary/other or preferred not to answer (n=2 in each).[9] The average age of the children and adolescents was 13 years. Approximately seven in ten participants (70%) were in early adolescence, between 10 and 14 years, while 30% were between 15 and 17 years.

The largest proportion of participating children and adolescents was in Guatemala (57%), followed by Honduras (14%), Peru (13%), Haiti (7%), Chile (5%) and Venezuela (3%). Regarding their ethnic self-identification, 45% of adolescents identified as Mestizo/a, 34% as Indigenous and 7% as Afro-descendant; 12% identified with another group and 1% preferred not to answer. The vast majority of children and adolescents (88%) indicated that they attended school. However, it is concerning that 12% reported not being in school at the time of the consultation.

The survey also gathered information from 5,146 adults, from households in six countries of Latin America and the Caribbean. The adults surveyed had an average age of 38 years and were mostly women (87%). Households were made up, on average, of five people, of whom approximately two were children and adolescents.



Girls, Boys and Adolescents: 3,230

Country	N	%	Gender	N	%	Ethnicity	N	%
Chile	174	5	Female	1737	54	Afro-descendant	229	7
Guatemala	1852	57	Male	1489	46	Indigenous	1101	34
Haiti	218	7	Non-binary / other	2	0.1	Mestizo/a	1453	45
Honduras	458	14	Prefer not to answer	2	0.1	Other	394	12
Peru	426	13	**Average age:** 13 years			Prefer not to answer	53	1
Venezuela	102	3	**Mobility status**					
			In human mobility	116	4%			
			Not in human mobility	2328	72%			
			Don't know / no answer / not applicable	786	24%			

Adults: 5,146

Country	N	%	Gender	N	%	Ethnicity	N	%
Chile	174	3	Female	4452	87	Afro-descendant	199	4
Guatemala	1852	36	Male	691	13	Indigenous	1351	26
Haiti	218	4	Non-binary / other	2	0	Mestizo/a	2858	56
Honduras	458	9	**Average age:** 38 years			Other	527	10
Peru	2323	45				Prefer not to answer	175	3
Venezuela	121	2	**Mobility status**					
			In human mobility	226	4%			
			Not in human mobility	3929	76%			
			Don't know / no answer / not applicable	991	19%			

9 Owing to the small number of participants in these categories, the results are not presented disaggregated and no comparisons are made throughout the report, since the percentages do not allow conclusions to be drawn about these groups.

4. RESULTS



What is the food situation and dietary diversity of girls, boys and adolescents?

The share of the world's population facing hunger has declined in recent years—from 8.6% in 2022 to 8.1% in 2024 and 7.8% in 2025—yet an estimated 608 to 696 million people worldwide faced hunger in 2025.[10] This trend has also been recorded in Latin America and the Caribbean: in 2024, hunger affected 33.6 million people, 1.5 million fewer than in 2023 and 3.5 million fewer than in 2022. However, significant subregional differences persist: the prevalence of hunger was 3.8% in South America, 5.0% in Mesoamerica and 17.5% in the Caribbean.[11]

The results of this consultation provide additional evidence on the characteristics of the diets of children and adolescents in the Latin American and Caribbean countries consulted. As described in Box 1, children and adolescents provided information about their experiences of hunger in the days prior to the consultation. 14% of children and adolescents reported having gone to bed hungry at least once in the seven days prior to the survey. For some, moreover, this was not an isolated experience: 9% reported having gone to bed hungry on two or more days of the previous week (see Figure 1).

Box 1.

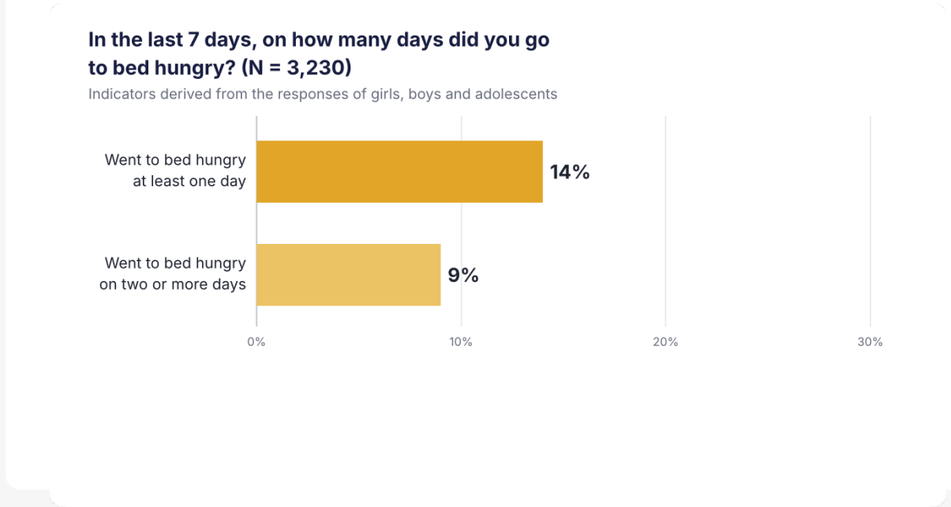
Food situation:
Who was asked? Girls, boys and adolescents

Indicator	Question	Response options
Experience of hunger	In the last 7 days, on how many days did you go to bed hungry?	0–7 days
Number of meals	Yesterday, how many meals did you eat?	0–6 meals

10 Food and Agriculture Organization of the United Nations, International Fund for Agricultural Development, Pan American Health Organization, United Nations Children's Fund, & World Food Programme. (2026). The state of food security and nutrition in the world 2026: Understanding and addressing the high cost of a healthy diet. FAO.

11 Food and Agriculture Organization of the United Nations, International Fund for Agricultural Development, Pan American Health Organization, United Nations Children's Fund, & World Food Programme. (2026). Latin America and the Caribbean: Regional overview of food security and nutrition 2025. Statistics and trends. https://doi.org/10.4060/cd8421es

Figure 1



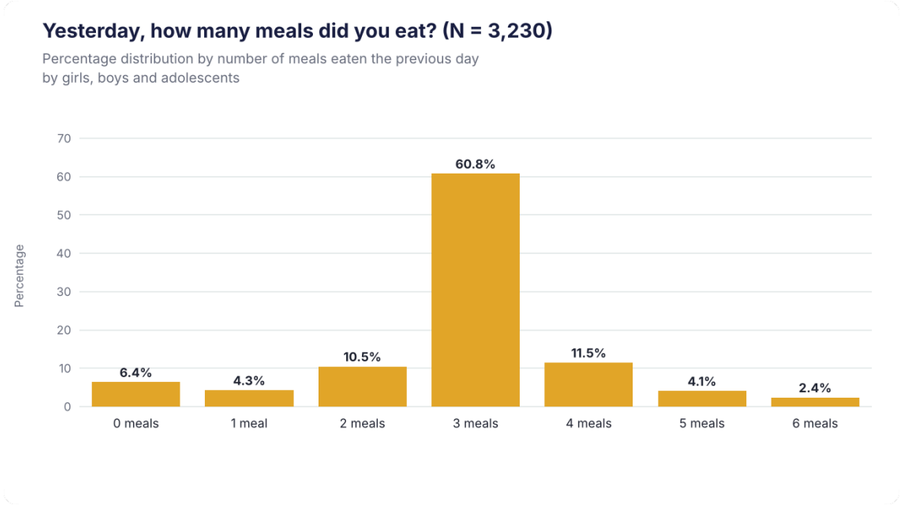
Source: World Vision

The consultation also provided information on the frequency of meals among children and adolescents (see Box 1). The majority (61%) reported having eaten three meals on the day before the survey. However, approximately one in five (21%) ate two meals or fewer: 11% reported two meals, 4% only one and 6% indicated they had eaten no meals at all the previous day (see Figure 2). While the number of meals alone cannot determine the sufficiency or quality of the diet, these results provide relevant information on the everyday food experiences of children and adolescents in the participating countries.

The results of the 2024 consultation and of the current one would show continuity in the difficulties related to the quantity of food consumed. In 2024, 18% of children and adolescents aged 11 to 17 reported eating fewer than three meals a day. In the current consultation, 21% of children and adolescents aged 10 to 17 reported having eaten two meals or fewer the previous day.[12] Although differences in the population consulted and in the wording of the questions do not allow these figures to be interpreted as a change over time, both consultations, conducted two years apart, show the presence of difficulties related to the quantity of food consumed among a significant proportion of adolescents.

12 World Vision. (2024). Voces de la Infancia [Voices of Childhood]. Exploring the right to food and the effects of climate change from the perspective of girls, boys and adolescents in Latin America and the Caribbean. https://worldvision.pe/hubfs/voces-de-la-infancia.pdf

Figure 2



Source: World Vision



The consultation also explored the dietary diversity of children and adolescents by asking about 7 food groups, including cereals and tubers, legumes, dairy, eggs, meat or fish, fruits and vegetables (see Box 2). As Figure 3 shows, on average, children and adolescents ate foods from 5 of the 7 food groups assessed on the day before the consultation. **85% ate foods from at least 4 of the 7 groups, thus reaching the minimum level of dietary diversity set as the reference for this analysis. In contrast, 15% ate foods from 3 groups or fewer, which was classified as insufficient dietary diversity.**

Box 2:

Dietary diversity and consumption of ultra-processed foods and sugar-sweetened beverages:

Question	Response options
DIETARY DIVERSITY	
Yesterday, did you eat any of the following foods? • Cereals, tubers and other staple foods (rice, maize, bread, potato, cassava, etc.) • Legumes (beans, lentils, chickpeas) • Dairy (milk, yogurt, cheese) • Eggs • Meat, chicken or fish • Fruits • Vegetables	Yes / No for each food group
CONSUMPTION OF ULTRA-PROCESSED FOODS AND SUGAR-SWEETENED BEVERAGES	
Yesterday, did you eat ultra-processed foods or drink sugar-sweetened beverages?	Sí / No

How was dietary diversity calculated?

The food groups consumed the previous day were added up (0–7). A higher score indicates greater dietary diversity, with 4 of 7 groups taken as the reference value.

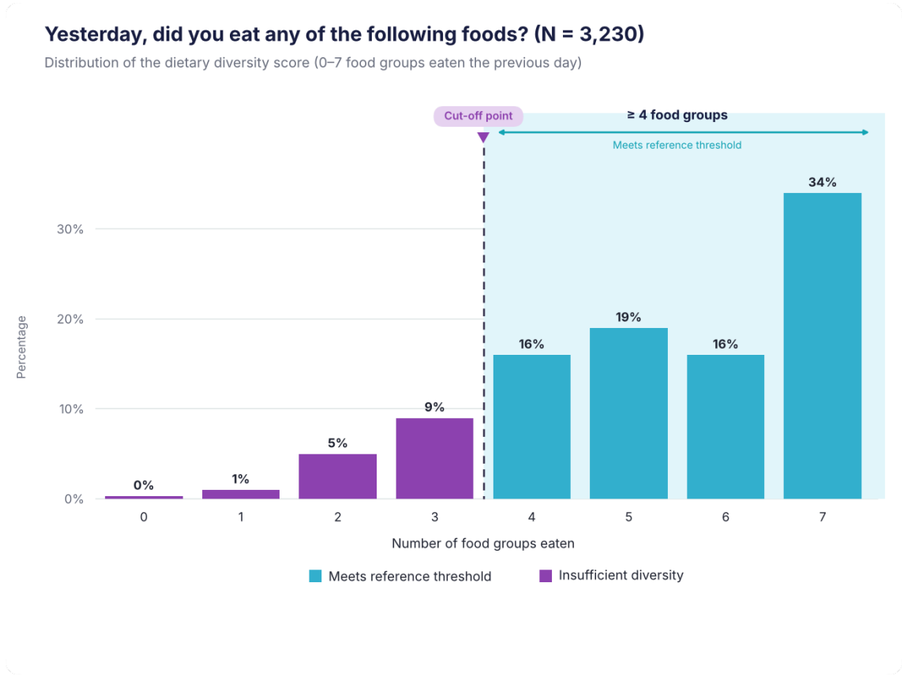
- 0–3 groups: insufficient dietary diversity.
- 4–7 groups: meets the reference threshold

.

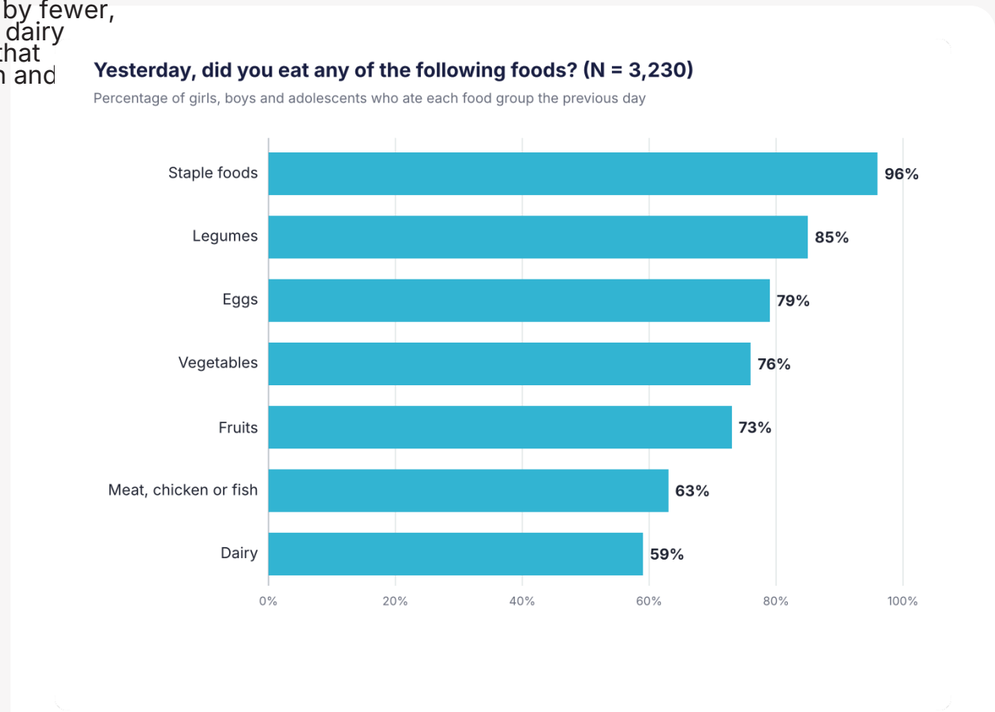
Note: This reference value was used for descriptive purposes and is not a cut-off point validated specifically for girls, boys and adolescents.

As Figure 4 shows, among the food groups consumed, cereals, tubers and other staple foods (rice, maize, bread, potato, cassava, etc.) were the most frequent (96%), followed by legumes (85%) and eggs (79%). Consumption of vegetables (76%) and fruits (73%) was also reported by most children and adolescents. Although reported by fewer, more than half of children and adolescents also reported frequently eating meat, chicken or fish (63%) and dairy products (59%). These differences are relevant, considering that a healthy diet requires a variety of foods that together provide the energy and nutrients needed for growth and development and help promote the health and overall well-being of children and adolescents.[13]

Figure 3



Source: World Vision



Source: World Vision

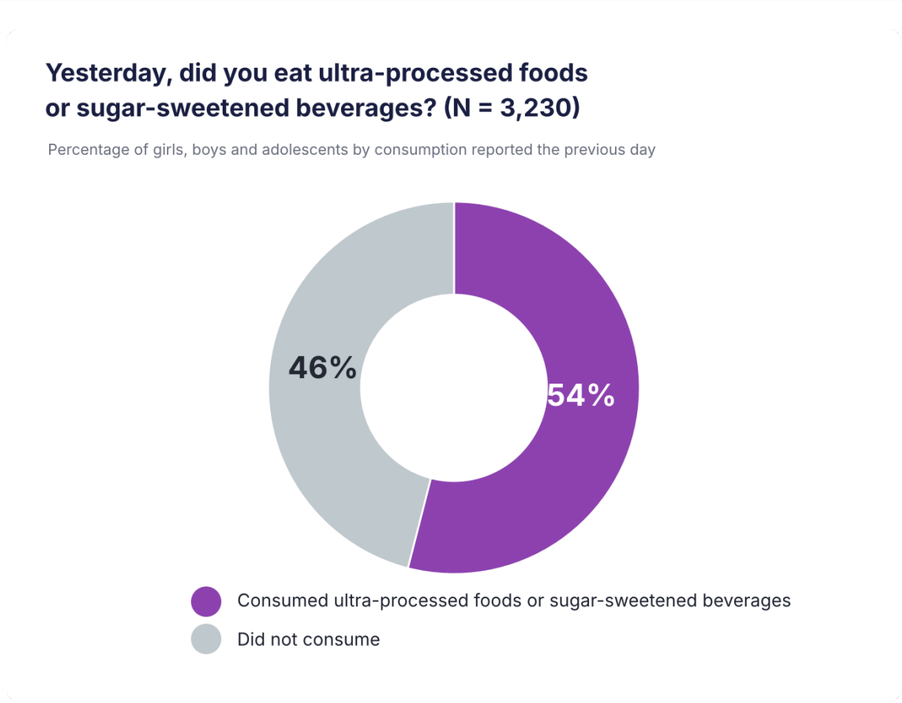
As described in Box 2, children and adolescents were also asked about their consumption of ultra-processed foods and sugar-sweetened beverages. **More than half (54%) said they had consumed these products the previous day (see Figure 5).** These results are in line with global evidence indicating that sugar-sweetened beverage consumption is common among children and adolescents.[14] The high percentage of children and adolescents who consume these types of foods deserves attention, given that diets high in ultra-processed foods—often rich in sodium, sugars or unhealthy fats—are associated with adverse health effects such as obesity, dental caries and metabolic disorders.[15]

12 https://www.who.int/es/news-room/fact-sheets/detail/healthy-diet

14 c Rosinger A, Herrick K, Gahche J, Park S. Sugar-sweetened beverage consumption among US youth, 2011–2014. NCHS Data Brief. 2017;271(271):8–2017.

15 Hardy LL, Bell J, Bauman A, Mihrshahi S. Association between adolescents' consumption of total and different types of sugar-sweetened beverages with oral health impacts and weight status. Aust N Z J Public Health. 2018;42(42):22–6. doi:10.1111/1753-6405.12749. Bleich SN; Vercammen KA. The negative impact of sugar-sweetened beverages on children's health: an update of the literature. BMC Obesity. 2018;5(6):2018. doi:10.1186/s40608-017-0178-9. https://www.who.int/es/news-room/fact-sheets/detail/healthy-diet

Figure 5



Source: World Vision

The 2024 consultation already showed experiences of food insecurity among children and adolescents: almost 3 in 10 reported at least one experience related to a lack of food during the previous six months, such as skipping a meal because there was no food at home, feeling hungry because there was nothing to eat, or caregivers going without food in order to prioritize theirs. The current consultation deepens this analysis by incorporating the Food Insecurity Experience Scale (FIES), which makes it possible to understand the severity of household-level food insecurity experiences and to relate them to the experiences reported directly by children and adolescents (see Box 3).

16 World Vision. (2024). Voces de la Infancia [Voices of Childhood]. Exploring the right to food and the effects of climate change from the perspective of girls, boys and adolescents in Latin America and the Caribbean. https://worldvision.pe/hubfs/voces-de-la-infancia.pdf

Box 3:

Food Insecurity (FIES):

Who was asked? Adult caregivers.

Question	Response options
FOOD INSECURITY	
Thinking about the last 6 months, was there a time when...	Sí / No
...you worried about not having enough food?	
...you were unable to eat healthy and nutritious food?	
...you ate only a few kinds of food?	
...you had to skip a meal?	
...you ate less than you thought you should?	
...your household ran out of food?	
...you were hungry but did not eat?	
...you went without eating for a whole day?	

How was it calculated?

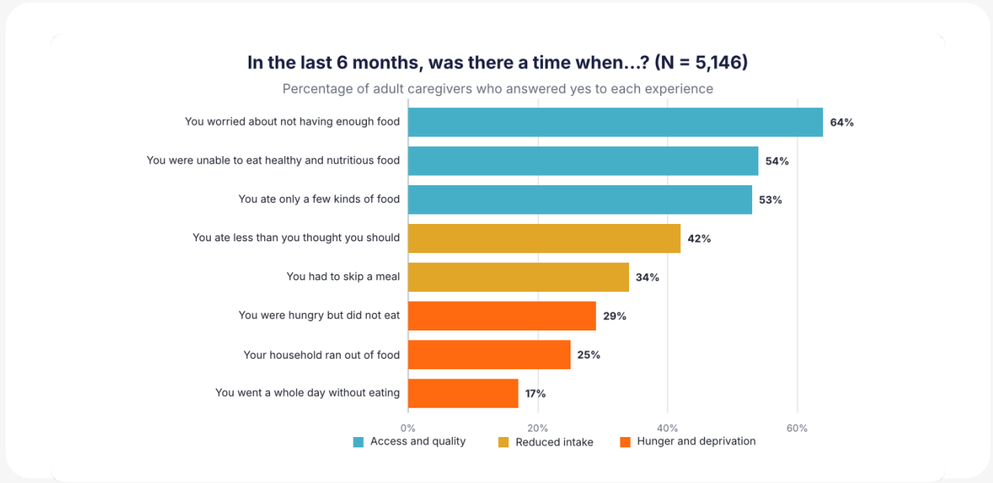
Affirmative answers were added up to obtain a score from 0 to 8. The higher the score, the greater the accumulation of food insecurity experiences:

- 0: no experiences reported
- 1–3: mild insecurity
- 4–6: moderate insecurity
- 7–8: severe insecurity

Note: This classification was used for descriptive purposes. Official FIES prevalence estimates require additional calibration and equating procedures against the FAO global reference scale.

Thus, the difficulties related to hunger, malnutrition and access to healthy food reported by children and adolescents in this consultation were also reflected in the responses of adult caregivers about the situation in their households. The consultation explored food insecurity based on the difficulties households experienced in accessing food over the previous six months. In line with the experiences reported by children and adolescents, **the most frequent situations were worrying about not having enough food (64%), being unable to eat healthy and nutritious food (54%) and having to eat a limited variety of foods (53%)** (see Figure 6).

Figure 6



Source: World Vision

These results show that more than half of households faced difficulties related not only to the availability of food, but also to the ability to access a healthy and diverse diet.

The most severe experiences of food deprivation were also present in a significant proportion of households. One in four (25%) reported having run out of food, 29% said they had been hungry but had been unable to eat and, in 17% of households, a member went a whole day without eating. These results show that, for a significant share of the families surveyed, difficulties in accessing food were not limited to worry or a less varied diet, but led to **concrete experiences of hunger and food deprivation.**

The analysis of the difficulties experienced made it possible to approximate the level of food insecurity in households. **In total, 73% of the adults consulted reported having experienced some degree of food insecurity in the last six months, having reported at least one difficulty in accessing food. In addition, 26% experienced moderate food insecurity, with between four and six of the experiences asked about, while 17% experienced severe food insecurity, reporting between seven and eight experiences.**

Situation by country

Although the aim of the consultation was to offer a regional perspective, the results also revealed differences in food experiences between countries, which makes it possible to get a sense of the particularities of each context (see Figures 7 and 8).

In Haiti, more than 9 in 10 children and adolescents (95%) reported having gone to bed hungry at least once during the previous week, and nearly 8 in 10 (77%) said this occurred on two or more days. Venezuela had the second-highest proportion, although considerably lower: 32% went to bed hungry at least once and 17% did so on two or more days. In Honduras, Chile and Guatemala, between 8% and 11% reported having gone to bed hungry at least once, while Peru had the lowest proportion (6%).



Figure 7

What food experiences did girls, boys and adolescents report in each country?

Percentage of children and adolescents who showed each indicator

	Chile	Guatemala	Haiti	Honduras	Peru	Venezuela
Went to bed hungry at least one day	8%	8%	95%	11%	6%	32%
Ate two meals or fewer the previous day	7%	10%	95%	14%	46%	24%
Insufficient dietary diversity	10%	11%	77%	12%	4%	31%
Reported at least one impact associated with a lack of food or income	13%	36%	44%	42%	29%	24%

Source: World Vision

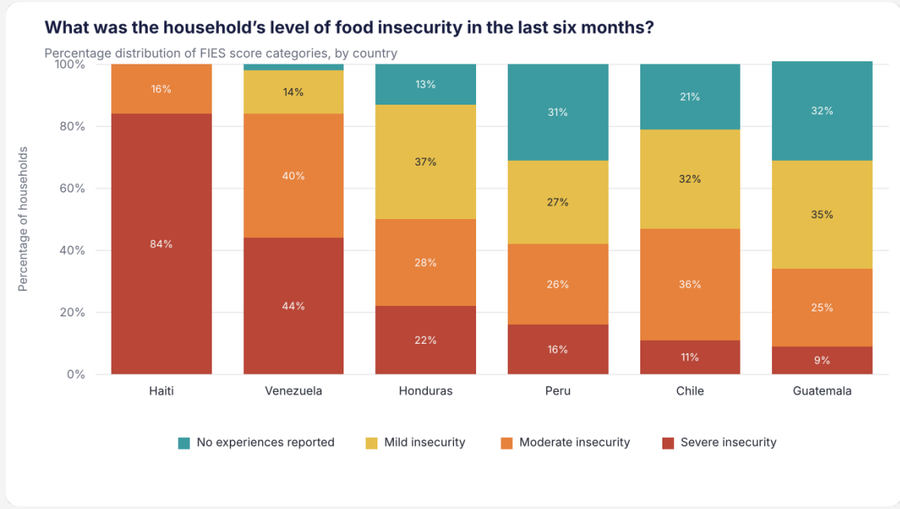
As for the number of meals eaten the previous day, significant differences were again observed. In Haiti, 95% reported having eaten two meals or fewer, followed by Peru (46%) and Venezuela (24%). The proportions were considerably lower in Honduras (14%), Guatemala (10%) and Chile (7%).

Differences were also marked in dietary diversity. In Haiti, 77% had insufficient dietary diversity, followed by Venezuela (31%). In the other countries, this proportion ranged from 4% in Peru to 12% in Honduras.

The responses of adults followed a similar pattern. Haiti had the highest proportion of households classified as severely food insecure (84%), followed by Venezuela (44%) and Honduras (22%). This proportion was lower in Peru (16%), Chile (11%) and Guatemala (9%). In Haiti, practically all the households surveyed showed moderate or severe levels of food insecurity (99%), with a marked concentration in the severe category (84%). In Venezuela, 84% of households were also concentrated in the moderate (40%) or severe (44%) food insecurity categories.[17]

17 The item "No experiences reported" does not correspond to a FIES item, but is a descriptive category used to identify households that did not report any of the experiences assessed.

Figure 8



Source: World Vision

What was reported by children and adolescents and by adults shows that, particularly in Haiti and Venezuela, some of the most severe food insecurity situations were recorded. These findings must be understood in light of the complex humanitarian contexts both countries were going through at the time of the consultation, which affected living conditions and families' access to food and other essential goods and services.

The particularly critical results observed in Haiti must be understood within the framework of a prolonged humanitarian and food crisis, marked by armed-group violence, population displacement, economic hardship and high exposure to disasters and extreme climate events. At the time of the consultation, food insecurity already affected a considerable part of the population: World Food Programme estimates indicated that 5.8 million people, approximately half of the population, were facing crisis levels of acute food insecurity, of whom more than 1.8 million were facing emergency levels.[19] These difficulties occur, moreover, in a context of displacement and limited access to food and essential services, with more than 1.5 million people internally displaced. This scenario is part of a trajectory of successive crises, such as the 2021 earthquake and Hurricane Melissa in late 2025, to which World Vision responded in the most affected areas.[20] As will be discussed later in this report, humanitarian situations reinforce inequalities and sharpen food vulnerability.

18 Population of Haiti in 2025: 11,906,095 https://datos.bancomundial.org/indicador/SP.POP.TOTL?locations=HT

19 World Food Programme Haiti. (June 2026). Country Brief. https://reliefweb.int/report/haiti/wfp-haiti-country-brief-july-2026

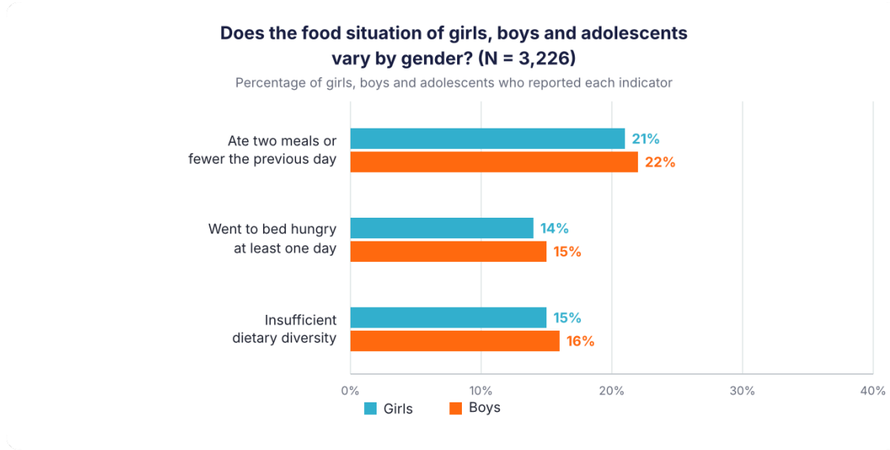
20 World Vision International. (2022). Haiti earthquake emergency response: One year on report. https://worldvisionamericalatina.org/wp-content/uploads/2022/08/Haiti-Earthquake-Response-One-Year-Report.pdf. World Vision España. (2025, 28 October). World Vision moviliza en Haití una respuesta de emergencia ante la intensificación del huracán Melissa [World Vision mobilizes an emergency response in Haiti as Hurricane Melissa intensifies] https://www.worldvision.es/actualidad/centro-de-prensa/world-vision-moviliza-en-haiti-una-respuesta-de-emergencia-ante-la-intensificacion-del-huracan-melissa/

The results for Venezuela must be interpreted taking into account the humanitarian context the country was going through at the time of the consultation. Pre-existing difficulties in accessing food were compounded by the effects of the two earthquakes that occurred on 24 June 2026, which caused damage to homes, hospitals and basic services in different parts of the country, deepening the food, water and shelter needs of the affected families.[21] This emergency also occurred against a prior backdrop of food insecurity and strong economic pressure on households, marked by the economic crisis, inflation and internal and cross-border human mobility.[22] These conditions continued to affect access to food, in a scenario of sharp price increases during 2026. A rapid assessment carried out by World Vision in January 2026 had already identified significant difficulties:[23] 34% of the households consulted reported that at least one family member went to bed without eating, and 54.8% of adults had reduced the size or frequency of meals to prioritize feeding children and older people. The assessment also warned of rising food prices and their repercussions on families' ability to meet their basic needs.

Situation by gender and age

Food consumption indicators were similar between girls and female adolescents and boys and male adolescents, with no statistically significant differences (see Figure 9). By age, the only statistically significant difference was found in the number of meals eaten the previous day: adolescents aged 15 to 17 more frequently reported a lower number of meals than those aged 10 to 14 (see Figure 10).

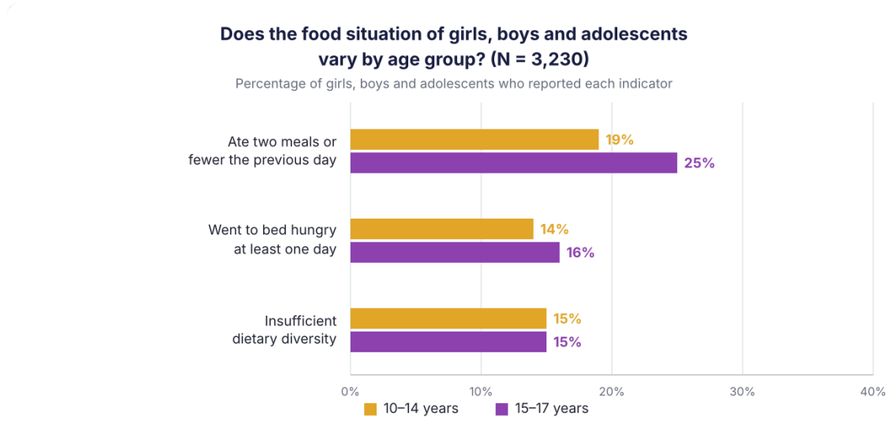
Figure 9



Source: World Vision

21 World Vision. Terremoto en Venezuela [Earthquake in Venezuela]
22 https://www.worldvision.es/landing/terremoto-en-venezuela/
23 World Vision América Latina y el Caribe. (2026). Violencia y hambre: las secuelas de la crisis humanitaria en Venezuela [Violence and hunger: the aftermath of the humanitarian crisis in Venezuela]. https://worldvisionamericalatina.org/violencia-y-hambre-las-secuelas-de-la-crisis-humanitaria-en-venezuela/

Figure 10



Source: World Vision

The pattern observed by age is consistent with international evidence showing greater exposure to food insecurity among older adolescents. A study based on the Global School-based Student Health Survey, which included more than 337,000 students aged 11 to 18 from 95 countries, found that 30% of adolescents aged 15 to 18 reported food insecurity, compared with 26% of those aged 11 to 14.[24]

Although this consultation did not identify significant gender differences in the food indicators analyzed, the available evidence suggests that it is key to look more closely at the eating patterns of girls and boys and at how these may change throughout adolescence. For example, a systematic review of the dietary practices of adolescent girls in low- and middle-income countries, which included evidence from Latin America and the Caribbean, found that 49% of girls aged 15 to 19 skipped breakfast, compared with 40% of those aged 10 to 14.[25] As will be seen later, in this consultation gender differences did emerge when analyzing other impacts associated with difficulties in accessing food and income.

24 Fram MS, Nguyen HT, Frongillo EA. (2022). Food Insecurity among Adolescent Students from 95 Countries Is Associated with Diet, Behavior, and Health, and Associations Differ by Student Age and Sex. Curr Dev Nutr. 6(3):nzac024. doi: 10.1093/cdn/nzac024.
25 Keats EC, Rappaport AI, Shah S, Oh C, Jain R, Bhutta ZA. The Dietary Intake and Practices of Adolescent Girls in Low- and Middle-Income Countries: A Systematic Review. Nutrients. 2018 Dec 14;10(12):1978. doi: 10.3390/nu10121978, PMID: 30558128; PMCID: PMC6315365.

Situation by household composition

Household size and composition are important factors to consider when analyzing and understanding food insecurity. In Latin America, previous studies have found higher levels of food insecurity in larger households and in households with children and adolescents.[26] These households may face greater pressure on the resources available to meet the needs of all their members, particularly in contexts of poverty or when household income is limited.

The results of this consultation show a pattern consistent with that evidence. **The proportion of households with severe food insecurity increased progressively with the number of children and adolescents living in them:** from 13% among households with one child or adolescent, to 16% among those with two, 22% among those with three and 23% among households with four or more.



26 Miguel, I. D. V. C., Valente Junior, A. T., Costa, B. P. B. M., Gongô, I. R., Ferreira, K. A. R., Costa, R. P., Ribeiro, R. L. S., Loureiro, S. S. C., Marchioni, D. M. L., Lobato, J. C. P., & Baltar, V. T. (2025). Food insecurity in households with children and adolescents under the intersectionality between gender and race/skin color. Cadernos de Saúde Pública, 41(11) https://doi.org/10.1590/0102-311XEN076325. Magaña-Lemus, D., Ishdorj, A., Rosson, C. P., III, & Lara-Álvarez, J. (2016). Determinants of household food insecurity in Mexico. Agricultural and Food Economics, 4, Article 10. https://doi.org/10.1186/s40100-016-0054-9

What are the impacts of food-related difficulties on the lives of girls, boys and adolescents?

As described in Box 4, the consultation also asked children and adolescents directly whether, due to a lack of food or income, they had missed school, had increased the time spent working or helping to obtain food or income, or had considered moving or migrating.

Box 4.

Impacts on the lives of children and adolescents

Who was asked? Children and adolescents

Indicator	Question	Response options
School attendance	In the last 6 months, how often did you miss school because of a lack of food or energy, or to help get food or income?	Never / Rarely / Sometimes / Often / Almost always
Work or help	In the last 6 months, how often did the time you spent working or helping to get food or income increase?	Never / Rarely / Sometimes / Often / Almost always
Considering migrating or moving	In the last 6 months, how often did you think about moving or migrating because of a lack of food or income?	Never / Rarely / Sometimes / Often / Almost always

How was the proxy indicator calculated?

From the three questions, a risk proxy indicator was built, that is, an approximate measure that makes it possible to identify situations of potentially higher risk based on the impacts reported. The number of impacts experienced at least once during the previous six months was added up, giving a score from 0 to 3, with 3 being the highest risk level.

0: reported none of the three impacts.

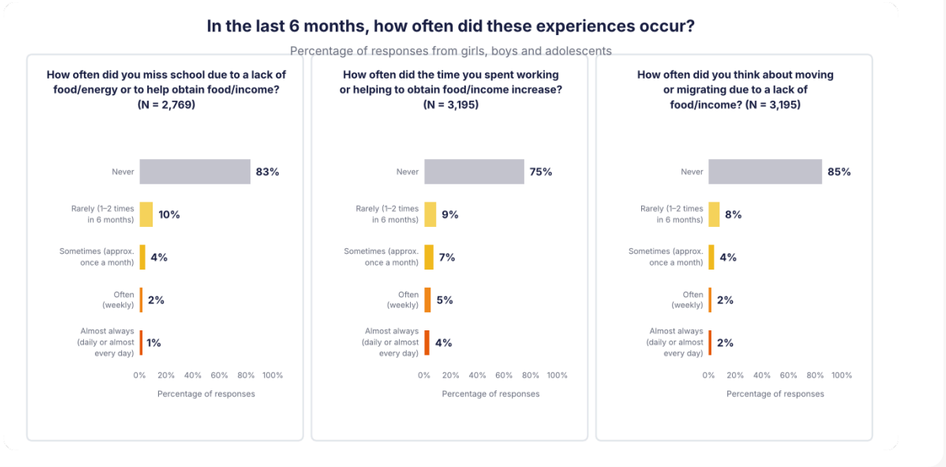
1: reported one impact.

2: reported two impacts.

3: reported all three impacts, representing the highest level on this indicator.



Figure 11



Source: World Vision

The most frequently reported experience was having to spend more time working or helping to obtain food or income: 25% said they had done so at least once in the last six months and 4% said they had done so almost always (see Figure 11).

These results are consistent with the evidence showing the close relationship between poverty, food insecurity and child labor. Economic and food hardship can increase the pressure on children to contribute to household income or resources; in turn, child labor can limit future educational and economic opportunities, perpetuating long-term cycles of poverty and food insecurity.[27] This finding is especially relevant in a region where child labor remains a major challenge. In 2024, 7.3 million children and adolescents were in child labor in Latin America and the Caribbean, of whom 4.7 million were doing hazardous work.[28] Although the increase in work or help reported in this consultation does not necessarily constitute child labor under international definitions, the results show how difficulties in accessing food and income can translate into greater responsibilities for children and adolescents.

Although reported to a lesser extent, the impact of food-related difficulties on school attendance is equally concerning. 17% of the children and adolescents who participated in the consultation missed school at least once in the last 6 months because of a lack of food or energy, or to obtain food or income. This result is especially relevant given that, at the time of the consultation, 12% of children and adolescents already reported that they were not attending school. In addition, there is a significant group of enrolled adolescents whose attendance has been affected by food-related or economic difficulties.

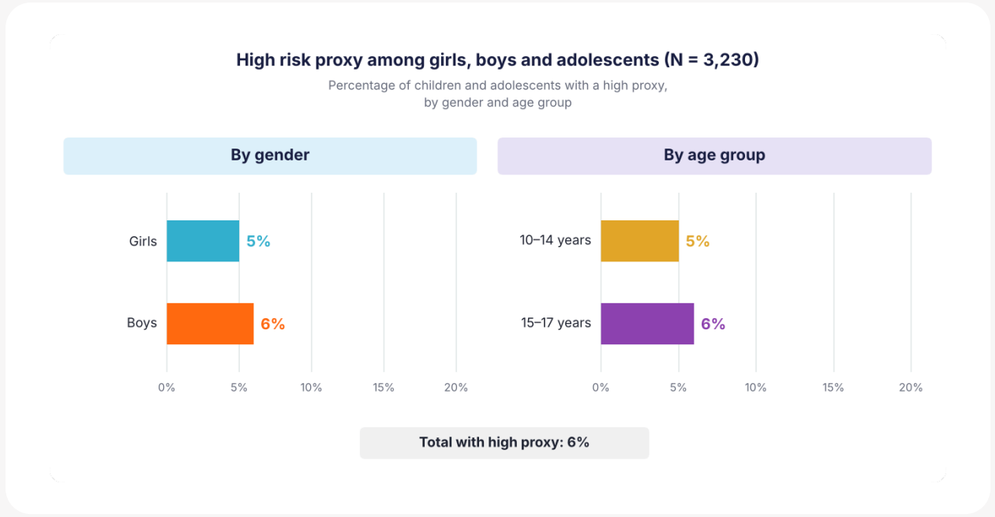
27 Lambon-Quayefio MP, Owoo NS. (2021) Investigating the long-term effects of child labor on household poverty and food insecurity in Ghana. Journal of Demographic Economics. 87(4):561-587. doi:10.1017/dem.2020.29
28 International Labour Organization, & United Nations Children's Fund. (2025). Child labour: Global estimates 2024, trends and the road forward. International Labour Organization and UNICEF https://www.ilo.org/publications/major-publications/child-labour-global-estimates-2024-trends-and-road-forward

International evidence shows that food insecurity can be a significant barrier to educational continuity. Studies in multiple countries have found consistent associations between food insecurity and school absenteeism. Among them, a study based on PISA data from nearly half a million students in 65 countries[29] and another that analyzed data from the Global School-based Student Health Survey, with more than 337,000 students in 95 countries, found that food insecurity was associated with a greater likelihood of missing school.[30]

Finally, **15% of the children and adolescents consulted considered moving or migrating because of a lack of food or income.** As will be discussed later, human mobility is closely related to a series of factors that can deepen food-related difficulties and, in turn, be aggravated by them.

In a complementary way, as described in Box 4, by considering the three impacts analyzed together, a risk proxy indicator was built to identify the accumulation of these experiences. 6% of children and adolescents reported all three impacts and were therefore at the highest level of the indicator, reflecting a greater accumulation of situations that can affect their well-being, development and protection. As Figure 12 shows, this proportion was similar between girls and boys (5% and 6%, respectively) and between children and adolescents aged 10 to 14 (5%) and 15 to 17 (6%).

Figure 12



Source: World Vision

29 Canbolat, Y., Rutkowski, D., & Rutkowski, L. (2026). Food Insecurity and Student Absence in the US and Across the Globe. Educational Policy, 40(5), 595-625. https://doi.org/10.1177/08959048251382153
30 Fram MS, Nguyen HT, Frongillo EA. (2022). Food Insecurity among Adolescent Students from 95 Countries Is Associated with Diet, Behavior, and Health, and Associations Differ by Student Age and Sex. Curr Dev Nutr. 6(3):nzac024. doi: 10.1093/cdn/nzac024.

Although the consultation focused on three dimensions, international evidence shows that the consequences of food insecurity can extend to multiple areas of the lives of children and adolescents. The multi-country study mentioned above found that food insecurity was associated with poorer mental health and lower physical activity, as well as a greater likelihood of tobacco, alcohol and other drug use, of being bullied and of some risky sexual behaviors.[31] Difficulties in accessing food can also affect well-being and relationships within the household. Evidence shows that food insecurity is associated with higher levels of parental stress, which can create tension in the relationship between caregivers and their sons and daughters. Likewise, various studies have found an association between food insecurity and a greater likelihood of physical and psychological aggression by parents toward their children, as well as other forms of violence.[32]

Previous consultations carried out by World Vision also show that food-related difficulties not only have consequences for physical health, but also for social and emotional health, and can generate pressures that increase children's and adolescents' exposure to protection risks. The 2024 consultation showed that these are also part of the experience of hunger among children and adolescents. Six in ten reported unpleasant emotions when they experienced hunger. The most frequent were distress (40%) and sadness (32%), while 7% mentioned other emotions such as anger, rage, anxiety, desperation or stress.[33] These results are a reminder that the repercussions of food insecurity can extend beyond food and everyday activities, also affecting the emotional well-being of children and adolescents. In a more recent consultation, a participant from Colombia said:

> **"In some cases, we despair because we have no food. Sometimes our parents worry because we could get sick from not eating, or sometimes we only eat once a day, and they have to look for work. If they don't find it, they despair even more. Sometimes the community helps us, but only when it can; and when it can't, in some cases we despair even more, because they can't help other people when they themselves have no money either!"[34]**

31 Fram MS, Nguyen HT, Frongillo EA. (2022). Food Insecurity among Adolescent Students from 95 Countries Is Associated with Diet, Behavior, and Health, and Associations Differ by Student Age and Sex. Curr Dev Nutr. 6(3):nzac024. doi: 10.1093/cdn/nzac024.

32 Helton, J. J., Jackson, D. B., Boutwell, B. B., & Vaughn, M. G. (2019). Household food insecurity and parent-to-child aggression. Child Maltreatment, 24(2), 213–221. https://doi.org/10.1177/1077559518819141. Frank, M., Daniel, L., Hays, C. N., Shanahan, M. E., Naumann, R. B., McNaughton Reyes, H. L., & Austin, A. E. (2024). Association of food insecurity with multiple forms of interpersonal and self-directed violence: A systematic review. Trauma, Violence, & Abuse, 25(1), 828–845. https://doi.org/10.1177/15248380231165689. Bloom, M., McCoy, C., Hendrix-Dicken, A. D., Elenwo, C., Baxter, M. A., Coffey, S., & Hartwell, M. (2024). Association and disparities of food insecurity and exposure to violence: Analysis of the National Survey of Children's Health. Journal of Osteopathic Medicine, 124(8), 369–376. Belans, R., Odom, J., Kolm, P., & Rethy, J. A. (2024). The association between food insecurity, parental stress, and child development. Family & Community Health, 47(4), 275–279. https://doi.org/10.1097/FCH.0000000000000411

33 World Vision. (2024). Voces de la Infancia [Voices of Childhood]. Exploring the right to food and the effects of climate change from the perspective of girls, boys and adolescents in Latin America and the Caribbean. https://worldvision.pe/hubfs/voces-de-la-infancia.pdf

34 World Vision. (2026). In the Shadow of Hunger. The Power of Self-Reliance to Protect Children and Restore Hope. https://www.wvi.org/sites/default/files/2026-06/WV_WRD%202026_PolicyRecommendations.pdf

Impacts by country

The most frequent type of impact varied between countries. In Guatemala, Honduras and Peru, the increase in time spent working or helping to obtain food or income predominated, reported by 28%, 32% and 19% of children and adolescents, respectively (see Figure 13). Although with diverse dynamics and despite regional efforts, these three countries account for a large share of working children and adolescents in Latin America.[35]

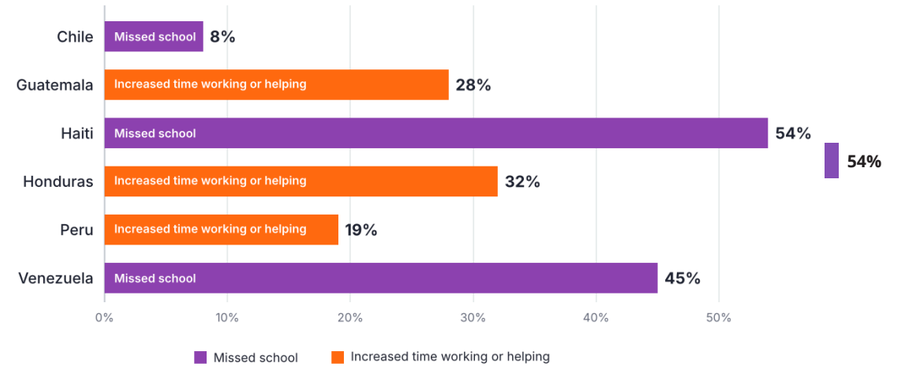
In Haiti and Venezuela, by contrast, the most frequent impact was missing school due to a lack of food or income, reported by 54% and 45%, respectively. This was also the most frequent impact in Chile, although in a considerably lower proportion (8%).

Differences between countries were also marked in the accumulation of the three impacts considered in the risk proxy indicator. Haiti had the highest proportion of children and adolescents with a high risk proxy (23%), followed by Honduras (9%). The proportions were lower in Peru (6%), Venezuela (5%), Guatemala (3%) and Chile (2%). The differences between countries were statistically significant, reinforcing the pattern observed in other indicators of the consultation, particularly the greater concentration of situations of food vulnerability in Haiti.

Figure 13

In the last 6 months, what was the most frequent impact of a lack of food or income on girls, boys and adolescents, by country?

For each country, the specific impact with the highest prevalence reported by girls, boys and adolescents



Source: World Vision

35 Abramo, L. (2022). Estudio subregional sobre las causas estructurales del trabajo infantil en la agricultura en El Salvador, Guatemala y Honduras [Subregional study on the structural causes of child labour in agriculture in El Salvador, Guatemala and Honduras]. Santiago de Chile. https://doi.org/10.4060/cc3077es. CISEPA (2024). El trabajo infantil en el Perú [Child labour in Peru]. https://cisepa.pucp.edu.pe/novedades-y-eventos/novedades/el-trabajo-infantil-en-el-peru/

Impacts by gender and age

As previously indicated, girls and female adolescents and boys and male adolescents reported similar experiences on the indicators directly related to food and perceptions of hunger. However, gender differences were observed in the way difficulties in accessing food or income affected other areas of children's and adolescents' lives. Boys and male adolescents more frequently reported having increased their work or help to obtain food or income during the last six months (29%, compared with 22% of girls).[36] Likewise, 19% of boys reported having missed school due to a lack of food or income, compared with 15% of girls.[37]

38% of boys and male adolescents reported at least one of the three impacts analyzed, compared with 32% of girls and female adolescents, and 17% of boys and male adolescents experienced two or more impacts, compared with 13% of girls and female adolescents.

Differences were more marked when analyzing impacts by age. Adolescents aged 15 to 17 more frequently reported having increased the time spent working or helping to obtain food or income (33%, compared with 22% among those aged 10 to 14) and having considered moving or migrating because of these difficulties (20% compared with 12%). In contrast, no significant differences were observed in having missed school, reported by around 17% of both groups.

The accumulation of impacts was also higher among older children and adolescents: 40% of those aged 15 to 17 experienced at least one of the three impacts assessed, compared with 32% of those aged 10 to 14. Likewise, 19% of the older group reported two or more impacts, compared with 13% of the younger group. These differences show that the consequences associated with a lack of food or income can intensify as adolescence progresses.

When age and gender are considered together, the proportion of children and adolescents who reported some impact increased with age among both girls and boys. Among girls, it rose from 30% in the 10–14 age group to 36% in the 15–17 group. Among boys, it increased from 35% to 45%. Thus, boys and male adolescents aged 15 to 17 had the highest proportion of those reporting at least one of the impacts associated with a lack of food or income (45%).

This pattern is particularly relevant when considering how gender norms shape the responsibilities children and adolescents take on. Expectations associated with masculinity may assign boys greater responsibility for contributing economically to the household as they grow up. Consistent with this, regional and global figures show a greater presence of boys in child labor and among children and adolescents in human mobility.

36 $p < .001$
37 $p = .004$

However, these differences do not necessarily imply a lesser burden for girls and female adolescents. Evidence from Latin America shows that, while adolescent boys tend to devote more time to paid work, girls devote more time to unpaid domestic and care work, a distribution that reflects gender roles that begin to consolidate during adolescence and that can be accentuated in contexts of greater socioeconomic hardship.[38] Therefore, the higher proportion of impacts observed among boys in this consultation should be interpreted with caution: the indicators used may not fully capture other responsibilities taken on by adolescent girls, in particular those related to domestic and care work.

As noted above, no statistically significant differences were identified at the highest level of the risk proxy indicator, by either gender or age.

Impacts by household composition

The impacts associated with a lack of food or income were also more frequent among children and adolescents living in households with a larger number of children and adolescents. The proportion who reported having missed school rose from 16% in households with one child or adolescent to 22% in households with four or more. An even more marked pattern was observed in the increase in work or help to obtain food or income, which rose from 23% to 31%, respectively.

The accumulation of impacts also increased as the number of children and adolescents in the household increased. While 31% of those living in households with one child or adolescent reported at least one of the three impacts assessed, this proportion rose progressively to 34% in households with two, 39% with three and 44% with four or more. Multiple impacts were also more frequent in this last group (18%).



38 UNICEF. (2024). Uso del tiempo entre los y las adolescentes en América Latina [Time use among adolescents in Latin America].

What difficulties do families face in accessing food and how do they respond?



Main barriers to accessing food

The cost of accessing a healthy diet is a particularly significant challenge in Latin America and the Caribbean, and the consultation results reflect this reality. The survey explored the main barriers to accessing food (see Box 5), and almost nine in ten families (88%) cited high prices as a difficulty in accessing food (see Figure 14).

Box 5.

Barriers to accessing food

Who was asked? Caregivers.

Indicator	Question	Response options
Barriers to accessing food	What are the main barriers to accessing safe and sustainable food?	More than one option could be selected

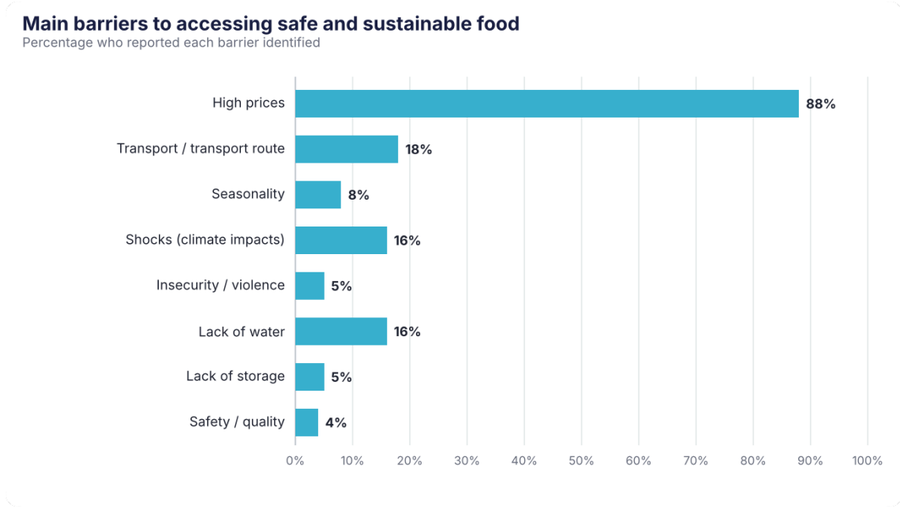
- High prices
- Transport or access routes
- Seasonality
- Climate shocks or impacts
- Insecurity or violence
- Lack of water
- Lack of storage
- Food safety or quality
- Other

In the 2024 consultation, 49% of children and adolescents and 61% of adults had already identified high prices as a barrier to accessing healthy food.[39] Likewise, 65% of children and adolescents and 76% of adults mentioned economic constraints.

In 2025, the average cost of a healthy diet in Latin America and the Caribbean reached 4.91 PPP dollars[40] per person per day, above the world average of 4.28 PPP dollars and the highest among all regions.[41] This situation occurs in a context in which high food prices continue to be an important factor in food insecurity.

World Vision's global analysis of food prices shows that households with less capacity to absorb shocks face greater difficulties in the face of price increases, especially in contexts simultaneously affected by climate events, economic hardship, displacement and disruptions in food production and distribution.[42]

Figure 14



Source: World Vision

39 World Vision. (2024). Voces de la Infancia [Voices of Childhood]. Exploring the right to food and the effects of climate change from the perspective of girls, boys and adolescents in Latin America and the Caribbean. https://worldvision.pe/hubfs/voces-de-la-infancia.pdf

40 PPP (Purchasing Power Parity): a measure that allows costs to be compared across countries by taking into account differences in price levels.

41 Food and Agriculture Organization of the United Nations (2026). Países de América Latina y el Caribe y la FAO acuerdan fortalecer los sistemas públicos de abastecimiento para enfrentar la inflación alimentaria [Latin American and Caribbean countries and FAO agree to strengthen public supply systems to tackle food inflation]. https://www.fao.org/americas/noticias/ver/es/c/1818000/paises-abastecimiento/es

41 World Vision. (2025). PRICE SHOCKS: High prices lead to hunger pandemic. https://www.wvi.org/sites/default/files/2025-03/Price shocks 2025.pdf

The consultation also showed that difficulties do not always occur in isolation. 100% of the caregivers consulted reported at least one barrier. Although 61% reported only one barrier, almost four in ten families faced multiple obstacles to accessing food: 23% reported two barriers and 17% three or more. This shows that, for some families, economic difficulties are combined with other conditions in their environment that can further limit their access to an adequate diet.

In addition to the main barriers, other aspects of local food systems were explored to better understand difficulties of access and supply. As described in Box 6, the origin and availability of food, periods of scarcity, community mechanisms and the stability of supply were explored.

Box 6.

Sustainable and resilient food systems.

Who was asked?: adult caregivers

Indicator	Question	Response options
Origin of food	What is the main source of the food eaten in the household?	- Market / store - Own production - Assistance - Combination of sources - Other
Periods of scarcity	Are there months or seasons of the year when food is scarcer?	Sí / No
	In which months or seasons does this mainly occur?	Months / seasons
Local availability	Is local production or the community's supply sufficient to cover food needs?	Sí/No
Community mechanisms	Are there storage systems, cooperatives or collective food-purchasing mechanisms in the community?	Sí / No
Stability of supply	On a scale of 1 to 5, how stable is the food supply in your community?	1 = Very unstable to 5 = Very stable

Most households (79%) obtain their food mainly from markets or stores, while 15% combine different sources and only 5% depend mainly on their own production. Assistance or external support as the main source was practically non-existent (0.1%).

Almost half of the adults consulted (47%) indicated that there are months or seasons of greater food scarcity. Among those who identified seasons of scarcity without naming specific months, mentions were concentrated mainly in winter (53%) and summer or hot periods (32%); the dry or drought season (6%) and periods of rain or flooding (4%) were mentioned less often. These results show that the times of greatest difficulty vary according to the context and seasonal conditions of each territory.

This situation is accompanied by challenges in the availability and stability of food at the local level. Only half of the respondents (50%) considered local production sufficient to meet their community's needs. Likewise, although nearly half (49%) rated the food supply as stable, 18% considered it unstable. Taken together, these results show that, for a significant share of families, access to food is conditioned not only by their resources but also by the availability and stability of supply in their communities and by variations throughout the year.



Household-level coping strategies

The consultation asked adult caregivers about the strategies used to cope with difficulties in accessing food (see Box 7). As Figure 15 shows, **the most frequent strategy was eating less preferred or cheaper foods (71%)**. Other strategies asked about, such as reducing portion sizes, prioritizing the feeding of children and adolescents, or borrowing food or money to buy it, were reported by around four in ten households.[43]

Box 7:

Coping strategies

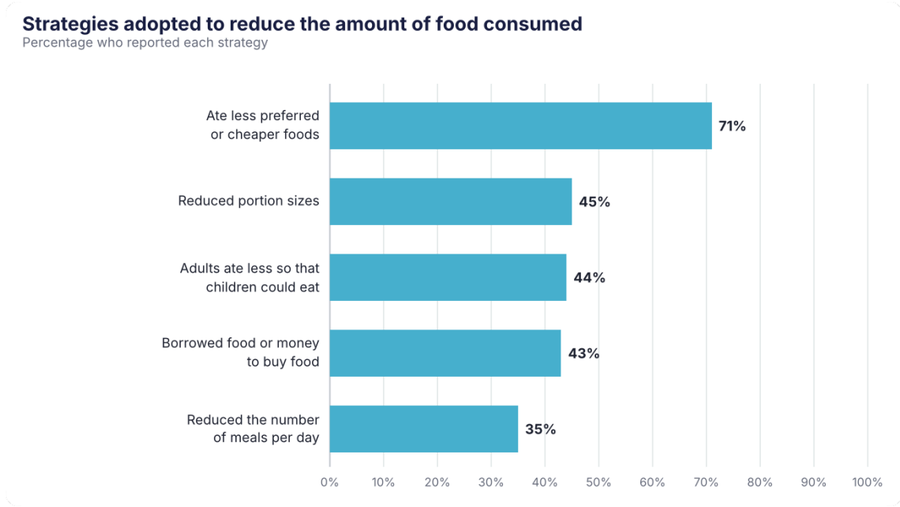
Who was asked? Adult caregivers

Question	Response options
In the last 6 months, when your household did not have enough food or money to buy it, how often did you use the following strategies? • Eating less preferred or cheaper foods • Borrowing food or money to buy it • Reducing portion sizes • Adults eating less so that girls and boys could eat • Reducing the number of meals per day	Never Rarely Sometimes Often Almost always

43 For the analysis, the score was used to present descriptively the coping strategies reported by households, taking into account five strategies considered in the reduced coping strategies index (rCSI).



Figure 15

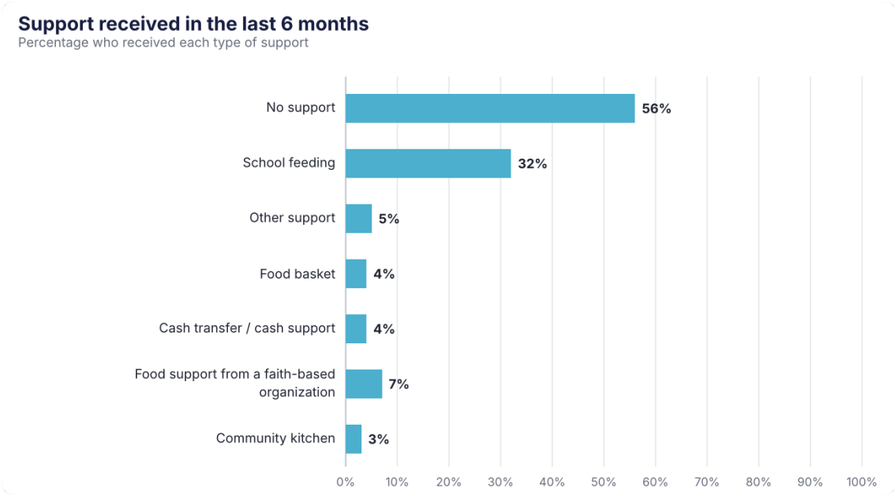


Source: World Vision

Community-level and institutional response mechanisms

World Vision is committed to strengthening social protection systems, which is why the consultation explored the support available.

Figure 16



Source: World Vision



Box 8.

Social protection systems

Who was asked? Adult caregivers
What was measured?

Indicator	Question	Response options
Types of support	In the last 6 months, did you receive any of the following types of support?	Multiple-response option. • School feeding • Cash transfer • Food basket or package • Community kitchen • Meals or assistance from a faith-based organization • None • Other
School feeding	If you receive school feeding, how many days a week does the adolescent receive it?	0–5 days
Support from faith-based organizations	Do you receive food support from a faith-based organization or church?	Sí / No

Among the different types of support explored (see Box 8), school feeding was by far the one with the greatest reach, reaching 32% of the households surveyed (see Figure 16). School feeding had already emerged in the 2024 consultation as a priority area for action, both because of the gaps identified and because of children's and adolescents' own recommendations. The current consultation adds a new perspective by showing the reach of this mechanism among the types of support received by households.[44] This result is consistent with the important role played by school feeding programs in Latin America and the Caribbean, one of the regions with the highest coverage of these programs worldwide.[45] In addition to their benefits for nutrition, school attendance and retention, there is evidence that school feeding is a cost-effective investment.[46]

Churches and faith-based organizations were also part of families' support networks. During the six months prior to the consultation, 7% of the adults consulted reported having received some type of food support from these actors, which shows their contribution to community responses to food-related difficulties.

However, **more than half of the households surveyed (56%) did not report having received any of the types of support explored in the last six months.** This result shows the still-limited reach of the different forms of assistance among the households consulted and raises questions about gaps in access to support.

The results show possible gaps in the reach of support to households and to children and adolescents facing the greatest difficulties. Among children and adolescents who reported two or more impacts—missing school, increasing the time spent working or helping to obtain food or income, or thinking about moving or migrating—45% belonged to households that had received some support, compared with 54% among those who reported fewer than two impacts.[47] The difference was especially marked for school attendance: among those who missed school for reasons related to a lack of food or income, 44% received support, compared with 57% of those who did not report this experience.[48]

A similar pattern was observed when considering the severity of household food insecurity. While around half of households with mild (50%) or moderate (51%) food insecurity received some type of support during the last six months, this proportion fell to 40% among those in severe food insecurity. The difference compared with households not in a severe situation (45%) was statistically significant.[49] (See Figure 17.)

44 World Vision. (2024). Voces de la Infancia [Voices of Childhood]. Exploring the right to food and the effects of climate change from the perspective of girls, boys and adolescents in Latin America and the Caribbean. https://worldvision.pe/hubfs/voces-de-la-infancia.pdf

45 World Food Programme. (2024). State of School Feeding Worldwide 2024. https://publications.wfp.org/2024/state-of-school-feeding/chapters/?utm_source=chatgpt.com#chapter-1

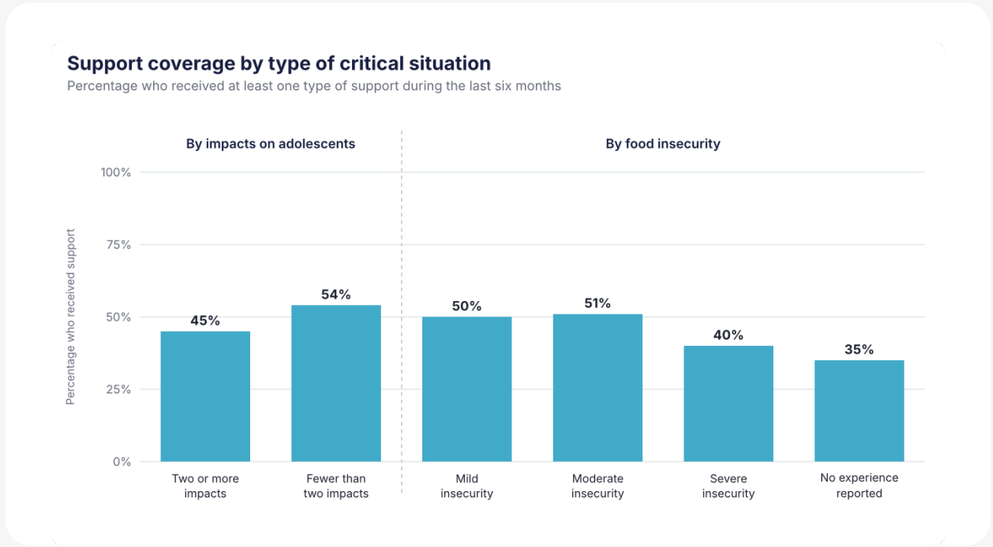
46 Angrist, N., Evans, D. K., Filmer, D., Glennerster, R., Rogers, H., & Sabarwal, S. (2025). How to improve education outcomes most efficiently? A review of the evidence using a unified metric. Journal of Development Economics, 172, 103382. https://doi.org/10.1016/j.jdeveco.2024.103382.

47 ($p < .001$).

48 ($p < .001$

49 ($p = .005$).

Figure 17



Source: World Vision



Who faces the greatest food-related difficulties?



The consultation placed particular emphasis on two groups of special relevance in the Latin American context: people in situations of human mobility and those belonging to different ethnic groups, according to their self-perception. The indicators explored in the consultation were therefore analyzed separately in order to better understand the food situation of these groups.

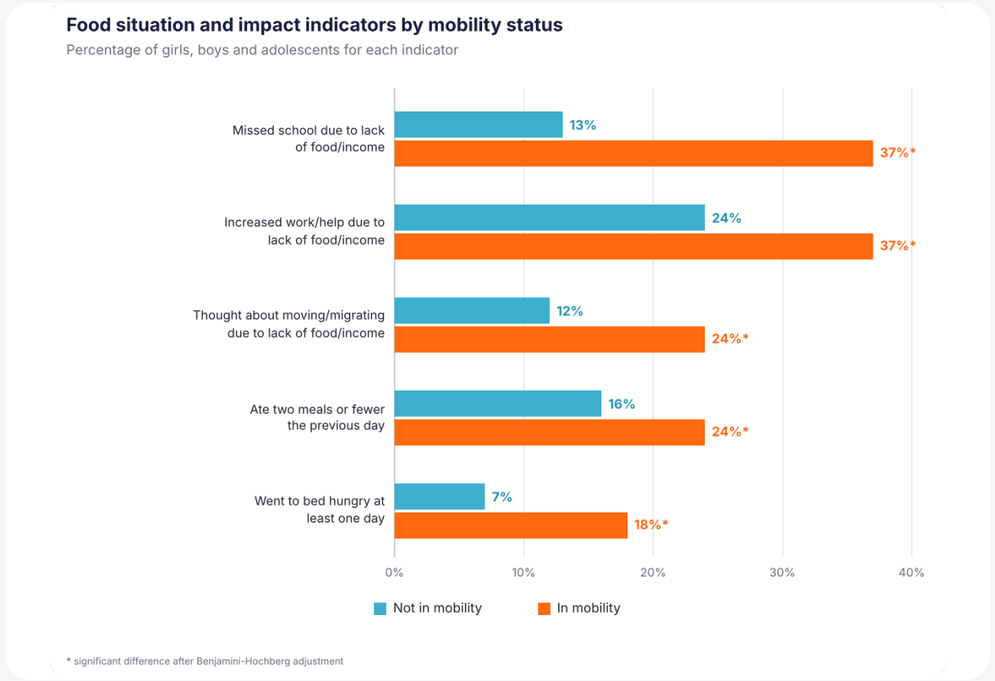
Food situation by human mobility status

The consultation results show greater food vulnerability among children and adolescents in situations of mobility (see Figure 18). 18% reported having gone to bed hungry at least once in the previous seven days, compared with 7% of those not in mobility conditions. Likewise, 13% had gone to bed hungry on two or more days, compared with 4% of the other children and adolescents who were not in a situation of mobility. Differences were also observed in the number of meals: 24% of children and adolescents in mobility ate two meals or fewer the previous day, compared with 16% of those not in this situation. Likewise, insufficient dietary diversity was more frequent among those in contexts of mobility (13% compared with 9%), although the gap was smaller.

Differences were even more marked when considering the repercussions of food and economic difficulties on their lives. **More than a third of children and adolescents in a situation of mobility (37%) reported having missed school because of a lack of food or income, compared with 13% of those not in mobility.** Likewise, 37% increased the time spent working or helping to obtain food or income, compared with 24%, and 24% considered moving or migrating because of these difficulties, compared with 12%.



Figure 18



Source: World Vision

The responses of adults confirmed the vulnerable situation of people in mobility. **Severe food insecurity was significantly higher among households in a situation of mobility (27%) than among those without this status (12%).**[50]

Households in a situation of mobility also resorted to more strategies to cope with food-related difficulties. On average, they used around three of the five coping strategies assessed, compared with just over two among households not in mobility.[51] In addition, 17% showed critical levels in the use of coping strategies, compared with 6% of households not in mobility.[52]

Although concerning, these results are consistent with the available evidence on the greater vulnerabilities that children and adolescents may face in contexts of human mobility. The consultation carried out by World Vision in 2024 had already identified that children and adolescents perceived those in a situation of mobility as a group particularly exposed to difficulties and risks.[53] This reality has also been documented through World Vision's work in different humanitarian contexts.

50 $p < .001$
51 ($p < .001$).
52 $p < .001$
53 World Vision. (2024). Voces de la Infancia [Voices of Childhood]. Exploring the right to food and the effects of climate change from the perspective of girls, boys and adolescents in Latin America and the Caribbean. https://worldvision.pe/hubfs/voces-de-la-infancia.pdf

These findings are especially relevant in a context of declining humanitarian assistance worldwide. In Latin America and the Caribbean, in 2025, only 20% of the financial needs of the United Nations High Commissioner for Refugees in the Americas had been covered, leading to a 42% reduction in its programs.[54] At the same time, the Regional Refugee and Migrant Response Plan reduced its target population from 2.3 million to approximately 578,000 people and its budget from USD 1.4 billion to USD 447.3 million.[55] These cuts have meant reductions in basic assistance, education, livelihoods, integration and protection services in different countries of the region.

In 2026, a study carried out by World Vision in collaboration with the World Food Programme analyzed the relationship between food insecurity, the reduction of humanitarian assistance, and child well-being and protection in eight contexts affected by hunger and forced displacement, including Colombia. The study highlighted the importance of strengthening household self-reliance—their ability to meet their basic needs independently and sustainably—as a strategy to contribute to the well-being and protection of children and adolescents. This requires combining the response to immediate humanitarian needs with longer-term measures that strengthen the resilience, rights and economic opportunities of households.[56]



54 United Nations High Commissioner for Refugees in the Americas (2025). Al Límite - Panorama en las Américas: El impacto devastador de los recortes en la ayuda para las personas forzadas a huir [On the Brink – Overview in the Americas: The devastating impact of aid cuts on people forced to flee] | July 2025. https://reliefweb.int/report/world/al-limite-panorama-en-las-americas-el-impacto-devastador-de-los-recortes-en-la-ayu

55 United Nations High Commissioner for Refugees in the Americas (2025). Al Límite - Panorama en las Américas: El impacto devastador de los recortes en la ayuda para las personas forzadas a huir [On the Brink – Overview in the Americas: The devastating impact of aid cuts on people forced to flee] | July 2025. https://reliefweb.int/report/world/al-limite-panorama-en-las-americas-el-impacto-devastador-de-los-recortes-en-la-ayu

56 World Vision (2026). Harvesting Hope Shadow of Hunger: The Power of Self Reliance to Protect Children and Restore Hope. https://www.wvi.org/sites/default/files/2026-06/WV_WRD%202026_PolicyRecommendations.pdf

Food situation by ethnic self-identification

Differences in food insecurity levels were observed between ethnic groups, although they do not follow a uniform pattern across all countries.

At the regional level, the Afro-descendant population included in the consultation had a particularly high proportion of severe food insecurity. However, this result is strongly influenced by the geographic composition of the sample: 95% of the children and adolescents who self-identified as Afro-descendant were surveyed in Haiti, the country with the highest levels of severe food insecurity in the study. For this reason, the aggregate regional comparison does not allow the conclusion that the Afro-descendant population systematically faces greater food insecurity than other ethnic groups.

When comparing household food insecurity according to the ethnic self-identification of children and adolescents in each country, different patterns were observed. In Honduras, 31% of the children and adolescents who self-identified as Indigenous belonged to households with severe food insecurity, compared with 21% of those who self-identified as mestizo. In Venezuela, the difference was greater: 71% among Indigenous adolescents and 42% among mestizo adolescents. In Guatemala, by contrast, differences were smaller: 8% and 7%, respectively. These results show the importance of analyzing ethnic inequalities considering the specific conditions of each country, rather than assuming a common pattern for the whole region.[57]

Likewise, the strategies used to cope with food-related difficulties showed some similarities between countries and ethnic groups.[58] In Chile, Guatemala and Peru, where the data allowed comparisons with sufficient sample sizes, eating less preferred or cheaper foods was the most frequent strategy in practically all the groups analyzed. However, some differences were observed in the use of other strategies. In Guatemala, for example, reducing portion sizes was more frequent among Indigenous households (44%) than mestizo households (31%), while in Peru Indigenous households resorted more often than mestizo households to less preferred or cheaper foods (65% compared with 45%). These differences must be interpreted considering the composition of each country's samples and do not allow a common pattern by ethnic belonging to be assumed across the region.

57 Regional comparisons should be made with caution, especially when certain ethnic groups are concentrated in one or a few countries. The country snapshots present in more detail the number of participants by ethnic self-identification and the food insecurity levels observed in each group.

58 The self-perception of children and adolescents was considered.

How are climate shocks related to food-related difficulties?



Climate change is a growing challenge for food security in Latin America and the Caribbean. The region is the second most exposed in the world to extreme climate events after Asia: 74% of the countries analyzed face a high frequency of these events and 52% show greater vulnerability to their effects on undernourishment.[59] Droughts, floods and storms can affect agricultural production, disrupt supply chains and contribute to rising food prices, making it harder both to have food available and for households to access a healthy diet. These impacts can be especially severe for populations with fewer resources to anticipate, adapt to and recover from crises.

Considering the challenge posed by climate change, the survey included questions on exposure to climate events and their possible effects on access to and availability of food (see Box 10).

Box 9.

Climate change and related shocks

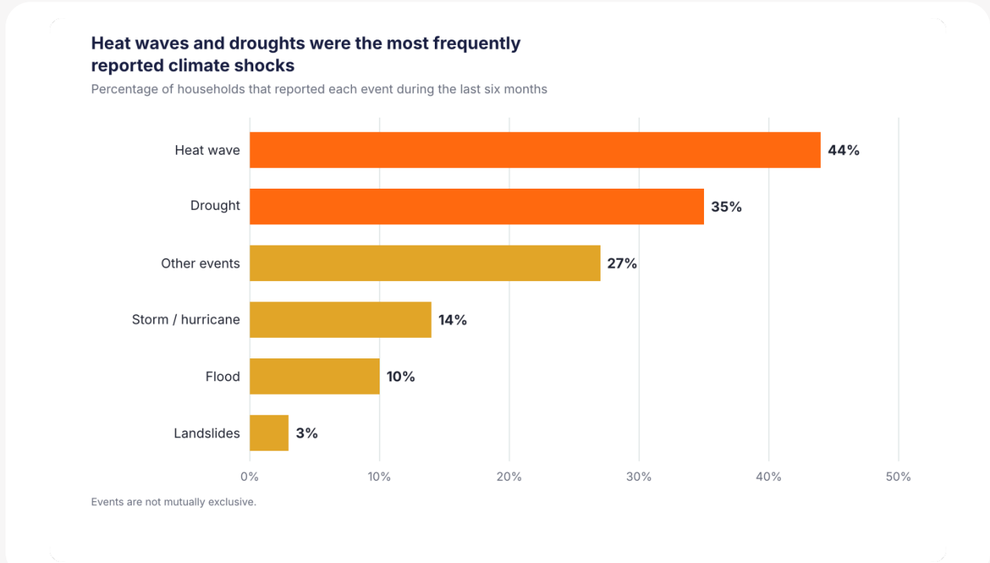
Who was asked?: Adult caregivers

Indicator	Question	Response options
Exposure to climate events	In the last 6 months, did any of these events occur in your community?	Multiple selection • Drought • Flood • Storm or hurricane • Heat wave • Landslide • Other
Impact on income or production	Did these events affect your household's income or production?	Sí / No
Price increases	In the last 6 months, did the prices of basic foods increase?	Sí / No
Supply disruptions	In the last 6 months, were there supply disruptions due to problems in markets or routes?	Sí / No
Access to safe water	In the last 6 months, did you have difficulty accessing safe water?	Sí / No

59 Pan American Health Organization. (2025). Nuevo informe de la ONU: 74 por ciento de los países de América Latina y el Caribe tienen alta exposición a eventos climáticos extremos, afectando la seguridad alimentaria [New UN report: 74 percent of Latin American and Caribbean countries have high exposure to extreme climate events, affecting food security] https://www.paho.org/es/noticias/27-1-2025-nuevo-informe-onu-74-por-ciento-paises-america-latina-caribe-tienen-alta

All the adults who responded to the survey (100%) reported that their community had experienced at least one climate-change-related event in the last six months, while almost three in ten (29%) reported two or more. Heat waves were the most frequently reported event, affecting 44% of households, followed by droughts (35%) (see Figure 19).

Figure 19



Source: World Vision

The relationship between climate events and food-related difficulties had already emerged in the 2024 consultation.[60] In that consultation, 53% of the children and adolescents who reported impacts linked to illness, 40% of those who mentioned floods, 37% of those who mentioned pests and 32% of those who reported the decline of the páramos had also experienced food insecurity.

The current consultation allows this finding to be explored further by showing a cumulative pattern: The proportion of households in severe food insecurity increased progressively with the number of climate shocks experienced: from 10% among those who reported none, to 19% among those who experienced one, 21% among those who faced two and 27% among those exposed to three or more during the last six months. Thus, severe food insecurity was almost three times more frequent among households exposed to three or more shocks than among those that reported none.

These results are consistent with evidence showing that climate events can affect the availability of and access to food, food prices and, consequently, households' eating practices.

60 World Vision. (2024). Voces de la Infancia [Voices of Childhood]. Exploring the right to food and the effects of climate change from the perspective of girls, boys and adolescents in Latin America and the Caribbean. https://worldvision.pe/hubfs/voces-de-la-infancia.pdf

The results also help to understand how climate shocks can aggravate families' difficulties in accessing an adequate diet. Although the rise in food prices was a widespread difficulty, it was especially frequent among households exposed to climate shocks: it was reported by 91% of exposed households, compared with 72% of unexposed households. Likewise, **among households exposed to at least one climate shock, almost two in three (63%) reported impacts on their income**, compared with 12% of those that were not. Difficulties in accessing safe water were more than double (53% compared with 23%), and supply interruptions in markets or routes were also considerably more frequent (45% compared with 22%).

These results are consistent with other World Vision analyses showing that climate shocks can affect food security through multiple pathways.[61] Rising temperatures, irregular rainfall, prolonged droughts and other extreme events can reduce agricultural production and contribute to rising food prices. At the same time, they can disrupt the functioning of markets and families' livelihoods, reducing their ability to buy the food that is available.

Voices of girls, boys and adolescents on climate change.

As part of its commitment to the meaningful participation of children and young people, World Vision promoted and supported spaces for dialogue and participation linked to COP30 in several countries of Latin America. In these spaces, participants reflected on the effects of climate change on their lives and communities, recognizing its links to food security, health, livelihoods and the well-being of children and adolescents. Below are some of the main priorities expressed by participants from Bolivia, the Peruvian Amazon, the Brazilian Amazon and Colombia.

> **"We, the youth of Bolivia, demand more ambitious NDCs that include everyone: we want climate education in every school, global exchanges to learn and share solutions, and projects with Indigenous peoples to protect our nature. We call for shared and transparent governance that gives a voice to communities and ensures a green future for our generation!"**

61 World Vision. (2025). PRICE SHOCKS: High prices lead to hunger pandemic. https://www.wvi.org/sites/default/files/2025-03/Price shocks 2025.pdf

World Vision (2025).

Manifesto of girls, boys and adolescents of the Peruvian Amazon on the road to COP30

Children and adolescents of the Peruvian Amazon called on authorities and world leaders to protect the rivers, forests and biodiversity of the Amazon and to act on the impacts of climate change. Among their main demands are reducing the use of plastics and improving waste management and recycling; preventing pollution of the Amazon River; stopping illegal logging and forest fires and promoting reforestation; and demanding greater environmental responsibility from companies. They also proposed strengthening education and community participation through clean-up campaigns, awareness-raising and environmental training in schools and communities. Faced with increasing droughts, floods and food shortages, they demanded that authorities fulfill their responsibility to protect the Amazon and stressed the right of children and adolescents to raise their voices and be part of the solutions to the climate crisis.

World Vision (2025).

Manifesto of girls, boys and adolescents of the Colombian Amazon on the road to COP30

Children and adolescents of the Colombian Amazon called on governments, institutions, companies and adults to act urgently on climate change and to protect Amazonian forests, water and biodiversity. Among their main demands are stopping logging and fires, promoting reforestation, reducing the use of plastics and improving waste management and recycling to avoid pollution of rivers. Faced with droughts, the loss of crops and fish, and rising food prices, they asked for concrete actions in communities to protect their livelihoods and food, also promoting practices such as family gardens and responsible consumption. They also demanded that cultural and community knowledge be respected and that children and adolescents be heard and take part in the spaces where climate decisions are made, demanding that the commitments made be translated into real action to protect their present and their future.

World Vision. (2025).

Manifesto of girls, boys and adolescents of the Brazilian Amazon on the road to COP30

Children and adolescents of the Brazilian Amazon called on governments, companies and communities to stop the destruction of forests and to protect the rivers, animals and Amazonian biodiversity. Among their main demands are reducing pollution and the accumulation of waste, promoting recycling, stopping logging and burning, and having adequate wastewater treatment systems to avoid river pollution. They also highlighted their willingness to be an active part of the solutions, through actions such as planting trees, caring for animals and raising awareness among others about caring for the environment. Faced with rising temperatures, diseases and other consequences of environmental degradation, they demanded that adults and children and adolescents work together to protect the Amazon and guarantee a future with living forests, clean rivers and healthy air.

5. RECOMMENDATIONS

Governments and public authorities:

- Strengthen and expand social protection systems, prioritizing the households with the greatest food insecurity and ensuring that assistance responds to rising prices and crisis situations.
- Consider household composition and the number of children and adolescents as a relevant criterion for the targeting and adequacy of social protection mechanisms, given that households with more children and adolescents showed progressively higher levels of food insecurity and greater associated impacts.
- Expand and strengthen school feeding programs, guaranteeing their coverage, continuity and nutritional quality, especially for adolescents in situations of greatest vulnerability.
- Protect children and adolescents from the repercussions of food insecurity, coordinating food, education and protection responses to prevent school absenteeism, child labor and migration associated with a lack of food or income.
- Reduce economic barriers to accessing healthy diets, improving the affordability of nutritious foods and strengthening markets, local production and healthy food environments.
- Integrate food security into climate change adaptation and response policies, strengthening adaptive social protection, access to safe water, and resilient livelihoods and food systems.
- Prioritize the populations facing the greatest barriers, especially those in a situation of human mobility, also considering inequalities related to ethnic belonging, age and gender in each context.
- Strengthen coordination with civil society, faith-based and community organizations, to expand the reach of responses and reach the households with the greatest food-related difficulties.
- Guarantee the meaningful participation of children and adolescents, incorporating their experiences and proposals into the design, implementation and monitoring of food, social protection and climate action policies.

Donors and international cooperation:

- Protect and expand funding aimed at combating child hunger and food insecurity, preventing cooperation cuts from deepening existing gaps in food and social protection.
- Prioritize investments in social protection, school feeding and food assistance, ensuring sufficient and flexible resources to respond to rising prices and crisis situations.
- Increase funding for climate adaptation and resilient food systems, especially in communities repeatedly exposed to climate shocks.
- Prioritize children and adolescents and households facing multiple vulnerabilities, including populations in a situation of human mobility and those simultaneously affected by food insecurity and climate shocks.
- Strengthen direct funding and partnerships with local actors, including civil society organizations, faith-based organizations and community organizations, recognizing their role in reaching the populations facing the greatest difficulties.

Private sector:

- Help keep healthy foods affordable, avoiding practices that needlessly increase costs and developing affordable alternatives for lower-income households.
- Strengthen local production and supply chains, working with small producers to improve the production, distribution and availability of nutritious foods.
- Invest in food chains that are more resilient to climate shocks, reducing disruptions in food production, transport and supply.
- Promote healthier food environments through responsible production, marketing and advertising practices, especially for products aimed at children and adolescents.
- Strengthen partnerships with governments and civil society, contributing resources, capabilities and innovation to scale up responses to food insecurity.

World Vision, NGOs and civil society:

- Strengthen and expand food and protection responses, prioritizing the households and adolescents facing the highest levels of food insecurity and multiple vulnerabilities.

- Complement immediate assistance with long-term strategies, strengthening livelihoods, household self-reliance and their capacity to cope with future crises.
- Promote community learning spaces and collective action against hunger and the impacts of climate change.
- Promote the meaningful participation of children and adolescents, incorporating their experiences and proposals into food security, protection and climate action programs.
- Continue generating evidence directly with children and adolescents and periodically monitor the relationship between food insecurity, climate and protection risks.

Organizations of girls, boys and adolescents:

- Promote spaces and mechanisms so that the voices of children and adolescents are heard and incorporated into the design, implementation and monitoring of policies, programs and initiatives related to the right to food and climate action.
- Promote child- and adolescent-led initiatives, in line with their interests and priorities, that allow them to exercise their leadership and help generate change in their schools, communities and other spaces.
- Strengthen the capacities of children's and adolescents' organizations for advocacy, facilitating opportunities to dialogue with authorities, community organizations and other responsible actors about their proposals and demands.

6. ANNEX: METHODOLOGY

Study design

A quantitative, cross-sectional, multi-country study was carried out to analyze the food insecurity situation of the participating households and to explore its relationship with the diets and well-being of girls, boys and adolescents (hereafter, children and adolescents), the coping strategies adopted by households, exposure to climate shocks and access to different forms of support.

The study had a primarily descriptive and analytical purpose, aimed at generating regional evidence for advocacy within the framework of World Vision's ENOUGH campaign. Owing to the design and the sampling strategy used, the results were not intended to produce estimates representative of the national population of the participating countries, but to characterize the situation of the households and children and adolescents included in the study and to identify relevant patterns and differences between groups.

The research considered two related units of analysis: the household, through information provided by an adult caregiver, and a child or adolescent from the same household. This design made it possible to complement information on the general conditions of the household with the experiences reported directly by adolescents.

Participants and sampling

The research was implemented in selected communities of the participating countries of Latin America and the Caribbean. Selection prioritized territories where World Vision had programmatic presence and that presented conditions relevant to the objectives of the study, including vulnerability to food insecurity, exposure to climate shocks and contexts of human mobility, among other factors.

Within the selected communities, households with at least one child or adolescent within the age range defined for the study took part. In each household, information was collected from one adult caregiver and one eligible child or adolescent.

The sample was non-probabilistic, so the results were interpreted as evidence corresponding to the populations and communities included in the research and not as estimates of national prevalence.

The design made it possible to examine differences according to characteristics considered relevant from an equity perspective, including sex/gender, age, ethnic belonging and human mobility status. Disaggregated analyses were carried out considering the number of observations available in each group and were interpreted with caution when sample sizes were small.

Instrument and data collection

Information was collected through a structured digital questionnaire, which included modules aimed at the adult caregiver and at the participating child or adolescent. The instrument combined internationally recognized scales with questions developed specifically to respond to the objectives of the research.

The questionnaire explored the following dimensions:

With adolescents:

- **Children's and adolescents' diets.** The food situation of children and adolescents was explored through indicators related to the diversity of foods consumed, number of meals and recent experiences of hunger. The study did not include anthropometric measurements and therefore did not estimate clinical or anthropometric indicators of malnutrition, such as stunting, wasting, underweight or overweight.

- **Impacts on children and adolescents.** Questions were included to identify possible consequences of food-related difficulties in different areas of adolescents' lives. These made it possible to examine, among other aspects, impacts related to their education, responsibilities inside or outside the home, and well-being.

With adult caregivers:

- **Household food insecurity.** The Food Insecurity Experience Scale (FIES) was used, made up of eight questions that explore experiences associated with increasing difficulties in accessing food. In this study, the questions referred to the household's experiences during the six months prior to the survey.

- **Coping strategies.** Questions adapted from the Reduced Coping Strategies Index (rCSI) were included to examine the strategies used by households in the face of difficulties in accessing food, including resorting to less preferred or cheaper foods, reducing portion sizes, reducing adults' consumption to prioritize children and adolescents, and borrowing food or money.

- **Climate shocks.** Information was collected on households' exposure to climate and environmental events and on the ways in which these had affected aspects related to their food security and livelihoods.

- **Support and social protection.** The questionnaire explored whether households had received different types of support during the months prior to the study, making it possible to analyze the reach of these mechanisms among households with different levels of food insecurity and among those whose children and adolescents had experienced different impacts.

Data processing and analysis

Once data collection was complete, the database was cleaned, validated and prepared, including a review of missing values, out-of-range responses, consistency between variables and unusual response patterns.

The main indicators used in the analysis were then constructed. Responses to the eight FIES items were used to characterize the severity of household food insecurity. Likewise, coping strategies were combined to construct the corresponding indicator based on the adapted rCSI. Indicators were also constructed on dietary diversity, meal frequency, experiences of hunger and impacts reported by adolescents.

The analysis was initially carried out using descriptive statistics, including frequencies, percentages and, where appropriate, measures of central tendency. Results were analyzed at the regional and country levels, and disaggregations were made according to relevant characteristics of households and children and adolescents.

Bivariate analyses were then carried out to examine the relationships between the main indicators. Among other aspects, the association between the severity of food insecurity and coping strategies was explored; differences by ethnic belonging, human mobility and household composition; the relationship between food insecurity and the impacts experienced by adolescents; and access to support according to the level of food insecurity and the presence of impacts on children and adolescents.

Where appropriate, statistical tests of association and correlation were used to determine whether the differences observed were statistically significant. A significance level of $p < .05$ was used.

Ethical and safeguarding considerations

The research was carried out in accordance with ethical principles for research with children and adolescents and with World Vision's safeguarding protocols. Participation was voluntary, and informed consent was obtained from the responsible adult and assent from the child or adolescent. Participants were informed about the purpose of the study, the use of the information and their right not to answer questions or to withdraw at any time.

The questionnaire was designed to minimize possible risks and did not include direct questions to children and adolescents about experiences of violence. Measures were also taken to guarantee the privacy and confidentiality of the information, and the results were analyzed and presented in aggregate form to avoid identifying participants.

Likewise, the presentation and interpretation of the findings followed a non-stigmatization approach, avoiding attributing food insecurity or its impacts to individual, ethnic, cultural or mobility characteristics. Differences between groups were interpreted considering the structural inequalities and the social, economic and environmental contexts in which they occur.

Interpretation and limitations

The results should be interpreted taking into account the cross-sectional design and the sampling strategy of the study. First, because the sample is non-probabilistic and concentrated in communities where World Vision has a presence, the results cannot be generalized to the national population of the participating countries.

Second, the cross-sectional nature of the study makes it possible to identify associations between variables—for example, between food insecurity, coping strategies and impacts on adolescents—but does not allow causal relationships to be established.

Finally, some subgroups had considerably smaller sample sizes than others. The differences observed by ethnic belonging, human mobility or other characteristics must therefore be interpreted considering both the magnitude of the differences and the number of participants in each group.

Despite these limitations, the use of a common instrument across the participating countries made it possible to identify regional patterns, explore inequalities between groups and generate comparable evidence on households' experiences of food insecurity and their implications for children and adolescents.

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