



ASIA AND THE PACIFIC

| | 2012 | 2011 | 2010 |
|--|---------|---------|---------|
| World Vision activities | | | |
| Total projects in region | 314 | 284 | 324 |
| Number of ADPs supported in region | 72 | 75 | 81 |
| Number of non-ADP projects in region | 142 | 142 | 243 |
| Number of AusAID and multilateral projects | 100 | 67 | 57 |
| Total disbursed in region (cash, food and goods) | \$91.8m | \$86.0m | \$74.7m |

ASIA

| 2012 | 2011 | 2010 |
|------|---|--|
| | | |
| 12 | 16 | 20 |
| 12 | П | 11 |
| 28 | 25 | 24 |
| 10 | 9 | 9 |
| 33 | 27 | 39 |
| 24 | 24 | 25 |
| 1 | I | _ |
| 26 | 20 | 24 |
| 10 | П | 14 |
| 22 | 23 | 24 |
| 7 | 8 | 6 |
| 8 | 9 | 12 |
| 19 | 19 | 25 |
| 10 | 12 | 10 |
| 23 | 18 | 21 |
| | 12 12 28 10 33 24 1 26 10 22 7 8 19 | 12 16 12 11 28 25 10 9 33 27 24 24 1 1 26 20 10 11 22 23 7 8 8 9 19 19 10 12 |

regional footprint

75.

Key development challenges in this region

- Access to water, sanitation and hygiene remains low. Among the earth's 884 million people without access to improved sources of drinking water, 63 percent live in Asia and 25 percent in South Asia. The poorest 40 percent of people in South Asia have barely benefited from improvements to sanitation².
- While progress in South Asia has been made, two in five children are still malnourished. In India, 69 million children under five years old are underweight and 35 percent of children under five suffer from mild to severe stunting.
- Marginalised groups such as girls and ethnic minority populations are still facing challenges to access quality education. Gender-based violence is a significant issue.
- Very high incidences of child protection issues, including child labour exploitation and abuse are evident, particularly in South Asia, Indonesia and the Philippines. According to the Human Development Index indices, Bangladesh and Nepal are in the Least Developed category, with India, Indonesia, Sri Lanka and the Philippines all in the Developing Country category.

STRATEGIC PRIORITIES

In 2012, World Vision Australia supported programs in Asia focusing on the following priority areas:

Child rights and protection

Child protection programming includes any project designed to "prevent, protect and restore" regarding issues of violence, abuse or exploitation. World Vision Australia is the implementing agency for the Prevention Pillar of Project Childhood, a \$7.5 million AusAID initiative to combat the sexual exploitation of children in tourism in the Mekong sub-region. It brings together the UN Office on Drugs and Crime, Interpol and World Vision to address the serious issue of sexual exploitation of children in travel and tourism.

The project operates in Cambodia, Vietnam, Thailand and Laos and takes a dual prevention and protection approach. By targeting children and their families, community leaders and child protection duty bearers, government, the tourism industry and the broader private sector, we are determined to keep children safe. During 2012, the project advanced key partnerships with government and the private sector; developed a public child-safe tourism campaign; and rolled out training and education activities in communities and the tourism sector.

World Vision Australia, along with World Vision offices in Canada, Japan and Taiwan, continues to support the End Trafficking in Persons (ETIP) program, which focuses on community-based child protection, rehabilitating children and adults who have been rescued from exploitation, and assisting regional governments to strengthen and implement anti-trafficking plans. Countries benefiting from this project are Cambodia, Thailand, Laos, Vietnam, Myanmar and southern China. ETIP is working towards completing a baseline study in partnership with a university to build up the evidence base for the approach undertaken.

We have also commenced supporting the pilot of the Child Protection and Advocacy model in Indonesia, Vietnam, Myanmar and Mongolia. Specific interventions focus on strengthening the child protection system at the community level, thus empowering local communities to protect children from abuse, neglect and exploitation.

Our Community Care for Children project, supported by AusAID and Jetstar, was completed in 2012. Over the last four years, the project has targeted vulnerable rural children who have lost

WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation Progress on Drinking Water and Sanitation 2012—Update.



UNICEF and WHO, JMP Thematic Report on Drinking Water 2011.

In Nepal, our work to improve maternal and child health provides a significant contribution to improving health in the remote region of Jumla. Our project will benefit 1,564 pregnant and lactating women, 8,693 children aged under five, and about 8,000 parents.

In central Sri Lanka, we are implementing a large water, sanitation and hygiene project with financial support from AusAID. This project has provided access to water and sanitation among tea estate workers and has made a significant contribution to reducing water-related diseases, as well as promoting privacy and dignity for women and girls.

Even though maternal and child health and nutrition status has improved dramatically in the past decade in Indonesia, progress in the Papua region has been minimal. With the high, under-five mortality rate of 64 per 1,000 live births, and a prevalence of 35 percent of Papuan children under five stunted, World Vision Australia recognises the need to invest in maternal and child health and nutrition. Building on the findings from a high impact community outreach project in the mountainous districts of Papua, the Jayawijaya Maternal, Newborn and Child Health and Nutrition Project will integrate across five long-term development programs.

Building community resilience

Our support for a "disability mainstreaming" project in Agent Orange-affected areas of central Vietnam has created positive changes in attitude from communities, government and schools over the past three years. Teachers have been trained to include children with disabilities in their classrooms, consequently increasing student attendance. Families with severely disabled children have been trained in basic rehabilitation that is starting to increase children's mobility. Specific support groups linking disabled adults with income generation initiatives have increased those people's self-esteem and profile within the community.

Several of World Vision Australia's projects in the region have helped people to prepare for and better recover from natural disasters. In Indonesia, several new projects have enabled local communities to adapt to various changes in their physical environment. These projects aim to improve food diversity, increase crop yields, replenish natural plant species and advocate for policy change at the local level.

In Mongolia, we are supporting efforts to improve community resilience to natural disasters caused by *dzud* (a local term for the compounding effects of drought, extreme cold, and heavy snowfall). As the country has faced *dzud* more frequently over recent years, millions of animals have been destroyed – important economic assets for nomadic herders. Targeting 1,500 households, our work aims to improve community, government and household capacity to prepare and respond to such emergencies. This work builds on similar interventions that we have carried out in Vietnam, and most recently, in Myanmar where our initiative benefited 95,694 people, including 48,757 women and girls from 94 villages in four townships. The final evaluation project found that communities were taking steps to prepare themselves through pre-positioning of supplies and were more alert to early warnings.

World Vision Australia has also worked with World Vision India to create a sustainable development project in an ADP in remote Rajasthan with plans to scale up to other ADPs.

A climate change assessment project in Nepal is currently at pilot stage and will work to strengthen our partners', and the government's capacity for data collection and analysis. Through this project, we hope to gain a good understanding of weather patterns based on scientific data, which will help our local partner to design development interventions that are adaptive to climate change.

Securing household livelihoods

World Vision India's project to address malnutrition in 92 ADPs includes eight funded by World Vision Australia. With a focus on improving household livelihoods and income levels, each approach is varied according to the context. In the urban Mumbai West ADP, youth unemployment and underemployment are addressed by providing vocational training and small enterprise support



Our support of World Vision Sri Lanka has improved the livelihoods of communities in Eastern Province through two special projects, which have benefited 1,600 households over 10 districts. These projects in post-conflict areas have adopted a permaculture approach, working with smallholders and poor communities to improve their food security. The evaluation of one project found that 87 percent of households produced more agricultural products than before and sold the surplus to buy other food necessities. Households reported having more food to eat from their gardens and having more money to save.

Asia has experienced rapid urbanisation and we have supported efforts in Cambodia, Indonesia, India and Bangladesh to adapt to this fast-changing context. In Cambodia, our work has focused on addressing land conflict in the urban slums. In Bangladesh, we are identifying new ways of addressing social and complex development issues in urban slums. We continue to support innovative approaches to urban programming with pilot learning sites in Indonesia, Bangladesh and India. These pilots allow national offices to trial new ways of working in urban contexts with their diverse populations and to leverage resources of ADPs and other partners.

On Indonesia's Flores Island, we have empowered local communities to improve their capacity to provide for their children; particularly, to cover the costs of healthcare and education. Using the Local Value Chain Development approach we have supported farmers to improve their production of agricultural products, including cashews, cocoa, coffee, coconut and candlenut, as well as to develop and strengthen relationships with markets.

Advocating for change

An evaluation of our Land Management Education project in northern Cambodia showed that communities were increasingly under threat of losing land to economic land concessions. Communities in Preah Vihear province have become more organised to present their concerns to government at both provincial and national level under our project. Their understanding of their rights under the law has made them more confident to challenge illegal land acquisitions and to push for community-protected areas where deforestation will not occur.

In India, World Vision supports community members to use the Right to Information law to identify commitments that the government has not met, such as building of roads and expenditure on infrastructure.

We continue to assist in strengthening communities, giving them the opportunity to have their voices heard and to monitor local government spending on health and education, using a proven approach called "Citizen Voice and Action". Citizen Voice and Action is a programming approach that improves the dialogue between communities and their governments. Local communities are encouraged to hold their governments accountable to improve the accessibility and quality of public services like healthcare and education.

This same approach is being integrated into our advocacy work in Cambodia and Nepal, as part of our large-scale, Child Health Now support efforts. This campaign aims at improving child health through influencing government to take action to provide improved maternal, newborn and child health services.

The Child Health Now campaign is also advocating for improved health and nutrition policy in Indonesia. Working at the national, provincial and district levels of government, we have contributed to the improved implementation of four policies, including the regulations towards the Golden Standard of Infant Feeding. The Golden Standard includes the promotion and protection of early initiation of breastfeeding, exclusive breastfeeding until six months, and continued breastfeeding until two years.

We were instrumental in establishing the Breastfeeding Advocacy Coalition, which promotes the implementation of government regulations on exclusive breastfeeding.



80.

regional footprint

PACIFIC 81.

| Number of projects | 2012 | 2011 | 2010 |
|----------------------------------|------|------|------|
| Country | | | |
| Pacific (multi-country projects) | 1 | 3 | 2 |
| Papua New Guinea | 26 | 18 | 20 |
| Solomon Islands | 20 | 15 | 15 |
| Timor-Leste | 13 | 6 | 14 |
| Vanuatu | 9 | 9 | 8 |

Key development challenges in this region

- Poor maternal, newborn and child health statistics. For example, Papua New Guinea's (PNG) maternal mortality rate, at 733 deaths per 100,000 live births, is one of the highest rates in the Asia-Pacific region.
- Access to safe and regular water supply and clean sanitation is limited, particularly in rural areas, where less than 60 percent of the population have access to safe water and less than 40 percent have access to clean sanitation.
- · High population growth rates and increasing urbanisation create strain on education, health and welfare services, and employment across the region.
- Adult literacy remains poor. Less than 70 percent of adults in PNG and less than 80 percent of adults in the Solomon Islands are literate.
- The Pacific region, including Melanesia, is particularly prone to natural disasters. High exposure to climate risks and limited adaptive capacity make Pacific Island countries particularly vulnerable to climate change and sea level rise.
- · Health issues, including the prevalence of HIV and AIDS, represent significant threats to individual, community and national wellbeing in the region.

STRATEGIC PRIORITIES

In 2012, World Vision Australia supported programs in the Pacific focusing on the following priority areas:

Improving health and responding to HIV and AIDS

HIV and AIDS and other sexually transmitted diseases challenge development programming in PNG, particularly in urban areas. Extremely poor maternal, newborn and child health and nutrition are significant regional challenges across Melanesia, along with slow progress in accessibility to safe water supply, improved hygiene and sanitation.

World Vision Australia-supported initiatives to address these challenges include:

- The refocused Port Moresby HIV and Health Project (People Living Positively III) to strengthen community-based care in PNG. For the past four years, the Women Are a Priority project has focused on HIV- and gender-based violence and discrimination. This project came to an end in 2012, with an evaluation planned for early 2013. Key findings from this project and the Channels of Hope for Gender project in the Solomon Islands will be used to extend our engagement in Melanesia (and Timor-Leste) under the new, Pacific Timor-Leste office in future years.
- In the Maternal, Newborn and Child Health (MNCH) program, four new MNCH projects have been developed across PNG (Madang), the Solomon Islands (Makira and Malaita) and Vanuatu



(Tanna). A catalogue of comparative data across three Melanesian countries has now been collated, providing analytical information about the impact of our MNCH programs. In addition, we are now supporting another two MNCH projects in Bougainville and Port Moresby. Potential collaboration with World Vision New Zealand on an expansion project in Madang may commence in 2013.

 The Water Supply, Sanitation and Hygiene (WASH) program has continued our focus on improving hygiene behaviour across the Pacific. Our focus remains on improving sanitation practices and access to clean water supply across PNG, the Solomon Islands and Vanuatu. Our program's success has been recognised by the Solomon Islands Government, which has appointed World Vision as the preferred provider of community-based water, sanitation and hygiene initiatives.

During 2012, World Vision Australia also provided significant support to World Vision PNG in its work to combat tuberculosis. In 2011, World Vision PNG achieved Primary Recipient Status for funding from the Global Fund to Fight AIDS, Tuberculosis and Malaria. We have provided matched funding and technical support to extend this work, and also supported the AusAID-funded TB project in Western Province, PNG. As the region is Australia's nearest foreign landmass, the project has received much media attention.

Building stronger communities

In 2012, we reinforced our focus on literacy and access to education, combating gender-based violence, youth empowerment and economic development in the Pacific region.

Through three new early childhood education projects started in 2011 in PNG, the Solomon Islands and Vanuatu, World Vision Australia is improving access to education, especially for girls. We are also aiding the successful transition of young children into formal education. AusAID has taken a particular interest in our Makira Girl Child Reading and Rescue project. The key findings from the project were presented to AusAID and other Pacific stakeholders as a precursor to the launch of AusAID's Early Childhood Development fund for the Pacific in 2013.

In PNG, the Port Moresby Children's Community Education Project has continued through collaboration with local NGO, Buk bilong Pikinini. This priority project seeks to establish local libraries in squatter settlements, encourages reading, runs literacy activities for pre-schoolers and their parents, and provides a bridge to reintegrate primary school "dropouts" back into formal education. Working with parents as "first teachers" continues, as do efforts to improve adult literacy – recognising that literate parents are better able to support their children's reading efforts and their wellbeing.

Acknowledging the appalling rates of gender violence in the Pacific region, we have launched a global initiative to adapt World Vision's "Channels of Hope for Gender". Two-thirds of women in the region have experienced direct violence at some time in their lives. The initiative specifically addresses genderbased violence in Melanesia through our Community Vision 4 Change project in Honiara, using Biblical and Christian messages to influence social change in Christian communities. Anecdotal evidence points to its significant impact – whether it's applied to attitudes towards HIV or gender issues – as it directly addresses the values that underlie human behaviour in a faith-based environment.

Local police officers have also been trained in gender-based violence issues. We have also used the Channels of Hope program in a new gender project in Madang, Bungim Famili na Komuniti (Bringing Family and Community Together) to run for the next five years.

The Solomon Islands' urban youth project has entered its second year. Our training activities have resulted in employment for 14 young people and in income-generating activities for two youth groups. In Madang, PNG Harmoni Musik, a project focused on youth empowerment through music, entered its final year in 2012 with a music video finale. In 2012, our youth projects grew to include a street kids project in Port Moresby and the Pikinini Lukaotem Project Vanuatu – a whole of community care program for children in urban areas. While both projects are at an early stage, we believe they are innovative initiatives, which intentionally seek to maximise the influence of local churches to support the increasing youth populations in Pacific capitals.

World Vision Australia continues to support economic development initiatives in the Solomon Islands. Through collaborative programs and joint training, World Vision Australia and World Vision New Zealand have assisted communities to access markets for their produce and understand savings schemes.

Strengthening community resilience

In 2012, we have continued to help strengthen community resilience to natural disasters and build capacity to adapt to climate change impacts. In PNG, the Usino-Bundi/Upper Ramu Community Resilience and Livelihoods Project started in late 2011, introducing Citizen Voice and Action to communities, conducting basic bookkeeping and personal viability training.

Similarly, the Solomon Islands/Malaita Community Resilience and Livelihoods Project assisted communities to mitigate climate change effects on food and livelihood security by improving opportunities for rural populations. In 2012, the project reported some key changes in behaviour, resulting from increased understanding and awareness of risk and disaster risk management. These changes included planning for the longer term risks to livelihoods and food security resulting from climate change.

In Vanuatu, the Community-Based Disaster Risk Management program also assisted communities to manage their preparation for and response to disasters, linking them to the provincial government's emergency response programs. In 2012, the mid-term review indicated that hazard awareness had increased and individuals and communities are implementing ways to mitigate the risks.

Advocating for change

Efforts to improve citizen engagement in civil affairs (Kommuniti Taukaut) continued in 2012 with a rollout of Citizen Voice and Action training to communities in Madang, PNG. Independent research found that the strongest determinant of service delivery was that group action – even the perception of group action – had a direct impact on motivating Members of Parliament to improve services.

Following the release of the joint World Vision Australia, Burnet Institute and Compass report and policy brief, "Improving Maternal, Newborn and Child Health in PNG through Family and Community Health Care", advocacy on maternal, newborn and child health has been increased. The first workshop dedicated to the work of Village Health Volunteers was held in Port Moresby in February 2012. Attended by PNG Department of Health officials, the Minister of Health, AusAID, donors, and the volunteers themselves, one of the key recommendations of the workshop was the need to address policy, budget and resourcing issues of village health volunteers.

Evaluations and learning in the Pacific

Following our commitment of an additional US\$13.5 million in funding to Pacific (PNG, Solomon Islands, and Vanuatu) programming in 2012, World Vision Australia has supported the consequent designs of 14 new projects. Another 14 projects are expected to follow in 2013. In addition, we have supported six end-of-project evaluations in 2012, with their results and "lessons learnt" still being processed.

Some of the key findings of these evaluations point to the ongoing need to: ensure effective community engagement and meaningful participation to secure success; engage with provincial and national decision makers to ensure sustainability; improve data collection and evidence building to drive future planning; and the absolute necessity of flexibility of funding and programming to ensure responsiveness to community changes.

In anticipation of the release of significant funding for WASH in 2012, World Vision Australia supported PNG and Solomon Islands in a WASH workshop in Brisbane in August 2012.





AFRICA

| | 2012 | 2011 | 2010 |
|--|----------|---------|---------|
| World Vision activities | | | |
| Total projects in region | 335 | 312 | 351 |
| Number of ADPs supported in region | 98 | 101 | 95 |
| Number of non-ADP projects in region | 151 | 138 | 256 |
| Number of AusAID and multilateral projects | 86 | 73 | 32 |
| Total disbursed in region (cash, food and goods) | \$105.4m | \$97.4m | \$91.3m |

| Number of projects | 2012 | 2011 | 2010 |
|--|------|------|------|
| Country | | | |
| Africa (multi country projects) | 7 | 15 | 20 |
| East Africa (multi country projects) | 10 | 4 | 2 |
| Southern Africa (multi country projects) | 5 | 3 | 2 |
| West Africa (multi country projects) | 2 | 1 | 3 |
| Angola | _ | _ | I |
| Burundi | 8 | 8 | 4 |
| Chad | 7 | 5 | 7 |
| Democratic Republic of Congo | П | П | 9 |
| Ethiopia | 28 | 30 | 31 |
| Ghana | 6 | 6 | 6 |
| Kenya | 40 | 29 | 29 |
| Lesotho | 12 | 15 | 17 |
| Malawi | 16 | 15 | 20 |
| Mali | 3 | I | I |
| Mauritania | _ | I | I |
| Mozambique | 15 | 16 | 21 |
| Niger | _ | 2 | 3 |
| Northern Sudan | 7 | 8 | 13 |
| Rwanda | 14 | 15 | 16 |
| Senegal | 14 | 12 | 14 |

| Number of projects | 2012 | 2011 | 2010 |
|--------------------|------|------|------|
| Country | | | |
| Somalia | 7 | 5 | 12 |
| South Africa | 10 | 7 | 2 |
| Sudan | 12 | 13 | 10 |
| Swaziland | 10 | П | 16 |
| Tanzania | 28 | 19 | 17 |
| Uganda | 28 | 27 | 26 |
| Zambia | 17 | 16 | 21 |
| Zimbabwe | 18 | 17 | 24 |

Key development challenges in this region

- Erratic rainfall, persistent drought, and floods have led to heightened food insecurity in many African countries. This necessitated humanitarian responses in east, west and southern Africa in 2012. World Vision Australia focused on meeting the immediate needs of children and their families, then building household resilience against longer term shocks.
- Africa still experiences some of the world's worst outcomes for maternal and child health. In particular, child malnutrition presents a significant challenge. In Sub-Saharan Africa, 43 percent of children are impacted by stunted growth the highest rate globally. Detrimental effects include slower cognitive development, lower school achievement, reduced reproductive health of girls and decreased economic productivity in adulthood.
- Despite free primary school education in most African countries, many children face challenges in attending schools. Girls and children with a disability are at a greater disadvantage. A lack of qualified teachers and teaching materials contributes to poor education outcomes.
- Increased mining activity in some African countries, such as Mozambique, presents potential threats to the achievements of development organisations, including World Vision Australia. As land is reclaimed for mineral resources, communities are often separated and resettled.
- Political instability restricts humanitarian opportunities in countries including Somalia, the Democratic Republic of Congo, Sudan and South Sudan. Rapid social changes and responses to them may present further challenges to regional security, particularly in East Africa.

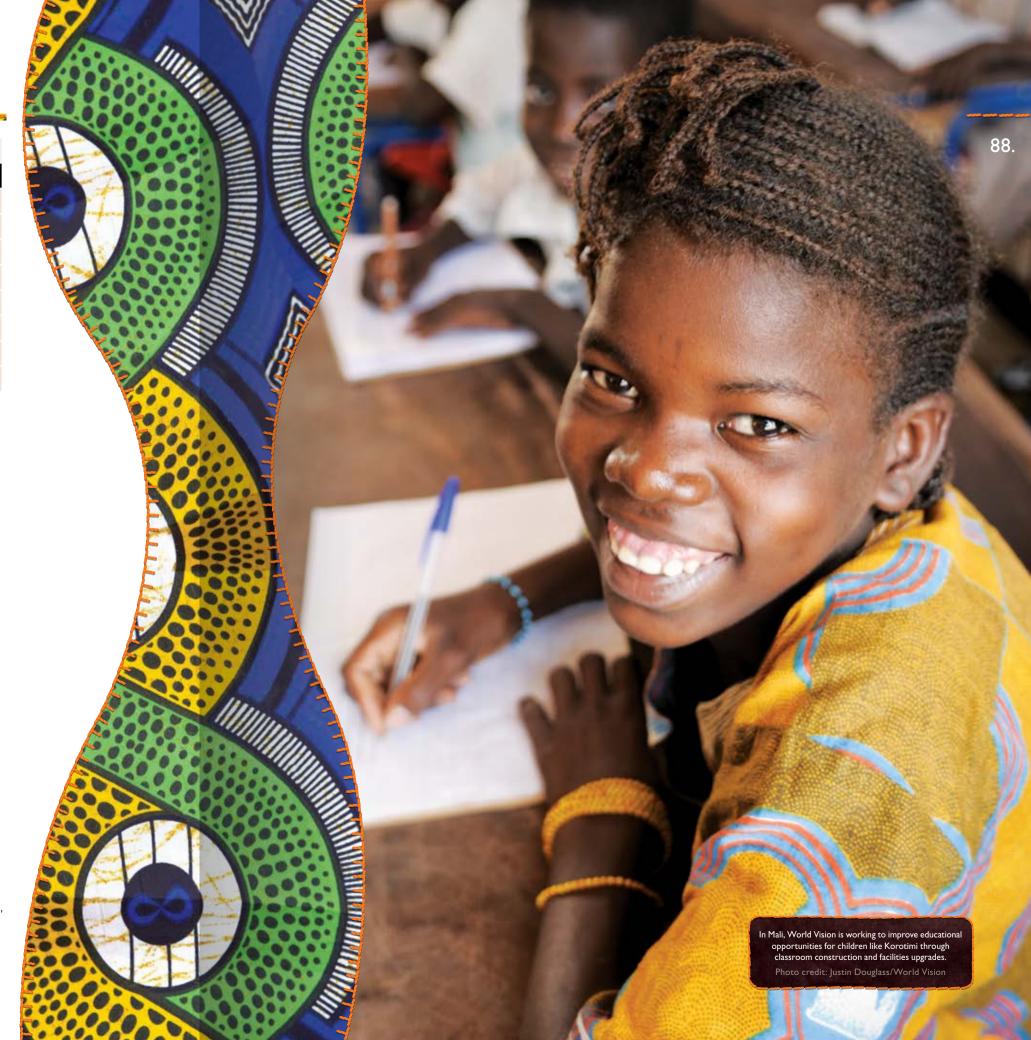
STRATEGIC PRIORITIES

In 2012, World Vision Australia supported programs in Africa focusing on the following priority areas:

Food security and livelihoods

In Lesotho, the Farmer Managed Natural Regeneration Project (FMNR) has focused on the impact that local communities can have on the environment, natural resources and livelihoods. By working with farmers, World Vision has helped them to reconsider how to manage and best utilise shared resources including soil, water, grassland and forests. Communities are increasing household resilience, reversing environmental degradation and facilitating adaptation to climate change.

The Humbo Community Managed Natural Regeneration Project in Ethiopia has restored 2,728 hectares of degraded forestland. The resulting ecological and economic benefits to the community have included fodder for livestock, abundant firewood and new fruit trees. Erosion has also been



reduced. Through collaboration with the World Bank, we have ensured that carbon credits can be sold by local projects, creating an additional economic benefit to the community.

By concentrating on market linkages, we are helping farmers to ensure crop value and sustainability long term. In Ethiopia, the Kochore ADP has created a website – **yirgacheffeunion.com** – to encourage promotion to markets and consumers outside of the region. This website is also linked to others, such as Hugh Jackman's and Laughing Man Coffee. Cooperative members have also featured in a promotion for the International Year of the Co-op.

Improving food security, environmental preservation and improved income for farmers have been the focus of the Beysatol project in the Kaffrine region of Senegal. FMNR has resulted in vegetation covering 39,315 hectares. Soil fertility has improved and agricultural yields have increased. Our support activities, including breeding, market gardening and beekeeping, have also improved the economic power of households, and women in particular.

Our evaluation of the first phase of Muzarabani ADP in Zimbabwe indicates significant success in improving the adoption and production of drought-resistant crops to improve household food security. Households growing sorghum increased from 36 percent in 2007 to 56 percent in 2012. Over the same period, households harvesting between 40-100 50-kilogram bags of cereal increased from 6 percent to 16 percent.

Maternal, newborn and child health

With the assistance of World Vision Australia, World Vision Swaziland continues to support improved health service provision; to raise awareness about immunisation, safe pregnancy and delivery; and to promote breastfeeding, infant and child nutrition and vitamin A supplementation. Our sponsorship activities increased child immunisation coverage in Macudvulwini ADP from 80 percent in 2008 to 95 percent in 2012.

Our ADP in Aboke in northern Uganda has substantially improved maternal and child health outcomes. A project evaluation revealed that the proportion of women accessing essential antenatal services increased from 37 percent at project inception to 89 percent after five years. The number of households with at least one insecticide-treated mosquito net increased from 30 percent to 74 percent, contributing to a reduction in malaria amongst children under five years of age. The prevalence of diarrhoea among children under five in target communities also fell from 35 percent to 19 percent. These positive outcomes were due to successful partnerships between World Vision and local government structures, such as Village Health Teams.

The East Africa Maternal, Newborn and Child Health project, funded by the AusAlD, Australia Africa Community Engagement Scheme, is demonstrating positive results in its early stages. Implemented in four countries across East Africa – Kenya, Rwanda, Tanzania and Uganda – the project aims to reduce maternal and under five child mortality rates. The project involves strengthening and educating local health workers, promoting sustainable nutrition and market diversity, and education and training in water supply and sanitation in selected communities. Our achievements have included more consistent drug stocks at clinics in Kilifi District, Kenya, and senior staff mentoring workers from six healthcare centres in antenatal care and delivery in Uganda.

Education

The Pader Improved Health and Education Project in northern Uganda has sought to improve the learning environment in selected schools and to improve the health of youth returning to the area after displacement by internal conflict. Results have revealed that over the three-year project, the teacher-pupil ratio decreased from 1:84 in 2009 to 1:72 in 2012. The number of pupils per classroom also decreased from 95 to 71 over the same period. Along with improved learning environments, we have sought to increase school enrolments and inclusion, with 15 percent of enrolments being children with a disability.

World Vision has supported communities to lobby and advocate for children's rights to access and complete quality education in Nkozi ADP in central Uganda. As a result of community efforts, school



feeding programs have been established in 14 out of 18 government primary schools, contributing in turn to improved performance and retention in primary pupils. Parents, guardians and school management committees empowered through leadership and monitoring skills are more involved in, and supportive of, their children's education.

In Kenya, increased interest in education, improved performance, and improved health and behaviour practices have been generated at our community learning centres. In Kumpa, Maasai farmers – traditionally pastoralists – have now embraced crop farming as a new source of livelihood. The Imejooli men's group are now keeping computer records of their livestock and transactions at the centres. They are even developing a website as part of their marketing strategy.

Child protection

In Ethiopia, a child protection project in Adama and Angolela ADPs has worked to combat child labour and trafficking. Communities are now mindful of the illegality of child trafficking, child labour, and child exploitation and abuse, and have been identifying children who are engaged in excessive child labour. Through child rights clubs and child parliaments in schools, children are now openly discussing their concerns and advocating for others.

Activities promoting child rights and child protection in Muzarabani ADP in Zimbabwe have led to increased willingness of communities to report child abuse cases to relevant authorities. Training facilitated by the Victim Friendly Unit of the Zimbabwe Police Force, as well as campaigns on child protection undertaken in schools, have also educated and empowered communities.

Cross-cutting themes (especially disability, gender and child protection)

The Masibambisane Working Together to End Domestic Violence project in South Africa aims to transform gender relations to prevent domestic violence. Victims are also reintegrated into society as survivors. Implemented alongside the Men As Partners project, we are promoting the active participation of men in addressing gender-based violence by challenging and changing attitudes and behaviours.

HUMANITARIAN EMERGENCY ASSISTANCE

West Africa food crisis

Droughts, soaring food prices, locusts and conflict have left almost 19 million people across five West African countries vulnerable to massive food shortages. With the generosity of donors and funding from governments, we are helping more than 1.1 million people in Niger, Mali, Chad, Mauritania and Senegal. Emergency food, water, sanitation and health are integral to the assistance.

Projects such as home vegetable gardening and the creation of "cereal banks" are part of our Disaster Risk Reduction work to build resilience in communities experiencing an increasing frequency of drought, floods and related food crises.

Our activities in West Africa include:

- child nutrition programs
- digging boreholes
- vaccinating livestock
- food-for-work projects
- cash-for-work projects
- assisting cereal banks
- provision of seeds and tools

Our regional footprint

90.

regional footprint

91.

A mental health and psychosocial support technical advisor was seconded to UNICEF to support the implementation of psychosocial care for malnourished infants and children in West Africa's food crisis response. The World Vision Australia Humanitarian Protection Adviser supported World Vision Mali in response to the displacement of people due to the West Africa food crisis and conflict.

Positive outcomes

Our partnership with the World Food Programme on Cash-for-Work and Food-for-Work projects in Niger resulted in many community members remaining in their villages to take part.

World Vision was among the first organisations to assist the Government of Niger to address acute malnutrition. Last year, of the 6,330 severely acute malnourished children in Niger, 5,451 have been rehabilitated and 25,162 moderately acute malnourished children were also cared for.

In Chad, we partnered with UNICEF to set up the first Community-Based Management of Acute Malnutrition program in the country.

Communities are better equipped to cope with food crises due to our vegetable garden projects, set up as medium-to longer-term interventions in the face of reoccurring drought.

Horn of Africa drought

During 2011, recurrent drought conditions across East Africa, combined with rising food prices and conflict, created a humanitarian emergency of unimaginable scale. At its peak, over 13 million people were unable to access food on a regular basis. Our 18-month emergency response assisted some 2.5 million people across Kenya, Ethiopia, Somalia and Tanzania. After one year, by July 2012, just over 2 million people had been assisted.

Activities have included:

- food distributions for pregnant and lactating mothers, children, elderly and other vulnerable groups;
- food-for-work projects that benefit the community in exchange for food;
- assessment, monitoring and treatment of malnourished children;
- health checks, immunisations, maternal and child healthcare, mobile health clinics, and health worker training;
- water trucking (short-term), then water borehole drilling;
- construction of water points and toilets;
- installation of water tanks at health clinics and primary schools;
- distribution of fuel-efficient stoves to minimise cutting of trees for fuel;
- distribution of seeds, seedlings and tools to farmers;
- distribution of livestock to pastoralists, de-worming and other veterinarian support to animals;
- small business training for women;
- distribution of relief items, including mosquito nets, cooking sets, hygiene kits and tarpaulins to 30,000 Somali refugees;
- training of child protection officers in communities;
- peace committees and peace promotion meetings reached 100,000 people in Kenya; and
- establishment of Child Friendly Spaces.





LATIN AMERICA AND THE CARIBBEAN

| | 2012 | 2011 | 2010 |
|--|---------|---------|-----------------------|
| World Vision activities | | | |
| Total projects in region | 119 | 122 | 115 |
| Number of ADPs supported in region | 58 | 60 | 56 |
| Number of non-ADP projects in region | 51 | 46 | 59 (including AusAID) |
| Number of AusAID and multilateral projects | 10 | 16 | 12 |
| Total disbursed in region (cash, food and goods) | \$27.4m | \$35.5m | \$29.8m |

| Number of projects | 2012 | 2011 | 2010 |
|--|------|------|------|
| Country | | | |
| Latin America and Caribbean (multi-country projects) | 4 | 5 | 5 |
| Bolivia | 10 | 9 | 7 |
| Brazil | 20 | 18 | 15 |
| Chile | 10 | 7 | 8 |
| Colombia | 6 | 7 | 8 |
| Ecuador | П | 10 | 9 |
| Guatemala | 6 | 7 | 9 |
| Haiti | 6 | 16 | 16 |
| Honduras | 17 | 13 | 12 |
| Nicaragua | 10 | 12 | 10 |
| Peru | 19 | 18 | 8 |

Key development challenges in this region

- Latin America and the Caribbean remains the most unequal region in the world. The richest 10 percent of the population earn 48 percent of total income, while the poorest 10 percent earn only 1.6 percent. Nearly one out of every three Latin Americans is poor and one out of every eight is extremely poor. An estimated 200 million people live in poverty and 70 million are homeless.
- Violence and crime are worsening, making Latin America and the Caribbean one of the most violent
 regions in the world. Young people, a very high proportion of the region's population, are turning to
 organised crime in an attempt to overcome poverty. There are also high levels of child abuse and violence
 against women.
- The region faces the constant prospect of natural disasters, such as earthquakes, floods, droughts and hurricanes. Many countries in the region are increasingly experiencing the effects of climate change.

• Latin America continues to have a high rate of urbanisation. By 2015, it is estimated that 69 percent of the region will be classified as urban. The vast and rapid rural migration to the cities has created massive slum areas where people live in very precarious conditions, often without access to essential services or job opportunities, and are vulnerable to becoming victims of gang violence and crime.

STRATEGIC PRIORITIES

In 2012, World Vision Australia supported programs in Latin America and the Caribbean focusing on the following priority areas:

Child rights and protection

In line with our Field Ministry Strategy and the new Latin America and the Caribbean regional strategy, World Vision Australia has supported child protection and participation projects, aiming to address child wellbeing issues in the region. In 2012, we prioritised regional and individual country projects, which target child protection and participation with a key focus on child rights, good governance, and social accountability.

One project in Nicaragua is gradually reducing the number of children and adolescents doing manual work and advocating their right to education and play. By raising awareness among community leaders about children's rights and the negative effects of child labour, we are helping to return children to education. We focused on 300 children who worked regularly, and received improper or no education, and provided them with reinforcement lessons to help them to return to school. Youth received technical vocational training, greatly improving their chances of finding a proper job. The majority of the 300 children now attend school.

In Brazil, the Youth Monitoring of Public Policies project has helped children, adolescents and youth to develop the independence to engage in the public sphere. Improved access to education, water, sanitation and health services has resulted from 250 young people conducting social audits of public services in their communities. In Rio de Janeiro, we have educated young people to lobby government, thus improving local water supply; while in Ponto dos Volantes, water tanks have now been constructed to irrigate rural properties. Young people are now viewed by local communities as valued and positive agents for change and have a vital role in procuring necessary resources for communities.

World Vision's advocacy project in Bolivia is building the capacity of children and youth networks to engage and influence the development agenda of their local governments. By empowering children and youth to negotiate and articulate their development priorities, we are ensuring the authorities take their voices into account. The project is also concurrently training and supporting municipal authorities to improve their engagement with civil society, particularly the most vulnerable, children and women.

The ongoing civil conflict in Colombia has left many children and adolescents without a sense of belonging. Through projects supported by World Vision Australia, World Vision Colombia facilitates child, adolescent and youth groups; clubs; and networks, which provide participants with a sense of belonging to a community. Currently, over 17,000 young people participate in the Peace Builders network in 10 cities throughout Colombia. As a result of these networks, a number of young people were elected to the municipal youth councils in 2011 and are now key decision makers in their communities. Our projects have further encouraged the young people through their engagement in community activities, including Peace Week, Community Clean Up Days, sports and cultural events.

In addition, World Vision Australia is funding a regional initiative to build capacity and strengthen child protection systems to prevent, protect and respond to abuse, neglect, exploitation and other forms of violence against children in the region. One remaining important focus is the improvement of maternal and child health by reducing malnutrition and infant morbidity.

In Guatemala, World Vision's health projects have increased families' knowledge of health and nutrition, provided access to drinkable water, and improved sanitation conditions. In addition, families have learned agricultural techniques to produce and secure nutritious food. By forging links with local health centres, we are ensuring that children's health is now monitored and immunisation is provided to prevent prevalent diseases. As a result, malnutrition of children in Santiago Chimaltenango – in the northwest



of the country – decreased from 50 percent in 2004 to the present 40 percent. For our sponsored children in communities of Bendicion de Dios – also in the northwest – malnutrition has decreased from 48 percent in 2004 to 20 percent currently.

The Commercialisation of Diversified Production project in Honduras has increased the production of 375 farmers by 25 percent. Severe malnutrition has dropped in Monquecagua area from 4.8 percent to below 1 percent and chronic malnutrition from 86 percent to 69 percent.

World Vision Australia has also supported projects to improve quality of primary and secondary education within ADPs. Our education initiatives have established early learning centres to stimulate children's development and increase their access to primary education. Tutor children have helped peers reinforce reading, writing and maths and now, many children with low academic capacity have significantly improved. In Monquecagua, 334 out of 410 boys and girls (81 percent) from 24 schools have improved their academic performance.

Securing household livelihoods

A livelihoods project in Peru has supported improvements in agriculture with guinea pigs produced for consumption and sale. Our focus on producing more nutritious food, improving technical skills, and linking producers to markets has assisted 200 families to increase their income and receive health benefits, particularly related to nutrition and improved hygiene. In the recent evaluation, participants reported that their additional income has predominantly gone to children's education, diet and reinvestment in their business.

A cocoa project in Ecuador has helped producers improve their cocoa production by training farmers in tree cultivation and sound environmental practices. Cocoa producers have worked in partnership with the local authorities to renew 100 hectares of cocoa and planted 60,000 cocoa plants in community nurseries. Further, 80 families have grown their own cocoa nurseries containing 1,000 plants each. Through the course of the project, we aim for producers to obtain organic and fair trade certification for their farms. Already, 100 farms have been selected for certification and 16 producers trained to support this process. A women's collective will process the cocoa to enhance sustainability of the project, as well as furthering income through the production of cocoa, egg nog and marmalade.

Building stronger communities

Our carbon credit feasibility analysis in Peru has recognised the impact that climate change is having in Latin America and the increase in vulnerability to natural disasters. This project has successfully identified appropriate carbon market mechanisms to support sustainable development for the community and provided climate change resilience to a harsh landscape and changing environmental conditions. In the past two years, over 48,000 trees have been planted, communal nurseries were set up, and agroforestry areas developed. The recent financial assessment of the project demonstrates its viability under current carbon market conditions. Impoverished communities in the Cusco Department of Peru will be helped out of the cycle of poverty through income earned through the carbon market.

In Honduras, our project focusing on risk management has established strong alliances with other organisations to protect children from abuse and reduce their vulnerability to natural disasters. Public and private organisations have worked together to support 127 boys and 119 girls in communities of Choluteca, in the south of the country. Our project has a strong prevention component in both social and natural risks. We are assisting to develop the abilities of community members to prepare for and respond to emergencies, as a result of frequent natural disasters.

HUMANITARIAN EMERGENCY ASSISTANCE

During 2012, we provided funding and technical assistance to World Vision Brazil for the Northeast Drought response and to World Vision Haiti for Tropical Storm Isaac response. Our support for the Latin America Community Resilience Project, integrating Disaster Risk Reduction and Climate Change Adaptation into all development and relief projects in three national offices, was co-funded by AusAID.

96.

regional footprint



MIDDLE EAST, EASTERN EUROPE AND CENTRAL ASIA

| | 2012 | 2011 | 2010 |
|--|---------|---------|-----------------------|
| World Vision activities | | | |
| Total projects in region | 84 | 61 | 61 |
| Number of ADPs supported in region | 4 | 5 | 4 |
| Number of non-ADP projects in region | 44 | 38 | 57 (including AusAID) |
| Number of AusAID and multilateral projects | 36 | 18 | 13 |
| Total disbursed in region (cash, food and goods) | \$14.9m | \$13.8m | \$11.7m |

| Number of projects | 2012 | 2011 | 2010 |
|---|------|------|------|
| Country | | | |
| Middle East, Eastern Europe and Central Asia Region (multi- country projects) | 8 | 6 | 5 |
| Afghanistan | 12 | 8 | 6 |
| Albania | 2 | 1 | 3 |
| Armenia | 3 | 3 | 2 |
| Azerbaijan | 5 | 5 | 4 |
| Bosnia | 3 | I | 2 |
| Georgia | 3 | 3 | 2 |
| Jerusalem/West Bank/Gaza | 8 | 5 | 9 |
| Lebanon | 16 | 15 | 15 |
| Pakistan | 23 | 14 | 12 |
| Romania | 1 | _ | _ |
| Uzbekistan | _ | _ | 1 |

Key development challenges in this region

- For World Vision, the region is a diverse mix of countries, ranging from Pakistan and Afghanistan to the Caucasian region, the Middle East and through to the Balkan countries. It includes diverse contexts with some countries severely affected by conflict and others still trying to emerge from centralised government systems.
- Afghanistan and Pakistan continue to be two of the poorest countries and in terms of the
 Millennium Development Goals, both continue to be off-track in several key areas, including efforts
 to eradicate extreme poverty and hunger, gender equality and environmental sustainability. Child
 and maternal mortality continue at high rates in both countries.

- The Arab Spring and ongoing conflict in many other countries has meant increased conflict and instability across a region with more refugees and internally displaced people than anywhere else. Violence continues to affect the health and wellbeing of children, families and communities and despite increasing needs, a decreasing respect for humanitarian law continues to impact ability to work with some of the most vulnerable communities.
- Given the needs of children in the region, World Vision continues to prioritise the protection of children, advocacy for child wellbeing, food security for the poorest communities, and maternal, newborn and child health.

STRATEGIC PRIORITIES

In 2012, World Vision Australia supported programs in the Middle East, Eastern Europe and Central Asia focusing on the following priority areas:

Food security and livelihoods

In Afghanistan, the Women's Economic Literacy and Livelihoods (WELL) project has been implemented in six villages of Badghis Province in western Afghanistan. The principal objective of the project was to lift women and children out of chronic poverty through educating and empowering women and girls and then enabling them to earn an income to provide for their families. This project targeted female-headed households, one of the most vulnerable groups in Afghanistan's maledominated society.

During the five years of implementation, WELL established 32 home schools, provided literacy classes to 800 girls and women, delivered carpet making training to 200 women, vocational training to 550 students and assisted in the sale of carpets. This meant the impoverished women gained a livelihood, helping them to look after their children and cope with the effects of poverty on their families.

The AusAID-funded Strengthening Community Resilience in the Gaza Strip project works with 1,180 households in North Gaza to rebuild lives after many years of conflict. This includes efforts to strengthen existing livelihoods, help households to diversify diets for agricultural and fishing activities, as well as home gardens for female-headed households and other vulnerable families.

To date, these families, which used to be able to obtain sufficient food for four days, are reporting that household food production is now providing sufficient food for an average of five days a week and that selling part of the excess production is covering sufficient food for the remaining two days.

Maternal, newborn and child health

In Herat, in western Afghanistan, World Vision's STI/HIV/AIDS Prevention and Education (SHAPE) project has been working on reaching out and providing knowledge, skills and culturally acceptable services to many at-risk groups. This includes a focus on one of the hardest to reach groups, women whose sexual partners undertake high-risk behaviour. By emphasising the cycle of infection, and reinfection if one's primary sexual partner is not also treated, the project is having a major impact by helping ensure women who fall ill seek and receive relevant treatment. Peer education approaches are also beginning to be utilised to further disseminate knowledge and skills.

This project works with the Afghan Ministry of Public Health, the Ministry of Religious Affairs and the provincial leadership, and has developed strong and dynamic relationships with its partners. These relationships represent important foundations for further STI/HIV/AIDS interventions.

In the West Bank, a maternal, newborn and child health project ("JumpStart Initiative") has focused on a method called Timed and Targeted Counselling. This has dramatically changed attitudes and practices towards pregnancy and newborn children by pregnant women and new mothers. Compared to standard behaviours, the mothers of the Bethlehem project are reporting that they are 30 times more likely to exclusively breastfeed their babies compared to mothers of others in the community and 83 percent more likely to introduce food at the correct time (at six months).



In addition, compared to others, the mothers in training were five times less likely to wrap their newborns and 30 times less likely to apply salt on the babies' skin (which are common practices in Palestine potentially damaging to the health of newborn babies). In regards to recognising danger signs, these mothers have more confidence in being able to respond to them – they are four times more likely to do so than Palestinian mothers without this training. Health professionals in the area have reported that instances of child health issues (diarrhoea and infections) in newborns in Bethlehem are now much lower than in other similar communities in Palestine. This project model is now expected to roll out in other villages and areas of the West Bank.

Child protection

In Azerbaijan, World Vision continues to work in partnership with a local partner, NGO Alliance, on de-institutionalisation to support changes to law to protect children institutionalised under previous regulations. In 2012, this culminated in new Azerbaijani legislation for the Law on Social Services, which will protect 4,308 registered abandoned children, as well as disabled children and adults, and more than 400,000 elderly people for the first time. This legislation also builds an improved social service system, which will enable the community and organisations to take a greater role in providing these services for their communities and build an alternative care system to government institutions.

Through these changes, children will be moved from damaging long-term, government-managed institutions to long-term foster care, small group homes and temporary care services. The change in legislation represents the first time that Azerbaijan will train and prepare professional social workers to work with children and provides a legal basis for alternative care of children. It is anticipated that this new law will help achieve an integrated, community-based child protection system, with accountability at a national level.

Whilst many children are enthuiastic about the digital online world, there are also many dangers for children. World Vision is implementing a Keeping Children Safe Online project in Armenia, Georgia, Jerusalem, West Bank, Gaza and Lebanon to help children, partners, governments and others nurture and protect children in this new experience.

In Lebanon, World Vision has mobilised national stakeholders (the Higher Council of Childhood, the local police, the Telecommunication Regulatory Authority and other organisations) and online child safety now is being coordinated collaboratively. Many Lebanese parents and others supporting children are computer-illiterate and unaware of the need for safeguards. A movement to implement a national program that reaches out to Lebanese children, their caregivers and service providers is gaining momentum by helping children and their communities become aware of positive and negative uses of the Internet and child protection practices.

In Kasur, Pakistan, World Vision has been establishing and strengthening a network of children's drop-in centres that provide a safe, friendly and educational environment for children and combat high rates of child labour. Within these centres, children are educated about good health and hygiene and receive preparatory schooling depending on the individual child's needs. Out-of-school youth (16 years and above) and adults are also provided with vocational training, in order to provide for their families, especially where economic pressure is otherwise a strong push factor driving child labour.

The establishment of a drop-in centre has provided a safe, stable environment for children where they are supported and enabled in their endeavours to better their futures. These centres have also been effective in educating the broader community as knowledge (especially in health and hygiene) filters down from the children to their families, peers and employers. To date, World Vision has provided 1,200 vulnerable children with improved education and knowledge regarding health. Through this intervention, 300 families have reported improved economic status and critically, are now supporting a return to education for their children and promoting alternative options to child labour.



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