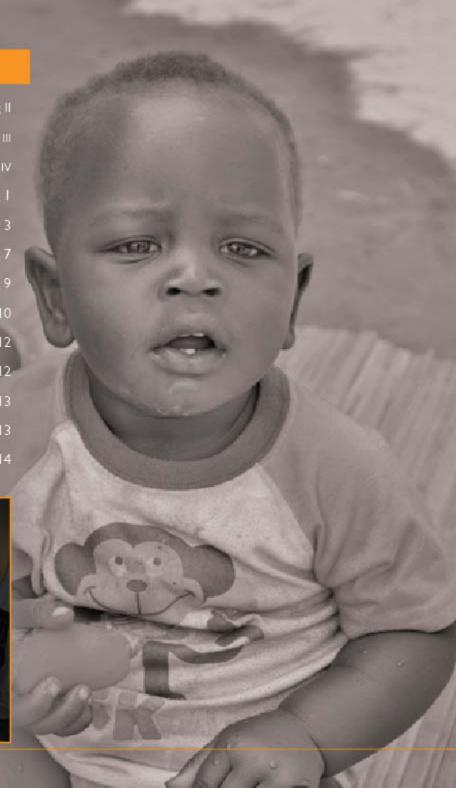


CONTENTS

Area Mappg II
Message from the Board Chairpg III
Message from National Directorpg IV
Child Health Nowpg I
Health and WASHpg 3
Food Security and Community Resiliencepg 7
Educationpg 9
Child Protectionpg 10
Partner Initiativespg 12
Advocacypg 12
Innovative Approachpg 13
Success Storypg 13
Financial Profilepg 14

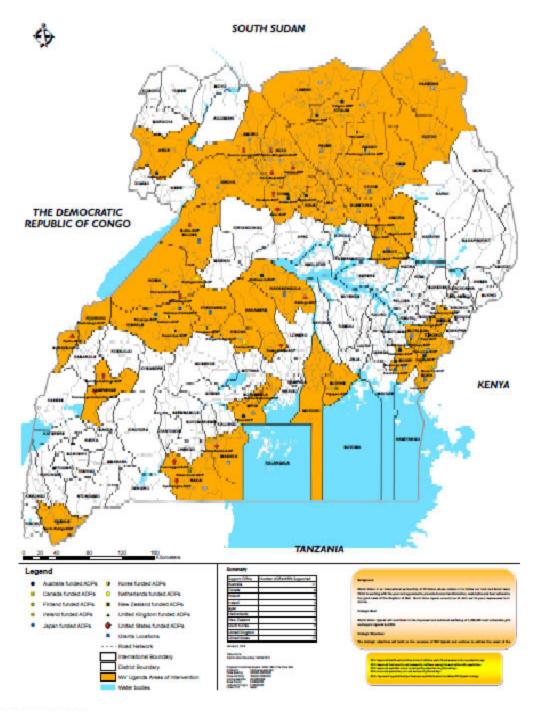




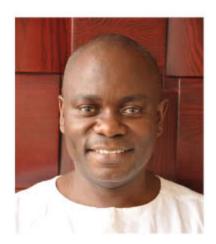


YEAR AT-A-GLANCE

- 4,336,605 children directly reached in 2013
- 744 staff members supporting programs
- USD 78,573,349 budgeted and spent in 2013
- Area Development Programs (ADPs) operating in 41 districts in 2013.



MESSAGE FROM THE CHAIRMAN, BOARD OF DIRECTORS



"I am thankful to our support offices, sponsors and donors whose generous contribution and sacrifices help our dream of children enjoying life in its fullness become a reality."

I am pleased to present to you World Vision Uganda's Annual Report for 2013. The report highlights some of the key achievements and milestones made in the year towards improving child well-being in the country.

We continue to make considerable improvements in providing essential health services among children and their families. As we strive to reduce the number of children dying before the age of 5, we continue to ensure children receive immunization against the 5 major killers and pregnant mothers attend antenatal services.

Our Water and Sanitation initiatives continue to provide clean water at reasonable costs in addition to improving numeracy and literacy levels for boys and girls, ensuring families have nutritious food all year round and most of all ensuring that children are protected from abuse.

During the year, we made tremendous strides in initiating and cementing various partnerships and collaborations with government ministries, private sector agencies, multilaterals and support offices

I am thankful to our support offices, sponsors and donors whose generous contribution and sacrifices help our dream of children enjoying life in its fullness become a reality. On our part, we pledge commitment in supporting the National Office in delivering exceptional services to children and the communities whom we serve.

As the Board of directors, we will continue to provide strategic leadership to the management and staff who have showed exceptional commitment in delivering the set targets and to remain accountable to all.

I thank you for taking your precious time to read this report.

Best Wishes,

Dr, Fred K. Muhumuza, PhD

Board Chair

MESSAGE FROM THE NATIONAL DIRECTOR



"We continued to strengthen our partnerships with organizations, the government and bilateral agencies."

On behalf of World Vision Uganda, I am glad to share with you the 2013 Annual Report. The report gives an overview of the key achievements made in the year towards improving the wellbeing of children.

World Vision Uganda's Strategy (2013-15) focuses on four major priorities of health, education, food security and child protection. The report presented herein highlights our achievements in the four above areas and how they have contributed to the well-being of children in the communities where we work.

The report underscores the importance of partnerships and strengthening of systems that have led to results achieved in different sectors. In the health sector for example, there has been remarkable progress in the immunization of children between the ages of 12 – 23 months against the five major killer diseases in World Vision supported ADPs with 78% of children immunized in our ADPs compared to national coverage of 52%. There has also been increased HIV/AIDs counseling and testing services to expectant mothers. The USAID funded SPEAR project also achieved its safe male circumcision targets. We continued to strengthen our partnerships with organizations, the government and bilateral agencies. Our renewed commitment to the children, families and the communities where we work cannot be underestimated as we increase our accountability to them.

I remain grateful to all World Vision Board of Directors for their guidance and support that has enabled us to achieve greater results. I also thank the entire staff of World Vision Uganda who are spread throughout the country and whose work every day is to ensure the children in this country live a better life. To our partners, the donors and community members, I say thank you for enabling us make a contribution in children's lives. I look forward to your continued support and enriching engagement.

Be blessed and wishing you happy reading.

Gilbert Kamanga

CHILD HEALTH NOW



In FY13, WVU received two awards; the Most Popular Campaign together with the most Impactful Campaign- Together we can end preventable deaths

In FY13, through the Child Health Now (CHN) campaign, World Vision Uganda (WVU) fostered two national level coalitions to advance issues of Reproductive, Maternal, Newborn and Child Health (RMNCH) right from grassroots experiences to national level. The coalition remained key in advocating for the reduction of maternal and child mortality in the country. A number of joint advocacy interventions especially around the increment of the health sector budget remained a priority throughout the year. Whereas there was no general increment in the national health budget FY13-14, the Parliamentary Committee for Health adopted one of the recommendations advanced by the coalition – to allocate 41 billion shillings (approx. 15b USD) for retention and motivation of health workers in the country. This was a build-up on an earlier achievement in FY 2012 where the government allocated an additional \$20 million USD to the health budget out of which over 8,000 medical workers were recruited.

As a focal point agency, WVU signed a Memorandum of Understanding with the Uganda Civil Society Coalition on Scaling Up Nutrition (UCCOSUN) and an agreement with the World Health Organisation (WHO) to implement the three year programme. With its membership of 25 Civil Society Organisations, the coalition participated in various mobilisation for awareness events and policy dialogues at the district and national levels.

Health and HIV/AIDs Interventions

Nationally, the proportion of children aged 12-23 months that are fully immunized is 52% (UDHS, 2011) as compared to 78% in World Vision supported ADPs. World Vision Uganda reached out to over 6,200 pregnant mothers who took up the HIV/AIDs test and counseling services. Out of those, at least 2,170 pregnant women attended antenatal care four times during their pregnancy and of those, 264 delivered their babies in a health centre under the care of a trained midwife.

SPEAR

Through the Supporting Public Sector Workplaces to expand their Actions and Response to HIV/ AIDS (SPEAR) programme in Uganda, World Vision is strengthening the institutional capacity of the government to address HIV/AIDS prevention among police and prisons staff and their families. This is done by enabling access to comprehensive HIV/AIDS prevention, treatment, care and support services in addition to a Health Wellness day once every year.

So far, the programme has enabled over 35,982 officers to access HIV services including counseling, testing for elimination of mother to child transmission of HIV, and performing safe male circumcision. SPEAR is further building skills of medical workers in the police force and providing equipment.

35,982 officers access HIV services including counseling,



HEALTH AND WASH

WVU works with families and communities to access clean water and improved sanitation facilities. During 2013, WVU partnered with communities (water communities) to construct deep and shallow boreholes, deep wells, protected springs, as well as, constructed rain water harvesting tanks and hand washing facilities in schools.

During the year, a total number of 127 water sources were constructed benefiting a total of 62,929 of households- 32,556, direct and 30,373 indirectly- putting the percentage of people in World Vision supported ADPs accessing sufficient clean water at 90% as compared to 72.8% national average and thus reporting a reduction of hygiene-related diseases in children and families.

It is also observed that in 2013, there has been significant improvement in the access to sufficient clean water in the World Vision areas of operation. Over 14,200 households have access to a clean water source and a clean safe latrine. The World Vision low cost innovative self supply water pilot in northern Uganda demonstrated decreased cost of installing a water source and increased sustainability to the large populations of people returning home after decades of displacement as a result of the civil war.

Through the Community Led Total Sanitation (CLTs) in schools, school children and their teachers have facilitated access to improved sanitation facilities by constructing a total of 832 new pit latrines and installing hand washing facilities benefiting 10,982 pupils (6,230 boys and 4,752 girls), as well as, 184 teachers (60 females and 124 males).

The School WASH interventions have been implemented in 135 schools of which 49 (accounting for 36%) are meeting the national school pit latrine stance ratio of 1:40 pupils. In addition, school health clubs have been formed and trained to become good sanitation and hygiene ambassadors in their schools and communities

there has been significant improvement in the access to sufficient clean water in the World Vision areas of operation.



a total number of

127 water sources were constructed

benefiting a total of 62,929

of households- 32,556, direct and

30,373 indirectly-



SUCCESS STORY, HEALTH AND NUTRITION

The Orange fleshed sweet potatoes improve micronutrient deficiency among children in Northern Uganda



A heap of Vitamin A orange fleshed sweet potatoes

espite the fact that micronutrients are needed in the body in small quantities, the lack of them causes adverse effects many of which can be irreversible if not diagnosed in time.

Margaret Acaye is a 50-year-old mother of 10 who for a long time had been grappling with her children's poor health. Having this large number of children and no proper means of survival the children literally lived by God's grace.

"We fed on posho and beans every day because we could not afford to change our diet. My husband abandoned us for another woman and I had to fend for all these children alone," says Ms Acaye. In addition, Ms Acaye's youngest children - five and six years old were diagnosed with Vitamin A deficiency a year ago. "The children used to fall sick all the time and appeared weak. I had to walk seven kilometers twice every week to get vitamin A supplements," says Ms Acaye.

According to the Uganda Demographic and Health Survey, the most prevalent form of micro nutrient deficiency among children in northern Uganda is vitamin A deficiency.

It is for this reason that World Vision started a project of supplying families with orange fleshed sweet potato vines; parents are now able to grow these orange sweet potatoes which are rich in Vitamin A. In partnership with Harvest Plus, World Vision started this five-year intervention to reduce micronutrient deficiency in Northern Uganda. The project is called Developing and Delivering Bio-fortified Crops (DDBC – project).

66...my children eat Vitamin A sweet potatoes on a daily basis. I do not have to walk for long distances to get the tablets and business is booming too," says Ms Acaye.

The project also promotes production and consumption of High Iron Beans (HIB). This project is being implemented in Koro and Bobi Sub Counties in Gulu District, Lira and other districts in Northern Uganda.

According to Simpson Biryabaho the HarvestPlus

Project Manager, rural people cannot always afford to buy Vitamin A tablets or food supplements and in many cases are not even aware of where to get the supplements.

"Most packed foods are fortified but people in the villages may not afford to buy packed food. Harvest Plus looks at less expensive ways of getting the micro nutrients. The orange fleshed sweet potatoes and beans are already staple foods in the region and easily adaptable to local conditions," Mr Biryabaho said.

He further explains that Vitamin A deficiency results in growth retardation, damage to mucous membrane tracts, reproductive disorders, eye damage-and ultimately blindness. Children with Vitamin A deficiency are likely to have impaired growth, and are at increased risk of severe morbidity from common childhood infections such as diarrheal diseases and measles. Pregnant women with Vitamin A deficiency may be at increased risk of mortality

World Vision trains the farmers and parents on how to grow and prepare these foods. The programme targets children under five years who are still developing and need the micronutrients the most. This method of planting is called bio fortification and is more reliable.

The project is reaching 35,000 households, with 16,058 of those households targeting boys and girls under five years old.

Parents are asked to include orange fleshed sweet potatoes in the children's diets at least three times a week. The beans are rich in iron which increases blood content in their bodies. After planting, families share the materials with their neighbors.

It has been a year since Ms Acaye introduced her children to these potatoes. She says her children are now healthier than before and she also makes money out of her sales since the vines produce as many as five tubers each.

"Now my children eat Vitamin A sweet potatoes on a daily basis. I do not have to walk for long distances to get the tablets and business is booming too," says Ms Acaye. In the last season, she reaped 200 bags of orange flesh sweet potatoes, and sold the surplus bags at Shs 20,000 each.

"I am happy with my life now. From the money I get, I am able to pay my children's school fees and buy requirements, in fact I have supplied my husband with vines and he is expecting a lot of money from this season's produce," she says.

> The project is reaching 35,000 households, with 16,058 of those households targeting boys and girls under five years old.

FOOD SECURITY AND COMMUNITY RESILIENCE

The food security and community resilience component in World Vision targets the most vulnerable households and supports them with agricultural inputs while providing them with improved farming methods to enable them to increase food production, be able to afford two meals a day, and sell to meet some of their household needs. This is premised on the notion that food supply at the community level coupled with lack of knowledge on good nutrition for children results in poor feeding and cultural practices that harmfully affect the child's nutrition status.

The World Vision Uganda natural resource management through the Farmer Managed Natural Regeneration (FMNR) initiatives, value addition, nutrition and Village Savings and Loan Association (VSLA) have strengthened communities to handle climate change vulnerabilities, manage natural resources (soil and water) for improved production, and empowered farmer groups by increasing their household incomes, knowledge and skills to demand for better agriculture extension service to farmers. The provision of agricultural inputs and supply of improved seeds and tools have also contributed to the progressive increase in year- round food sufficiency.

'Food for Work' improves livelihood in Karamoja region

"On a normal day I go to the well about five times, I also ask my children to come along so that we fetch enough for the family," says Ruth Kiyonga, a resident of Longelep village in Kotido district.

A day, Kiyonga and the family only fetch water once, enough for only cooking and washing hands before meals. Other activities like washing clothes and bathing are considered a luxury. Here in Kotido, just like in the entire Karamoja region, water is not readily available. People have to walk for over three kilometers to a water source and when they get there the queues are unbearable. According to Kiyonga, one spends a minimum of three hours just to get one jerry can of water from the source to the house.

"You can walk for about 30 – 45 minutes to the well but when you get there the line is very long and you have to wait for about two hours, and then you start walking back," says Kiyonga.



It is against this backdrop that World Vision has started a number of activities to improve access to water, and offer people alternative livelihoods that will improve their living conditions. In the Northern Uganda Social Action Fund II (Nusaf II phase III) project, World Vision is implementing 92 projects in two sub counties in Kotido district reaching about 6,736 households. These include; water ponds, wood lots, farm managed natural regeneration, check dams, rock catchments, apiary farming and distribution of fruit trees and vegetable seeds thus boosting food production.

6 6 ...after a cycle of six weeks work, each participatory member is given 40.5 kg of maize as a reward."

Through what is termed as 'Food for Work' people work to construct the public projects whereas the seeds and fruit trees are distributed and people trained to look after them.

In Longelep, a charcoal dam is currently under

construction. Members dig three days in a week in which soil is excavated and poured onto the sides to act as buffers. This dam in particular has been under construction since July last year and is nearly complete waiting for the April rains. After the rains, the dam is expected to serve the people an extra two and a half months. After a cycle of six weeks work, each participatory member is given 40.5 kg of maize as a reward.

"At least I have some food for my children after working, this place is very dry, the last season I planted but the crops did not sprout," she says adding: "By the end of February, we want to have completed the dam. The water will feed our animals and we shall spend less time looking for water. I would then concentrate on brewing more beer so that I get money to buy scholastic materials for my children and also pay school fees.

projects they hope that people's lives will improve as they will be able to live more settled lives and concentrate on developing their families"

Francis Opira, the Project Coordinator Nusaf II says that Food for Work project aims to improve livelihoods and food security for families in the area.

"The family comes up with the projects they would

like to engage in, World Vision gives inputs and capacity building. It is all about tapping labor and doing projects that benefit entire communities," explains Mr Opira.

The project is funded by the World Food Programme at a tune of \$501,871 from the World Food Programme while World Vision has injected in \$175,924.

These projects come as a huge relief to the communities who, until recently, had been previously pastoralists moving from one place to another looking for pasture and water for their cattle. This over the years led to conflicts with neighboring communities and increased insecurity in the area. Also because the area is very dry with several episodes of drought, it has been hard to grow food all year round unless supported through irrigation.

Mr Opira says that through these projects they hope that people's lives will improve as they will be able to live more settled lives and concentrate on developing their families.

"I expect to see a reverse in environment degradation which will improve on the patterns and volume of rainfall. In bridging the gap for water availability, we also want to see people live more settled and meaningful lives as they have more time to engage in income generating activities," says Mr Opira.

EDUCATION



World Vision education interventions have helped increase access to education and also improved its quality



The National Office strategic objective on education is "Improved equitable access to and quality education for girls and boys"

Equitable access to education measures enrollment, retention and completion of basic education; Quality education measures learner achievement in literacy, numeracy and life skills, as well as, parental and community engagement to support, influence and participate in the provision of primary education.

World vision Education programming contributes to the national education goal of ensuring equitable access to quality education by focusing on ensuring age appropriate enrollment, increasing enrollment, ensuring equity through addressing gender disparity and disability, reducing dropout, improving retention and increasing completion. In addition World Vision focuses on improving literacy and numeracy levels, promoting age appropriate life skills and also increasing community demand and support for education.

World Vision has initiated national and local level partnerships for change in education and is working closely with partners to promote learning outcomes. In 2013, World Vision deliberately worked with partners to improve equitable access to quality education. World Vision has a working Memorandum of Understanding with the Ministry of Education participating in the ministry working group meetings

In the same year World Vision signed partnerships with the British Council, Mango Tree, Literacy and Adult Basic Education (LABE), and the media to work together towards improved education. Through the Certificate in Primary English Language Teaching (CiPELT) partnership, British Council is supporting teachers with English language training materials after transitioning from use of local language used in the lower section.

World Vision worked with School Management Committees, which are led by parents involved in improving learning environments at school, after school, and at home. The functionality of school management committees has been

enhanced through Citizen Voice and Action (CVA) and through the community-led initiatives. For example with the Word Vision Citizen Voice for Action (CVA) model, a number of interventions have been implemented that have transformed relationships. The CVA approach has fostered the implementation of the social accountability education project. This project promotes dialogue as a means of encouraging community ownership and development plans while identifying ways the community can contribute to its development. There is increased community and parent engagement leading to improved children's learning environment and increased child to teacher engagement. World Vision also trained over 400 school management committee members and 90 teachers in the Certificate in English language Teaching (CiPELT) which helps teachers to manage the transition from teaching in mother tongue to teaching in English.

Northern Uganda has evolved strong associations of school management committees that promote accountability. This has helped increase pupil enrollment and improve child protection and academic performance. This has been achieved through increased school monitoring and support to school feeding. The number of schools that provide food for children in World Vision operation areas increased from 26 percent in 2012 to 50 percent in 2013.

In 2013 World Vision supported 116 schools with relevant localized reading and instructional materials. Pupils were supplied with Newspapers in Education (NiE) and Excel in Primary Leaving Examinations (PLE) newspapers. John Tereraho, the World Vision Uganda Education Specialist says in 2013 there was a remarkable improvement in performance of schools receiving these materials. "PLE results of our registered children in 2013 show that 97 percent of them passed. For 12 years, Lunyo Area Development Programme in Busia district never had a child in division one but in 2013 they had seven in division one," said Tereraho".

World Vision is also working with communities to develop reading materials where parents and teachers write illustrated materials for their children. These materials, written by people the children know, are more acceptable to the children who are inquisitive to read and learn from them. In Tororo district, 14 book titles were produced, 10 in Pader and eight from Oyam-Kole Area Development Programmes.

CHILD PROTECTION

WVU is dedicated to ensuring children are safe and protected from all forms of abuse, receive adequate care, and grow up in a protective environment. We work with law enforcement, community structures and child rights groups in schools to monitor and address child abuse cases. In 2013, there was evidence that children are increasingly taking active participation in deciding on issues that affect their lives.

A total 37 child abuse cases were reported to the police, and 21 (56.8%) of these were reported by children, which shows improvement in their self esteem due to participation in decision making processes. For example, 88.9% of the children in Nkozi Area Development reported that they can positively identify and know where to access the formal and informal child protection services (Nkozi Area Development Programme annual monitoring report, 2013). This indicates a yearly improvement from 74% in 2012 and 64 5% at baseline 2011

In addition, there is positive change of parents and teacher's attitude towards education of pupils with disabilities and schools have taken up the policy of inclusive education providing an enabling environment to all

SUCCESS STORY

"My name is Senyonjo. I am 16 years old in Primary Seven. World Vision started a Child Protection Committee where we speak for children who cannot speak for themselves. This is because some of our fellow children have problems they cannot tell their parents or their teachers. Because of tireless training we thank World Vision so much because we have learned to speak for our fellow children. Many parents are mistreating their children. They make them do very hard work and they make them suffer. We report to our teachers, local community chairmen and police when these things and the children are helped."



ADVOCACY AND PARTNER INITIATIVES



Children's goodwill ambassador, king Oyo Nyimba Kamamba Iguru IV, the King of Tooro listens during the Child Health Now Campaign which aims at contributing to the reduction in maternal and child mortality in Uganda

In the year 2013, World Vision Uganda continued to partner with local government and other civil society agencies to build local capacity of citizens to advocate and demand for improved services from government.

World Vision Uganda will continue learning from, contributing to and collaborating with stakeholders at all levels in a quest for achieving child well-being where children are educated for life, enjoy good health, are protected, cared for and experiencing the love of God and their neighbors.

In the year 2013 four major grants were acquired and a number of Memorandums of understanding were signed with key government ministries, UN agencies, churches and Community Based Organizations. Some of these include The British Council, Mango Tree, Securing Africa's Future, Ministry of Education, Scripture Union in schools and Children at Risk National Collaboration.

These collaborations have improved the functionality of structures and systems at the community level, as well as, enabling timely delivery of services in the health and education sectors. World Vision organized a forum with the private sector to share its strategic intent so that the private sector can identify areas of contribution to child well-being. Different organizations committed to support World Vision's work. The Programme Development Department (PDD) also increased its funding this financial year 2013/2014 by 18 percent.

Success Story

Community Voice and Action (CVA) approach improves health services in Kiboga

Katarama HC II in Kiboga District had been closed for a period of about three years because it lacked the personnel to run it. The health assembly resolution to have it re-opened came to fruition with the district urgently recruiting and posting three medical workers who are serving the community of Ddwaniro Sub County. This has enhanced children and their caregivers to access essential health services.

Rudeness of the medical staff had been widely identified as one of the major problems that had been keeping patients, especially the pregnant mothers, from accessing health facilities for services. However, this problem reduced after the assembly introduced radio programs sponsored by the State Minister for Fisheries Hon. Ruth Nankabirwa which are used to name and shame the medical workers who are rude to patients.

World Vision community empowerment initiative, Citizens Voice and Action (CVA) is a local level advocacy approach that empowers the local population to amplify their voices, and has drawn the medical staff's attention and held them accountable for service provision. Kiboga district was one of the eight pioneer districts where the approach was piloted, specifically in Ntwetwe and Kimu The approach helps communities realize the power within themselves to engage with the government officials in a way that promotes dialogue leading to improved government services which truly impact the daily lives of the people.

Riding on the theme "Renewed stakeholders commitment towards improving maternal and newborn child health", the health assembly started as an innovation by Kiboga ADP to provide a platform which would bring all players in the health, political and technical sectors; as well as, development partners and players such as VHTs, and community members together.

Every year the assembly gathers all people from the three levels namely the community, sub county and district level, and also those that may not have been part of the initial process but are sector players like private practitioners, and other faith based foundations, as well as, civil society organisations.

This is where the overall health status is given, problems are discussed and solutions are generated. It is also during this annual forum that directives are given and action plans drawn, as well as, the formation of a task force to monitor the implementation of the resolutions. The formed task force is responsible for giving feedback and progress to the stakeholders.

As a result of the assembly and holding leaders accountable, there is an improved relationship between the medical staff and the patients which is evident in the increasing numbers of patients at health facilities. More outreach has been conducted on immunization and malaria prevention which has seen the prevalence of malaria fall from 38 percent to 23 percent per the HMIS data 2013, thus helping protect children from infection, disease and injury.

There is regular inspection of private clinics by the office of the District Health Officer and the District Health Team to regulate the mushrooming of sub standard clinics.

There has been an increase in the involvement of Village Health Teams and support in conducting household visits. There has also been input into the district Public health and sanitation ordinance. "If we held this assembly on an annual basis, the majority of the health problems in the district would be no more. If you look at the problem solving generated at the assembly, the best outcome is that it provides a platform for all players in the sector from the non-structure Health Centre 1 to the highest level, namely the hospital.", narrates Martin Kabuye, Kiboga District Health Inspector.

"There is a better work environment for the health workers which has trickled down to the service users. For instance, the better treatment and handling of patients has encouraged more to visit the health centres they had snubbed. Children have their centre of treatment without having to tussle with adults.

FINANCIAL INFORMATION FOR FY 13

ACTUAL EXPENDITURE BY FUND TYPE

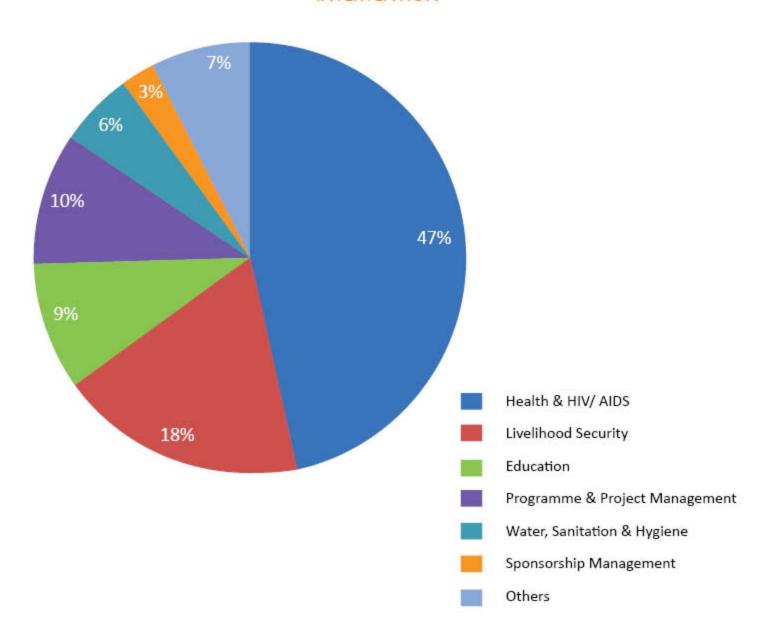
FUNDING TYPE	AMOUNT (USD)	PERCENTAGE
Government	5,978,430	8%
Multilateral	1,292,817	2%
Private Non-Sponsorship	11,148,314	14%
Sponsorship	26,536,895	34%
Gifts In Kind (GIK)	33,616,893	43%
Grand Total	78,573,349	100%

FY 13 EXPENDITURE BY PROGRAMMING INTERVENTIONS

PROGRAMME INTERVENTION	AMOUNT (USD)	PERCENTAGE
Health & HIV/ AIDS	37,037,134	47%
Livelihood Security	14,498,889	18%
Education	7,037,400	9%
Programme & Project Management	7,584,444	10%
Water, Sanitation & Hygiene	4,398,592	6%
Sponsorship Management	2,241,899	3%
Others	5,774,991	7%
Grand Total	78,573,349	100%

Others include - Advocacy, christian commitment, gender, infrastructure, leadership development, shelter, protection, monitoring and evaluation, peace building and conflict resolution.

GRAPHICAL PRESENTATION OF PROGRAMMING INTERVENTION



WVU BOARD MEMBERS



Dr. Fred Muhumuza **Board Chairperson & Member Governance Committe**



Dr. Monica Chibita Vice Chairperson & Member **Governance Committe**



Dr. Ekiria Kikule Chairperson Governance Committe



Bishop George Bagamuhunda; Member **Ministry & Audit Committe**



Dr. Mary Ssonko Member Ministry Committe



Mr. David Opiokello **Chairperson Audit** Committe



Mr. Fred Mukhwana **Chairperson-Ministry** Committe



Mrs. Susan Lubega Member Ministry & **Audit Committe**



Mr. Anthony Esenu **Member Audit** Committe

SENIOR LEADERSHIP TEAM



Gilbert Kamanga National Director



Tinah Mukinda Deputy National Director



Fred Barongo Associate Director Support Services



George Ebulu Quality Assurance Director



Maria Yvette Program Development Director



Tom Robert Mugabi Intergrated Programmes Director



Jwanesh Pasipuleti Finance Director

MISSION

To follow our Lord and Savior Jesus Christ in working with the poor and oppressed to promote human transformation, seek justice and bear witness to the good news of the Kingdom of God.

VISION

Our vision for every child, life in all its fullness; Our prayer for every heart, the will to make it so.

COREVALUES

- · We are committed to the poor
- · We value people
- We are stewards
- · We are partners
- · We are responsive

World Vision Uganda

National Office:

Plot 15B Nakasero Road P.O. Box 5319 Kampala – Uganda Tel: +256 41711400/312264690/414 345758 Website: wvi.org/uganda

- worldvisionug
- worldvisionuganda
- worldvisionuganda

