Annual Report

2013

WORLD VISION DEMOCRATIC REPUBLIC OF CONGO

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

- ADP: Area Development Program
- CFS: Child-Friendly Space
- CHNC: Child Health Now Campaign
- CVA: Citizens’ Voice and Actions
- DRC: Democratic Republic of the Congo
- IDP: Internally Displaced People
- INC: Introduction to the New Citizenship
- LLINs: Long-Lasting Insecticide-Treated Nets
- PRONANUT: Programme National de Nutrition (National Nutrition Program)
- RECO: Relais Communautaire (Community Relay)
- SUN: Scaling Up Nutrition
- WASH: Water, Sanitation and Hygiene
- WFP: World Food Program
- WV: World Vision
- WV DRC: World Vision Democratic Republic of the Congo
I am delighted to present the summary report of the achievements of World Vision in the Democratic Republic of the Congo in 2013. This year has proven to be particularly rewarding. Three important events have marked our path. First, the Round Table, under the topic “Another Congo is possible, Another Congo is necessary.” This meeting was an opportunity for placing the DRC in the forefront of the partnership with donors. Then, the new partnership with churches has promoted the expansion of our operations in the province of Equateur. Finally, the successful partnership with the government, including the adopting of the “Citizens’ Voice and Actions” approach as the official approach in the Ministry of New Citizenship, the enacting of a new law on people living with disabilities, and the construction of 55 schools in 6 provinces (North Kivu, South Kivu, Kasai Oriental, Kasai Occidental, Bas-Congo and Equateur).

In addition, donors’ commitment has allowed WVDRC to contribute to improving child and maternal health care, nutrition, access to drinking water, access to education, and the quality of education, empowering children as actors of transformation, as well as improving household incomes.

Thus, with these resources at its disposal, WV has contributed to improving the well-being of children and to promoting the resilience of the most vulnerable families and communities. All this has been made possible through the involvement of each staff member for whom I have great admiration and pride.

I could not conclude without thanking the Congolese Government for its support and confidence, and our other various international and national partners, communities, families and children.

Another DRC is possible, Another DRC is necessary!

Robert Kisyula
National Director
WV DRC
Our mission

World Vision is an international partnership of Christians whose mission is 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.

Core Values

We are Christian.
We are committed to the poor.
We value people.
We are stewards.
We are partners.
We are responsive.

Our aspirations for child well-being

Children enjoy good health.
Children are educated for life.
Children experience the love of God and of their neighbours.
Children are cared for, protected and participating.

Our vision

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

World Vision is a Christian, relief and development humanitarian organization, working to improve the quality of life of people, especially children, who are marginalized and living in poverty. World Vision helps all who are in need regardless of their religion, race, ethnicity or gender.

World Vision has been working in the Democratic Republic of the Congo (DRC) since 1984. It has continued to expand its operations throughout the country over the years through emergency assistance, Area Development Programs and advocacy.

World Vision DRC operates in 6 out of 11 provinces (Bas-Congo, Equateur, Katanga, Kinshasa, North Kivu and South Kivu), with offices in Western Region (Kinshasa and Bas-Congo), Southern Region (Katanga), Northwestern Region (Equateur) and Eastern Region (North and South Kivu). In addition, WVDRC intervened in Kasai-Oriental and Kasai-Occidental in the construction of schools with funding from the Government of DR Congo.

The map below presents the intervention zones of WV in the DRC.
Areas of interventions in the WV DRC

Regional Office : Gemena
- Gemena (WV US)
- Sanru/GF (WV Japan)
- DFID (WV US)

Kinshasa 1
- Obokaba (WV Hong Kong)
- Kinkole (WV Hong Kong)
- Kikimi (WV Canada)
- Kibanssekia (WV Canada)
- Maluku (WV US)
- Menkoa (WV Canada)
- Ngandu (WV Canada)
- Koica Grant (WV Korea)

Regional Office : Goma
- Rutshuru emergency Wash (WV Korea)

North Kivu Programs
- Masisi Livelihoods (WV Korea)
- CMAM Minova (WV Canada)
- Wvwwdc 3 years Strat (WV Austr., Canada, Germ., Joan, Krea, UK, US, Twn)
- Rebound 2 (WV Germany)
- Health and nutrition Masereka (WV Germany)
- Partnership for prevention Care and support of SGBV survivors (WV Canada & US)
- Wamama Simameni (WV Canada)
- Help keep a formerly exploited child safe (WV US)
- PPA2 DFID (WV UK)
- Go health clinics Masereka & Musienne (WV US)
- Food Aid = SFP & GFD (WFP, WV US, Canada, Australia, Korea, Germany, Japan & Taiwan)
- ARP Rwanguba Wash (WV Canada)
- Rwanguba School Wash (WV Canada)
- Eastern DRC Advocacy Project (WV Canada)
- Strengthening Community Based Protection
- Cholera response Projects (WV Korea)
- GFD Kalehe & Kabare (WFP, WV US)
- Projet de reponse aux besoins hum
- Unicef CFS

Regional Office : Rutshuru
- Beni emergency response (WV Canada, Australia, Korea, Taiwan & UK)
- Beni hand pump project (WV Korea)

Regional Office : Beni

Regional Office : Kinshasa 2
- Christian comm prjct (WV Canada)
- CHN Project (WV UK)
- Strengthening Drc Adv (WV Austr., Hong Kong, Malaysia, USA, Taiwan)

Head Office
- Bas-Congo
  - Kisantu (WV US)
  - Kinsanzu (WV US)
  - Loma (WV Malaysia)
  - Kasangulu (WV Canada)

Sub Office : Kisantu

Sub Office : Kolwezi
- Kolwezi (WV US)
- Mutsho (WV South Korea)
- Kasaji (WV US)

Sub Office : Likasi
- Likasi
  - Kikula (WV South Korea)
  - Toyota (WV Japan)
  - Kambove (WV Japan)
  - Kinsuka (WV Korea)
  - Fungurume (WV Korea)
  - GF Malaria (WV Japan)
  - GF HIV (WV Japan)
  - PAA(MCH) DFID (WV HK)

Sub Office : Lubumbashi
- Lubumbashi
  - Kimumwe (WV Taiwan)
  - Rwashi Congo (WV Hong Kong)
  - Kasungani (WV Hong Kong)
  - Kigoma (WV Taiwan)
  - Gladoline (WV Taiwan)
  - Kipushi (WV US)
  - Lwanza (WV Canada)
  - Sanru/Glob Funds (WV Japan)
  - GF HIV (WV Japan)

Sub Office : Kalamie
- Kalamie
  - Malamba (WV Canada)
  - Kabondo (WV Canada)

Sub Office : Kamina
- Kamina
  - GF HIV (WV Japan)
  - GF Malaria (WV Japan)

Sub Office : Rutshuru
- Rutshuru emergency Wash (WV Korea)

Sub Office : Bukavu
- Mpya (Jenga 2) (Usaid)
- Food Aid=SFP & GFD (WFP, WV US, Korea, Canada, Australia, Germany, New Zealand, Japan)

1. Bandundu
2. Bas-Congo
3. Equateur
4. Kasai Occidental
5. Kasai Oriental
6. Katanga
7. Kinshasa
8. Maniema
9. Nord Kivu
10. Province Orientale
11. Sud Kivu

The year 2013 was marked by a change of direction for WV DRC which sets itself the main objective to contribute by 2015 to measurable improvement in the well-being of 4 million most vulnerable children in the communities where it operates.

Four priority sectors have been identified:


2. **Water, Sanitation and Hygiene (WASH)**: WV relies on its “LIFE” approach to help reduce the proportion of people without sustainable access to drinking water and to promote change of behavior in relation to hygiene in communities.

3. **Education**: promoting access of children (both girls and boys) to a quality formal and non-formal training and ensuring completion thereof.

4. **Economic Development**: contributing to improving the living conditions of households in our intervention zones through increased food security and increased opportunities of income-generating activities by 2015.

To achieve its objectives, WV adopts the following as critical tools and approaches: advocacy and child justice; working with and through local institutions; partnership with the church, and staff capacity building.

The following sections illustrate the major achievements of WV DRC in 2013:

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1 LIFE (Leveraging change, Improved Facilities, Enabling environment). The ‘LIFE’ approach is based on an influential change, improving facilities, a favorable environment including support and training on sustainable community management, promoting local, national and regional favorable environment for the WASH sector, including regulatory and policy framework, partnerships with key players in this sector.
WV DRC has provided members of poor communities with access to essential health care services and has implemented the following activities to ensure that children are well fed and protected against diseases:

- Capacity building of local health partners and Community Relays (RECO): local health workers have been trained to improve their knowledge and basic skills in communication on health, nutrition and HIV/AIDS to communities.

- Supporting activities of vaccination of children: WV has helped, among others, produce and distribute vaccination cards to serve as proof of vaccination for children under 5 years. This has helped record 7,410 children as fully vaccinated and protected from so-called childhood diseases.

- Supporting health centers in sensitizing pregnant women about good nutrition practices. Mothers have been trained on improving the nutritional status of children under five years through the gradual adoption of exclusive breastfeeding for breastfeeding women, and good child nutrition. Over 1,126 people are applying good dietary habits in their communities thanks to cooking demonstration sessions using locally, available produce.

- Supporting health centers in upgrading their facilities with essential medical equipment and capacity building of their staff.

- Taking care of people living with HIV and AIDS. About 248 HIV-positive pregnant women were placed on antiretroviral (ARV) treatment thanks to SANRU-WVDRC partnership, with funding from the Global Fund to Fight AIDS, Tuberculosis and Malaria.
In November 2012 in Gemena, Martine, 5 years, was on the verge of dying from severe acute malnutrition. Her parents become aware of the seriousness of her illness when she was already significantly suffering. Her case was reported by a volunteer to the local World Vision office which decided to transfer her to a health center that could take care of her. Martine weighed only 19 pounds when she was taken to the health center: “All her ribs were visible”, her mother still remembers. After two week’s hospitalization, Martine was able to quickly recover her health thanks to the ingestion of specially designed formulas. “We used milk-based formulas to enable effective nutritional recovery thanks to their high protein and nutrients contents. We also gave her soy-based porridge”, explains Alima Issa, the nurse who took care of Martine. Martine left the hospital weighing 28 pounds.

As well as Martine herself receiving treatment, her parents additionally received training on improving child nutrition. To help children like Martine, World Vision works closely with the National Nutrition Programme (PRONANUT) and Health Zones which sensitize, train and refer cases of malnutrition in the community.

<table>
<thead>
<tr>
<th><strong>Saved from malnutrition</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>In November 2012 in Gemena, Martine, 5 years, was on the verge of dying from severe acute malnutrition. Her parents become aware of the seriousness of her illness when she was already significantly suffering. Her case was reported by a volunteer to the local World Vision office which decided to transfer her to a health center that could take care of her. Martine weighed only 19 pounds when she was taken to the health center: “All her ribs were visible”, her mother still remembers. After two week’s hospitalization, Martine was able to quickly recover her health thanks to the ingestion of specially designed formulas. “We used milk-based formulas to enable effective nutritional recovery thanks to their high protein and nutrients contents. We also gave her soy-based porridge”, explains Alima Issa, the nurse who took care of Martine. Martine left the hospital weighing 28 pounds.</td>
</tr>
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<table>
<thead>
<tr>
<th><strong>Statistics</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>316 468</strong> children under 5 years vaccinated</td>
</tr>
<tr>
<td><strong>32 485</strong> children and <strong>9,022</strong> mothers have access to primary health care in nine programs of Western Region (Menkao, Maluku, Kisantu, Kasangulu and Kikimi)</td>
</tr>
<tr>
<td><strong>35 870</strong> pregnant women, mothers and caregivers of 0-23 month children sensitized on nutrition and infectious diseases in the Southern Region</td>
</tr>
<tr>
<td><strong>70 265</strong> women trained and sensitized on the use of LLINs (Long-Lasting Insecticide-Treated Nets)</td>
</tr>
<tr>
<td><strong>2 355</strong> children suffering from diarrhea received treatment combining zinc and ORS in Kalehe, South Kivu</td>
</tr>
<tr>
<td><strong>7 298</strong> women were sensitized on family planning through 87 image boxes produced and distributed in health trainings</td>
</tr>
</tbody>
</table>

**Training session for women on improving the nutritional status of children with food available within the community.**
Education is one of the fundamental rights of children and a powerful tool to break the link of poverty. It allows children to protect themselves, make good decisions, and communicate their ideas. WV focuses on access to quality education, through approaches such as improved training of teachers. WV also contributes to increasing education rates by sensitizing communities where it operates.

WV also assists in supporting education infrastructure, helping communities in the renovation or construction of school facilities such as classrooms, latrines, playgrounds and sanitation.

In IDP camps, WV, in partnership with UNICEF, has established the use of “Child Friendly Spaces”. These spaces help provide displaced children and victims of abuses of war with extracurricular support in reading, writing and basic mathematics. 1,831 young people (1,407 girls, 424 boys) have acquired income-generating skills, including knitting, embroidery, hairdressing, and basketwork in Eastern DRC.

As part of the School Facilities Renovation and Reconstruction Program (PRRIS), established by the Congolese Government, WV has worked with the Government to construct and renovate 55 schools in the provinces of Bas-Congo, Kasai Oriental, Kasai Occidental, North Kivu, South Kivu and Equateur.
Beni: a fresh start thanks to Rebound Project

Patrick Kasereka, 17 years, is a former child soldier who had been involved with various armed groups in Eastern DRC since the age of 10. Today, thanks to Rebound Project the dream of rebuilding his life is coming true. “Fortunately for me, World Vision has offered me the opportunity to rebuild my life through mechanics I have learned at Rebound Center. My parents, at the same time, have renewed their confidence in me”, says Patrick Kasereka.

In one year, Rebound Project has helped 70 children – 40 girls and 30 boys - in Beni, to make a fresh start. Here, training centers are designed to provide former child soldiers and victims of sexual abuse with vocational training and psychosocial support. With qualified instructors, program participants learn trades such as mechanics, woodwork and sewing. The program also focuses on providing skills and psychological support, and prioritizes social values like communication.

Josiane, 17 years, was sexually abused. “When I got here, they explained to me how I could rebuild my life by learning dressmaking and culinary art. I am thankful to World Vision for this training which has really been helpful to me”, she explains.

At the end of the training, each participant receives a certificate and a “starter pack” to help them begin a new life. The project also aims at reuniting boys and girls with their families and reintegrating them into their communities.

| 139 classrooms constructed and/or renovated and equipped with benches |
| 121 862 children are studying in good conditions while receiving a quality education thanks to the intervention of WV |
| 1 668 teachers in primary and secondary schools have received trainings on the new schooling method (national program), docimology, on the appropriate methodology of the national program of education in terminal degree, etc. |
| 1 223 young girls and boys received training on dressmaking, mechanics, woodwork, driving, agronomy, fitting, etc. |
To improve adequate access to drinking water, WV built underwater wells and wells with hand pumps, and improved water sources. These efforts in 2013 reached more than 62,000 households across the country. The drinking water supply project in our intervention zones significantly reduces absenteeism rate among children at school. The construction of latrines in schools and installation of hand-washing kits helps protect children from disease caused by unclean hands.

In schools, WV is undertaking the distribution of hand-washing kits and construction of latrines to ensure good hygiene and to prevent disease caused by unclean hands. This work contributes to reducing water-borne diseases such as cholera. Time spent at water wells, or the distance to be covered for having access to drinking water, are reduced in many cases for local communities.

Moreover, World Vision encourages the creation of water committees wherever a well is drilled and wherever a water source is improved. These committees ensure the proper use and maintenance of water points. WASH committees in communities receive training on financial management, operation and maintenance of water points, hygiene and environmental sanitation.
Water flows in Samboko for the first time

Nguru Kambiaote, a farmer, has lived in Samboko for 30 years with his wife and their 8 children. He is happy to see for the first time two water wells drilled in his village. These wells now allow nearly 5,600 households to have access to water at all times.

“Having drinking water available is a relief for my family. Before, I could wash only once or twice a week because water was not available in the village. Now I can wash every day”, says Nguru Kambiaote.

Samboko Village is about 55 km from the health zone of Oicha in Beni territory. Before the drilling by World Vision, Oicha people had to travel roughly 4 km on foot in search of drinking water. But now, the distance is reduced to 100 or 200 meters for many of them.

Water is also a relief for the primary school of Samboko. Before, the 330 pupils divided in 8 classrooms and their 9 teachers did not have access to sanitation in the school. For Jean-Jacques, a 13-year pupil, their habits have changed. “Our toilets were always closed; we had to find a place in the neighborhood to relieve ourselves. With the water we have now, we can use our toilets and wash our hands.” «We thank God for this work and hope that World Vision is the channel through which our voices will be heard for more interventions with regard to our needs», says Katungu Tongo, teacher at primary school of Samboko.
During the year 2013, the 28 area development programs of WVRDC continued to implement livelihood projects through agriculture, livestock and economic development. These various projects contribute to improving child well-being because they allow households to increase their incomes and to ensure food security.

In connection with the objective of World Vision to contribute to food security, WV DRC conducted various trainings on savings, entrepreneurial skills, diversification of crops and livestock production. Thanks also to the promotion of savings groups and value chains sectors in its various projects, WV allowed households to increase and diversify their sources of income to meet socio-economic needs of their households.

© Income from diversification activities allow households to build the sustainable well being of the child.

Source: © WV DRC
**Kisantu: Breeding rabbits to increase family income**

At the end of the school year (2012-2013), François Makonda, 53 years, is a happy man. His four children attending school have successfully completed their school year unlike previous years where some had to quit school because of lack of resources. This he owes to Bitwisi project (“animal” in Kikongo), of which he has been a beneficiary for two years. This project is developed by World Vision in its area development program of Kisantu to help households increase their income. Thanks to this activity, François Makonda is happy to be able to support the education of his children throughout the school year. In addition to being a farmer, François is feeling positive in his new role as a rabbit breeder. “I like this breeding because rabbits breed and grow properly when we respect the practices,” he says.

Through Bitwisi project, François received two rabbits, a rabbit hutch and twenty-two pounds of improved food. Although very few people eat rabbit meat in Kisantu, this breeding contributes to meeting basic needs of Makonda family. More than 100 vulnerable households were selected for the first phase. World Vision continues to support farmers with careful monitoring by an agro-veterinary consultant who advises and administers appropriate treatment to sick animals.

| **4 468** farmers, grouped in associations, trained on improving farming techniques in order to increase agricultural production and productivity of households |
| **8 221** households able to support their children |
| **644** households engaged in savings and credit groups. |
| **1 032** vulnerable families received support in breeding to increase their family income |
The World Vision sponsorship system connects children, their families and their communities with sponsors to ensure child well-being.

In 2013, World Vision DRC had a total of 93,700 children in its sponsorship program of which 61,557 sponsored. World Vision serves as an interface between these children and their sponsors across the world by ensuring good communication.

Sponsors contribute significantly to the budget of WV DRC, most of which is devoted to transformational development of children, families and communities in which these children live. Transformational development promotes all kinds of actions allowing children, their families and communities to evolve towards the fullness of life in dignity, justice, peace and hope.

WV DRC ensures that sponsored children maintain a regular correspondence with their sponsors. The sponsorship department answers specific questions of sponsors through support offices. Each year, sponsors are informed of the progress of each child (in terms of health, education and even spirituality), their participation in ADP activities and what they have received.
Ken, 12 years old, has suffered since birth from cylindrical ametropia. It was at the age of 5 that his mother noticed that the eyes of her son had a problem. “All the white part of his eyes turned a coffee-like color. I did not know what the cause was. He scratched his eyes all the time and tears flowed”. Ken remembers the time when he began to go to school. “My eyes tickled me so much that I could not even see what was written on the board, everything was a blur to me”. Bad results ensued. Ken had to repeat his first grade at school. A year later, Ken is lucky to be sponsored. He receives directly medical care. The ophthalmologist prescribed him his first prescription glasses to improve his eyesight. “I began to see more clearly. I was no longer obliged to sit on the first bench during class”, explains Ken. His school performance became satisfactory and impressive. “From 45% in the first quarter, he rose to 61% in the second quarter,” joyfully recalls his mother.

Sponsorship has really changed Ken’s life and not just for his eyes. Ken regularly receives gifts from his Taiwanese sponsor. “I recently received a mattress, a blanket and clothes,” says Ken. 100 meters from Ken’s home, World Vision drilled a well for the community. This well allows them to have access to drinking water.
To promote child participation and to ensure child protection, World Vision assists the government’s activities by supporting the organization of children in child protection committees at the community level in each area of its interventions.

These children’s committees called “Children’s Parliaments” have the role to prevent, report and advocate for all cases of abuse, violence and negligence against children.

As a partner, WV works with these committees in planning activities related to protection and participation, implementation and evaluation.

To strengthen child parliamentarians, WV DRC builds the capacity of child protection committees constituted by local political, administrative, school and judicial authorities for better accompaniment of children in the promotion of their rights and participation in the improvement of their living conditions.

After training 8,870 children on their rights and duties, children parliamentarians of Kinkole have reported 51 cases of abuse, including 15 cases of rape of minors that led to the imprisonment of six guilty persons in the Central Prison in Kinshasa.

In Kipushi, Katanga, the Children’s Parliament managed to remove 50 children from working in a gravel quarry. These former miners were reinstated to school and their families received an economic kit valued at $50 for the sustainability of this action.

In the Eastern Region of WVDRC, 80 children representing children’s clubs were trained on the rights and duties of children, the importance of birth registration in the Civil Registry, child protection principles, reporting, referral mechanism, life skills, good communication, and child marriage.

For the year 2013, WV DRC also welcomes its contribution to the participation of three children parliamentarians at two international meetings in Caux, Switzerland, and in Arusha, Tanzania. These meetings intended to promote the participation
of children and young people in all decisions affecting them.

"Children as actors of the transformation of society"

From 24 to 29 July 2013, World Vision ensured the participation of the President of the Children’s Parliament of Kipushi, Tanya Sanky, 12 years, in a conference organized by “Initiatives of Change” in Caux, Switzerland, in partnership with Child Trust. This six-day conference is designed for children and youth representatives from different backgrounds who are actively involved in participatory processes.

In her presentation, Tania looked into the case of children working in mines in the town of Kipushi in Katanga. The Children’s Parliament of Kipushi helped remove 50 children from exploitation and put them back to school.

Thanks to an open space in that conference, Tanya had the opportunity to answer questions from participants on the DRC, the paradox that characterizes the country, its hope and dreams. “I am hopeful that another DR Congo is possible. There are children like me who believe in change, and I will do my best to make it come true”, stated Tanya.
WV DRC has integrated Advocacy and Justice for Children in all its operations in order to address the root causes of poverty. This section highlights the WV DRC advocacy initiatives by focusing on Citizens’ Voice and Actions (CVA) approach, advocacy in the mining sector and the Child Health Now Campaign (CHNC) during fiscal year 2013.

Citizens’ Voice and Actions (CVA): More Responsible Citizens

CVA is an approach to advocacy at the local level aimed at improving dialogue between ordinary citizens, basic public services providers (health, education, etc.) and the Government.

To achieve the integration of CVA in its programs, WV DRC conducted the training of its staff, community leaders and representatives of public social services at local level.

CVA method is currently integrated in the programming of ADPs as an approach to advocacy at local level.

28 programs located in four provinces (Kinshasa, Bandundu, Katanga and Equateur) have incorporated CVA in their detailed implementation plans. In total, 85 CVA groups were trained to be effectively operational in 2014.

WVDRC also provides technical support to the Congolese government for the implementation of the Introduction to the New Citizenship (INC), in its aspect of accountability and local governance, through the CVA approach.

“Child Miners Speak” - New Research Report

In 2013, WV conducted research on children working in artisanal mining in Kambove, in Katanga province. In this study, children themselves describe, through interviews, circumstances, consequences and motivations of their work in the mines, and offer various solutions. Their descriptions were then compared and supplemented by adults, including parents and stakeholders in the community and the mining industry.

This research is the first step in the long-term commitment of WV DRC to solve the issue of child labor in mines. WV particularly recommended...
to the provincial government of Katanga to issue a decree for the formal establishment of the “Provincial Committee against the worst forms of Child Labor and the update of the Provincial Action Plan 2013 - 2015 against child labor, according to the main recommendations of the research.

Currently, WV is involved in the review process of the Congolese Mining Code. It has managed to integrate issues related to the protection of children and women in the new mining code to be passed by the Parliament.

The Child Health Now Campaign - Ending Preventable Child Deaths

The CHNC is the first advocacy campaign WV has launched internationally and whose focus is on improving child and maternal health. WVDRC is working in partnership with the Ministry of Health and other actors of civil society to achieve the objectives of this campaign, notably by conducting advocacy for an increase in budget and expenditure allocated to health. During its second year of implementation, WVDRC conducted research on “Scaling Up Nutrition” (SUN) initiative to understand the different mechanisms that contribute to the engagement of the DRC in this international initiative. Thanks to the results of this research, shared with the Minister of Health and the Director of the National Nutrition Program, the DRC has joined this international initiative to address nutrition issues faced by children in the DRC.
In all emergency situations, WV works in partnership with other international and local organizations in order to maximize the speed and effectiveness of its response to affected populations. In 2013, WV responded to several emergency situations in Eastern DRC by providing assistance to more than 856,000 displaced people. Many of them traveled hundreds of kilometers without access to food during the fighting between M23 rebels and the DRC army.

In partnership with UNICEF, WV has created “Child Friendly Spaces” in many IDP camps to improve child protection issues and provide children with a safe environment in which to play, begin emotional healing and return to normal life after the war they lived. World Vision has also helped to ensure sanitation and hygiene through the provision of necessary materials in displaced and refugees camps with non-food items to help them settle into their new home.

WV initiates its interventions in partnership with the Government, the United Nations High Commissioner for Refugees (UNHCR), the World Food Program (WFP) and UNICEF.
At World Vision, stewardship is an integral part of everything we do - because we recognize that all means entrusted to us can transform the lives of children. Total income for 2013 was USD 69,628,984.

**Table 1: Source of funding in 2013**

<table>
<thead>
<tr>
<th>Description Fund Source</th>
<th>Y-T-D ACTUAL (USD)</th>
<th>Y-T-D BUDGET (USD)</th>
<th>BUDGET VARIANCES (%)</th>
<th>ANNUAL BUDGET (USD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>FUNDED BY WV USA</td>
<td>27,856,966</td>
<td>29,870,228</td>
<td>6.74%</td>
<td>29,870,228</td>
</tr>
<tr>
<td>LOCAL INCOME D.R. OF CONGO</td>
<td>2,039,685</td>
<td>3,146,413</td>
<td>35.17%</td>
<td>3,146,413</td>
</tr>
<tr>
<td>FUNDED BY WV CANADA</td>
<td>9,323,147</td>
<td>10,070,443</td>
<td>7.42%</td>
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<tr>
<td>RESERVE NOT ALLOCATED</td>
<td>557,998</td>
<td>100.00%</td>
<td></td>
<td>557,998</td>
</tr>
<tr>
<td>FUNDED BY WV HONGKONG</td>
<td>2,769,682</td>
<td>3,082,079</td>
<td>10.14%</td>
<td>3,082,079</td>
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<tr>
<td>FUNDED BY WV KOREA</td>
<td>3,064,962</td>
<td>3,287,098</td>
<td>6.76%</td>
<td>3,287,098</td>
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<tr>
<td>FUNDED BY WV JAPAN</td>
<td>2,323,595</td>
<td>2,449,647</td>
<td>5.15%</td>
<td>2,449,647</td>
</tr>
<tr>
<td>FUNDED BY WV FRANCE</td>
<td>167,904</td>
<td>282,051</td>
<td>40.47%</td>
<td>282,051</td>
</tr>
<tr>
<td>FUNDED BY WV TAIWAN</td>
<td>3,362,838</td>
<td>3,422,279</td>
<td>1.74%</td>
<td>3,422,279</td>
</tr>
<tr>
<td>FUNDED BY WV EUK</td>
<td>977,631</td>
<td>1,032,359</td>
<td>5.30%</td>
<td>1,032,359</td>
</tr>
<tr>
<td>FUNDED BY WV GC MONROVIA</td>
<td>3,409</td>
<td>25,000</td>
<td>86.36%</td>
<td>25,000</td>
</tr>
<tr>
<td>FUNDED BY WV MALAYSIA</td>
<td>69,990</td>
<td>73,425</td>
<td>4.68%</td>
<td>73,425</td>
</tr>
<tr>
<td>FUNDED BY WV AUSTRALIA</td>
<td>9,968,650</td>
<td>9,941,052</td>
<td>-0.28%</td>
<td>9,941,052</td>
</tr>
<tr>
<td>FRAGILE CONTEXT SPECIAL FUND</td>
<td>1,765,172</td>
<td>1,735,789</td>
<td>-1.69%</td>
<td>1,735,789</td>
</tr>
<tr>
<td>FUNDED BY WV GERMANY</td>
<td>730,133</td>
<td>653,123</td>
<td>-11.79%</td>
<td>653,123</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>64,423,765</strong></td>
<td><strong>69,628,984</strong></td>
<td><strong>7.48%</strong></td>
<td><strong>69,628,984</strong></td>
</tr>
</tbody>
</table>
Graphic 1: Funds source

- FUNDED BY WV AUSTRALIA
- FUNDED BY WV CANADA
- FUNDED CONTEXT SPECIAL FUND
- FUNDED BY WV FRANCE
- FUNDED BY WV GERMANY
- FUNDED BY WV HONGKONG
- FUNDED BY WV GC MONROVIA
- FUNDED BY WV JAPAN
- FUNDED BY WV KOREA
- FUNDED BY WV MALAYSIA
- FUNDED BY WV TAIWAN
- FUNDED BY WV USA
- LOCAL INCOME D.R. OF CONGO

Y-T-D ACTUAL

ANNUAL BUDGET
### Table 2: WV DRC Expenditure by sectors

<table>
<thead>
<tr>
<th>Description</th>
<th>Y-T-D ACTUAL (USD)</th>
<th>Y-T-D BUDGET (USD)</th>
<th>BUDGET VARIANCES (%)</th>
<th>ANNUAL BUDGET (USD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>RESERVE</td>
<td>557 998</td>
<td>100,00%</td>
<td></td>
<td>557 998</td>
</tr>
<tr>
<td>ADVOCACY</td>
<td>240 209</td>
<td>331 571</td>
<td>27,55%</td>
<td>331 571</td>
</tr>
<tr>
<td>ASSESSMENT/DESIGN</td>
<td>109 272</td>
<td>112 919</td>
<td>3,23%</td>
<td>112 919</td>
</tr>
<tr>
<td>ASSESSMENT/DESIGN</td>
<td>163 211</td>
<td>153 790</td>
<td>-6,13%</td>
<td>153 790</td>
</tr>
<tr>
<td>CHRISTIAN COMMITMENTS</td>
<td>137 911</td>
<td>179 065</td>
<td>22,98%</td>
<td>179 065</td>
</tr>
<tr>
<td>DISABILITY</td>
<td>8 009</td>
<td>7 391</td>
<td>-8,35%</td>
<td>7 391</td>
</tr>
<tr>
<td>ECONOMIC DEVELOPMENT</td>
<td>64 551</td>
<td>62 084</td>
<td>-3,97%</td>
<td>62 084</td>
</tr>
<tr>
<td>EDUCATION</td>
<td>5 802 324</td>
<td>7 255 495</td>
<td>20,03%</td>
<td>7 255 495</td>
</tr>
<tr>
<td>EMERGENCY RESPONSE</td>
<td>2 826 817</td>
<td>2 767 742</td>
<td>-2,13%</td>
<td>2 767 742</td>
</tr>
<tr>
<td>FOOD SECURITY</td>
<td>3 729 596</td>
<td>4 012 191</td>
<td>7,04%</td>
<td>4 012 191</td>
</tr>
<tr>
<td>GENDER</td>
<td>149 234</td>
<td>189 884</td>
<td>21,41%</td>
<td>189 884</td>
</tr>
<tr>
<td>HEALTH</td>
<td>3 531 681</td>
<td>3 927 405</td>
<td>10,08%</td>
<td>3 927 405</td>
</tr>
<tr>
<td>HIV/AIDS</td>
<td>830 648</td>
<td>839 369</td>
<td>1,04%</td>
<td>839 369</td>
</tr>
<tr>
<td>LEADERSHIP DEVELOPMENT</td>
<td>90 188</td>
<td>82 500</td>
<td>-9,32%</td>
<td>82 500</td>
</tr>
<tr>
<td>NUTRITION</td>
<td>13 304 234</td>
<td>13 800 110</td>
<td>3,59%</td>
<td>13 800 110</td>
</tr>
<tr>
<td>PROGRAMME AND PROJECT MANAGEMENT</td>
<td>15 497 540</td>
<td>15 592 339</td>
<td>0,61%</td>
<td>15 592 339</td>
</tr>
<tr>
<td>PROTECTION</td>
<td>5 145 401</td>
<td>5 279 974</td>
<td>2,55%</td>
<td>5 279 974</td>
</tr>
<tr>
<td>SPONSORSHIP MANAGEMENT</td>
<td>6 564 973</td>
<td>6 601 910</td>
<td>0,56%</td>
<td>6 601 910</td>
</tr>
<tr>
<td>WATER AND SANITATION</td>
<td>1 486 596</td>
<td>2 054 088</td>
<td>27,63%</td>
<td>2 054 088</td>
</tr>
<tr>
<td>MULTIPLE SECTORS</td>
<td>4 741 371</td>
<td>5 821 160</td>
<td>18,55%</td>
<td>5 821 160</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>64 423 765</strong></td>
<td><strong>69 628 984</strong></td>
<td><strong>7,48%</strong></td>
<td><strong>69 628 984</strong></td>
</tr>
</tbody>
</table>
Table 3: Income and expenditure statement for the year ended September 30, 2013

<table>
<thead>
<tr>
<th></th>
<th>FY13 USD ('000)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Income</td>
<td></td>
</tr>
<tr>
<td>International Income</td>
<td>33,147</td>
</tr>
<tr>
<td>Local Income</td>
<td>2,650</td>
</tr>
<tr>
<td>Other Income</td>
<td>348</td>
</tr>
<tr>
<td>Income Clearing</td>
<td>(1,673)</td>
</tr>
<tr>
<td>GIK</td>
<td>29,925</td>
</tr>
<tr>
<td></td>
<td><strong>64,397</strong></td>
</tr>
<tr>
<td>Expenditure</td>
<td></td>
</tr>
<tr>
<td>Project expenses</td>
<td>28,599</td>
</tr>
<tr>
<td>GIK Distributed</td>
<td>29,925</td>
</tr>
<tr>
<td>Operating Costs</td>
<td>5,900</td>
</tr>
<tr>
<td>Exchange Differential</td>
<td>(27)</td>
</tr>
<tr>
<td></td>
<td><strong>64,397</strong></td>
</tr>
</tbody>
</table>

Table 4: Consolidated balance sheet for the year ended September 30, 2013

<table>
<thead>
<tr>
<th></th>
<th>FY13 USD ('000)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assets</td>
<td></td>
</tr>
<tr>
<td>Cash</td>
<td>2,446</td>
</tr>
<tr>
<td>Advances</td>
<td>539</td>
</tr>
<tr>
<td>Receivables</td>
<td>510</td>
</tr>
<tr>
<td>Prepayments</td>
<td>1,845</td>
</tr>
<tr>
<td>Other Assets</td>
<td>513</td>
</tr>
<tr>
<td></td>
<td><strong>5,853</strong></td>
</tr>
<tr>
<td>Liabilities</td>
<td></td>
</tr>
<tr>
<td>Payables</td>
<td>2,247</td>
</tr>
<tr>
<td>Provisions</td>
<td>955</td>
</tr>
<tr>
<td>Other liabilities</td>
<td>-</td>
</tr>
<tr>
<td>Clearing Account</td>
<td>1,619</td>
</tr>
<tr>
<td></td>
<td><strong>5,853</strong></td>
</tr>
</tbody>
</table>
DRC

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3888, Boulevard du 30 Juin
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Email:
DR_Congo@wvi.org

Website:
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