Fighting poverty by empowering women and girls in the poorest communities around the world
CONTENTS

Our Vision and Mission [2]

Forewords [3]

A Year in the Life of CARE: Highlights from 2012 [4]

A World of CARE [6]

Empowering Women and Girls [8]

Maternal Health [10]

Food Security [11]

Climate Change [12]

Education [14]

HIV and AIDS [15]

Water, Sanitation & Hygiene [16]

Economic Development [17]

Emergency Response [19]

Get Involved [22]

Accountability and CARE’s Structure [23]

Financial Figures [24]

OUR VISION

We seek a world of hope, tolerance and social justice, where poverty has been overcome and people live in dignity and security.

CARE will be a global force and partner of choice within a worldwide movement dedicated to ending poverty. We will be known everywhere for our unshakeable commitment to the dignity of people.

OUR MISSION

CARE’s mission is to serve individuals and families in the poorest communities in the world. Drawing strength from our global diversity, resources and experience, we promote innovative solutions and are advocates for global responsibility.

We promote lasting change by:

- Strengthening capacity for self-help
- Providing economic opportunity
- Delivering relief in emergencies
- Influencing policy decisions at all levels
- Addressing discrimination in all its forms

Guided by the aspirations of local communities, we pursue our mission with both excellence and compassion because the people whom we serve deserve nothing less.
The year 2012 was the pivotal moment in a major journey to transform the CARE International confederation. Together, CARE colleagues from across the confederation, including Country Offices, CI Members, Affiliate Members as well as external stakeholders worked to elaborate a vision for our strategic development. They discussed how CARE could become more relevant and efficient in the future to achieve a greater impact on the lives of poor and vulnerable women and men. The result is CARE 2020, a CI-wide vision of what we want CARE to be by the year 2020. We want to be known for our work across the relief, recovery, and development spectrum and our particular focus on empowering poor women and girls. CARE’s credibility is a reflection of our success over the previous decade in improving the economic, social and political advancement and wellbeing of millions of poor women and their communities around the world.

In order to achieve our vision, we are committed to working more closely with local and global civil society organizations and to welcoming more CARE members and affiliate members from around the world, as we have recently with CARE India and CARE Peru. We are also relying on our diversity as a global organization to make our global impact more sustainable, dynamic and long-lasting.

In fiscal year 2012, CARE worked in 84 countries around the world, supporting 997 poverty-fighting development and humanitarian aid projects to reach more than 83 million people and advocate for policy change to improve the lives of the poorest populations.

I would like to thank our partners, donors, stakeholders and staff for their huge commitment and support. You are essential to CARE’s mission of reducing poverty and achieving social justice for millions of poor people across the world. We could not have achieved this without you!
A YEAR IN THE LIFE OF CARE: HIGHLIGHTS FROM 2012

HIGHLIGHTS ON THE INTERNATIONAL STAGE

CARE’s work in Peru with indigenous women as citizen monitors of public services was selected as a best practice by the World Health Organization’s Independent Expert Review Group (iERG). Following our involvement in the development of the United Nations (UN) Secretary General’s Global Strategy for Women and Children’s Health, CARE Peru and the CI Secretariat contributed to the work of the iERG to provide oversight, report on progress made and identify best practices in implementing the UN’s “Every Woman, Every Child” strategy.

At the UN Conference on Sustainable Development in Rio de Janeiro in July 2012, CARE highlighted issues facing the world’s poor in a report ‘One Planet – One Future: Equity and resilience for sustainable development’ which called on leaders to move towards sustainable development that builds people’s resilience to shocks while tackling climate change, feeding a growing population and eradicating inequality.

At the International Conference on Afghanistan in Bonn, Germany, CARE once again advocated for women’s rights. CARE supported the Afghan’s Women’s Network by facilitating and promoting the development of their recommendations for the conference, based on consultations with thousands of women from across the country. CARE also hosted a series of meetings between women’s rights activists from Afghanistan and diplomats and journalists who were attending the conference to ensure that Afghan women can shape the future of their country.

At the UN Climate Change Conference (COP17) in Durban, CARE worked with partners to call for action to reduce the effects of climate change on the poor and vulnerable, including securing better policies to help people adapt to climate impacts, limit deforestation, improve support for small-scale agriculture and tackle gender inequality.

In addition to national and local celebrations of International Women’s Day 2012, CARE released the ‘Reaching New Heights’ report showing that stunting, a measure of the shortfall in a child’s growth due to malnutrition, had plummeted 28 percent in Bangladesh from February 2006 to November 2009 as a result of women’s empowerment. CARE promoted female entrepreneurship, encouraged greater participation by mothers in their children’s education and supported self-help groups where women and girls could address taboo subjects such as early marriage, dowry and violence against women.

The ‘Reaching New Heights’ report is a powerful example of why we believe greater gender equality is the key to fighting poverty, hunger and injustice around the world. Read more about the ‘Reaching New Heights’ report at www.care-international.org

HIGHLIGHTS FROM OUR COUNTRY OFFICES

CARE Haiti launched a food voucher program ensuring that vulnerable families have access to food in nine communes of Grand Anse. The program introduced an innovative electronic voucher system and piloted a social safety net mechanism that can be activated and scaled up in response to future emergencies as well as support longer-term development programs.

CARE Nepal was honoured for its water, sanitation and hygiene development projects by the Honourable Prime Minister of Nepal, Dr. Baburam Bhattara.

CARE Kenya launched an innovative partnership with Equity Bank and mobile communications firm Orange that, for the first time anywhere, will allow savings groups remote access to full-service banking using mobile phones. CARE savings groups (known as Village Savings & Loan Associations, or VSLAs) will be able to open an Equity Bank account and deposit cash into interest-bearing group savings accounts without visiting a physical branch.

We formally opened an office in the new country of South Sudan to respond to the humanitarian needs and contribute to the long-term development of the young country.

CARE advocates for women and girls as the key drivers of change in the fight against poverty. ©Josh Estey/CARE
HIGHLIGHTS FROM OUR MEMBER OFFICES

CARE Austria celebrated a double anniversary last year: the 65th anniversary of the delivery of the first CARE packages to Austria and the 25th anniversary of the delivery of the first CARE packages from Austria to countries in need of help.

In 2012, CARE International UK’s innovative microloan website, lendwithcare.org, raised just under £1 million in loan capital for entrepreneurs in developing countries looking to start or expand a small business. The site, with help from The Co-operative Group who signed a three year partnership with CARE in August 2011, attracted 4,500 new lenders and started working in four more countries (taking its total to seven). In October 2011, lendwithcare.org was awarded the Third Sector Excellence Award for Best New Website. Visit www.lendwithcare.org for more information.

CARE Australia and other members, with financial support from CI UK, launched the ‘Asia Impact Report,’ a comprehensive report that explores CARE’s impact in the Asia region over a five-year period (2005-2010). The report is part of our commitment to transparency, and it shows the positive and significant impact our work has had on the lives of millions of people and provides greater accountability to supporters. Access the entire report at www.care.org.au/special-reports.

CARE Norway released a report highlighting projects that address domestic violence and gender inequality in Burundi entitled ‘Engaging Men: The Abatangamuco and Women’s Empowerment in Burundi.’ The report looks at our work with a group of rural men who have decided to end abusive and oppressive practices and instead collaborate with their wives in all aspects of family life. Read the report here: www.care.no.

CARE France unveiled the ‘Where the Rain Falls’ project at the Rio+20 Summit in Rio de Janeiro, Brazil in June 2012. The project investigates how changing rainfall patterns impact rural communities by providing a more nuanced understanding of the links between rainfall variability, food and livelihood security, as well as migration in eight case study countries and a series of community-based adaptation projects to reduce vulnerability to climate change. This three-year project is managed by CARE France in partnership with the United Nations University in Bonn, and sponsored by The AXA Group and the John D. and Catherine T. MacArthur Foundation. Visit the project’s website: www.wheretherainfalls.org.

GOVERNANCE AND ADVOCACY

- **Direct participants:** 913,012
- **Projects:** 142
- **Countries:** 50

Last year, 142 of CARE’s programs helped more than 900,000 poor people claim their rights and advocate for policies at local, regional and national levels to improve gender equity, motivate policy changes and address the underlying causes of poverty.

<table>
<thead>
<tr>
<th><strong>HIGHLIGHTS OF CARE PROJECTS 2012:</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>72% of CARE’s projects in FY12 were implemented with or through partners.</td>
</tr>
<tr>
<td>68% of CARE’s projects in FY12 addressed women’s empowerment and gender equality, facilitating transformative change in gender roles and empowering women and girls.</td>
</tr>
<tr>
<td>More than half of CARE’s projects in FY12 helped poor people claim their rights and advocate for policy change at local, national or regional levels.</td>
</tr>
<tr>
<td>More than half of CARE’s projects developed innovative approaches for reducing poverty.</td>
</tr>
<tr>
<td>26% of CARE’s projects in FY12 addressed sexual and gender-based violence.</td>
</tr>
</tbody>
</table>
IN THE FISCAL YEAR 2012, CARE WORKED IN 84 COUNTRIES AROUND THE WORLD, SUPPORTING 997 POVERTY-FIGHTING DEVELOPMENT AND HUMANITARIAN AID PROJECTS TO REACH MORE THAN 83 MILLION PEOPLE.
GENDER EQUALITY

2,393,982  Direct participants
135  Projects
48  Countries

Last year, CARE’s projects reached more than two million people, women and men, with information and tools to promote gender equality and empower women. Our women’s empowerment programs help women and men promote women’s rights, provide solidarity and support groups for women, as well as prevent and ensure services and support for survivors of sexual and gender-based violence.

EMPOWERING WOMEN AND GIRLS

The changes need to happen on three stages: a woman’s own capabilities and aspirations, the environment that influences her choice and the interactions she engages in each day. In short: Empowerment means changing the relationships and social structures that shape the lives of women and girls.

Women and girls’ empowerment cannot be sustained without getting men and boys as allies. When we engage with male community leaders, they realize the importance of ending the practice of child marriage and investing in the wellbeing of the girls and women in their communities. When women and girls are supported by their husbands, fathers and brothers, we are one step closer to bringing about social justice and breaking through the cycle of poverty and discrimination.
We believe that women’s empowerment means changing the relationships and social structures that shape women’s lives.

CARE’S HOLISTIC APPROACH: ACCESS TO BASIC RIGHTS FOR SUSTAINABLE DEVELOPMENT

- Food security and sustainable agriculture
- Economic development
- Maternal and child health, HIV and AIDS
- Disaster risk reduction
- Education
- Water and sanitation

Political environment: Governance
Social environment: Human rights and protection
Economic environment: Access to markets
Natural environment: Climate change, environment and natural resource management

Advocacy at the local, national and international level
OVER HALF A MILLION WOMEN DIE EACH YEAR FROM PREGNANCY AND CHILDBIRTH-RELATED CAUSES. 90 PERCENT OF MATERNAL DEATHS CAN BE PREVENTED THROUGH SIMPLE, COST-EFFECTIVE INTERVENTIONS, SUCH AS: ACCESS TO VOLUNTARY FAMILY PLANNING SERVICES; QUALITY CARE BY A DOCTOR, MIDWIFE OR NURSE; EMERGENCY OBSTETRIC CARE; IMMEDIATE POST-PARTUM CARE FOR THE MOTHER AND NEWBORN; AND A STRONG AND EQUITABLE HEALTH SYSTEM THAT ADDRESSES THE SOCIAL AND ECONOMIC FACTORS THAT INFLUENCE WOMEN’S ACCESS TO AND USE OF HEALTH SERVICES.

OUR IMPACT

In India, CARE is working to improve maternal and newborn healthcare practices in the state of Bihar. We are strengthening the capacity of local health services by creating Quality Improvement Teams, which include doctors, health managers, nurses and front line health workers. When Gayatri, a 20-year-old first-time mother gave birth at the Primary Health Centre in Bihar that was supported by CARE, she realized instantly that something was different. “It was clean, we had privacy to give birth, there was oxygen for the babies and an assistant helped me to breastfeed. When I look back, everyone in the hospital from the highest staff downwards, was involved in making my pregnancy the best experience of my life.”

As an individual community change worker with CARE Ethiopia, Abera knew about the risks of early marriage and fought against the traditional practice in his community. However, when his aging parents and relatives pushed him into marrying off his 14-year-old daughter Sosina, he prepared everything for her marriage – until the day when she learned about the plans and said “no”. Abera honoured his daughter’s wishes and cancelled the wedding, instead promising to use the money set aside for the wedding on her education. He said, “If I am not going to respect my own daughter’s right and if I do not model this behaviour myself as a community change agent, then who will? Who will hear my words and believe what I say is true? So, I said to myself no, I will take all the risk and give a lesson to the rest of the community.”

In South Sudan, CARE’s programs provide quality health care to newborns and mothers. ©Josh Estey/CARE
FOOD SECURITY

INEFFICIENT AGRICULTURAL PRACTICES, DROUGHT AND CLIMATE CHANGE: THESE ARE AMONG THE UNDERLYING CAUSES OF FOOD INSECURITY.

CARE WORKS WITH FAMILIES AND COMMUNITIES TO HELP THEM PRODUCE MORE NUTRITIOUS FOOD, DEVELOP BETTER AGRICULTURAL AND ENVIRONMENTAL SKILLS AND INCREASE THEIR INCOME. OUR GOAL IS TO HELP POOR PEOPLE CONSERVE THEIR NATURAL RESOURCES AND PROTECT THEIR ENVIRONMENT FOR THEIR CHILDREN’S FUTURE.

OUR IMPACT

CARE works with poor families in Timor Leste to help them grow their own crops, improve their diet, sell surplus crops for a profit and store their seeds for the next season. Take the example of Arminda Pererira, a mother of six children between the ages of four and 17 and a member of a women’s farmer group. Her involvement with CARE taught her agricultural techniques that will help her plan for the future. “I have learned many things,” explains Arminda. “Before, we planted with no order. Now, we know how to plant properly, space the crops and prepare the land. We can make our own organic fertilizer which saves money, and we learned how to compost.”

The new farming methods and seed varieties introduced by CARE have resulted in a dramatic increase in production. The families now have enough vegetables to eat all year round and can sell the surplus at the market to earn an income. The impact that Arminda’s group is having extends beyond the members and their families to the rest of the community. After each harvest, the group stores a drum of seeds, which are available to members of the community who have not had a successful harvest. This practice is a traditional method in the community and has been successfully integrated into CARE’s project to avoid embarrassment to those families asking for assistance.

Having seen the powerful difference her group has made in the community, Arminda humbly acknowledges her role as the group’s leader, saying, “We produce more than before because we work as a group and it reduces the burden. An individual cannot achieve as much in the same time as a group can.” Arminda is passing on her hard work ethic and positive attitude to her children. “I expect my children to be leaders,” she says with a smile. “It’s important because then they can change their lives.”

In Timor Leste, CARE teaches communities like Arminda’s sustainable farming practices. ©Josh Estey/CARE
ENVIRONMENT AND NATURAL RESOURCE MANAGEMENT

391,558 Direct participants
76 Projects
32 Countries

Last year, CARE worked with almost 400,000 people on improved natural resource management, recovery of degraded lands, forest management and watershed management.

CLIMATE CHANGE

355,065 Direct participants
69 Projects
30 Countries

Last year, we assisted more than 350,000 people to adapt to the effects of climate change.

CLIMATE CHANGE IS ALREADY HAVING A PROFOUND IMPACT ON OUR PLANET AND ITS PEOPLE WHO DEPEND ON A STABLE CLIMATE IN ORDER TO SURVIVE AND THRIVE.

NEW CLIMATIC RECORDS ARE BEING SET WITH ALARMING FREQUENCY, WITH CHANGES RECONFIGURING OUR BUILT AND NATURAL WORLD, OUR ECONOMIES AND THE VERY BASIS OF OUR SOCIETIES. YET, IT IS THE WORLD’S POOREST PEOPLE WHO ARE BEARING THE BRUNT OF CLIMATE CHANGE IMPACTS, INCLUDING MORE ERRATIC WEATHER, MORE SEVERE STORMS AND CHANGES IN RAINFALL PATTERNS, ALL IMPACTING ON ALREADY FRAGILE LIVELIHOODS.

In response, CARE is helping people adapt by finding new sources of income, planting different types of crop and being better prepared for disasters. CARE is also influencing national and international policies and institutions to help tackle the growing climate crisis.

OUR IMPACT

Noor Jelle lives in Fafi District in Garissa, in northeastern Kenya. Here, people have traditionally lived as pastoralists, raising livestock like camels for food and to sell at the market. For centuries, Noor’s community has used traditional methods to predict weather patterns, including observing changes in temperature, wind direction and birds’ and insects’ behaviour. However, with the changing climate, including prolonged droughts and unpredictable rainfall, Noor’s family risked losing their herds. They were forced into a different way of life, keeping just a few goats and surviving on rain-fed crops like maize.

In 2011, CARE’s Adaptation Learning Programme began using scientific information about climate change to help families like Noor’s survive. Now, CARE runs ‘Participatory Scenario Planning’

CARE works with women in Tanzania to reduce the impacts of climate change through reforesting. ©Evelyn Hockstein / CARE
The Poverty, Environment and Climate Change Network (PECCN) is a CARE Centre of Expertise which supports CARE to deliver humanitarian and development projects that consider the risks and impacts of climate change. PECCN also calls on leaders and lawmakers to adopt policies that promote the needs and rights of poor and vulnerable people affected by climate change. See: www.careclimatechange.org
EDUCATION

2,381,228   Direct participants
136   Projects
48   Countries

Last year, CARE facilitated access to quality basic and secondary education or technical training for more than 2.3 million people.

GIRLS ARE USUALLY THE FIRST TO BE TAKEN OUT OF SCHOOL, WITH PARENTS OFTEN PRIORITIZING A BOY’S EDUCATION OVER A GIRL’S. YET, WHEN A GIRL COMPLETES PRIMARY SCHOOL, SHE IS MORE LIKELY TO HAVE CHILDREN LATER, SEND HER OWN CHILDREN TO SCHOOL, HAVE A HEALTHIER FAMILY AND EARN A GREATER INCOME.

THIS IS WHY WE ARE WORKING TO INCREASE THE VALUE OF GIRLS’ EDUCATION IN COMMUNITIES AND REMOVE THE BARRIERS THAT PREVENT GIRLS FROM GOING TO SCHOOL AND STAYING THERE.

OUR IMPACT

In Guatemala, CARE works with groups of girls to give them access to education and to train them as future community leaders. Maria Angelica Joj Yac is a 21-year-old indigenous woman who fought for the chance to be the first person to finish school in her family. Maria Angelica volunteers in her community through CARE’s Education and Leadership Program, where she is trained in teaching and learning techniques and themes such as leadership, self-esteem, and children’s rights and responsibilities. With a scholarship and inspiration from CARE, she was able to pay for her high school studies and keep the earnings from her job to buy 45 chickens to raise and sell.

Maria Angelica knows that in order to overcome injustice in her community, girls must be educated about their rights and support one another. “I work with the girls in my community, and together we leave the confines of the home, of isolation, and of timidity, and move toward the public, especially to participate in the classroom among our peers,” she explains. “What I have to do now is demonstrate that women have the same rights and opportunities in school and in the workplace. Nothing and no one will stop me from reaching my goals.”

CARE works to ensure every girl has the right to attend school and have a brighter future. © CARE
HEALTH PROJECTS

9,845,584  Direct participants
91  Projects
35  Countries

Last year, CARE provided access for almost ten million people to health services to protect themselves from HIV, tuberculosis and other diseases.

HIV AND AIDS

OUR IMPACT

In Bougainville, Papua New Guinea, young adults are experiencing an HIV and AIDS epidemic that is placing their generation in even more danger after years of conflict. However, Dormatilda Gani, 23, and Bridgette Mohin, 22, are two young women who have chosen to contribute to a more positive future by volunteering to become peer educators in a CARE education program, which raises awareness of HIV and AIDS among youth to help prevent the spread and impacts of the epidemic. They attend monthly training on health issues and leadership skills, which they turn into education sessions for their communities to transfer the knowledge they have gained on issues such as HIV and AIDS, sexual and reproductive health and substance abuse.

Dormatilda is committed to helping protect her community from the epidemic, saying “What I like about being a peer educator is public speaking and having the chance to talk to many people. Trying to build up the community. I like to be aware of HIV and AIDS and other sexual and reproductive health issues. And also it strengthens me to be strong and know my rights and just be faithful to myself.” These youth are also learning vital leadership skills to play a stronger role in decision-making in their communities.

POOR PEOPLE, ESPECIALLY WOMEN AND GIRLS, ARE MOST AT RISK OF BECOMING INFECTED WITH HIV AND AIDS BECAUSE OF THE CYCLE OF POVERTY AND INJUSTICE THAT KEEPS THEM FROM LEARNING BASIC HEALTH PRACTICES, ACCESSING HEALTH CENTRES AND HAVING SOCIAL PROTECTION FROM SEXUAL VIOLENCE AND ABUSE.

CARE WORKS TO HELP POOR PEOPLE PREVENT HIV TRANSMISSION, PROTECTS THE RIGHTS OF PEOPLE LIVING WITH HIV AND AIDS AND REDUCES SOCIAL STIGMA ASSOCIATED WITH THE DISEASE.

In Papua New Guinea, CARE raises awareness of HIV and AIDS among youth like Dormatilda to help prevent the spread and impacts of the epidemic. ©Josh Estey/CARE
WATER, SANITATION AND HYGIENE

1,531,840 Direct participants
99 Projects
40 Countries

Last year, CARE helped more than 1.5 million people access safe drinking water, develop sustainable water management practices and improve hygiene practices and sanitation options.

INFRASTRUCTURE

1,008,686 Direct participants
55 Projects
28 Countries

CARE’s programs led to one million people in 28 countries obtaining access to improved school infrastructure, housing or basic services.

CLEAN WATER, SAFE LATRINES AND PROPER HYGIENE CAN MEAN THE WORLD TO GIRLS AND WOMEN. A NEWLY BUILT WELL IN THEIR VILLAGE HELPS FREE UP HOURS THAT THEY PREVIOUSLY NEEDED TO FETCH WATER AT FAR AWAY SOURCES.

SEPARATE LATRINES MEAN THAT MORE GIRLS WILL RECEIVE AN EDUCATION, AS MANY STAY AWAY FROM SCHOOLS IF ADEQUATE HYGIENE FACILITIES ARE UNAVAILABLE.

Good hygiene practices prevent disease and malnutrition. We work with communities to train them on basic hygiene and sanitation practices, improve access to toilets and provide clean water for drinking and cooking.

OUR IMPACT

When Serina learned about the benefits of building a toilet in the home she shares with her husband and eight children, nothing could stop her from completing the task. Serina is a member of a community health club facilitated by CARE in Zaka District, Zimbabwe. “I’m very happy to be a club member,” Serina explains. “It helps me to learn about health and hygiene. I have learned how to keep my house clean inside and out and how to avoid the spread of diseases in our community. Now I feel happy that I can teach these things to my children.”

Serina’s family now practices many hygiene principles that they didn’t previously, and she is working to spread the knowledge among other women in her community. “I can see in the households that women are the ones that care for their families, so it’s important that we are learning to live in a healthy environment. After I have gained all these skills my family is practicing good hygiene. We always remind each other to keep ourselves clean. I hope I will learn even more in the health club sessions.”

Access to clean water, safe latrines and proper hygiene can mean the world to girls and women. © Josh Estey / CARE

© Michael Tsegaye / CARE
ECONOMIC DEVELOPMENT

3,433,351  Direct participants
223  Projects
54  Countries

Last year, CARE enabled more than 3.4 million people to improve their household income through increased access to financial and non-financial services, participation in village savings and loan associations, value chain strengthening, market linkages and diversified livelihoods.

ECONOMIC DEVELOPMENT

OUR IMPACT

In Georgia, CARE is working to help people displaced by the war with Russia in 2008 to recover their livelihoods and rebuild their communities. So when Maia, a 41-year-old housewife and mother of three grown children, decided to open a mill in her settlement of internally displaced people, she submitted a proposal to CARE and received a small loan. The new mill is welcome news to all the people of the settlement, who previously had to travel to another town and pay more money to grind their maize or wheat. Maia says that this project has given her back hope in her life and has helped her benefit not only her family, but the community as a whole.

Maia is an inspirational figure in overcoming the hardship that many displaced families have experienced. She and her husband now send their two children to the local town of Gori to study law and economics, and she uses income received from the mill along with the state allowance to buy their daily food. In addition, Maia sometimes takes the vegetable harvest from her small kitchen garden to a local market to expand the family’s income.

Maia and her husband say: “After the war, we did not have anything. Now we feel better, and we know we won’t starve. We can’t change everything, but we can strive not to be dependent on others, and to live on the money we earn.”

In Georgia, CARE gives women and men access to economic resources and training to transform their communities. ©Zaven Khachikian/www.photogroup.am
The inhabitants of Bazazaga, Niger are no longer facing the loss of all assets in the face of droughts or food crises. Their lives have been transformed by a savings model that CARE started in 1991: Village Savings and Loan Associations (VSLA). They give village women access to funds they can use for loans or put towards social activities. Tani Dan Loumou, a member of the VSLA, says that CARE’s projects have helped the women of her community. “Our banks are working, and our businesses are still prosperous, even though the CARE projects have finished.” Abdoullahi Chekaraou, a local farmer, knows that CARE’s work in his village has meant the difference between life and death for his community, saying, “Even in times of poor harvests and droughts, we have been better protected and prepared for the worst.”

Today, Village Savings and Loans Associations thrive in 24 countries reaching over 24 million people in Africa.
EMERGENCY RESPONSE

EMERGENCIES ARE A DEVASTATING FORCE, OFTEN DESTROYING THE LIVES AND LIVELIHOODS OF POOR AND VULNERABLE PEOPLE, ESPECIALLY WOMEN AND GIRLS. ON AVERAGE, WOMEN AND CHILDREN ARE 14 TIMES MORE LIKELY TO DIE DURING A DISASTER THAN MEN, ACCORDING TO THE UNITED NATIONS. IN TIMES OF CRISIS, WOMEN AND GIRLS ARE OFTEN THE LAST TO EAT WHEN THEIR FAMILIES RUN SHORT ON FOOD, AS THE NUTRITIONAL NEEDS OF MEN AND BOYS ARE VIEWED AS MORE IMPORTANT. NEW MOTHERS AND PREGNANT WOMEN ARE OFTEN THE MOST VULNERABLE FROM THE VERY BEGINNING OF A FOOD CRISIS AS THEY HAVE THE LEAST RESISTANCE DUE TO POOR NUTRITIONAL INTAKE AND OVERWORK.

IN 2012, CARE RESPONDED TO EMERGENCIES ACROSS THE WORLD WITH HUMANITARIAN AID AND ASSISTANCE. THE CHRONIC FOOD CRISIS, INSECURITY AND POLITICAL INSTABILITY IN THE HORN OF AFRICA AND THE SAHEL REGION WERE DEVASTATING FOR TENS OF MILLIONS OF PEOPLE, ESPECIALLY MOTHERS, CHILDREN AND THE ELDERLY. THROUGH OUR HUMANITARIAN RESPONSE WE PROVIDED IMMEDIATE RELIEF TO OVER 3.52 MILLION VULNERABLE PEOPLE IN THE COUNTRIES OF THE SAHEL AND THE HORN OF AFRICA, WHILE HELPING COMMUNITIES DEVELOP LONG-TERM STRATEGIES FOR RECOVERY AND RESILIENCE IN THE FACE OF FUTURE CRISSES AND SHOCKS.

In Kenya, Ethiopia, Somalia and Djibouti, we helped over 2.77 million people recover from drought and rebuild their livelihoods. We gave emergency food distributions and treatment for malnutrition to almost 1.3 million people, including malnourished children and their mothers. In addition, we provided access to clean water, household and hygiene supplies, sanitary facilities and hygiene education to refugees and communities affected by drought. We helped people protect and rebuild their livelihoods by training pastoralists to maintain the health of their animals, distributing improved seeds and fertilizer to allow farmers to replant, and undertaking cash-for-work activities, among others.

CARE responds to today’s emergencies and helps people prepare for tomorrow’s. © Jake Lyell/CARE
EMERGENCY RESPONSE

In the world’s largest refugee camp in Dadaab, Kenya, CARE worked with and continues to help exhausted and malnourished refugees, the majority of whom are women and children, who have fled conflict, drought and famine in Somalia. CARE provides primary education and access to clean water, distributes food and offers psychological support and counselling for survivors of sexual and gender-based violence to more than 460,000 refugees in the camp. More than 1,600 refugees assist CARE in implementing programs, many of whom have lived in the camps for most of their lives.

The Sahel region of Africa was also hit with a devastating food crisis last year. Some communities in Niger were better prepared to survive the drought because of their participation in CARE-sponsored cereal banks and Village Savings and Loan Associations (VSLAs).

However, conflict in northern Mali made the situation more desperate and caused a movement of people within Mali and increasing numbers of refugees fleeing from Mali to neighbouring countries. CARE provided humanitarian aid to over 750,000 people in Chad, Mali and Niger through access to food via cash transfers and direct distributions, handing out seeds and tools and promoting hygiene through improved access to water and sanitary facilities. At the same time, CARE’s long-term development programs in the region, such as women-led VSLAs and cereal banks, continue to help women build and protect assets to become more resilient in future times of crisis.

In addition to these large-scale crises, last year CARE responded to emergencies and natural disasters worldwide, including: floods in Pakistan, Cambodia, Vietnam, Guatemala, Thailand, Tanzania, Brazil and Peru; cyclone in Madagascar; internally displaced people in South Sudan and Myanmar; and the early stages of the Syrian refugee influx into Jordan.
**Helping Syrian Refugees**

As the humanitarian crisis in Syria began in 2011 and continued to escalate in 2012, we saw thousands of people crossing the border to neighbouring Jordan and registering as refugees with the United Nations High Commissioner for Refugees (UNHCR). Most families arrived with nothing more than what they could carry, and those who had crossed the borders with savings quickly spent their money and sold their assets to survive. Our efforts to help displaced families and host communities began in Jordan in early 2012 with cash support to pay for housing and living costs, and in 2013 we expanded our presence on the ground in Egypt and Lebanon, collaborating with a range of partners to help refugees and host communities.

**Gender and Emergencies**

Emergencies have different impacts on men and women and often change household and community dynamics. Women are disproportionately affected by natural disasters and face specific challenges in armed conflict. CARE is committed to working with women and girls, boys and men to free women’s potential to the benefit of society as a whole.

**How we include gender into our emergency response:**

- Having a gender balanced team with the ability to assess and respond to the different needs of men, women, boys and girls, and who know and respect CARE’s codes of conduct;
- Applying a solid gender analysis including sex and age disaggregated data (SADD). This means we analyze the different power, roles and needs of women, men, boys and girls within the community, and how these have been affected by the crisis;
- Grounding our emergency response strategy, program design and implementation directly on the gender analysis;
- Incorporating a gender lens in all of our humanitarian programs;

Ensuring that we monitor the different impacts of our response on women, men, boys and girls, including by using gendered indicators and monitoring tools that allow us to see and track the different impacts according to sex and age.
TAKE ACTION: JOIN CARE

Around the world, CARE Members are organizing events, public speeches and challenge tours – all with the help of committed volunteers. They raise awareness, engage the public and bring the needs of poor people to the attention of politicians. If you are interested and want to take action in the fight against poverty, contact us here: www.care-international.org/take-action.

---

CARE Australia @CAREAustralia
Happy World Water Day! Great day to celebrate $500,00 raised for Walk In Her Shoes, which will help reduce time walking for water #WIHS

CARE Deutschland @care_de
Guten Morgen! Schon mitgemacht bei unserer #Facebook Foto-Aktion? Reach out your hand!

CARE India @CAREIndia
Gearing up for International Women’s Day. Please join us on 5 March to pledge to break myths about women and girls!

CARE InternationalUK @CAREintuk
Congratulations all who completed the CARE 3 Peaks Challenge in stormy conditions, raising an amazing £70,000! Thankyou!

CARE Perú @careenperu
En el Día Mundial del Agua #CAREPeru los invita a su stand en la Feria por el Agua en @Senamhiperu

CAREUSA @CARE
A world without #poverty - it all starts with you. RT if you believe one person has the power to change the world!

CARE Canada @carecanada
Ever dreamed of climbing Kilimanjaro? Join us in 2012! Get all the details...
CARE’S STRUCTURE AND ACCOUNTABILITY

OUR 12 MEMBERS
CARE International is a global confederation of 12 National Members working together to fight poverty and provide emergency assistance. Each CARE Member is an autonomous non-governmental organization and implements program, advocacy, fundraising and communications activities in its own country and developing countries.

OUR AFFILIATE MEMBERS
Last year CARE Peru joined CARE India as an Affiliate Member of CARE International. Both offices will further strengthen the global diversity in CARE’s governance.

OUR WORK IN 84 COUNTRIES
In fiscal year 2011, CARE worked in 84 countries around the world. In countries where we work, projects are implemented through a Country Office, which is managed by one of CARE’s Members. This Member ensures appropriate and inclusive strategic planning and program development, sound financial management and control, and effective personnel hiring and management. CARE also supports projects in a small number of countries where we do not have a full Country Office.

OUR GLOBAL SECRETARIAT
The CARE International Secretariat is located in Geneva, Switzerland, with offices in Brussels, Belgium and New York, U.S.A. Under the leadership of the Secretary General, the Secretariat coordinates and supports the CARE confederation, represents the confederation at the United Nations and the European Union, and leads CARE’s global advocacy. The Secretariat also houses the CARE Emergency Group and the CARE International Safety and Security Unit.

OUR PARTNERSHIPS
Partnerships are the foundation of CARE’s work. By working with local groups and governments, we develop a deeper understanding of the context and build local capacity and ownership. CARE works with other national and international aid organizations and United Nations agencies to maximize the impact of our work, and we are an active member of several networks with the goal of alleviating poverty through policy change.

OUR DONORS
CARE’s work is made possible with the generous support of our donors, which include national governments, private individuals, the European Commission, foundations, corporations and United Nations agencies.

OUR PROGRAMMING PRINCIPLES
CARE’s projects are designed and implemented according to CARE’s Programming Principles:
• Promote empowerment
• Work in partnership with others
• Ensure accountability and promote responsibility
• Address discrimination
• Promote the non-violent resolution of conflicts
• Seek sustainable results

OUR COMMITMENT TO ACCOUNTABILITY
CARE is committed to meeting international standards of quality and accountability while ensuring communities have a say in planning, implementing and evaluating our response. We measure our impact through monitoring activities, and internal and external evaluations. Some key networks in which CARE is involved or is a signatory to:
• Code of Conduct for the International Red Cross & Red Crescent Movement and NGOs in Disaster Relief
• The Sphere Project
• Humanitarian Accountability Partnership International (HAP)
• Active Learning Network for Accountability and Performance in Humanitarian Action (ALNAP)
• People in Aid
• INGO Accountability Charter Company
## FINANCIAL FIGURES

### COMBINING STATEMENT OF ACTIVITY AND NET ASSETS FOR THE YEAR ENDED JUNE 30, 2012 (FY12) ‘000 EURO

#### SUPPORT AND REVENUE

<table>
<thead>
<tr>
<th></th>
<th>CARE Australia</th>
<th>CARE Canada</th>
<th>CARE Danmark</th>
<th>CARE Deutschland-Luxemburg</th>
<th>CARE France</th>
<th>CARE Japan</th>
<th>CARE Nederland</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agricultural commodities</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Donor contributions</td>
<td>9,099</td>
<td>7,413</td>
<td>4,089</td>
<td>8,610</td>
<td>10,276</td>
<td>371</td>
<td>3,205</td>
</tr>
<tr>
<td>Programs contracted with member organizations</td>
<td>11,368</td>
<td>32,135</td>
<td>-</td>
<td>1,908</td>
<td>744</td>
<td>3,252</td>
<td>-</td>
</tr>
<tr>
<td>Contributions in kind</td>
<td>38</td>
<td>35,111</td>
<td>-</td>
<td>-</td>
<td>11</td>
<td>74</td>
<td>-</td>
</tr>
<tr>
<td>Government and non-governmental agencies grants</td>
<td>22,525</td>
<td>38,626</td>
<td>9,160</td>
<td>21,662</td>
<td>6,476</td>
<td>1,460</td>
<td>10,703</td>
</tr>
<tr>
<td>Interest and other income</td>
<td>1,518</td>
<td>2,400</td>
<td>743</td>
<td>344</td>
<td>726</td>
<td>390</td>
<td>118</td>
</tr>
<tr>
<td>Administrative support</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>TOTAL SUPPORT AND REVENUE</strong></td>
<td><strong>44,548</strong></td>
<td><strong>115,686</strong></td>
<td><strong>13,992</strong></td>
<td><strong>32,524</strong></td>
<td><strong>18,234</strong></td>
<td><strong>5,547</strong></td>
<td><strong>14,026</strong></td>
</tr>
</tbody>
</table>

#### EXPENSES

<table>
<thead>
<tr>
<th></th>
<th>CARE Australia</th>
<th>CARE Canada</th>
<th>CARE Danmark</th>
<th>CARE Deutschland-Luxemburg</th>
<th>CARE France</th>
<th>CARE Japan</th>
<th>CARE Nederland</th>
</tr>
</thead>
<tbody>
<tr>
<td>Development program activities and disaster and emergency relief</td>
<td>36,194</td>
<td>107,266</td>
<td>10,479</td>
<td>26,318</td>
<td>13,057</td>
<td>4,588</td>
<td>9,870</td>
</tr>
<tr>
<td>Supporting services, fundraising spend and other expenses</td>
<td>8,124</td>
<td>7,640</td>
<td>3,191</td>
<td>6,257</td>
<td>5,079</td>
<td>563</td>
<td>3,389</td>
</tr>
<tr>
<td><strong>TOTAL EXPENSES</strong></td>
<td><strong>44,318</strong></td>
<td><strong>114,906</strong></td>
<td><strong>13,670</strong></td>
<td><strong>32,574</strong></td>
<td><strong>18,136</strong></td>
<td><strong>5,150</strong></td>
<td><strong>13,259</strong></td>
</tr>
</tbody>
</table>

#### EXCESS (DEFICIENCY)

<table>
<thead>
<tr>
<th></th>
<th>CARE Australia</th>
<th>CARE Canada</th>
<th>CARE Danmark</th>
<th>CARE Deutschland-Luxemburg</th>
<th>CARE France</th>
<th>CARE Japan</th>
<th>CARE Nederland</th>
</tr>
</thead>
<tbody>
<tr>
<td>Net assets, beginning of year</td>
<td>7,021</td>
<td>4,338</td>
<td>1,014</td>
<td>5,438</td>
<td>4,668</td>
<td>708</td>
<td>4,781</td>
</tr>
<tr>
<td>Other changes</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>255</td>
<td>-307</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Currency translation adjustment</td>
<td>693</td>
<td>424</td>
<td>4</td>
<td>0</td>
<td>0</td>
<td>136</td>
<td>0</td>
</tr>
<tr>
<td><strong>NET ASSETS, END OF YEAR</strong></td>
<td><strong>7,943</strong></td>
<td><strong>5,542</strong></td>
<td><strong>1,341</strong></td>
<td><strong>5,643</strong></td>
<td><strong>4,459</strong></td>
<td><strong>1,240</strong></td>
<td><strong>5,548</strong></td>
</tr>
</tbody>
</table>

### COMBINING BALANCE SHEET AS AT JUNE 30, 2012 ‘000 EUROS

#### ASSETS

<table>
<thead>
<tr>
<th></th>
<th>CARE Australia</th>
<th>CARE Canada</th>
<th>CARE Danmark</th>
<th>CARE Deutschland-Luxemburg</th>
<th>CARE France</th>
<th>CARE Japan</th>
<th>CARE Nederland</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash and short term investments</td>
<td>27,796</td>
<td>24,475</td>
<td>2,599</td>
<td>9,632</td>
<td>6,000</td>
<td>1,097</td>
<td>7,001</td>
</tr>
<tr>
<td>Receivables from governmental and non-governmental agencies</td>
<td>6,703</td>
<td>7,283</td>
<td>2,333</td>
<td>4,824</td>
<td>3,208</td>
<td>298</td>
<td>27,028</td>
</tr>
<tr>
<td>Deposits and other assets</td>
<td>414</td>
<td>365</td>
<td>53</td>
<td>10,995</td>
<td>1,504</td>
<td>754</td>
<td>-</td>
</tr>
<tr>
<td>Property and equipment, net</td>
<td>806</td>
<td>4,830</td>
<td>210</td>
<td>97</td>
<td>7</td>
<td>221</td>
<td>21</td>
</tr>
<tr>
<td><strong>TOTAL ASSETS</strong></td>
<td><strong>35,719</strong></td>
<td><strong>36,953</strong></td>
<td><strong>5,195</strong></td>
<td><strong>25,548</strong></td>
<td><strong>10,718</strong></td>
<td><strong>2,370</strong></td>
<td><strong>34,050</strong></td>
</tr>
</tbody>
</table>

#### LIABILITIES AND FUND BALANCE

<table>
<thead>
<tr>
<th></th>
<th>CARE Australia</th>
<th>CARE Canada</th>
<th>CARE Danmark</th>
<th>CARE Deutschland-Luxemburg</th>
<th>CARE France</th>
<th>CARE Japan</th>
<th>CARE Nederland</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accounts payable and accrued expenses</td>
<td>1,501</td>
<td>7,685</td>
<td>-</td>
<td>256</td>
<td>4,330</td>
<td>1,130</td>
<td>724</td>
</tr>
<tr>
<td>Advances by governmental and non-governmental agencies</td>
<td>24,271</td>
<td>20,601</td>
<td>2,771</td>
<td>19,555</td>
<td>1,594</td>
<td>-</td>
<td>27,778</td>
</tr>
<tr>
<td>Debt and other liabilities</td>
<td>2,005</td>
<td>3,125</td>
<td>1,083</td>
<td>95</td>
<td>335</td>
<td>0</td>
<td>-</td>
</tr>
<tr>
<td><strong>TOTAL LIABILITIES</strong></td>
<td><strong>27,776</strong></td>
<td><strong>31,410</strong></td>
<td><strong>3,854</strong></td>
<td><strong>19,905</strong></td>
<td><strong>6,259</strong></td>
<td><strong>1,130</strong></td>
<td><strong>28,502</strong></td>
</tr>
</tbody>
</table>

#### NET ASSETS

<table>
<thead>
<tr>
<th></th>
<th>CARE Australia</th>
<th>CARE Canada</th>
<th>CARE Danmark</th>
<th>CARE Deutschland-Luxemburg</th>
<th>CARE France</th>
<th>CARE Japan</th>
<th>CARE Nederland</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NET ASSETS</strong></td>
<td><strong>7,943</strong></td>
<td><strong>5,542</strong></td>
<td><strong>1,341</strong></td>
<td><strong>5,643</strong></td>
<td><strong>4,459</strong></td>
<td><strong>1,240</strong></td>
<td><strong>5,548</strong></td>
</tr>
</tbody>
</table>

#### TOTAL LIABILITIES AND NET ASSETS

<table>
<thead>
<tr>
<th></th>
<th>CARE Australia</th>
<th>CARE Canada</th>
<th>CARE Danmark</th>
<th>CARE Deutschland-Luxemburg</th>
<th>CARE France</th>
<th>CARE Japan</th>
<th>CARE Nederland</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TOTAL LIABILITIES AND NET ASSETS</strong></td>
<td><strong>35,719</strong></td>
<td><strong>36,953</strong></td>
<td><strong>5,195</strong></td>
<td><strong>25,548</strong></td>
<td><strong>10,718</strong></td>
<td><strong>2,370</strong></td>
<td><strong>34,050</strong></td>
</tr>
</tbody>
</table>
## Financial Figures

**Combining Statement of Activity and Net Assets for the Year Ended June 30, 2012 (FY12) ‘000 Euro**

<table>
<thead>
<tr>
<th></th>
<th>CARE Norge</th>
<th>CARE Österreich</th>
<th>CARE Intl UK</th>
<th>Raks Thai</th>
<th>CARE India</th>
<th>CARE USA</th>
<th>CARE Int’l Secretariat</th>
<th>Combined Adjusted</th>
<th>Total 2012</th>
<th>Total 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>3,311</td>
<td>4,646</td>
<td>13,671</td>
<td>411</td>
<td>857</td>
<td>88,390</td>
<td>-</td>
<td>-</td>
<td>154,349</td>
<td>146,629</td>
<td></td>
</tr>
<tr>
<td>-</td>
<td>-</td>
<td>174</td>
<td>414</td>
<td>119,353</td>
<td>-169,348</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td>14,064</td>
<td>12,580</td>
<td>37,668</td>
<td>7,109</td>
<td>5,155</td>
<td>146,083</td>
<td>13,496</td>
<td>-</td>
<td>346,767</td>
<td>390,376</td>
<td></td>
</tr>
<tr>
<td>102</td>
<td>73</td>
<td>172</td>
<td>165</td>
<td>5</td>
<td>11,324</td>
<td>1,163</td>
<td>-</td>
<td>19,242</td>
<td>19,747</td>
<td></td>
</tr>
<tr>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>4,330</td>
<td>-4,330</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td><strong>17,477</strong></td>
<td><strong>17,299</strong></td>
<td><strong>51,687</strong></td>
<td><strong>7,858</strong></td>
<td><strong>6,431</strong></td>
<td><strong>419,530</strong></td>
<td><strong>18,988</strong></td>
<td><strong>-173,678</strong></td>
<td><strong>610,152</strong></td>
<td><strong>592,155</strong></td>
<td></td>
</tr>
<tr>
<td>13,768</td>
<td>13,927</td>
<td>47,826</td>
<td>7,414</td>
<td>4,923</td>
<td>378,008</td>
<td>14,064</td>
<td>-169,348</td>
<td>518,353</td>
<td>498,614</td>
<td></td>
</tr>
<tr>
<td><strong>15,949</strong></td>
<td><strong>16,890</strong></td>
<td><strong>55,516</strong></td>
<td><strong>7,907</strong></td>
<td><strong>5,767</strong></td>
<td><strong>437,588</strong></td>
<td><strong>18,751</strong></td>
<td><strong>-173,678</strong></td>
<td><strong>626,703</strong></td>
<td><strong>613,460</strong></td>
<td></td>
</tr>
<tr>
<td>1,529</td>
<td>409</td>
<td>-3,828</td>
<td>-48</td>
<td>665</td>
<td>-18,058</td>
<td>237</td>
<td>-</td>
<td>-16,552</td>
<td>-21,305</td>
<td></td>
</tr>
<tr>
<td>3,870</td>
<td>2,550</td>
<td>17,074</td>
<td>2,975</td>
<td>1,066</td>
<td>237,026</td>
<td>1,849</td>
<td>-</td>
<td>294,374</td>
<td>323,886</td>
<td></td>
</tr>
<tr>
<td>-</td>
<td>1</td>
<td>-180</td>
<td>-22</td>
<td>62</td>
<td>-10,987</td>
<td>426</td>
<td>-</td>
<td>-10,751</td>
<td>32,413</td>
<td></td>
</tr>
<tr>
<td>30</td>
<td>173</td>
<td>-173</td>
<td>-111</td>
<td>31,390</td>
<td>95</td>
<td>-</td>
<td>-</td>
<td>34,359</td>
<td>-40,621</td>
<td></td>
</tr>
<tr>
<td><strong>5,429</strong></td>
<td><strong>2,960</strong></td>
<td><strong>14,838</strong></td>
<td><strong>2,830</strong></td>
<td><strong>1,681</strong></td>
<td><strong>239,371</strong></td>
<td><strong>2,607</strong></td>
<td>-</td>
<td><strong>301,431</strong></td>
<td><strong>294,374</strong></td>
<td></td>
</tr>
</tbody>
</table>

**Combining Balance Sheet as at June 30, 2012 ‘000 Euros**

<table>
<thead>
<tr>
<th></th>
<th>17,437</th>
<th>7,360</th>
<th>9,167</th>
<th>6,218</th>
<th>1,500</th>
<th>181,418</th>
<th>2,339</th>
<th>-</th>
<th>304,040</th>
<th>283,588</th>
</tr>
</thead>
<tbody>
<tr>
<td>221</td>
<td>193</td>
<td>7,548</td>
<td>559</td>
<td>277</td>
<td>18,523</td>
<td>1,544</td>
<td>-12,245</td>
<td>68,296</td>
<td>80,091</td>
<td></td>
</tr>
<tr>
<td>-</td>
<td>2,885</td>
<td>3,533</td>
<td>63</td>
<td>26</td>
<td>131,538</td>
<td>317</td>
<td>-</td>
<td>152,446</td>
<td>167,506</td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>159</td>
<td>417</td>
<td>27</td>
<td>83</td>
<td>19,710</td>
<td>12</td>
<td>-</td>
<td>26,620</td>
<td>29,402</td>
<td></td>
</tr>
<tr>
<td><strong>17,677</strong></td>
<td><strong>10,597</strong></td>
<td><strong>20,666</strong></td>
<td><strong>6,867</strong></td>
<td><strong>1,886</strong></td>
<td><strong>351,190</strong></td>
<td><strong>4,211</strong></td>
<td><strong>-12,245</strong></td>
<td><strong>551,402</strong></td>
<td><strong>560,587</strong></td>
<td></td>
</tr>
<tr>
<td>65</td>
<td>146</td>
<td>344</td>
<td>12</td>
<td>129</td>
<td>13,221</td>
<td>1,027</td>
<td>-</td>
<td>30,569</td>
<td>26,393</td>
<td></td>
</tr>
<tr>
<td>11,824</td>
<td>7,408</td>
<td>5,484</td>
<td>2,908</td>
<td>-</td>
<td>43,501</td>
<td>578</td>
<td>-12,245</td>
<td>156,026</td>
<td>188,320</td>
<td></td>
</tr>
<tr>
<td>359</td>
<td>83</td>
<td>-</td>
<td>1,118</td>
<td>75</td>
<td>55,097</td>
<td>-</td>
<td>-</td>
<td>63,375</td>
<td>51,498</td>
<td></td>
</tr>
<tr>
<td><strong>12,248</strong></td>
<td><strong>7,637</strong></td>
<td><strong>5,828</strong></td>
<td><strong>4,037</strong></td>
<td><strong>205</strong></td>
<td><strong>111,818</strong></td>
<td><strong>1,605</strong></td>
<td><strong>-12,245</strong></td>
<td><strong>249,970</strong></td>
<td><strong>266,211</strong></td>
<td></td>
</tr>
<tr>
<td>5,429</td>
<td>2,960</td>
<td>14,838</td>
<td>2,830</td>
<td>1,681</td>
<td>239,371</td>
<td>2,607</td>
<td>-</td>
<td>301,431</td>
<td>294,376</td>
<td></td>
</tr>
<tr>
<td><strong>17,677</strong></td>
<td><strong>10,597</strong></td>
<td><strong>20,666</strong></td>
<td><strong>6,867</strong></td>
<td><strong>1,886</strong></td>
<td><strong>351,190</strong></td>
<td><strong>4,211</strong></td>
<td><strong>-12,245</strong></td>
<td><strong>551,402</strong></td>
<td><strong>560,587</strong></td>
<td></td>
</tr>
</tbody>
</table>
CARE INTERNATIONAL SECRETARIAT:

Headquarters
Chemin de Balexert 7-9
1219 Chatelaine, Geneva
Switzerland

Tel: +41 22 795 10 20
Fax: +41 22 795 10 29
cisecretariat@careinternational.org
www.care-international.org

CARE INTERNATIONAL MEMBERS:

CARE Australia
www.care.org.au

CARE Canada
www.care.ca

CARE Danmark
www.care.dk

CARE Deutschland-Luxemburg
www.care.de

CARE France
www.carefrance.org

CARE International Japan
www.careintjp.org

CARE Nederland
www.carenederland.org

CARE Norge
www.care.no

CARE Österreich
www.care.at

Raks Thai Foundation
(CARE Thailand)
www.raksthai.org

CARE International UK
www.careinternational.org.uk

CARE USA
www.care.org

CARE AFFILIATE MEMBERS:

CARE India
www.careindia.org

CARE Peru
www.careenperu.org

Cover photo: © Josh Estey / CARE