



care®



Our mission is to  
serve individuals  
and families  
in the poorest  
communities in  
the world



We partner with  
communities to  
create lasting  
change and respond  
to humanitarian  
crises



We seek a  
world of hope,  
tolerance, and  
social justice

We will be a  
global force in  
a worldwide  
movement  
dedicated to  
ending poverty



One woman,  
one family,  
one community  
at a time

# CARE International

## Annual Report 2010

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## 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.

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# Secretary General's Message

I hope you will be inspired by the stories, quality and breadth of CARE's work presented here, as our members work together to fight global poverty.

**I'm happy to present the CARE International annual report, which provides a snapshot of the focus of our programs, the impact of our work, and the strength of our staff and supporters around the world.**

The year will forever be marked by the devastation in Haiti after the earthquake of Jan. 12, 2010. CARE staff in Haiti, many of whom had lost family members and friends in the quake, responded immediately, providing urgently needed assistance to more than 300,000 people. It is a testament to the commitment of our staff to CARE's mission that we are able to respond so quickly, to help so many, in a world facing an increasing number of disasters.

Many of those disasters are made worse by global climate change, and CARE has been steadily building our program and advocacy efforts to help people cope. At the United Nations Climate Change conference in Copenhagen, Denmark, CARE's climate change team joined experts

from around the world to advocate for a binding agreement to help the world's poor, setting the stage for our work throughout 2010.

This year, the CARE International Board also approved a focus for CARE on fighting poverty by empowering women and girls. Our more than 65 years of experience has shown us that empowering women around the world leads to improved health and opportunities for them, their families, and their communities.

Looking forward, we are strengthening advocacy on behalf of the people in the communities where we work. Our new global advocacy strategy focuses on four main themes: women and food security; women, peace and security; women and climate change; and maternal health.

I am also happy to announce that in 2010 we came one step closer to welcoming CARE Peru and CARE India into the CARE confederation as affiliate members. When their

status is approved, CARE India and CARE Peru will further strengthen global diversity in CARE's governance.

In a confederation as vast and as varied as CARE, a single document could never reflect the richness of our work, but I hope you will be inspired by the stories, quality and breadth of CARE's work presented here, as our members work together to fight global poverty. I would like to thank our countless supporters, staff, partners and donors around the world who continue to make this work possible.



A handwritten signature in black ink, which appears to read "Robert Glasser".

**Dr. Robert Glasser,**  
CARE International Secretary General

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# Where Does CARE Work?

CARE International is a global confederation of 12 independent non-profit, non-sectarian humanitarian organizations working together to fight poverty and provide assistance in humanitarian emergencies.

In fiscal year 2010, CARE worked in 87 countries around the world, implementing long-term programs to fight poverty, responding to humanitarian emergencies, and advocating for policy change to improve the lives of the poorest people. Below is a breakdown of the countries where we worked in fiscal year 2010 (July 1, 2009 to June 30, 2010).

## Countries with CARE programs in FY10:

- |                                  |                      |
|----------------------------------|----------------------|
| 1. Afghanistan                   | 36. Liberia          |
| 2. Angola                        | 37. Macedonia        |
| 3. Armenia*                      | 38. Madagascar       |
| 4. Azerbaijan*                   | 39. Malawi           |
| 5. Bangladesh                    | 40. Mali             |
| 6. Benin                         | 41. Montenegro*      |
| 7. Bolivia                       | 42. Morocco          |
| 8. Bosnia and Herzegovina        | 43. Mozambique       |
| 9. Brazil                        | 44. Myanmar          |
| 10. Burundi                      | 45. Nepal            |
| 11. Cambodia                     | 46. Nicaragua        |
| 12. Cameroon                     | 47. Niger            |
| 13. Chad                         | 48. Pakistan         |
| 14. Chile*                       | 49. Papua New Guinea |
| 15. Côte d'Ivoire                | 50. Peru*            |
| 16. Croatia                      | 51. Philippines*     |
| 17. Cuba                         | 52. Romania*         |
| 18. Democratic Republic of Congo | 53. Rwanda           |
| 19. Dominican Republic*          | 54. Serbia           |
| 20. Ecuador                      | 55. Sierra Leone     |
| 21. Egypt                        | 56. Somalia          |
| 22. El Salvador                  | 57. South Africa     |
| 23. Ethiopia                     | 58. Sri Lanka        |
| 24. Georgia                      | 59. Sudan            |
| 25. Ghana                        | 60. Tajikistan       |
| 26. Guatemala                    | 61. Tanzania         |
| 27. Haiti                        | 62. Thailand**       |
| 28. Honduras                     | 63. Timor Leste      |
| 29. India*                       | 64. Togo             |
| 30. Indonesia                    | 65. Uganda           |
| 31. Jordan                       | 66. Vanuatu          |
| 32. Kenya                        | 67. Vietnam          |
| 33. Kosovo                       | 68. West Bank Gaza   |
| 34. Laos                         | 69. Yemen            |
| 35. Lesotho                      | 70. Zambia           |
|                                  | 71. Zimbabwe         |

## CARE International Members:

- 72. Austria
- 73. Australia
- 74. Canada
- 75. Denmark
- 76. France
- 77-78. Germany-Luxembourg<sup>^</sup>
- 79. Japan
- 80. Netherlands
- 81. Norway
- . Thailand\*\*
- 82. United Kingdom
- 83. United States

## CARE International Secretariat:

- 84. Geneva, Switzerland
- 85. Brussels, Belgium
- . New York, United States

## Sub-offices:

- 86. Hungary (of CARE Austria)
- 87. Czech Republic (of CARE Austria)







# Why Does CARE Focus on Women and Girls?

Our experience shows that, when equipped with the proper resources, women have the power to help whole families and entire communities escape poverty.



**There are two key reasons why we work with women and girls. The first is simple; women around the world are disproportionately affected by poverty and discrimination.**

Lack of education for girls contributes to early marriage, higher birth rates, and lower income. Discriminatory laws prohibit women from owning or inheriting property, holding bank accounts, or prosecuting abusers.

Girls face the greatest risk, as they often have no choice but to leave school so they can help their family earn money, find food, look after younger siblings, collect water, and run the household while their parents work.

The second reason, and our key motivating factor, is that women are an important part of the solutions needed to truly overcome poverty. Women tend to transfer improvements in

their own lives into the lives of their children, families and communities. To ensure this happens, we promote savings and provide women with small loans so they can turn their talents into businesses. We work with both women and men to create more equitable relations. We work to enable more girls and boys to attend school, and receive a better quality education when they get there.

*In a society where marginalized women have a traditional role in the home, a CARE flyer offering free courses in welding caught Maria's attention. She passed her first course, and continued to learn through CARE to start her own business. When she needed to expand, traditional banks denied her credit, but CARE gave her a loan – Maria repaid it in full in just a year. Now, she shares her success to help more women in Peru, and today, there are two women with similar businesses in her town. Plus, when an earthquake struck Peru, Maria was able to construct 1,000 tents for survivors and 100 classroom-sized tents so that children could resume class.*



© Ami Vitale/CARE

## challenge

- 70 percent of the world's poorest billion people are women and girls
- Women work two-thirds of the world's working hours, earn 10 percent of the world's income, and own one percent of the world's property
- Two-thirds of all illiterate people in the world are women and girls
- One in three females worldwide has been physically assaulted or sexually abused
- Over 60 million girls ages 17 and younger – many as young as 10 – in developing countries are forced into marriage
- The risk of death in pregnancy and delivery for girls under the age of 15 is five times higher than for women in their 20s
- Traditions and practices that limit choices and opportunities for women are shaped by established gender roles.

## solution

- When women earn an income, they reinvest 90 percent of it in their families
- For every year a girl spends in school she raises her family income by up to 20 percent
- Educated girls grow into educated women, who have healthier babies and are more likely to educate their children
- When a girl in the developing world receives seven years of education, she marries four years later and has 2.2 fewer children
- Engaging men, boys, girls, and women can transform gender roles and increase gender equality.

Last year, CARE's programs reached over **19 million** people with information and tools to promote gender equality and empower women to claim their rights



© Phil Borges/CARE



# Humanitarian Response

Responding to humanitarian emergencies is an essential part of CARE's work to fight poverty and injustice, and we recognize that emergencies are a cause and effect of both.

**The fight against poverty is never more difficult than in times of crisis. For communities that are already poor and vulnerable, any kind of disaster – human-made or natural – can be catastrophic.**

This was made clear Jan. 12, 2010, when in an instant, more than 220,000 Haitians were killed and more than a million left homeless after a devastating earthquake. With staff already on the ground – survivors of the disaster themselves – CARE responded immediately, providing food, shelter, water and emergency supplies to more than 300,000 people in the first few months alone.

With long-term presence in many of the world's most vulnerable countries, CARE takes a comprehensive approach to emergency response: helping people prepare for disasters; providing immediate assistance when a crisis hits; and helping people recover.

While each response is tailored to the needs of each situation, CARE's four emergency focus areas are:

- water, sanitation and hygiene
- shelter
- food security
- logistics.



© Josh Estey/CARE

CARE also provides assistance in economic recovery, education, nutrition, sexual and reproductive health, psychosocial support, and agriculture and natural resource management.

We place special emphasis on women, children and the elderly, who are disproportionately affected by disasters. Recognizing the link between poverty and gender inequality, CARE's humanitarian advocacy priorities are women and food security; and women, peace and security.

CARE is a signatory to and holds itself accountable to accepted humanitarian standards and codes of conduct, and we work

with other aid organizations and United Nations agencies to improve humanitarian action and to influence policy.

In 2010, CARE worked with other agencies to revise the Sphere Handbook, a guide used to improve standards and quality in emergency response. On World Humanitarian Day August 19, CARE staff around the world joined tens of thousands of other humanitarian workers to raise awareness of the humanitarian principles of humanity, neutrality, impartiality and operational independence.



## Haiti earthquake, January 12, 2010:

*Little Sarah was born the morning of the catastrophe. "Everything was shaking, my bed was moving. I hugged Sarah tightly in my arms, I was sure we were going to die." Holding Sarah, Emy Merci's face shows how thankful she is to be alive. To ensure proper hygiene after the earthquake, CARE gave women a kit with products like soap, toilet paper, toothbrushes, toothpaste and detergent. "Thanks to this, I will be able to wash Sarah and wash her diaper. I didn't have any soap and her clothes weren't clean. This will change everything," she says.*



### How does our approach work?

#### prepare

Preparedness saves lives. By incorporating disaster risk reduction methods and emergency preparedness plans into our long-term work, CARE helps communities strengthen their resilience to disasters and minimize the impact when a crisis hits.

In all our programming, CARE builds local capacity by:

- providing ongoing training, technical guidance and tools to CARE staff and partners
- buying materials locally when possible, helping us respond faster and support local businesses
- making sure communities have a say in planning, implementing and evaluating our response.

Rapid response to disasters is the most visible part of our humanitarian action, but is only one part of the bigger picture. The effect of disasters is long-term, and CARE is committed to working with communities long after the television cameras have gone home.

#### respond

With trained staff already on the ground and a worldwide team of emergency experts, we partner with local groups to provide fast, effective assistance to communities in need when disaster strikes. Coordination with other aid agencies, governments and local groups is crucial to ensure we reach everyone in need.



#### recover

We work with survivors to help them recover after the crisis has passed. Our goal is to transition as quickly as possible from emergency response to rehabilitation, and then to sustained development.

**6.5 million**  
people in 36 countries  
were reached by our  
emergency programs

CARE helped more  
than **6 million**  
people experiencing or  
recovering from conflict

# Food Security

CARE tackles underlying causes of poverty so that people can become self-sufficient. We help families produce more food and increase their income while managing their natural resources and preserving the environment for future generations.

## challenge

The number of chronically hungry people worldwide has grown to more than a billion. Hunger kills more people each year than AIDS, malaria and tuberculosis combined. Climate change and the negative impact it will have on agricultural productivity threaten to push more people into hunger and malnutrition. While emergency food aid in times of crisis is important, food assistance alone does not adequately address the root causes of chronic hunger.

## solution

CARE works with farmers to increase their crop and livestock yields through activities such as planting new seed varieties and home gardening. We provide tools and skills to help families learn better farming techniques, and we work with farmers to develop irrigation systems for farms and water conservation projects.



© Josh Estey/CARE

Help her to LIVE a **healthy life** and LEAD her community to a **brighter future**



*When CARE came to Rosalina's district, villagers said: "We need to grow more food so we can feed our families and sell at the market... but in order to do that we need irrigation and a road from our village." CARE and the community began to tackle the issues one by one. Some villagers received road construction training and Rosalina learned how to collect rainwater to grow crops year round. CARE provided seeds, tools, and training on how to construct raised garden beds and how to prepare natural pesticides. "The profits from this garden will allow us to buy goats, pigs, and chickens."*



© Jane Dempster/CARE

Underlying all this is the urgent need for gender equality, as women and children comprise the vast majority of the world's chronically hungry people. Girls and women are often the last to eat when food is scarce, yet are the primary providers of food and water for their families. In sub-Saharan Africa, women produce 80 percent of the food but have access to less than five percent of the land, credit and support services. CARE works to empower women and increase their influence on household and community decisions as well as their access to land ownership, water and markets. CARE advocates for global and local policy change that improves food security for the most vulnerable communities.

Helping communities produce more nutritious food is important, as proper nutrition is vital to a child's healthy development and an adult's ability to work and care for his or her family. To help prevent malnutrition, our projects

focus not only on increasing food production but also on:

- demonstrating proper breastfeeding
- educating families and communities about how to prepare nutritious food
- providing food and cash transfers as part of emergency relief efforts
- managing food-for-work projects to help communities improve infrastructure
- influencing public policy to improve government food security and social safety net programs.

Last year, CARE helped to improve food security for almost **10 million** people

We worked to reach almost **35 million** children and their families to improve child health and nutrition



© Marieke van der Velden/CARE



# Maternal Health

As a leading organization that fights global poverty by empowering women and girls, CARE has made reducing maternal and newborn mortality one of its top priorities.

## challenge

**Maternal mortality is nothing short of an epidemic. Worldwide, hundreds of thousands of women die from complications during pregnancy or childbirth each year – that’s one woman dying nearly every minute of every day – and millions more are left with life-altering disabilities.**

These statistics are particularly devastating when you consider that a majority of these deaths can be prevented if women have access and are able to utilize proven, cost-effective, life-saving interventions.

## solution

**With more than 50 years of experience developing and implementing maternal and child health programs, CARE empowers vulnerable women with services and information while affecting policies to ensure that safe pregnancy and birth are a basic human right. Our goal is to make pregnancy and delivery safer for more than 30 million women in Africa, Asia and Latin America by 2015.**

We don’t have to wait for a medical breakthrough to save women’s lives. We know how to prevent 90 percent of all maternal deaths:

- access to voluntary family planning services
- quality care by a doctor, midwife or nurse
- emergency obstetrical care
- immediate post-partum care for the mother and newborn
- a strong and equitable health system that addresses the social and economic factors that influence women’s access to and use of health services.



*In Budar, a village in the hills of western Nepal, Ganga Devi, 40, is a community health worker who received training from CARE. "There has been a lot of change. First people didn't even know the basics like hygiene, vaccinations or oral rehydration but now we know more. I received 15 days training and extra training about respiratory infections. CARE has given me very good training in neonatal care. It has really helped to build my ability to help new babies. Women used to be afraid when they went into labour but now they know it is better with more facilities available to them."*



© Kate Holt/CARE



© Ida Sem Fossvik/CARE

### Our Holistic Approach

We cannot improve maternal and child health without nutrition interventions or access to safe drinking water. Hunger has a direct and dire impact on maternal health. The expected impacts of climate change on agricultural productivity and water scarcity will adversely affect health outcomes.

We focus our programs on empowerment and gender equity, tackling the barriers such as cost, discriminatory behaviours of health workers, and lack of

understanding of their health rights that often prevent women from seeking or utilizing health services. Because communities understand the barriers to improving health in their specific country, CARE works closely with local partners to make real and lasting change.

Evidence has shown that by empowering women, you can increase their use of health and other services; improve their lives, the well-being of their children and the economic stability of their communities.

For every year a woman is educated, the mortality rate of her young children is reduced **5 to 10** percent – her children are better fed, better cared for, and more likely to be vaccinated

CARE reached more than **22 million** women, men and children last year with information and services to improve maternal health

# Climate Change

Climate change is a reality for millions of the people we work with and the single greatest threat in history to achieving our vision. We're working with communities to help them adapt and advocating for global policy change.



## challenge

The number of natural disasters has doubled within the last 20 years. From floods in Bangladesh to droughts in Kenya, glacier melts in Peru to hurricanes in the Caribbean, the world's poorest people are already experiencing the effects of climate change.

## solution

CARE's response to climate change is rapidly expanding to:

- help people **adapt** to climate change
- **advocate** for a global response to climate change, sustainable use of water and other natural resources, and a pro-poor approach to **carbon finance**
- **model** 'climate smart' policies, plans, and practices in our own organization.

There is no doubt that the global community must act quickly to reduce greenhouse gas emissions. However, it is equally important to help people adapt to changes that are already occurring.

We support poor and marginalized people to develop resilient livelihood strategies. We enable local government and civil society organizations to analyze risks, plan for change, and facilitate innovative approaches to adaptation.



*“We’ve fattened the fish up with this,” says Abiba Ussene, 50, clutching a sack of cassava she ground into powder. Traditionally, along Mozambique’s coast, men head out into the Indian Ocean to cast nets. But in recent years, fish catches have plummeted, due to overfishing and a reef ailing in waters warmed by climate change. That’s why Abiba and 11 men and women formed a fishing association as part of an innovative project spearheaded by CARE and the WWF. Two no-fish zones were created to rehabilitate the ecosystem, and the group secured a 50-year lease on land to build a farm to grow and protect the fish.*



© Ausi Petrelius/CARE

### Disaster Risk Reduction

Population increase, climate change, increasing urbanization, and environmental degradation result in increased disaster risk in the future. Disaster preparedness is a long-term investment that pays off, and CARE is preparing people for the impacts of natural disasters. This can include sturdier buildings, early warning systems, evacuation plans, technical equipment, and information through local media. In Vietnam, for example, CARE staff helps local communities and governments to draft evacuation plans, build shelters and dams, plant mangroves for storm protection and inform the population with theatre and workshops.

### Natural Resource Management

People’s livelihoods depend on the environment they live in. To help communities preserve their natural resources, we:

- protect agro-forestry systems to reduce the loss of biodiversity
- support reforestation, use of lower-carbon products,

and the establishment of conservation areas

- campaign to minimize environmentally damaging practices
- train water-management organizations
- support local governments to reduce pollution in rivers, air, and soil.

### Advocacy

Policy choices made by the international community in the next few years will determine if we can make poverty history despite climate change, or if climate change will make poverty worse. At every opportunity, particularly annual events such as the 2009 United Nations Climate Change Conference in Copenhagen, Denmark, CARE is promoting carbon finance projects and advocating for a fair, ambitious and binding international agreement that places poor and vulnerable people at the centre of a worldwide response to climate change.



© Josh Estey/CARE

For every dollar we invest in reducing disaster risk, we save **7 dollars** in emergency aid

Last year, CARE’s programs helped almost **6 million** people mitigate and adapt to the effects of climate change

# Education and HIV/AIDS

The underlying causes of poverty are not simple, and they are always interlinked. CARE takes a holistic approach to fighting poverty, tackling multiple issues, such as health, education, and women's empowerment to address those causes.

## girls' education

**Worldwide, 796 million people lack basic literacy skills. Nearly two-thirds are women and girls.** We are dedicated to promoting the right to education and strengthening education systems in collaboration with teachers, communities, government and partners.

**CARE has a unique approach to girls' education and leadership:**

- outside of the classroom, we sensitize parents and communities to the importance of educating girls
- inside the classroom, we ensure that girls receive a quality education focused on reading, writing, basic arithmetic and critical-thinking skills
- after school, we engage girls in extracurricular activities and social networks, while urging them to participate in civic action to build leadership skills.



©2006 Meredith Davenport/CARE

More than 550 million women around the world cannot read or write. Ten-year-old Hasin Jehan is not one of them – not anymore. She started school this year at UDAAN Accelerated Learning Camp, an alternative centre for girls who were unable to attend school at an early age. At first, Hasin's parents were skeptical about their daughter's education because it's not typical for older girls to attend school in their culture. After seeing the change in his daughter, Hasin's father is proud of her – the first girl in the family to get an education. He realizes it's important to educate girls, and visits her at school every Sunday.



© Valenda Campbell/CARE

## HIV/AIDS

**Approximately 33.3 million people live with HIV, mostly in poor countries.** Many social conditions may contribute to increasing vulnerabilities to HIV and AIDS. For women and girls who have no opportunity to attend school, have virtually no rights, and are exposed to domestic and sexual violence, it is hardly possible for them to break the vicious cycle of oppression and HIV infection.

We empower individuals and communities to address vulnerabilities to and from HIV and AIDS, including strategies to prevent HIV, reduce stigma associated with the illness, mitigate its negative economic impact, and protect the rights of people living with HIV and AIDS. We believe that our HIV and AIDS programs must provide information and services to vulnerable groups while addressing the underlying factors that shape the choices that put them at risk.

Our HIV and AIDS programs are often integrated into our work in other sectors.

For example, we often include HIV and AIDS education in a group's Village Savings and Loan Association meetings.

### Through our HIV/AIDS programs, we:

- empower key populations at higher risk of HIV to address social inequalities that contribute to higher exposure of HIV risk
- help communities care for children who have become orphaned and vulnerable by HIV and AIDS
- improve access to affordable and quality public health services by upgrading health clinics and hospitals and training health workers
- develop peer education and outreach in communities
- increase access to services such as condoms, voluntary counselling and testing, anti-retroviral treatment, and Sexually Transmitted Infection prevention and treatment
- advocate on behalf of and with vulnerable and marginalized people.

Last year, through health and social services, CARE helped more than **30 million** people protect themselves from HIV

CARE's programs last year helped improve access to school and better quality education for almost **13 million** people



# Water and Economic Development

CARE's economic development programs help impoverished families generate income, protect assets, access new markets and increase financial stability.

## economic development

Women often lack the assets or skills and education required to earn an income or expand livelihood activities. Female heads of households, such as widows, divorced or abandoned women are particularly vulnerable if they are unable to own assets such as land.

Power over one's own financial resources and economic situation is the power to escape poverty – especially for women. CARE helps vulnerable communities gain that power through market linkages, diversified livelihoods, and by working with local groups around the world to help them organize and finance their own Village Savings and Loans Associations (VSLAs). These groups, pioneered by CARE, pool their savings to make small loans to each other.

With these loans, members can begin or expand small businesses. We reinforce their entrepreneurship with

skills training and market linkages to create income-generating opportunities through activities like farming, small-scale food processing, and handicrafts. Because members borrow from each other, repayment rates are nearly 100 percent, and interest rates are much lower than the high rates charged by traditional moneylenders.

CARE's groundbreaking report released in 2009, *Microfinance in Africa: Bringing Financial Services to Africa's Poor*, shows that Village Savings and Loans Associations are giving women at the very bottom of the world's economic ladder the means and confidence to build more prosperous futures for themselves and their families.



© Heiko Junge/SCANPIX



© Heiko Junge/SCANPIX

Help her to EARN and she can be the **solution to poverty**

Eunice's first loan was US\$10. CARE's training helped Eunice plan and craft a strategy with sound business knowledge. She bought fabric, made school uniforms, and earned a remarkable US\$90 profit. Eunice did this over and over again until she was able to purchase a sewing machine and even hire labourers. From her profits, the seamstress has built a brand-new two-room house, complete with a sanitary latrine. Eunice's success not only allows her to send her six children to school, but she is also able to provide free school uniforms to orphan children in her community.



© Direct Point Group 2010

## water, sanitation and hygiene

For more than five decades, CARE has recognized the link between poverty and the lack of access to water. Both directly and through local organizations and governments, CARE provides training and subsidizes construction of clean water systems and latrines. Communities make significant contributions in cash and labour, and pay the cost of operation and maintenance. By educating people about good hygiene and helping communities build, maintain, and protect their water systems and sources, we reduce the health risks of water-related diseases and save time spent gathering water to increase the earning potential of households.

Women have more time for school and work when they aren't spending hours each day hauling water. Access to safe water also results in women spending less time caring for family members who would otherwise fall

sick due to unsafe water. Also, improved sanitation can keep a girl in school by making facilities available to her when she reaches puberty. While women suffer disproportionately from lack of access, they are often excluded from discussions regarding water allocation and management. CARE promotes local management of natural water sources and includes women so that they have an increasingly strong and effective voice.



© Tabinda Sadiq/CARE

Last year, CARE worked to help almost **17.5 million** people overcome poverty and improve their household income

We worked with almost **12 million** people to help them improve water supply, sanitation, and hygiene to stop the spread of diseases



# Making a Difference

Around the world, CARE and our supporters joined together to raise awareness of the key challenges in the fight against poverty.

## get the word out

- To see what it's like for women in developing countries who must walk for hours a day to fetch water, students at Presentation College in Melbourne, Australia walked seven kilometres to launch CARE's Walk In Her Shoes campaign on World Water Day. The now-global campaign asks individuals, schools and community groups to take 10,000 steps per day and get sponsored for their efforts
- In 2008 alone, 670 education-related attacks in Afghanistan caused hundreds of schools to close. CARE, the Government of Afghanistan and the World Bank released *Knowledge on Fire: Attacks on Education in Afghanistan*, a groundbreaking study looking at the factors that increase the risk and steps that can be taken to reduce it for Afghan schools, teachers and students – especially girls



© Inspired Adventures



*“As a long-time activist for women’s rights, I love marching! So it’s a huge privilege to join the hundred women, and some warmly welcomed men, and march through the town of Pader. The women’s T-shirts say ‘Happy families, happy lives, choose to be non-violent.’ Two coach-loads of women came from Pader, and today another coach of Kitgum women will join the caravan. Local women came out to clap, cheer and dance us along our way.”* CARE’s Lee Webster joined more than 1,000 women activists and rape survivors in Uganda for a rally and four-day march to demand a law to end violence against women.



© CARE/Jenny Matthews

## get inspired

- In March 2010, the Half the Sky LIVE movie event inspired, motivated, and mobilized a movement to help women and girls around the world turn oppression into opportunity. The CARE-sponsored event featured a musical performance from India.Arie, panelists like Pulitzer Prize-winning journalist Nicholas Kristof and Sarah Duchess of York, and the world premiere of the film *Woineshet*
- Before the G8 met in Huntsville in June 2010, CARE and our partner aid agencies pushed a carefully coordinated advocacy strategy that not only convinced the Prime Minister of Canada to make maternal, newborn and child health the focus issue of the G8, but by the end of the summit, the G8 countries had committed US\$5.3 billion in aid for maternal and child health services

## get involved

- From cycling across the UK and Asia, to endurance tests in the Egyptian desert and climbing Mount Kilimanjaro in Tanzania, individuals and companies challenged themselves and others to help raise awareness and money for CARE’s work. Norway’s national annual telethon in October 2009 mobilized the entire country to raise awareness of CARE’s work with women and girls, and Norwegians donated a record amount of money to help us scale up our programs
- CARE partnered with other aid agencies to support the “100 Places to Remember Before They Disappear” photo exhibit in Copenhagen during the UN Climate Change Conference, and fought for a binding agreement with new money for adaptation in developing countries most affected by climate change.

**630,000**  
people donate to  
CARE every year

Our biggest supporters  
are our staff –  
all **11,500** of  
them worldwide



© CARE Canada

# CARE International's Structure

CARE is a non-political, non-sectarian humanitarian organization fighting global poverty.



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## 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 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 where CARE has programs.

## Our work in 87 countries

In countries where CARE works, projects are implemented through the 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 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.



CARE was established in 1945 as part of an international network bringing emergency relief to the people of war-torn Europe. CARE responded with the first-ever “CARE Packages”: cardboard boxes filled with food, toys, and a message of hope and compassion. The first CARE Packages reached Le Havre, France, on May 11, 1946. Some 100 million more CARE Packages reached people in need during the next two decades. Today, instead of handouts, CARE works with poor communities to help them become self-sufficient.



### Our commitment to accountability

CARE is committed to meeting international standards of quality and accountability, making sure communities have a say in planning, implementing and evaluating our response, and measuring 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.

### 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 United Nations agencies, the European Commission, national governments, private individuals, foundations, and corporations.

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# CARE International's Governance

CARE International is governed by the CARE International Board of Directors.

CARE Members and Country Offices operate according to the CARE International Code, and pursue shared priorities in the CARE International Strategic Plan. The CARE International Board consists of an independent chairperson (elected by the Board), plus the National Director and a Board representative from each of the 12 CARE International Members. The Board meets ordinarily twice a year, and maintains an Executive Committee to conduct its work between meetings. Three other Board committees and four sub-committees (consisting mainly of CARE staff) determine how to implement CARE's priorities and Strategic Plan.

## Members of the CARE International Board of Directors as of June 30, 2010:

- **Eva Lystad** (Chairperson)
- **Harold Mitchell** (CARE Australia)
- **Julia Newton-Howes** (CARE Australia)
- **Paul Drager** (CARE Canada)
- **Kevin McCort** (CARE Canada)
- **Christian Nissen** (CARE Denmark)
- **Niels Tofte** (CARE Denmark)
- **Brigitte Schulte** (CARE Deutschland-Luxemburg)
- **Anton Markmiller** (CARE Deutschland-Luxemburg)
- **Chimaki Kurokawa** (CARE International Japan)
- **Katsuhiko Takeda** (CARE International Japan)
- **Petra Stienen** (CARE Nederland)
- **Guus Eskens** (CARE Nederland)
- **Arne Cartridge** (CARE Norge)
- **Marte Gerhardsen** (CARE Norge)
- **Ralph Martens** (CARE Österreich & Treasurer)
- **Andrea Wagner-Hager** (CARE Österreich)
- **Richard Greenhalgh** (CARE International UK)
- **Geoffrey Dennis** (CARE International UK)
- **Ken Lehman** (CARE USA & Vice Chair)
- **Helene Gayle** (CARE USA)
- **Arielle de Rothschild** (CARE France)
- **Philippe Lévêque** (CARE France)
- **Krasae Chanawongse** (Raks Thai Foundation)
- **Promboon Panitchpakdi** (Raks Thai Foundation)

## Prospective Affiliate Members of the Board of Directors:

- **Nachiket Mor** (CARE India)
- **Muhammad Musa** (CARE India)
- **Mariano Paz Soldán** (CARE Peru)
- **Milo Stanojevich** (CARE Peru)

## Secretariat:

- **Robert Glasser** (Secretary General)
- **Marcy Vigoda** (Deputy Secretary General)



# FAQs

Supporting CARE International means you are supporting one of the most effective, well-respected humanitarian organizations in the world.



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## Does CARE have political or religious affiliations?

CARE is non-religious and non-political, allowing us to deliver humanitarian assistance to anyone in need regardless of race, gender, ethnicity, age, religion or political view.

## Does CARE only work with women and girls?

We work to help whole communities. CARE focuses on women and girls because our experience shows that a project focused on women and girls will benefit everyone, but a project that focuses on everyone may not benefit women and girls.

## How do I know that the money I donate actually reaches those most in need?

CARE maintains low overhead costs, with about 90 percent of donations going to support CARE's programming. The remaining funding is spent on administration and fundraising that is vital to support and expand our work.

CARE was active in developing Sphere minimum standards, and CARE's standards are aligned with the Humanitarian Accountability Principles and the Code of Conduct for the International Red Cross & Red Crescent Movement

and NGOs in Disaster Relief. Our Members' financial stewardship consistently earns excellent reviews from independent watchdog organizations and we are externally audited every year.

## How does CARE decide what projects and areas to support?

We start by assessing people's needs in consultation with the local communities. Over 97 percent of CARE staff come from the countries in which we work, so we speak local languages and understand local culture, and can design programs that respond to the local needs.

## Are CARE's projects evaluated?

CARE projects have a monitoring framework as part of their project designs. CARE's projects are regularly monitored during their implementation, and upon completion projects are evaluated, usually by external consultants and the communities we work with to determine their effectiveness.

# Financial Figures

## COMBINED STATEMENT OF ACTIVITY AND NET ASSETS FOR THE YEAR ENDED JUNE 30, 2010 – '000 USD

### SUPPORT AND REVENUE

	CARE Australia	CARE Canada	CARE Danmark	CARE Deutschland-Luxemburg	CARE France	CARE Japan	CARE Nederland	CARE Norge	CARE Österreich	CARE Int'l UK	Raks Thai	CARE USA	CARE Int'l Secretariat	Combined Adjusted	Total 2010	Total 2009
Government and non-governmental agencies grants	23,476	55,599	13,962	20,120	15,661	1,521	24,359	21,992	17,948	39,153	4,946	246,124	3,481	-	488,342	558,768
Donor contributions	12,862	7,487	5,693	6,496	12,945	1,211	4,079	2,145	3,869	11,522	506	129,342	-	-	198,159	168,760
Programs contracted with member organizations	19,581	39,099	-	-	426	-	-	-	-	-	358	140,622	-	-200,085	-	-
Contributions in kind	74	28,560	-	-	351	-	-	-	-	267	-	21,491	-	-	50,744	7,098
Agricultural commodities	-	-	-	-	-	-	-	-	-	-	-	30,707	-	-	30,707	143,658
Interest and other income	1,127	1,595	358	1,484	683	21	266	55	132	497	149	17,722	2,509	-	26,600	27,130
Administrative support	-	-	-	-	-	-	-	-	-	-	35	-	4,662	-4,697	-	-
<b>Total support and revenue</b>	<b>57,119</b>	<b>132,341</b>	<b>20,014</b>	<b>28,101</b>	<b>30,066</b>	<b>2,754</b>	<b>28,704</b>	<b>24,192</b>	<b>21,949</b>	<b>51,439</b>	<b>5,993</b>	<b>586,008</b>	<b>10,652</b>	<b>-204,782</b>	<b>794,551</b>	<b>905,414</b>

### EXPENSES

Development program activities and disaster and emergency relief	49,546	122,180	16,036	23,816	21,888	1,852	22,694	21,807	18,793	40,407	5,652	506,525	4,240	-200,085	655,351	780,924
Supporting services and other expenses	8,183	9,080	3,604	4,089	6,260	997	4,251	2,700	2,491	10,518	670	95,221	6,168	-4,697	149,534	128,454
<b>Total expenses</b>	<b>57,729</b>	<b>131,260</b>	<b>19,641</b>	<b>27,905</b>	<b>28,148</b>	<b>2,849</b>	<b>26,945</b>	<b>24,507</b>	<b>21,284</b>	<b>50,925</b>	<b>6,322</b>	<b>601,746</b>	<b>10,408</b>	<b>-204,782</b>	<b>804,885</b>	<b>909,379</b>

### EXCESS (DEFICIENCY)

Net assets, beginning of year	10,284	3,850	636	6,743	4,799	1,536	4,864	2,216	2,359	21,367	3,839	297,490	2,396	-	362,378	432,842
Other changes	-	-	-	-	269	-14	-	-0	-	-3	71	51	-	-	374	198
Currency translation adjustment	681	402	21	119	-898	116	-854	444	58	-4,798	116	49,082	-317	-	44,171	-66,697
<b>Net assets, end of year</b>	<b>10,355</b>	<b>5,333</b>	<b>1,031</b>	<b>7,057</b>	<b>6,088</b>	<b>1,544</b>	<b>5,769</b>	<b>2,345</b>	<b>3,082</b>	<b>17,080</b>	<b>3,697</b>	<b>330,885</b>	<b>2,324</b>	<b>-</b>	<b>396,589</b>	<b>362,378</b>

## COMBINED BALANCE SHEET FOR THE YEAR ENDED JUNE 30, 2010 – '000 USD

### ASSETS

Cash and short-term investments	31,023	22,456	2,543	10,322	7,912	759	6,805	29,461	11,168	12,186	7,145	284,342	2,449	-	428,572	440,222
Receivables from government and non-government agencies	5,197	12,941	5,402	4,428	6,037	-	32,626	596	2,542	9,971	1,844	42,899	675	-15,630	109,529	89,103
Deposits and other assets	1,229	421	24	16,624	2,327	1,201	-	-	12	4,821	48	150,123	506	-	177,336	390,752
Property and equipment, net	1,086	3,875	181	91	18	282	21	160	149	205	62	14,543	-	-	20,674	32,409
<b>Total assets</b>	<b>38,535</b>	<b>39,693</b>	<b>8,150</b>	<b>31,465</b>	<b>16,295</b>	<b>2,242</b>	<b>39,452</b>	<b>30,217</b>	<b>13,871</b>	<b>27,184</b>	<b>9,099</b>	<b>491,907</b>	<b>3,631</b>	<b>-15,630</b>	<b>736,111</b>	<b>952,486</b>

### LIABILITIES AND FUND BALANCE

Accounts payable and accrued expenses	2,579	7,912	-	194	5,525	64	833	502	412	345	221	42,388	592	-15,630	45,939	46,993
Advances by government and non-government agencies	23,421	24,305	6,108	24,154	4,662	630	32,780	26,806	10,288	8,914	4,045	57,718	714	-	224,547	280,206
Debt and other liabilities	2,180	2,144	1,011	60	20	3	70	563	88	844	1,136	60,916	-	-	69,034	192,445
<b>Total liabilities</b>	<b>28,180</b>	<b>34,360</b>	<b>7,119</b>	<b>24,408</b>	<b>10,207</b>	<b>698</b>	<b>33,683</b>	<b>27,872</b>	<b>10,789</b>	<b>10,104</b>	<b>5,402</b>	<b>161,022</b>	<b>1,307</b>	<b>-15,630</b>	<b>339,521</b>	<b>519,644</b>
<b>Net assets</b>	<b>10,355</b>	<b>5,333</b>	<b>1,031</b>	<b>7,057</b>	<b>6,088</b>	<b>1,544</b>	<b>5,769</b>	<b>2,345</b>	<b>3,082</b>	<b>17,080</b>	<b>3,697</b>	<b>330,885</b>	<b>2,324</b>	<b>-</b>	<b>396,590</b>	<b>432,842</b>
<b>Total liabilities and net assets</b>	<b>38,535</b>	<b>39,693</b>	<b>8,150</b>	<b>31,465</b>	<b>16,295</b>	<b>2,242</b>	<b>39,452</b>	<b>30,217</b>	<b>13,871</b>	<b>27,184</b>	<b>9,099</b>	<b>491,907</b>	<b>3,631</b>	<b>-15,630</b>	<b>736,111</b>	<b>952,486</b>



# Financial Figures

	CARE Australia	CARE Canada	CARE Danmark	CARE Deutschland-Luxemburg	CARE France	CARE Japan	CARE Nederland	CARE Norge	CARE Österreich	CARE Int'l UK	Raks Thai	CARE USA	CARE Int'l Secretariat	Combined Adjusted	Total 2010	Total 2009
<b>COMBINED STATEMENT OF ACTIVITY AND NET ASSETS FOR THE YEAR ENDED JUNE 30, 2010 – '000 EURO</b>																
<b>SUPPORT AND REVENUE</b>																
Government and non-governmental agencies grants	16,919	40,119	10,013	14,427	11,248	1,097	17,495	16,000	12,870	28,163	3,553	177,480	2,500	-	351,884	404,267
Donor contributions	9,269	5,403	4,083	4,658	9,297	873	2,930	1,560	2,775	8,288	363	93,269	-	-	142,768	122,145
Programs contracted with member organizations	14,111	28,213	-	-	306	-	-	-	-	-	257	101,403	-	-144,290	-	-
Contributions in kind	53	20,609	-	-	252	-	-	-	-	192	-	15,497	-	-	36,604	5,172
Agricultural commodities	-	-	-	-	-	-	-	-	-	-	-	22,143	-	-	22,143	104,873
Interest and other income	812	1,151	257	1,064	490	15	191	40	94	357	107	12,779	1,802	-	19,162	19,703
Administrative support	-	-	-	-	-	-	-	-	-	-	25	-	3,348	-3,374	-	-
<b>Total support and revenue</b>	<b>41,164</b>	<b>95,495</b>	<b>14,353</b>	<b>20,149</b>	<b>21,594</b>	<b>1,986</b>	<b>20,616</b>	<b>17,601</b>	<b>15,739</b>	<b>37,001</b>	<b>4,305</b>	<b>422,570</b>	<b>7,651</b>	<b>-147,663</b>	<b>572,561</b>	<b>656,161</b>
<b>EXPENSES</b>																
Development program activities and disaster and emergency relief	35,707	88,163	11,500	17,077	15,720	1,335	16,299	15,865	13,475	29,066	4,060	365,255	3,045	-144,290	472,279	566,125
Supporting services and other expenses	5,897	6,552	2,585	2,932	4,496	719	3,053	1,964	1,786	7,566	481	68,664	4,430	-3,374	107,751	92,990
<b>Total expenses</b>	<b>41,604</b>	<b>94,715</b>	<b>14,085</b>	<b>20,009</b>	<b>20,217</b>	<b>2,054</b>	<b>19,352</b>	<b>17,830</b>	<b>15,261</b>	<b>36,632</b>	<b>4,541</b>	<b>433,919</b>	<b>7,475</b>	<b>-147,663</b>	<b>580,030</b>	<b>659,116</b>
<b>EXCESS (DEFICIENCY)</b>																
Net assets, beginning of year	-440	780	268	140	1,378	-68	1,264	-229	477	370	-236	-11,349	176	-	-7,469	-2,955
Other changes	7,321	2,741	450	4,784	3,416	1,094	3,462	1,573	1,673	15,210	2,725	211,783	1,705	-	257,936	274,917
Currency translation adjustment	-	-	-	-	193	-10	-	-0	-	-2,192	51	36,770	-	-	34,812	-41,797
<b>Net assets, end of year</b>	<b>1,602</b>	<b>848</b>	<b>1</b>	<b>-0</b>	<b>-0</b>	<b>249</b>	<b>-</b>	<b>292</b>	<b>-</b>	<b>606</b>	<b>40</b>	<b>33,889</b>	<b>23</b>	<b>-</b>	<b>37,550</b>	<b>27,772</b>
<b>Net assets, end of year</b>	<b>8,484</b>	<b>4,369</b>	<b>719</b>	<b>4,924</b>	<b>4,987</b>	<b>1,265</b>	<b>4,726</b>	<b>1,636</b>	<b>2,150</b>	<b>13,994</b>	<b>2,580</b>	<b>271,094</b>	<b>1,903</b>	<b>-</b>	<b>322,829</b>	<b>257,936</b>
<b>COMBINED BALANCE SHEET FOR THE YEAR ENDED JUNE 30, 2010 – '000 EURO</b>																
<b>ASSETS</b>																
Cash and short-term investments	25,417	18,399	1,774	7,202	6,481	622	5,574	20,547	7,792	9,985	4,985	232,961	2,006	-	343,745	280,270
Receivables from government and non-government agencies	4,258	10,603	3,768	3,089	4,945	-	26,725	416	1,774	8,169	1,287	35,147	553	-12,806	87,929	56,706
Deposits and other assets	1,007	345	17	11,599	1,906	983	-	-	9	3,950	33	122,996	414	-	143,259	248,078
Property and equipment, net	890	3,175	126	63	15	231	17	111	104	168	44	11,915	-	-	16,860	20,562
<b>Total assets</b>	<b>31,572</b>	<b>32,522</b>	<b>5,684</b>	<b>21,953</b>	<b>13,348</b>	<b>1,836</b>	<b>32,316</b>	<b>21,074</b>	<b>9,678</b>	<b>22,272</b>	<b>6,349</b>	<b>403,019</b>	<b>2,974</b>	<b>-12,806</b>	<b>591,792</b>	<b>605,616</b>
<b>LIABILITIES AND FUND BALANCE</b>																
Accounts payable and accrued expenses	2,113	6,483	-	135	4,526	53	682	350	288	283	154	34,728	485	-12,806	37,475	29,805
Advances by government and non-government agencies	19,189	19,913	4,260	16,852	3,819	516	26,851	18,696	7,178	7,304	2,822	47,288	585	-	175,275	178,892
Debt and other liabilities	1,786	1,756	705	42	16	3	57	393	62	691	792	49,908	-	-	56,212	122,003
<b>Total liabilities</b>	<b>23,088</b>	<b>28,152</b>	<b>4,966</b>	<b>17,029</b>	<b>8,361</b>	<b>572</b>	<b>27,591</b>	<b>19,439</b>	<b>7,527</b>	<b>8,278</b>	<b>3,769</b>	<b>131,925</b>	<b>1,070</b>	<b>-12,806</b>	<b>268,962</b>	<b>330,700</b>
<b>Net assets</b>	<b>8,484</b>	<b>4,369</b>	<b>719</b>	<b>4,924</b>	<b>4,987</b>	<b>1,265</b>	<b>4,726</b>	<b>1,636</b>	<b>2,151</b>	<b>13,994</b>	<b>2,580</b>	<b>271,094</b>	<b>1,903</b>	<b>-</b>	<b>322,830</b>	<b>274,917</b>
<b>Total liabilities and net assets</b>	<b>31,572</b>	<b>32,522</b>	<b>5,684</b>	<b>21,953</b>	<b>13,348</b>	<b>1,836</b>	<b>32,316</b>	<b>21,074</b>	<b>9,678</b>	<b>22,272</b>	<b>6,349</b>	<b>403,019</b>	<b>2,974</b>	<b>-12,806</b>	<b>591,792</b>	<b>605,616</b>

Income and expenditure have been translated using the average exchange rate over the fiscal year. The assets and liabilities have been translated using the exchange rate at the end of reporting period. Foreign currency translation adjustments appear under the currency translation adjustment line.

## **CARE International Members**

### **CARE Australia**

[www.careaustralia.org.au](http://www.careaustralia.org.au)

### **CARE Canada**

[www.care.ca](http://www.care.ca)

### **CARE Danmark**

[www.care.dk](http://www.care.dk)

### **CARE Deutschland-Luxemburg**

[www.care.de](http://www.care.de)

### **CARE France**

[www.carefrance.org](http://www.carefrance.org)

### **CARE International Japan**

[www.careintjp.org](http://www.careintjp.org)

### **CARE Nederland**

[www.carenederland.org](http://www.carenederland.org)

### **CARE Norge**

[www.care.no](http://www.care.no)

### **CARE Österreich**

[www.care.at](http://www.care.at)

### **Raks Thai Foundation (Thailand)**

[www.raksthai.org](http://www.raksthai.org)

### **CARE International UK**

[www.careinternational.org.uk](http://www.careinternational.org.uk)

### **CARE USA**

[www.care.org](http://www.care.org)

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