



World Vision



2016
Annual Report
Burundi

Who We Are

Our Vision

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

Core Values

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

Our Mission

WorldVision is an international partnership of Christians whose mission is to follow our Lord and Saviour Jesus Christ in working with the poor and oppressed to promote humanitarian transformation, seeking justice and bear witness to the good news of the Kingdom of God.

Who We Are

World Vision is a Christian humanitarian organisation dedicated to working with children, families, and their communities worldwide to reach their full potential by tackling the causes of poverty and injustice. We serve close to 100 million people in nearly 100 countries around the world. Motivated by our faith in Jesus Christ, we serve alongside the poor and oppressed as a demonstration of God's unconditional love for all people regardless of religion, race, ethnicity or gender.

This Annual Report provides an overview of the work of WorldVision Burundi from October 2015 to September 2016.

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Our Areas of Operation





Message from the **National Director**

“During the past year, we lived out our core value of being responsive.”

This year, we started implementing our new strategy (2016-2020), whereby we plan to support 2.8 million vulnerable children in Burundi. World Vision continued to work alongside communities in need to ensure they are working together towards building a more sustainable future.

The last fiscal year was a special year for us because we started working through a new structure. This included moving from Area Development Programmes (ADP) to a cluster development programme structure. This new approach has already proven to be an efficient way of reaching more people with less or similar resources.

During the past year, we lived out our core value of being responsive. This is evident through our successful collaboration with the government, communities and stakeholders to support the needs of the communities that we support especially in emergencies.

Our peace-building project engaged with highly ranked officials in the army and police to create dialogue on how the Burundi forces can handle emerging security issues. Additionally, we partnered with WFP and other organisations to meet the needs of malnourished children in North East Burundi. We are particularly pleased that we were able to influence leaders’ decision making. Due to this we have been able to advocate for a number of protocols that were passed which significantly contributed to the reduction of malnutrition among children under five such as bio fortification.

We are encouraged that we are a preferred partner for donor resources for health projects that are enabling us help to address the key underlying issues that contribute to poor nutrition practices. With regard to the sustainable development goals, we are delighted to have helped so far, more than 57,000 children from rural families learn how to read and write, including children who haven’t started primary school yet.

2016 proved yet to be another successful year.

All our achievements would not have been possible without the support of those who have selflessly given towards our ministry. On behalf of World Vision Burundi, I want to say thank you and we look forward to a greater 2017 with your support

**Marthe Mbengue,
World Vision Burundi**

National Director



Table of Contents

Transformational Development	
6	
Food Security, Livelihoods and Nutrition	
8	
Health	
10	
Education	
12	
Water, Sanitation and Hygiene	
14	
Advocacy and Child Protection	
16	
Humanitarian Emergency Affairs	
17	
Accountability	
18	
Financial Profile	





Food Security and Nutrition

Our Goal: We aim to contribute towards increased food production and diversified diet through innovative projects in food bio-fortification



Food Security Situation in Burundi

In Burundi, land is infertile as a result of repetitive exploitation. Burundi farmers are generally small landholders whose land does not produce enough for their generally large families. A Burundian woman gives birth to an average of 6.4 children (DHS, 2010) making the fertility rate one of the highest in the world. Land contraction inhibits herding of livestock for organic manure, thus fertilisers are very important for the Burundi farmers.

Scarcity of improved, higher yielding, and shorter duration varieties of seeds are one of the root causes of low crop production in Burundi. Certified seeds are scarce. This results in farmers using the same seeds for multiple agricultural seasons that result in seed degeneration which in turn leads to the reduction of food production.

Analysis of the available food security and nutrition data in terms of child nutrition and mortality places the country among the hungriest places in the world.

What World Vision is Doing

World Vision continues to actively invest in resilience and livelihood projects with most of the interventions focusing on the contribution of increased food production and diversified diet by supporting farmers throughout the whole process. Community beneficiaries are supported with both improved seeds and fertilisers to contribute to increased food production.

World Vision is also investing in innovative projects in food bio-fortification. We are currently focusing on bean fortification; an improved bean variety that is rich in vitamin A and Iron. Unlike the other varieties, which were planted before by the community members, this variety has an advantage of contributing to the reduction of anaemia, a common chronic disease in children under five in Burundi.

To ensure the availability of vegetables at household level, our teams in collaboration with local technical government service raised awareness among community members on establishing kitchen gardens in every household. This includes tapping into locally available nutritious products.

Communities from Gasorwe, in North East Burundi, are now growing soy and producing soy milk which is significantly contributing to combating malnutrition. World Vision provided these communities with the soy seeds and fertilisers.

Youth who are out of school, mothers and communities are encouraged to initiate income generating activities through Village Savings and Lending Associations (VSLAs), to save and borrow money. To help associations scale up their investments, World Vision supports them to rear small livestock, produce fruit and beekeeping. Through negotiated agreements, World Vision also linked the community members to markets through local companies that can buy their products. Rapidly, the number of households with a secondary source of income is increasing in our areas of intervention. Due to this, communities celebrated increased household access to income. So far more than 1,600 associations have been set in place with a capital of over USD 500,000. Through the VSLA approach, World Vision is contributing to the well-being of around 100,000 children.

Success Story

“We had despaired. We thought he would die”

Jean Marie Nsavyimana is a four year old boy of Nyanza-lac commune, Makamba province, south of Burundi. When his father died, his mother started struggling to put food on the table. His mother worked as a laborer to make ends meet. When the situation became unbearable for her, she decided to flee, leaving behind Jean Marie. She now lives in a refugee camp in Tanzania.

Jean Marie's Aunt, Marie Kabura, took him in, despite being a widow struggling to provide for her four other children. Jean Marie was however very ill. He had a swollen body and grey hair. He could hardly walk. “We had despaired, we thought he would die; but we were amazed to see how his health status improved with the treatment by the supplement” Marie Kabura, aunt to 4-year-old Jean Marie says.

By the time they took him in he was already malnourished. His new family was already in despair when a mass screening conducted by Burundi emergency platform including World Vision took place. Jean Marie was put on Ready To Use Therapeutic food (RTUF) donated by World Vision after he was diagnosed with severe malnutrition. The nutrition supplement helped him regain his health. He ate four packs of RTUF a day for three consecutive months.

His family is now making efforts to prevent Jean Marie from relapsing. His new family is now putting into practice their newfound knowledge on nutrition. They are feeding Jean Marie with locally available nutritious food, especially vegetables which are helping to keep him in good health.

Local health authorities in the Province of Makamba alerted the Burundi emergency platform. A nurse at Bukeye health centre where Jean Marie was referred to says that they issued an alert after they noticed an unusual number of malnutrition cases in children in the area. 500,000 children were targeted through the screening exercise in Makamba. In Nyanza-lac village where Jean Marie lives, 80 children were found to be severely malnourished.

World Vision responded by supplying ready to use therapeutic food to help rehabilitate children found to be malnourished (RTUF). Bukeye, Jean Marie's nearby health centre was among the beneficiaries of the donation.

“Limited arable land and recurrent conflict are the main challenges that prevent families from producing enough food. In some cases, ignorance plays a big role.” Juvenal Simbatohana, a community mobiliser explains. Juvenal requests for support through provision of fertiliser so as to increase food production and considerably decrease malnutrition in children.

Key Achievements



16,839 small holder farmers supported to access community based services



15,459 farmers and lead farmers received improved seeds and other materials for market and nutrition productions



9,038 VSLA group members initiated income generating activities after World Vision training



5,221 lead farmers and youth association members trained on Agriculture conservation practices



334,350 agroforestry trees produced and planted to help protect the environment



334 mothers supported to improve infant and young child feeding practices



38,604 children screened for malnutrition



447 children referred from World Vision's foyer d'apprentissage et de rehabilitation nutritionnelle (FARN) session to outpatient therapeutic programs (OTP)



182 FARN sites equipped with cooking utensils, reporting and monitoring materials



6,118 boys and girls recovered from malnutrition after they were rehabilitated in FARN



Health

Goal: To contribute towards increased access to quality reproductive health services and Integrated Community Case Management (ICCM)

Health Situation in Burundi

The prevalence of infectious diseases amongst children under five in Burundi remains high. Preventable diseases cause 80% of all deaths of children in this demographic. Available data states that around 220 children under five years old die daily (DHS, 2010). Infant mortality rate is at 59 deaths per 1,000 live births and neonatal mortality is estimated at 31 deaths per 1,000 live births. Maternal mortality rate is 500 deaths per 100,000 live births with the number of women attended to by skilled staff being 60%.



What World Vision is Doing

World Vision focused on the promotion of family planning and safe delivery as well as improving the nutritional status of children and mothers. Birth rates in Burundi are among the highest in the world and poorly spaced births are triggering malnutrition resulting in mortality among children under five. In 2016 World Vision scaled up its Integrated Community Case Management (ICCM) project to fight against the three main diseases affecting children under five in Burundi. These are malaria, diarrhea and pneumonia.

An outbreak in malaria, forced a scale up of the ICCM project to support affected populations, mainly children at risk of death in many areas of three intervention, the focus being put on malaria management. ICCM has proved to be an effective way of addressing these three kinds of diseases as they are treated at community level allowing children to access health care in due time.

In its effort to contribute to the reduction of morbidity and mortality caused by major infectious diseases especially in the under five demographic, World Vision provided various training sessions targeting health staff. Training sessions were accompanied by health kit distribution to health facilities.

Other areas of interventions such as health districts are supported with the implementation of a Community Led and Total Sanitation (CLTS) approach. This approach effectively assists in the reduction of diarrhea related diseases and the reduction of open defecation.

Apart from the ICCM implementation World Vision in partnership with Global Fund distributed mosquito nets to help fight the high malaria prevalence. The high malaria prevalence was as a result of an outbreak that occurred towards the end of 2015 prompted by flooding caused by El Niño in many areas of the country. Effective training of health workers was done to ensure sustainability of the World Vision projects within the communities.

Success Story

Reproductive Health

Peer education helps change high risk sexual behaviour

"In terms of sexuality, young people are eager to learn and often they learn from those who don't know or are ill-intentioned people," says Jessy Karen Irankunda, student at Lycée Royal of Muramvya, centre west of Burundi. Jessy Karen, like other peer educators are advocating for more training sessions for young people from different backgrounds so that they can get opportunities to learn about their sexuality so to avoid risky sexual behavior. Many young people ask to join the network for peer education. A request made when RAMBA project has almost achieved its goals. RAMBA project is a European Union funded Project implemented by World Vision Burundi aiming at contributing to improving access to services of the reproductive Health by removing socio- cultural and gender based barriers.

Out of a targeted 1,980 peer educators, the project has already trained 1624,704 and 920 respectively in and out of school; a goal achieved at 82 per cent. Out of a total of 20,000 young people who were targeted in discussion forums, 19,563 young people, i.e 97.8 per cent took part in the discussions. On the target of 20,000 youth, in and out of schools, 12,548 representatives of youth associations have completed the training, i.e 62.7 per cent.

Breaking the taboo

With the help of peer educators, the question of sexuality which was so far taboo is openly discussed. Each young person trained is asked to spread the message of the project, to educate peers about the dangers of irresponsible sexual behaviours. Since abstinence is not possible all the time for everyone, the project teaches youth, protection methods, such as condom use. In the event of sexual violence, for example, victims are aware of the danger of being silent. "A girl from a village of Muramvya province who was recently raped took the courage to ask for help. This is a behavior that was not there before the coming of the RAMBA project," Hilaire Niyinzigamiye, responsible for youth training in Muramvya province explains.

RAMBA project does not have detailed statistics on the reduction of unwanted pregnancies in schools, but school directors working in the four provinces of RAMBA intervention express their satisfaction in terms of unwanted pregnancy reduction among girl students.

 **25,614** community members sensitised on health care seeking behaviour at **community level**

Key Achievements

 **25,614** community members sensitised on health care seeking behaviour at community level

 **755** Community Health Workers (CHWs) trained on Timed Targeted Counseling (TTC)

 **266** health staff trained on Timed Targeted Counseling (TTC)

 **9,352** lactating mothers delivered with the support of skilled birth attendants

 **35,216** men and women mobilised for Healthy Timing and Spacing of Pregnancies (HTSP)

 **1,555** Community Health Workers (CHWs) trained on how to diagnose and treat pneumonia, diarrhea and malaria according to national policy

 **689** trained on Integrated Community Care Management (ICCM) at community level

 **2** health facilities provided with drugs after they reported drug stock outs

 **7** new technologies promoted in service delivery, monitoring and reporting at household, community and national levels.

 **18** joint field supervision visits conducted to support Healthy Timing and Spacing of Pregnancies (HTSP) implementation



Education

Goal: To contribute to improved access to quality basic education and creation of better learning environments for both boys and girls



Education Situation in Burundi

Since 2013, Burundi allocates 17.2% of its public expenditure budget to education, this is approximately 5.4% of country's GDP (UNESCO, Institute for Statistics). Education remains Burundi's core focus in its long-term development vision.

The government's education sector plan (Programme sectoriel de développement de l'éducation et de la Formation, PSDEF, 2020), aims at "achieving universal primary education for the majority of youth until they attain legal age to be employed and serve the country."

The government however, still faces challenges related especially to congestion in schools, insufficient school materials, high repetition rates and persistence of double-shift classrooms despite the efforts deployed by the government in classrooms construction. Early Childhood

Development (ECD) remains rare in rural areas (only 6% of children under five years have access to preschool at national level).

What World Vision is Doing

To help address the need for increased access to education, World Vision supported communities to construct and rehabilitate schools, distribute educational materials to teachers and school children. In order to contribute to a better learning environment, World Vision also provided the schools with clean water, which is a great need in some areas, as well as latrines and training sessions on school management.

In the last couple of years, World Vision initiated Literacy Boost (LB), an innovative approach to help children to learn how to read and write at community level. Children who attended Literacy Boost before they started primary school

performed better compared to those who did not participate in the programme before starting school. World Vision partnered with communities to construct reading camps, equip them and train reading camp facilitators.

Partnerships with different stakeholders (parents, local education authorities, churches, etc.) were actively reinforced and strengthened so as to reach more children from age three. We also scaled up this approach and reached more than 57,000 children enrolled in this programme in the past year.

Parents are proud to have established pre-schools in their communities and have promised to contribute and enroll their children in the pre-school as those children in pre-primary education show improved cognitive abilities.

Success Story

More classrooms for more performance

Evangeline Iradukunda, is a nine-year-old girl studying at Gasakuza Primary school in South East Burundi. She learnt in a congested classroom. Only her class, hosted more than 100 pupils in a school of more than 900 children. Evangeline and her classmates found it hard to concentrate. "One desk was shared by four pupils, and it was uncomfortable." Evangeline explains

Ildephonse Niyukuri, Evangeline's teacher, says that the big number of children he was teaching did not ease his work; and that bore consequences towards learners. Poor performance due to congested classes was the basis of dropouts in Evangeline's school. Some years back, such a situation prompted 8% out of the 900 school children to drop out of school.

Thanks to the partnership between World Vision and her community. Four new classes were recently built at her school. The new infrastructure was recently officially handed over by World Vision to the Government of Burundi.

"I am happy in my new classroom and expect to move to the next class in the coming school year", says Evangeline, whose class this year witnessed improved performance.

Her teacher says that the performance has now shifted to around 80% while before it was around 50%. "Only 4 per cent dropped out last school year after we started using new classes", Ildephonse appreciates.

"I want to be a nurse once I complete my studies.", Evangeline delightfully shares her hopes for the future.

"Only 4% dropped out last school year after we started using new classes"

Key Achievements

 **24,720** reading materials developed or bought to promote community reading activities

 **11,296** children registered and attending reading camps at community level


 **650** children with special needs supported to access to education

 **57** child rights violation issues reported and followed up by community structures

 **973** teachers applying literacy boost and numeracy teaching methodologies

 **4,450** children supported with evening refresher training sessions to get prepared for national tests

 **793** literacy boost mobilisers supported with working materials

 **5,608** mothers, fathers and caregivers attended literacy boost awareness raising sensitisation sessions

 **401** adolescents successfully completed vocational training

 **530** adolescents trained on entrepreneurship and peace building

 **216** teachers trained on entrepreneurship

 **68** entrepreneurial groups for income generating activities set in place



Water, Sanitation and Hygiene

Goal: To contribute to increased access to adequate safe water supply, improved sanitation facilities and hygienic practices

WASH Situation in Burundi

According to the National Inventory of Water Supply in Burundi approximately 57% of Burundi's rural area population have access to clean water. The majority of these people are forced to walk several kilometres daily to collect untreated water. This has contributed to a high prevalence of potentially fatal water borne diseases. It is also a major factor in limiting access to education and economically productive activities, particularly for women and children who bear the main burden of fetching water.

What World Vision is Doing

The Water, Sanitation and Hygiene (WASH) program makes up one of the cornerstones of World Vision Burundi's national strategy. The WASH program used a range of approaches to achieve its overall objectives based on World Vision International global practices and models in implementing WASH activities in a broad range of development and emergency contexts.

With regards to water supply, World Vision intervened through spring development (on-site capping), gravity-fed water supply system with storage, distribution systems and multiple water points. We also worked in the domain of hygiene and sanitation focusing on Community-Led Total Sanitation and Hygiene (CLTSH), school WASH and public hygiene and sanitation.



TRANSFORMATIONAL DEVELOPMENT

World Vision hygiene and sanitation work involved training communities and local institutions to create sustainable change. The overall general landscape assessment conducted by World Vision Burundi revealed that open defecation is not culturally a customary practice in Burundi but rather reflects the awkwardness of the sanitation facilities.


Thus, the objective was to improve the quality of sanitation facilities so as to promote sustained hygiene behavioural change. Currently, World Vision is working with Community Health Workers (CHWs), Faith Based Organisations (FBOs) and other Community Based Organisations (CBOs) for a lasting community based development.

Community Health Workers (CHWs) were responsible for mobilising their respective villages and ensuring that communities were empowered at village level. This was in tandem with already established community development efforts that have seen Burundians dedicate every Saturday morning for public work that includes environmental sanitation.

Only **57%** of Burundi's rural area population **has access to clean water**

Key Achievements

 **14,600** people gained access to clean water


 **37,819** households constructed their own improved latrines and hand washing facilities after World Vision's sensitisation

 **204** water, sanitation and hygiene committee members trained

 **10** on spot spring capping sources rehabilitated

 **47** water supply systems installed

 **4** water treatment methods promoted

 **157** school clubs formed to promote sanitation and hygiene in schools and in the nearby

 **584** health staff and community mobilisers trained on community led total sanitation (CLTS)

 **67** safe and clean latrines constructed for schools and others public institutions

 **14,600** people gained access to clean water



Advocacy and Child Protection

Our Goal: To contribute towards empowered communities to bring about their own development and child well-being and promote an Empowered World View

Child Protection and Advocacy in Burundi

Each year, Burundi loses more than 35,000 children under five (UNICEF, 2015) due to preventable or curable diseases. Many of these deaths are due to inadequate service delivery and persistent negative and harmful attitudes in the communities.

Ratios for doctor-patient; nurse/midwife-patient; and many health requirements at different levels of health facility (health centers, district, regional or Referral Hospitals are not adequately met. In 2011, Burundi had only 3 doctors for every 100,000 inhabitants, while WHO standard is one doctor for every 600 patients (World Bank, 2011).

Teacher-student, student-desk, or student-class ratios are very low compared to the standards. While each classroom is supposed to have only 45 students, some classrooms contain up to 100 students. Children in schools and other public places (churches, health centers, playgrounds) use

unhygienic toilets thus exposing them to water-borne diseases.

What World Vision is Doing

WorldVision influenced change at community level by focusing on empowering communities to be the real drivers of their own development and child well being. This was achieved by facilitating the process of social transformation through addressing various social norms, practices and attitudes that inhibit individuals including children. Practices that prevented households and communities from exploiting their full potential for development and that pushed them into dependency and negative relationships.

Through community engagement processes, practices such as alcoholism, polygamy and witchcraft were identified by communities as some of the worst barriers to development and child well-being.

In addition to supporting initiatives aimed at promoting social and spiritual transformation, World Vision Burundi empowered community members to influence decision-making as well as policy and structural changes at community level on issues affecting their lives and child well-being.

World Vision promoted Citizen Voice and Action (CVA), a social accountability methodology designed to promote dialogue between citizens and their leaders and service providers to improve services. Through CVA, members of the community were empowered to become more aware of their rights and hold service providers accountable through a process of constructive dialogue.

World Vision also worked with partners and stakeholders to influence policy decisions that cannot be passed at local level, including allocation of funding, establishment of national level policies, structures and laws.



Success Story

Girls' economic empowerment reduces sexual assaults

Mutoni Wase Ortine, is a three-year-old child, living in Muyinga center, province of Muyinga, Northeast of Burundi who can now access basic needs. She was born of an early pregnancy that her mom, Ines Nishemezwe, conceived while she was still in her 3rd year of her secondary school studies. Thanks to World vision support that trained her in soap making, she is now self-reliant and able to provide to her daughter from quality food to beautiful clothes.

"Life became tougher after I got pregnant. I had to move from one place to another seeking accommodation and food", says Ines Nihemezwe, Ortine's Mom.

After conceiving, Ines could neither expect support from her family that was living far, nor from a man who impregnated her. He disappeared from the time he was informed about the pregnancy, Ines explains. Worse still, she dropped out of school against her will.

In Burundi, young girls who get early pregnancies are left to rely on themselves; a situation that in some occasions leads to abortion, or dumping babies at birth. According to UNFPA, around 3,000 girls in Burundi dropout of school yearly due to unwanted pregnancies.

In Muyinga center, Ines and other 44 young girls came together and made two associations. They approached World Vision for support. They were trained in soap making and Ines, who grappled with rent arrears, and poor quality food, is now celebrating the good results.

"We did not know that girls would make it, but as we started, the business thrived and we are happy", says Ines.

After selling the soap, the money is saved and members of the association lend one another in order to respond to our urgent needs. "Since then, life became bearable, you can see how my young child is healthier.", adds Ines.

Ines is committed to her association's activities and pays tribute to it. The entity has also become a hub for sharing their experiences and supporting each other. "Our wish is to eradicate dependency which is likely to trigger other pregnancies.", she says.

Thanks to a law that was recently enforced, Ines has resumed school. Something that could not have happened in the past whereby a school girl who became pregnant was usually sent home forever.

World Vision staff in Muyinga advocate for continued acceptance in schools of such girls once they opt to go back to school. Making them more resilient is another commitment and Ines appreciates it. "We have been trained in farming, and how to keep records in our saving group.", she joyfully shares. Pursuing her studies is Ines' goal and her call to school girls is not to indulge themselves in behaviors that would endanger their lives

Key Achievements



10,795 community members mobilised to fight against certain social norms and harmful practices that affect child health and nutrition status; including alcoholism, gender based violence, child labour and birth registration



486 community child protection committee (CCPC) members trained on fighting against early marriage issues



244 child issues addressed through child protection and care groups at community level



725 child protection advocacy committee (CPAC) members trained on Child's Rights



1,020 community child protection committee members trained on child rights and reporting mechanisms



14 child protection cases reported by community child protection committee members according to Government standards



111 staff and partners trained on citizen voice and action (CVA) approach



105 functional citizen voice and action (CVA) working groups



244 child issues addressed through **child protection and care groups** at community level

Humanitarian Emergency Affairs

Our Goal: To contribute to humanitarian accountability and response by linking communities to the humanitarian actors in Burundi

Humanitarian Emergency Affairs (HEA) in Burundi

Burundi, like other countries in East and Central Africa, is prone to natural disasters. Floods, hailstorms, drought and torrential rain are recurrent in Burundi causing landslides and loss of lives in some areas. In recent years, the country has registered an unusually high amount of natural disasters, which contributed to the displacement of communities, the destruction of homes, the disruption of livelihoods and the further deterioration of food and nutrition security. Political tensions have also contributed to people's insecurity for decades.

What World Vision Doing

In view of this situation and with the funding from the Australian High Commission, World Vision initiated an accountability hotline project, aimed at contributing to humanitarian accountability and response by linking affected communities to the humanitarian actors in Burundi. The hotline provided an opportunity for affected populations to call free of charge and seek for help.

This project brought together different stakeholders through a consortium, including United Nations High Commission for Refugees (UNHCR), World Food Programme (WFP), International Organisation for Migration (IOM), Office for the Coordination of Humanitarian Affairs (OCHA) and Caritas.

Various humanitarian needs were reported with the help of this accountability hotline. Needs were mostly related to shelter, protection, child abuse, food security and health as well as increased vulnerabilities caused by the recent El Niño phenomenon.

World Vision also responded to malaria outbreak in Burundi. Since early 2016, statistics from the Burundi Ministry of Health and news from the

FEWSNET projected numbers of malaria cases to reach nine million (more than 80% of the Burundi population) if nothing was done.

World Vision Burundi responded to the malaria outbreak and is presently still responding with key interventions in highly affected areas (Karusi, Muramvya, Rutana and Cankuzo) utilising internal funding from Area Development Programs (ADPs) allocations.

Immediate lifesaving assistance was launched distributing mosquito nets and scaling up the malaria case management at community level to enable affected children to access treatment on time.

A number of lifesaving interventions were launched including Indoor Residual Spraying (IRS) and case management focusing on diagnosis and treatment of patients with malaria while promoting and implementing Integrated Community Case Management (ICCM) for children 2-59 month; Intermittent Preventive Treatment of malaria in Pregnant women (IPTP); promoting proper sanitation around homes and clearing mosquito multiplication sites; strengthening integration with other sectors and intervention within health sector and promoting positive healthy behavior for early diagnosis and treatment

projected numbers of malaria cases to reach **nine million** in 2017 **(more than 80% of the Burundi population)**

Accountability

In 2016 World Vision Burundi continued to strengthen its culture of accountability. World Vision invests up to \$10 million annually in Gift in Kind (GIK). We put in place GIK community committees to facilitate fair and transparent distribution of GIK materials to children and their communities in the areas where we work.

Transparency started from beneficiary selection with vulnerability being the core element in the selection and the entire committee agreeing on the beneficiaries. Once the selection was done by the communities committee members, World Vision organised for public validation of the selected beneficiary lists.

Once the lists were agreed upon, community members selected started working on the community development work. Once again, distribution of the GIK items worked for was done in public. Community members were also given an opportunity to provide feedback on the items distributed. World Vision took into consideration all the recommendations.

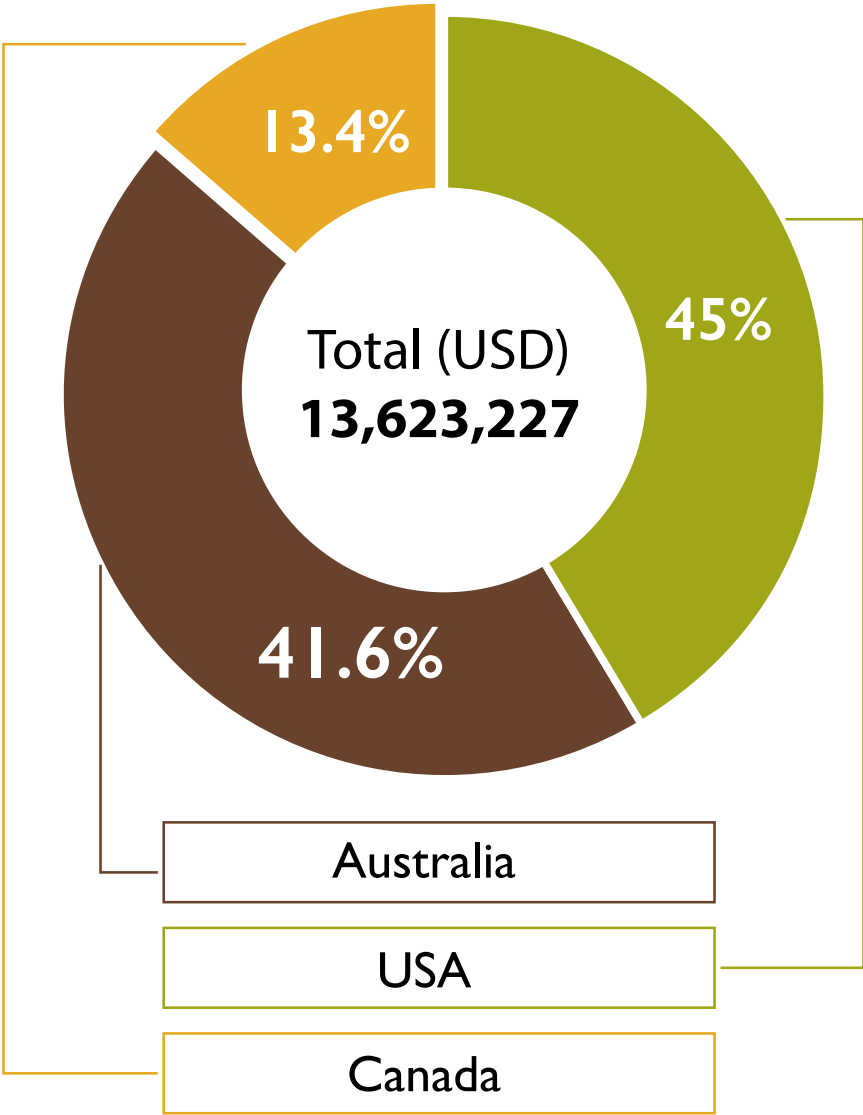
This year World Vision also launched an anti-corruption campaign, to educate staff, partners and beneficiaries about our anti-corruption policy. People were encouraged to report any fraud, whenever they dealt with World Vision staff. Large posters in the local language stand tall in all World Vision offices to educate people on how to channel their complaints. A phone number was provided on the posters to facilitate incident reporting and feedback. There are suggestion boxes available at the entrance of each and every office to allow people to have their say.

World Vision invests up to **\$10 million annually** in **Gift in Kind (GIK)**

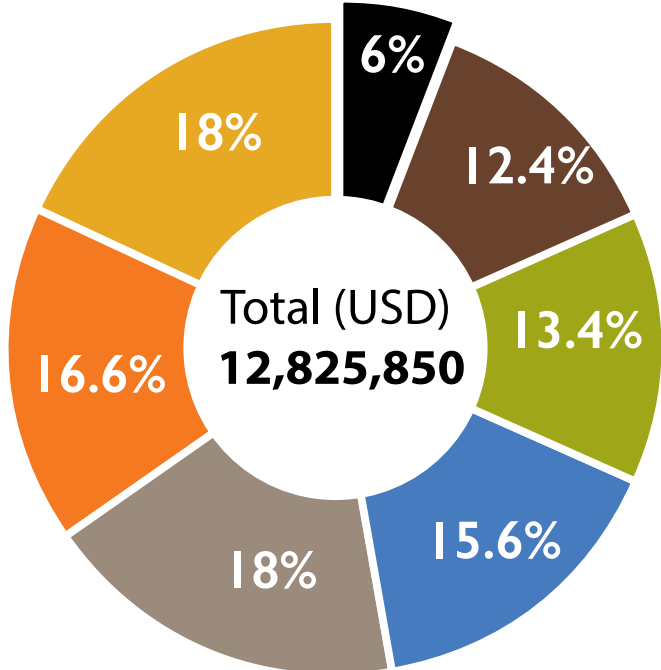


Financial Profile

GIK budget breakdown 2016 by World Vision Support Office



Cash budget breakdown 2016 by World Vision Support Office



- Australia
- Burundi (Local income)
- Canada
- Germany
- Hong Kong
- Korea
- USA



Our Donors and Partners





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