

2021

ANNUAL RESULTS REPORT



ACKNOWLEDGMENTS

This report was prepared by World Vision Canada and made possible through extensive time and input from colleagues across the organization. We owe utmost respect and gratitude to the staff and volunteers who have continued to serve children and communities across the world in the midst of an ongoing global pandemic and countless other obstacles in 2021.

INDIGENOUS LAND ACKNOWLEDGMENT

We acknowledge that the land on which our head office is located, in the Region of Peel, is part of the Treaty Lands of the Territory of the Mississaugas of the Credit. For thousands of years, Indigenous people inhabited and cared for this land. In particular, we acknowledge the territory of the Anishinabek, Huron-Wendat, Haudenosaunee and Ojibway/Chippewa peoples; the land that is home to the Metis; and most recently, the territory of the Mississaugas of the Credit First Nation, who are direct descendants of the Mississaugas of the Credit. We are grateful for the opportunity to work on this land, and we give our respect to its first inhabitants.

ON THE COVER

Maimuna, 12, lives in a Rohingya refugee camp in Cox's Bazar, Bangladesh with her parents and five siblings. When her school closed because of COVID-19, hygiene education sessions run by World Vision became a bright spot for her and the other children who joined. Through games and laughter, they learned to wash their hands and practice safe hygiene—and they took that knowledge back to their families and neighbours. "People are safe and happy to learn it," Maimuna says. "They also appreciate me."

Cover photo: Md. Shabir Hussain



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ACRONYMS + DEFINITIONS

CBA – Cost-benefit analysis

CMAM – Community-based Management of Acute Malnutrition

CVA – Citizen Voice and Action

DALY – Disability-adjusted life year

ECCE – Early childhood care and education

ECW – Education Cannot Wait

FGM – Female genital mutilation

GAC – Global Affairs Canada

GESI – Gender equality and social inclusion

GIK – Gifts-in-kind

LGBTQI+ – Lesbian, gay, bisexual, transgender, queer and intersex

MEAL – Monitoring, evaluation, accountability and learning

NGO – Non-governmental organization

OECD – The Organisation for Economic Co-operation and Development

RMNCAH – Reproductive, maternal, neonatal, child and adolescent health

RUTF – Ready-to-use therapeutic food

SDG – Sustainable Development Goal

SRHR – Sexual and reproductive health and rights

WASH – Water, sanitation and hygiene

WFP – World Food Programme

WVC – World Vision Canada

WVI – World Vision International

Humanitarian assistance addresses immediate and short-term needs following a crisis. Often called “relief” work, it seeks to save lives and help communities rebuild.

Development assistance addresses long-term, systemic issues that drive poverty and injustice, particularly focusing on social and economic development in lower- and middle-income countries.

Gender responsive work seeks to reduce gender-based inequalities by assessing and responding to the different needs and interests of women, men, boys and girls, and by incorporating the views of women and girls.

Gender transformative work takes specific measures to address root causes of inequality that change social structures, cultural norms and gender relations, in order to achieve more shared and equal power dynamics and control of resources, decision making and support for women’s empowerment.



LETTER FROM OUR PRESIDENT



A handwritten signature in black ink that reads "M Messenger". The signature is fluid and cursive.

Michael Messenger

President, World Vision Canada

REMAINING STEADFAST TO SEE GREATER IMPACT

I write this letter in the spring of 2022, having just returned from the Ukraine-Romania border. I heard so many stories of heartbreak and challenge from women and children fleeing the violence there. And the crisis in Ukraine is just one among many—COVID-19, climate effects, protracted conflicts, food insecurity and exploitation all continue. More than ever, I find myself contemplating the overwhelming and deep need of our ever-changing world.

Yet even as we've sensed the ground shifting beneath our feet—for us at World Vision, two things have remained clear. First, girls and boys today face greater challenges than we've seen in this lifetime. Second, we are undeterred. World Vision remains steadfast, committed to our God-given mission to help children where they need us most—even in some of the world's toughest places.

Fiscal year 2021 saw our investment in the most fragile contexts increase to 43% compared to 34% in the previous year—a sign of our commitment to helping in the places where it's hardest to be a child. Endeavoring to provide more protection and decision-making power for women in fragile contexts while increasing food security, we provided \$67 million directly to families through cash-based programming, in partnership with the World Food Programme. And when we analyzed the results from our five-year ENRICH grant in Kenya, Myanmar, Bangladesh and Tanzania, we found that our efforts had prevented over a thousand deaths, including 849 children under the age of five.

We strive to do the *most* good we can for children who are *most* in need, and part of that means putting time and expertise to measuring the results of our work. Evaluating our impact through rigorous measurement and analysis shows where we've been strong and where we need to improve. It keeps us accountable to the families we serve and the donors who support us. It drives us to be good stewards of the funds and resources we have been given by our generous donors. And it equips us to make sound decisions in times like these, as the world faces so many destabilizing factors.

This year, you'll notice a new format for our annual report. It runs longer and delves deeper into the progress we made in 2021. It features in-depth explorations of the challenges we face (even where we've not met our goals), the solutions we're applying, and the progress, change and measurable impact we're achieving, because of your partnership.

Despite extremely challenging conditions, the impact we're making together only continues to grow. Thank you for the critical part you have played in that. May God bless you.

SNAPSHOT REPORT:

2021 BY THE NUMBERS

OVERALL PROGRESS

This report accounts for World Vision Canada's program work completed in fiscal year 2021, from October 1, 2020 to September 30, 2021.



18,221,738

GIRLS, BOYS AND ADULTS WERE REACHED THROUGH OUR PROGRAMS.

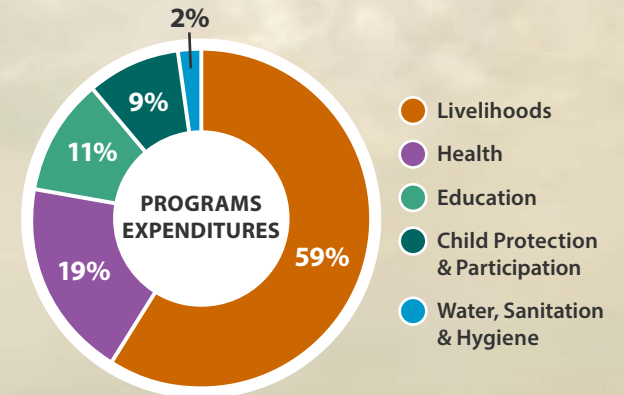
721 PROJECTS **WERE CARRIED OUT IN** **59** COUNTRIES.

\$384 million

WAS INVESTED IN AREAS OF NEED AROUND THE WORLD.

43%

WENT TO SUPPORT THE MOST FRAGILE COUNTRIES — UP FROM 34% IN THE PREVIOUS YEAR, AS WE SHIFT OUR PRIORITY TO HELPING THE MOST VULNERABLE.



LIVELIHOODS



4,135,337
people reached through
192 projects with
\$226 million invested

3,320,279
people received
food assistance*

48,424
people were active
members in 2,951
savings groups

Families with enough
food increased from
53% to 74%
in Mongolia between
2013 and 2020

HEALTH



10,817,381
people reached through
122 projects with
\$74 million invested

4,940,488
people learned how to
protect themselves
against COVID-19

1,024
deaths were prevented
through the
ENRICH program

Women holding leadership
positions on health committees
increased from
15% to 56%
in Ethiopia between
2016 and 2021

EDUCATION



1,409,324
people reached through
111 projects with
\$42 million invested

110,288
girls and boys attended
in-school or after-school
literacy activities

163,651
books were shipped
to support children's
education

Children reading
with comprehension
increased from
18% to 65%
in Sri Lanka between
2014 and 2021

CHILD
PROTECTION +
PARTICIPATION



1,766,683
people reached through
253 projects with
\$35 million invested

119,421
young people
participated in activities
aimed at ending violence
against children

5,119
community leaders,
faith leaders and local
partners were engaged

Children under five
with birth certificates
increased from
43% to 95%
in Mali between
2014 and 2021

WATER,
SANITATION
+ HYGIENE



1,324,978
people reached through
26 projects with
\$7 million invested

467,077
people gained access
to sanitation

253,458
people received hygiene
kits and supplies

202
communities were
certified as
"open defecation free"

* In partnership with the
World Food Programme.

When looking across sectors, the level of investment may not correlate in a linear way to the number of people reached. For example, infrastructure projects like drinking water systems are costly to build in comparison to widescale deworming campaigns which are quite inexpensive—yet both reach large numbers of people with multiplying benefits.

WORKING IN COMMUNITIES



344,800

children were actively sponsored in 41 countries.

469

sponsorship projects were carried out in 173 communities.

17

communities graduated to self-sufficiency.

ENGAGING WITH GOVERNMENTS



10 years into our *No Child for Sale* campaign, the Standing Committee on Foreign Affairs and International Development published a report recommending that Canada prioritize legislation to strengthen supply chain integrity and combat modern slavery in global supply chains.

12 *refugee and displaced youth* from around the world joined the new Refugee Education Council and are now influencing Canadian government policymaking on education.

We participated in creating the first **anti-racism framework** for Canada's international cooperation sector.

RESPONDING TO CRISES



We responded to **30** *emergencies*, including fragile contexts, in **25** *countries*.

Over **6.6 million** *people* were reached through our response efforts.

ACTING IN PARTNERSHIP



Over **\$70 million** in grant funding enabled us to meet the needs of children, through contributions from government and institutional partners.

15,315,537 *resources* like medical supplies and books were shipped to **30** *countries*, thanks to gift-in-kind partnerships.

Four case studies of lessons learned in 2021

1. The pandemic forced us to change the way we teach our Youth Ready curriculum, but through adaptations and lessons learned, 91% of participants completed the program in 2021.
2. We identified five gender equality pillars that have made World Vision's programming gender transformative.
3. After finding that only 18.5% of our data points measuring "people" were disaggregated by sex, we set a goal to have 90% of our indicators disaggregated by sex within two years.
4. World Vision Canada's transition to the Agile methodology has come with growing pains, but this new way of working is improving how our teams measure impact.

[Learn more.](#)



OUR MISSION + VISION

**OUR VISION FOR EVERY CHILD, LIFE IN ALL ITS FULLNESS.
OUR PRAYER FOR EVERY HEART, THE WILL TO MAKE IT SO.**

WHO WE ARE

World Vision Canada is a Christian global relief, development and advocacy organization. Our focus is helping the world's most vulnerable girls and boys overcome poverty and experience fullness of life.

WHAT WE DO

Grounded in more than 70 years of experience and expertise, World Vision works alongside communities, supporters, partners and governments to change the way the world works for children—impacting lives for generations to come. What does this work look like?

- **Emergency relief** for people afflicted by conflict or disaster—providing both immediate, practical help and longer-term support in rebuilding lives.
- **Transformational development** that is community-based and sustainable, focused especially on the needs of children.
- **Promotion of justice** that advocates to change unjust structures affecting the poor—empowering children, their communities and local partners with tools that address the root causes of injustice.

In every aspect of our work, World Vision is focused on a future where all children have what they need to live healthy lives that are full of promise: nutritious food, healthcare, education, protection from harm, clean water and economic opportunities.

WHY WE DO IT

Simply put, we are inspired and motivated to do this work because of our Christian faith. We believe in upholding, restoring and honouring the dignity and value of every human being, and we work alongside the poor and oppressed as a demonstration of God's unconditional love. We find joy as we partner with children in all their talent, strength and spirit—and see great things result. Lives are changed, and whole life stories transformed.

World Vision serves all people—without distinction of any kind, such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth, sexual orientation, gender identity or other status*—and we collaborate with those from other faiths (and none) who share our common values of compassion, love, justice and mercy.

Our Credentials

- World Vision has over 70 years of experience working in partnership to create better futures for vulnerable girls and boys.
- We are part of the World Vision Partnership that reaches around the globe, with more than 37,000 employees in nearly 100 countries spanning six continents.
- Together, we've supported more than 200 million children by tackling the root causes of poverty.

* Universal Declaration of Human Rights 2014 second resolution on "human rights, sexual orientation and gender identity"



2021 OUR STRATEGIC APPROACH

WHERE WE WORK

Focusing where we're most needed



World Vision is committed to improving the lives of the most vulnerable girls and boys—wherever they are in the world.



World Vision is guided by a single goal:

The sustained wellbeing of children, especially the most vulnerable.

To reach this goal, we must first meet children (and their families) *where they are*—and understand their needs—before we can work with them toward immediate and long-term solutions.

World Vision identifies “vulnerable” girls and boys as those under 18 who experience two or more of the following realities (understanding these factors may shift according to the environment):

- **Children in abusive, violent or exploitative relationships**
- **Children living in extreme poverty and deprivation**
- **Children who face discrimination that prevents them from accessing services and opportunities**
- **Children who are most susceptible to the negative effects of emergencies and protracted crises**
- **Children with disabilities or life-threatening health conditions**
- **Children who live without care and protection**

It grieves us that children face these kinds of layered threats and obstacles in all corners of the world. We find vulnerable girls and boys in every setting where we work—from high developing countries like Brazil and South Africa to the most fragile regions of Afghanistan and South Sudan.

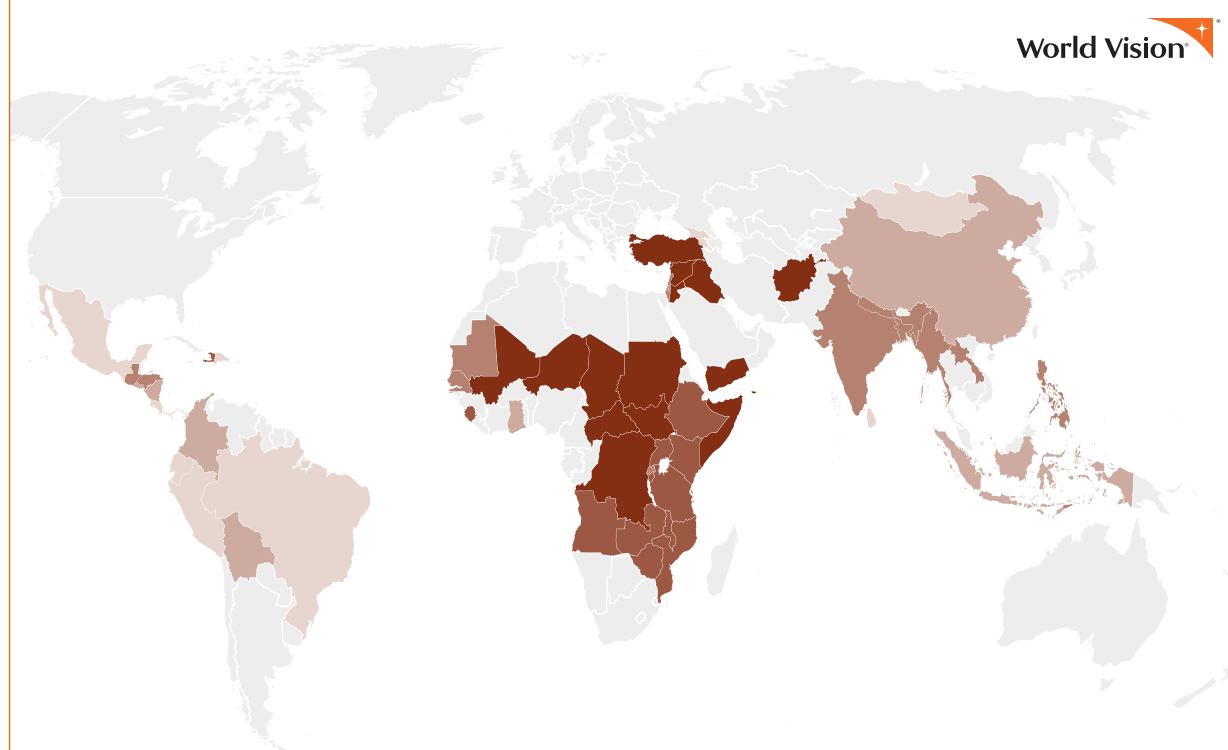
Moving our priority to fragile contexts

Over the past four years, we have increasingly shifted our focus toward [fragile contexts](#)—areas fraught with chronic instability, conflict and violence. Why? These are the most difficult environments for vulnerable girls and boys.

In fragile contexts, political and social stresses put children in harm’s way, exposed to the worst kinds of violence, exploitation, abuse and neglect. These settings provide less protection against factors that accelerate extreme child vulnerability, including gender inequality, social exclusion and climate change. In some places, governments are unable or unwilling to ensure the basic rights and wellbeing of their citizens, or lack the capacity to manage conflict without violence. In extreme cases, the state may be non-existent, or actively involved in perpetrating violence against its people. The Organisation for Economic Co-operation and Development (OECD) has predicted that a staggering 80% of the world’s poorest people will live in fragile contexts by 2030.¹

If we’re committed to reaching the world’s most vulnerable children, we need to be where they are.

We prioritize locations where girls and boys are in harm’s way, exposed to violence, exploitation, abuse and neglect.



- MOST FRAGILE**
 Afghanistan, Central African Republic, Chad, Democratic Republic of Congo, Iraq, Jordan*, Mali, Niger, Somalia, South Sudan, Sudan, Syria*, Turkey*, Yemen**
- VERY LOW DEVELOPING**
 Angola, Burundi, Cambodia, Ethiopia, Haiti, Kenya, Malawi, Mozambique, Sierra Leone, Tanzania, Uganda, Zambia, Zimbabwe
- LOW DEVELOPING**
 Bangladesh, Guatemala, Honduras, India, Jerusalem, West Bank and Gaza, Laos, Lebanon, Mauritania, Myanmar, Nepal, Pacific Timor Leste, Philippines, Rwanda, Senegal
- MEDIUM DEVELOPING**
 Bolivia, China, Colombia, El Salvador, Ghana, Indonesia, Nicaragua, Vanuatu
- HIGH DEVELOPING**
 Armenia, Brazil, Costa Rica, Dominican Republic, Ecuador, Georgia, Mexico, Mongolia, Peru, Sri Lanka

* Syrian response ** Through partners



We work for systemic change, targeting the underlying causes of inequality.

World Vision has compiled and maintains a yearly fragility ranking of the countries where we work.* This helps us to plan our work where the needs are greatest. Even so, these categories are never fixed—situations change rapidly and although we track trends, our data does not predict the future. Instability can be felt across entire countries, reach beyond national borders, or be contained in smaller areas—even neighbourhoods of cities—called “pockets of fragility.”

World Vision has developed and is now piloting a program approach tailored to our work in fragile contexts—one built on the need to be agile in these rapidly-shifting environments. Our approach ensures families have the tools to survive, then addresses the underlying issues that threaten their stability, and ultimately seeks a future where they can thrive. *Learn more about the [Fragile Context Programme Approach here](#).*

Long-lasting change through long-term commitments

Creating a reality where the most vulnerable children can experience full and flourishing lives requires systemic change, with stable and well-functioning institutions that support their wellbeing. This calls for community-led advocacy work holding governments accountable to their commitments, country-level efforts to improve policies, and international initiatives to change the way we approach issues that affect children—like child labour.

This kind of work—and sustainable change—takes time. Consider World Vision’s efforts pushing for [legislation to eliminate child labour](#) from the supply chains of Canadian companies. After ten years spent advocating for the protection of children, important gains were finally made in 2021—and we expect they will contribute to long-lasting change in the lives of vulnerable girls and boys worldwide.

As the gap between rich and poor continues to widen, while emerging issues like the COVID-19 pandemic and climate change reveal deepening inequality, families live increasingly on the edge of survival. We believe it’s not enough to help them merely survive. By investing in long-term stability and growth, we’re working toward a future where their children can flourish and succeed.

* The World Vision Fragility Index ranks national operational contexts according to three main sources: Maplecroft Global Risk Analytics, the Fund for Peace; and the Institute for Economics and Peace. These data sources are some of the best and most up to date but are retrospective and do not indicate a forecast. Note: the index measures average national fragility and does not account for pockets of fragility within otherwise stable countries.

HOW WE WORK

Partnering with people



We believe the root causes of vulnerability should be defined by the people experiencing them.

The underlying causes that push children and families into a vulnerable state are complex, interconnected and not just determined by the geographical context where they live. Hunger experienced by a family, for example, may lead to increased stress and gender-based violence in the home. Discrimination against girls may deprive them of an education, limiting their potential as leaders and providers in their future communities.

Identifying these root issues can be complicated, and absolutely requires that we begin with the people experiencing vulnerability—they are the experts in their own lives, after all. It's only through strong collaboration with communities, families and children themselves that we can hope to see long-term, transformational change.

Our work starts and ends with the people we serve.

- Early in the planning stages of a project, World Vision engages with local leaders and decision-makers. We may conduct gender, human rights and needs assessments, holding community consultations to identify the specific challenges families are facing.
- Once the objectives have been identified and our plans are set, we work alongside communities to carry out the projects. This requires strong connections between governments and community leaders and healthy relationships between families, local organizations and religious groups as we work toward shared goals.
- World Vision staff are in constant communication with community members over the course of a project, but formal sessions also create spaces to debrief, discussing progress, lessons learned and making adjustments to our activities when needed.
- “Community Summits” create opportunities to set plans and evaluate progress collectively, while accountability mechanisms like help desks invite people to speak directly with World Vision staff about concerns or suggestions, ensuring people’s experiences are being heard and their recommendations given careful attention. Our follow-up to community feedback is also tracked.

Working in partnership with community members means everyone involved has a deeper, shared understanding of the root issues we’re working to address. Keeping our eye on those set goals, we can adapt our plans toward them if and when the environment rapidly changes.

To be this agile, our programming approaches must account for risk, integrate work across our [five sectors](#), and remain focused on the long-term goal of building stronger, more resilient communities.

Our Christian faith often gives us credibility in local communities, creating trust and mutual respect within diverse faith groups.



In Uganda, the [Channels of Hope for Child Protection](#) approach brings faith leaders and their spouses together to collaborate on child protection issues. Participants have reported holding joint education sessions, preaching and home visits with leaders from other faith groups to raise community awareness.

“I learned that girls need to be educated,” said one faith leader. “I changed my attitude of saying that ‘girls do all the domestic work according to the culture.’”

The role of faith

With 84% of the global population identifying themselves with a religious group, faith plays a vital role in our world.² Religious values help to guide the thoughts, priorities and actions of families and communities. They influence how people see their ability to change their circumstances, break free of poverty or contribute to social change. In certain cases, they influence acceptance of harmful traditional practices or fuel civil conflict.

Yet despite the importance of faith in people’s lives, humanitarian and development projects often overlook this element, and miss a vital component of transformational change.

Faith-based approaches are central to our work

As a Christian organization, World Vision is uniquely positioned to engage with faith communities. Our Christian identity and focus on community empowerment help to establish trusted relationships with influential local faith-based organizations and faith leaders—who are often trusted more than any other societal or governmental leader.³

Because of their long-term presence in their communities, churches and other faith-based organizations are valuable partners in ensuring that the progress made is sustainable into the future.

These partnerships are especially critical in fragile contexts. Where government institutions are weak and unable to provide basic services, faith communities are often one of the few institutions that remain.

Using evidence and faith-based approaches, World Vision’s Christian identity is an asset, strengthening us as we work toward a world where children can flourish and succeed.

- **Our network of faith-based partnerships is broad and deep**, with over half a million local faith actors—including Muslims, Buddhists, Hindus and Christians of multiple denominations. We work together in diverse social and political contexts, harnessing their power and influence to advance gender equality and combat gender-based violence, including traditional practices such as early and forced marriage.
- **We partner with faith leaders and communities to change harmful social norms**, addressing barriers to children’s rights and wellbeing on issues including gender equality, child protection and health.
- **We support faith-based actors to increase social cohesion** and build peace as they engage their communities on important and sensitive topics.
- **We equip families and faith leaders to value and nurture children holistically**—support for children that is sensitive to their faith has been shown as a vital source of resilience for children who are facing challenges.

Faith is an essential component of World Vision’s holistic approach, enriching and strengthening our partnerships with communities as we work toward change together.

OUR OBJECTIVES

Guided by global priorities



We partner with communities to understand their specific and complex challenges, and the needs identified by the community guide our plans.

The objectives set for each project are guided by partnerships with the community. Not every challenge that's raised will be addressed—our priorities remain on issues causing the most harm for children and families, where we can do the most good for those most in need.

Even so, the circumstances that drive families into poverty and instability are complex, interrelated and interdependent; we believe addressing them requires a holistic understanding of the context, and a holistic approach to the solution. Our work may involve projects that integrate livelihoods, health, education, child protection, and water, sanitation and hygiene services—with a steady focus on gender equality and social inclusion—as we work together to accomplish the community's goals.

These objectives are defined and co-owned by the community, with World Vision providing facilitation and support. They ultimately feed into the [Sustainable Development Goals](#) (SDGs)—targets adopted by the United Nations in 2015 to end poverty, protect the planet and ensure that all people enjoy peace and prosperity by 2030. The SDGs collectively inform our understanding of poverty and guide us in our mission.

Here are the main SDG targets that World Vision Canada's work contributed to in 2021.

SUSTAINABLE DEVELOPMENT GOALS



By 2030, eradicate extreme poverty for all people everywhere, currently measured as people living on less than \$1.25 a day.



By 2030, end hunger and ensure access by all people, in particular the poor and people in vulnerable situations, including infants, to safe, nutritious and sufficient food all year round.



By 2030, end preventable deaths of newborns and children under 5 years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live births and under-5 mortality to at least as low as 25 per 1,000 live births.



By 2030, ensure that all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and effective learning outcomes.



Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation.



By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations.



By 2020, substantially reduce the proportion of youth not in employment, education or training.



Facilitate sustainable and resilient infrastructure development in developing countries through enhanced financial, technological and technical support to African countries, least developed countries, landlocked developing countries and small island developing States.



By 2030, empower and promote the social, economic and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status.



Strengthen resilience and adaptive capacity to climate-related hazards and natural disasters in all countries.



By 2030, provide legal identity for all, including birth registration.



Enhance international support for implementing effective and targeted capacity-building in developing countries to support national plans to implement all the sustainable development goals, including thorough north-south, south-south, and triangular cooperation.

EVALUATING OUR APPROACH

Data-led decision-making



Measuring impact determines our effectiveness—it is the only accurate way to see that a community is better off because of our work.

Data collection and analysis is a fundamental aspect of World Vision's work. We partner with communities to measure the results of our joint efforts—this keeps us accountable to the children and families we serve, as well as the donors who support us.

We begin collecting data in the early stages of project planning and assessment. Over the course of a project, continuous data collection cycles and, where appropriate, evaluations allow us to analyze the changes that communities are experiencing—whether positive or negative. We use those learnings to make short-term changes and improvements, while informing the way future projects are planned.

Increasing our focus on *real* impact

Evaluating our impact is the only accurate way to know that a community is indeed better off, and that we are truly doing more for the girls and boys we serve. However, in the world of international development, words like **impact**, **change** and **progress** are often used interchangeably. That creates confusion for people trying to understand the effect of our work—because when it comes to results measurement, these words carry specific meanings.

Progress reflects the results of our activities—things like: how many women received business training, how many malnourished boys were treated, how many gender-sensitive latrines were installed. We have a high degree of certainty with these results simply by doing quality work with communities as we implement projects.

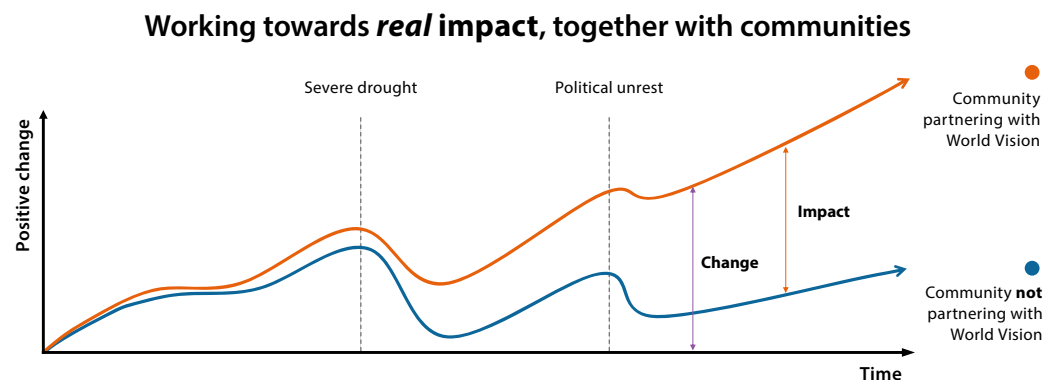
Change is the transformation that results from a project's progress—how many women increased their profits, how many boys recuperated from malnutrition, how many more girls are attending school thanks to gender-sensitive latrines. Culture, environment and behaviour all play roles here, so we have less certainty with the results—and measurable change may take years to see.

Impact is the true measure of transformation. The Organisation for Economic Co-operation and Development (OECD) defines impact as “positive and negative, primary and secondary long-term effects produced by a development intervention, directly or indirectly, intended or unintended.” This means that *real* impact looks beyond the basics of what happened in a given project and seeks to understand what role the project had in creating those particular effects.

World Vision takes this a step further as we design our projects: we don't just strive for positive impact—we focus on **sustainable, long-lasting impact** that can only be achieved by addressing the root causes of poverty and injustice.

It's important to note that at times, circumstances like a country's sudden change in stability may force us to alter course, and helping families simply survive the present must take precedence over longer-term solutions. Even so, with our community-led program approaches and strategies that put families at the centre, we're working toward change that transforms people's lives and sets a new trajectory for the generations that follow.

These are long-term goals; some may only be achieved through the work of multiple projects, and even then, the results may not be seen until after the projects come to an end. This makes impact measurement all the more important, because it tells us whether our work is creating the right kind of change.



The chain reaction we aspire to in every project:



Measuring the value of our impact

We at World Vision see value in every positive change we can make for any child. When it comes to understanding the overall impact we've made, however, understanding the monetary value of a project—including its long-term financial benefits to society—is essential, because that information prepares us to make better decisions. This work includes measuring the effectiveness and efficiency of our programs with questions like: did we address the root causes we intended to? Was the target population actually reached? And how much did it cost to create **progress, change** and **impact** within a given population?

The answers to these questions are important. Understanding the total costs that go into a program—including factors like the time required by community volunteers, for example—allows us to compare the program's cost against its results. This gives us a measure of the program's efficiency, which is useful when deciding whether to use that approach—or a different one—in the future. *Learn more about this kind of work in the [cost-benefit analysis of our ENRICH health program](#).*

World Vision is committed to creating a better future for the world's most vulnerable girls and boys. Understanding the long-term social value of the work we're doing helps us toward that goal, equipping us to maximize our stewardship of donors' money with wise investments so that ultimately, we can do the most good for the children we serve.

Comparing the costs that go into a program against the results the program achieves gives us the project's long-term monetary value for society. That value helps us choose the most efficient—though not necessarily the cheapest—approach for future programs.

2021 PROGRESS + CHANGE

- LIVELIHOODS
- HEALTH
- EDUCATION
- CHILD PROTECTION + PARTICIPATION
- WATER, SANITATION + HYGIENE

OUR SECTOR WORK IN 2021

World Vision is committed to helping the world's most vulnerable children overcome poverty and experience fullness of life. Poverty is complex and multi-layered—and working with communities toward sustainable solutions requires a holistic approach.

World Vision integrates projects across five sectors to address the underlying causes of child vulnerability. These are:

- [Livelihoods](#)
- [Health](#)
- [Education](#)
- [Child Protection and Participation](#)
- [Water, Sanitation and Hygiene](#)

The programs we operate take place in both stable and fragile contexts, using approaches tailored to each environment. Three fundamental priorities—known as “cross-cutting themes”—override our programs in every sector.

1. Through [gender equality and social inclusion \(GESI\)](#), we work toward the balanced distribution of power for *all* genders, with *all* people participating in society. GESI is a multi-faceted process of transformation that places the most vulnerable girls and boys and families at the centre, by:

- Promoting their equal and inclusive access, decision-making, participation and wellbeing.
- Transforming systems, social norms and relationships so they can participate and benefit equally from projects.
- Building their resilience, sense of agency and ability to act—both as individuals and groups.
- Empowering and enhancing the wellbeing of vulnerable girls and boys, their families and communities.

Our GESI approaches work toward **agency, empowerment** and **transformation** so that all people—especially women and girls—can **access** resources, opportunities, services, benefits and infrastructure; **make decisions** free of coercion; **participate** in societal affairs and systems of power that influence their lives; benefit from equal and inclusive **systems** that promote equity and take their needs into account, and live in a world where their holistic **wellbeing** is supported—this includes freedom from gender-based violence and all forms of discrimination.

2. Through [social accountability](#), we equip communities to hold their own governments accountable for the promises they make. Our approach to this work, called Citizen Voice and Action (CVA), starts by educating communities about their basic service rights—for example, how many teachers or nurses the government promises them—and then comparing these standards against current realities.

Armed with the results of their audits, communities are empowered to influence stakeholders and decision-makers toward the improvement of their health, education, water or child protection services, using measurable action plans and ongoing advocacy.

3. Through [peacebuilding](#), we empower girls, boys, young women and young men to be agents of peace, facilitating change and healing among their peers and in their communities. With the tremendous influence they hold, faith leaders are other important partners in this work; we equip them with tools to foster positive change among their communities and followers. Peacebuilding work is particularly vital in fragile contexts—it contributes to good governance, sustainable and equitable economic development, peace and reconciliation, and civic empowerment.

World Vision's sector strategies align to the [Sustainable Development Goals](#) (SDGs) as we work toward a world where girls and boys enjoy good health, are educated for life, experience the love of God and their neighbours, and are cared for, protected and participating. Read through the following sections to learn about the progress and change achieved across these five sectors in fiscal year 2021.

LIVELIHOODS



GLOBAL CHALLENGES

Food security

Our world is in the midst of a global hunger crisis. With conflict, climate change and the enduring economic impacts of COVID-19, families are struggling to access enough safe, nutritious food for basic human health and development.

In 2021, 41 million⁴ people—approximately half of them girls and boys—were at risk of starvation in 43 countries, with 584,000 people enduring famine-like conditions in Ethiopia, Madagascar, South Sudan and Yemen.⁵ This is a crisis that often goes unnoticed, because much of the worsening hunger is concentrated in the world's hardest to reach, most dangerous places where humanitarian access is difficult.

We know from past emergencies, such as the 2011 Somalia famine in which 258,000 people are estimated to have died, that approximately half had already perished by the time a declaration of famine was made,⁶ and that half of all those who died were children younger than five years old.



GLOBAL CHALLENGES

APPROACH + STRATEGY

RESULTS

PROGRAM HIGHLIGHT

STORY



The vulnerability of agriculture to natural hazards and disasters is a major driver of hunger and food insecurity. Between 2008 and 2018, approximately \$108.5 billion US was lost because of declines in crop and livestock production in both least developed and lower- and middle-income countries following disasters.⁷ Over that period, Asia was the hardest hit region, followed by Africa, then Latin America and the Caribbean.

Women continue to be the face of food insecurity, with moderate or severe food insecurity being 10% higher among women than men in 2020, a 4% increase from 2019. With high levels of income inequality and food costs, consuming a healthy diet was out of reach for approximately 3 billion people in 2019, particularly the poor. That number is now expected to have increased—according to FAO's Food Price Index,⁸ global food prices were 31.4% higher in October 2021 compared to October 2020.

Large-scale food and nutrition crises can and should be a thing of the past—to make this a reality, we need strong collective leadership, political will and the right financing, with short-term emergency responses and longer-term commitments that address the underlying issues driving hunger. These efforts must all support human rights, peaceful resolutions to conflict and the transformation of food systems to become inclusive, sustainable and more resilient.

Economic empowerment

The world has seen a decline in global poverty, especially since 1998. However, the rate of that decline has been slowing, driven largely by armed conflicts and climate change.⁹

In June 2021, the World Bank noted that growth in 90% of advanced economies was expected to regain pre-pandemic per capita income levels by 2022—yet only a third of emerging markets and developing economies would make the same recovery.¹⁰ The pandemic's severe outbreaks and increasingly transmissible virus strains is hurting economic growth, especially in low-income countries where vaccine access remains low. In sub-Saharan Africa, per capita income growth is forecast to remain subdued, averaging 0.4% a year in 2021 and 2022, following a 5% decline in 2020. Meanwhile, income inequality continues to increase, worsened by COVID-19.

Financial services are a tool that can help people rise out of poverty, providing access to credit and savings, the ability to invest in education or businesses, and safety nets to weather financial emergencies. However, many living in poverty lack services like bank accounts that can help in these ways. As of 2017,¹¹ 1.7 billion adults were “unbanked” around the world, most of them from developing economies. Women are over-represented, accounting for 56% of all unbanked adults, and 30% are young adults with lower education levels.

Education is an important factor in future economic success, yet there were 267 million young people not involved in employment, education or training even before the pandemic,¹² with young women three times more likely than their male counterparts to be unemployed or out of school. In 2020, UNESCO estimated that 24 million children and youth were at risk of dropping out of school for financial reasons because of the pandemic.¹³



Disaster risk reduction

Between climate change, urbanization and an overall lack of disaster preparedness worldwide, natural hazards like earthquakes and tsunamis are becoming increasingly catastrophic, causing death and economic losses. Children are often disproportionately affected in these events, and the risk of disasters caused by natural hazards is rising.¹⁴

The year 2020 rivalled 2016 as the world's hottest year on record. It was dominated by climate-related disasters that were largely responsible for 389 recorded events, resulting in more than 15,000 deaths and \$171.3 million US in economic losses.¹⁵ In 2020 there were 26% more storms and 23% more floods than previous annual averages. In Africa, floods affected seven million people and droughts were most heavily experienced in the Sahel region, affecting 13.4 million people in Burkina Faso, Mali and Niger.

The practice of "disaster risk reduction" reduces vulnerability to disasters by identifying risks and making community-based and systemic changes that mitigate them. This work is vital to prevent needless deaths and to ensure the development work of organizations like World Vision is sustainable.

The 2030 Agenda for Sustainable Development affirms the need to reduce the risks and effects of disasters. By doing so, there are opportunities to achieve the Sustainable Development Goals (SDGs) through reducing vulnerability among the poor and building resilient infrastructure.¹⁶



APPROACH + STRATEGY

Equip families and individuals with resources and training, focusing on women's economic empowerment

Join forces at the community level to build sustainability and resilience

Strengthen gender-responsive food and market systems to support the most vulnerable

World Vision 



Families become economically self-reliant with the ability to provide for their children—both now and in the future

World Vision's livelihoods work is founded on our deep commitment to the world's most vulnerable girls and boys. Using holistic, evidence-based approaches, we help families in dire need to affirm their dignity and become economically self-reliant, with the means to provide for their own children—both now and in the future.

At the household level, we equip parents to provide for their children, with a specific focus on women's economic empowerment. With training in small business skills, savings through savings groups and adapted practices for livestock and agriculture, families can both increase and diversify their incomes. This strengthens their resilience to disasters so that their lives and livelihoods are less disrupted by future shocks and stresses. During emergencies and hunger crisis situations, providing food assistance to families is a critical, life-saving part of our response. In settings that are politically and environmentally precarious and exposed to disasters and climate risks, we focus where the need is greatest, building resilience and adaptability through temporary provisions of food and cash. This gives families a safety net and helps them manage without slipping further into extreme poverty.

At the community level, we work with local groups and organizations to become more economically productive, with access to markets and financial services like savings, credit and cash where appropriate and needed. We support communities in becoming more resilient to shocks, stewarding their environments in ways that increase agricultural sustainability and reduce the risks of disaster.

At the systemic level, we influence structural changes to promote sustainable employment opportunities, inclusive market systems and positive social and gender norms, creating pathways for women's economic empowerment. In hazard-prone areas, we support the development of early warning systems and action plans for times of crisis, so that authorities are equipped with knowledge, skills and resources for effective disaster management.



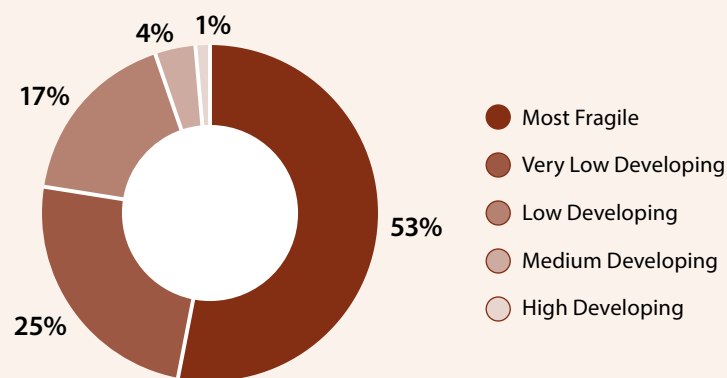
How we've adapted in the face of COVID-19

- Cash and voucher programming have helped to protect people's livelihoods and decrease their reliance on harmful coping mechanisms—especially for women, girls and people with disabilities.
- Savings groups have received support to continue functioning while prioritizing members' health and safety. Now, long-term measures are being instituted to digitize savings group ledgers, enabling mobile money linkages and minimizing handling of cash.

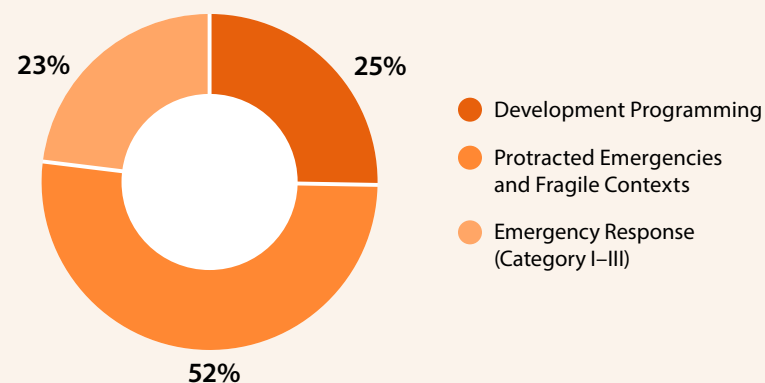
RESULTS

In 2021, \$226 million was invested in 192 projects that focused primarily on livelihoods approaches, reaching 1,212,499 girls, 1,162,914 boys, 966,675 women and 793,249 men. These investments went largely toward projects in **most fragile** countries (53%), followed by **very low developing** countries (25%). The vast majority of our livelihoods portfolio (77%) involves humanitarian relief work in small to large-scale emergencies, protracted emergencies and fragile contexts—this is largely because people in unstable and dire situations have pressing, large-scale food security needs. Our economic empowerment work, most concentrated in long-term development settings, is an important step in breaking cycles of poverty and seeing sustainable economic improvements.

LIVELIHOODS EXPENDITURES BY LEVEL OF FRAGILITY



LIVELIHOODS EXPENDITURES BY PROGRAMMING TYPE



Going forward, we expect our focus on food security to continue as a main driver in the livelihoods sector, led by our partnership with the United Nations [World Food Programme](#). Complementing this work, we anticipate World Vision's agricultural training and distribution of farming and livestock resources will continue to strengthen food systems and increase family food security across our project areas.

PROGRESS

Here are some key results from our 2021 progress in the livelihoods sector.

Food security

- 87,019 metric tons of food and \$67 million in cash-based programming was provided in partnership with the World Food Programme, reaching 3,320,279 people with support for their immediate survival needs.
- 82,404 people were trained in agriculture and livestock techniques including food production, livestock handling, climate-smart techniques and post-harvest storage methods.
- 114,086 people received support with agricultural resources, including seeds and the provision of 2,119 large and small livestock.
- 106 farm demonstration schools and sites were established for farmers to learn new techniques.
- 9,533 people applied the [farmer managed natural regeneration](#) (FMNR) approach to restore and improve pasture, forest and agricultural land.
- 1,755 producer groups were in operation, with members working together to create or sell products.

Economic empowerment

- 48,424 people, including 24,801 women, were active members in 2,951 savings groups, providing them with opportunities to learn financial skills, save money collectively and gain access to small loans.
- 8,468 people, including 3,769 women, were trained in business and entrepreneurial skills, including financial literacy and income-generating activities outside of livestock-rearing and agriculture.

Disaster risk reduction

- 15,175 community members, including 1,629 children, received training in disaster risk reduction.
- 600 communities updated their disaster preparedness plans to provide guidance during emergency situations.
- 514,705 trees were planted by volunteers and community organizations through reforestation efforts that prevent erosion and make environments more resilient to weather events.

LIFE ESSENTIALS PROVIDED, 2018–2021	FY18	FY19	FY20	FY21
Metric tons of food distributed	136,527	124,744	108,723	87,019*
Yards of fabric shipped to support income-generating work in trades like sewing	490,961	352,980	76,782	16,299

* Metric tons of food distributed in FY21 decreased as we simultaneously increased our cash programming.

CHANGE

Efforts put in by families and communities over the past several years have contributed to measurable positive change. Here are some livelihoods examples we gathered in 2021.

In Buwatun, Mali from 2013 to 2021, households having enough food for their families throughout the year increased from 16.9% to 66.2% and households with access to credit increased from 24.2% to 89.6%.

In Chingeltei, Mongolia from 2013 to 2021, households with enough food year-round for their family needs increased from 52.6% to 74.4%, while parents and caregivers using effective disaster risk reduction strategies increased from 72.8% to 94.4%.

In Elegeyo Marakawit county, Kenya, farmers with knowledge about the benefits of biofortified crops increased from 40% to 84% between 2017 and 2021.

In Seno, Mali, households managing to meet their basic needs—including food, health and education—increased from 44% in 2013 to 67% in 2021.

In Khan Uul, Mongolia, the percentage of parents and caregivers who had been affected by disaster but were able to maintain their standard of living increased from 46% in 2013 to 55% in 2021.

In the Thakurgaon district of Bangladesh, 26.1% of women reported they have a say in household spending in 2021, up from only 8.4% in 2016.

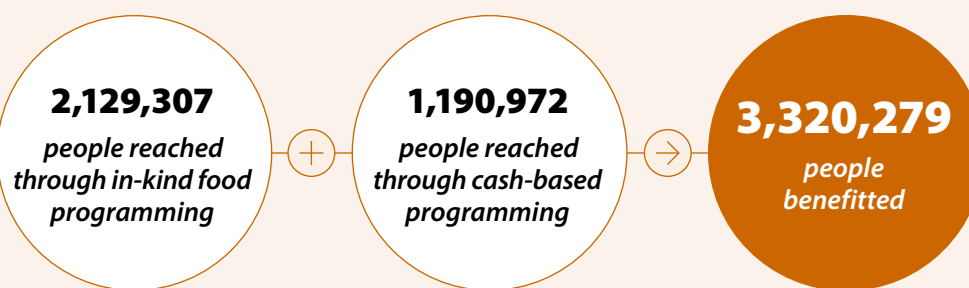
PROGRAM HIGHLIGHT: PARTNERING WITH THE WORLD FOOD PROGRAMME

One of World Vision's most vital partners is the United Nations World Food Programme (WFP)—the leading humanitarian organization fighting hunger worldwide. The global World Vision Partnership is WFP's largest non-governmental partner and has been for 16 years, delivering food assistance to people most in need. In cooperation with WFP, we provide food assistance, particularly in fragile contexts, and work with communities to improve nutrition and build resilience.

In fiscal year 2021, we provided \$140 million in food and cash-based programming. In partnership with WFP*:

- We delivered 87,019 metric tons of food to 2,129,307 people.
- We distributed \$67 million through cash-based programming, reaching another 1,190,972 people.

In 2022, we anticipate providing \$135 million in food and cash-based programming to meet the basic needs of vulnerable families.



While WFP conducts their work using several different food assistance approaches, World Vision partners with them through **five main programming types**. On the pages that follow, learn more about these approaches and the number of people World Vision reached through them in 2021.

* Because we work with WFP through our World Vision Partnership, the values presented are proportionate to World Vision Canada's contribution.

PROGRAMMING TYPES

1 General food distribution

General food distribution has been the historic cornerstone of WFP's approach and remains a fundamental aspect, particularly in fragile contexts or humanitarian crises.

In-kind food assistance helps families to continue eating in the wake of disasters, displacement, during lean seasons or when food supplies are cut off. The foods we distribute are chosen for their ability to prevent malnutrition and provide energy. Distributions may happen across geographical areas or be given to specific groups that are particularly vulnerable.

This approach phases out when communities can meet their needs in other ways.

People reached by World Vision	444,259 girls	409,343 boys	323,488 women	263,281 men
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2 Cash and voucher-based programming

Cash and voucher-based programming is an effective way to improve food security and nutrition in settings where the local market and financial sector is functioning.

Cash transfers—provided in forms ranging from physical bank notes to mobile money or vouchers—[empower people to prioritize their needs and make purchases accordingly in their own local markets](#). This upholds their dignity and respects the fact that not all families have the same food needs.

Findings show that when vulnerable households are empowered to choose, they make decisions that improve their food security and wellbeing—as seen in Lebanon, where 91% of families receiving multipurpose cash in 2018 prioritized food, followed by rent and medical fees.

Because they permit people to purchase their needs locally, cash transfers help to maintain existing supply chains and strengthen local markets. Between 2009 and 2019, WFP cash transfers injected approximately \$6.8 billion US into national economies.

People reached by World Vision	318,716 girls	316,566 boys	294,070 women	261,620 men
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3 Food or cash for assets

The food or cash for assets approach considers the fact that the world's most vulnerable, food-insecure people often live in fragile contexts prone to disaster, where resources are scarce, and infrastructure or environments may be compromised.

People are provided with cash or food-based transfers that help them to cover their immediate food needs while they work on projects that develop or restore their local assets—this might include constructing roads, rehabilitating land or participating in skills training to manage and maintain the assets.

The goal is improving communities' long-term food security and resilience through healthier environments and increased agricultural productivity.

People reached by World Vision	43,223 girls	42,011 boys	38,601 women	34,568 men
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4 Targeted vulnerable group feeding

Through targeted vulnerable group feeding programs, we go beyond the undernutrition addressed through other interventions and focus on all forms of malnutrition.

This approach integrates projects that treat and prevent direct causes of malnutrition—inadequate and insufficient diets—with projects that address root issues—like knowledge gaps in feeding practices or unsafe drinking water.

Targeted feeding programs focus on the most vulnerable people, particularly young girls and boys, pregnant women, breastfeeding mothers and those living with HIV.

People reached by World Vision	112,276 girls	100,050 boys	85,046 women	18,656 men
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5 Integrated school feeding

Integrated school feeding programs form an important safety net for girls and boys, improving their access to education, health and nutrition.

The barriers to a complete education are many—but a daily meal at school combats malnutrition while supporting students’ development and cognitive abilities, allowing them to focus on learning. Feeding programs also lessen the burden of vulnerable families.

When out of school, girls become more susceptible to early and forced marriage, early pregnancy and gender-based violence, but the assurance of a meal during the school day provides an incentive for families to keep their children, especially their girls, attending—studies have shown that feeding programs can increase enrolment by an average of 9%.

Improvements in children’s education provide significant advantages for society. Homegrown feeding programs support local economies, with food purchased directly from local farmers and traders. More broadly, WFP cites that every \$1 US invested in school feeding yields up to \$9 in economic return, because of the health, education and productivity benefits.

People reached by World Vision

98,269
girls

109,115
boys

3,733
women

3,388
men



FOOD THAT FUELS THE FUTURE

Sara has lived as a refugee for as long as she can remember. “Home” is a camp in the Kurdistan region of Iraq. She was carried here as a baby, as her family fled their war-torn region of Syria. Eight birthdays have come and gone for Sara in this refugee camp.

Her mother yearns for more for her four children than this crowded, makeshift community. “I want them to live in a nice place,” she says. “Wherever they go will be better for them.” But for that, the family must wait.

Her whole life, Sara’s family has been waiting. Waiting for the conflict in Syria to end. Waiting for peace and prosperity. Waiting for medical care for her sister, who struggles to walk without pain.

But there are some things Sara hasn’t had to wait for—including nutritious food. She and her family benefit from a food assistance project thanks to donors in Canada, World Vision and the World Food Programme.

The program helps parents purchase necessities for their children—like sustaining ingredients for meals that bring the family together. This food is helping Sara and others in the camp to grow and develop in healthy ways. Well-nourished children are better able to focus on their lessons, more likely to succeed in school. This lays a strong foundation for future opportunities. Because there will be life after this refugee camp.

Today, Sara attends Grade 4 at a local primary school and her favorite subject is Kurdish. She yearns to become a teacher. She believes that education is important for all children, so she’s happy that her two brothers will be joining her at school within the year.

Even in a place where so much has been lost, there is reason to hope. Whether Sara’s family returns to Syria, remains in Iraq or emigrates elsewhere, she and her peers stand to form the next generation of leaders, creators and problem-solvers.

With sustaining food, World Vision is helping keep children on track for the futures they were born to live.



Because of World Vision’s partnership with the World Food Programme, Sara and her family have support to purchase necessities like food.

HEALTH



GLOBAL CHALLENGES

In the last 30 years, the number of child and maternal deaths worldwide has gone down—yet even with this progress, 5.2 million girls and boys died before their fifth birthday in 2019.¹⁷ Every year, one million newborns die the same day that they're born, while 2.6 million don't live beyond their first month of life.¹⁸

Nutrition: Foundational for children's development

Poor nutrition is a frequent culprit in this crisis, hurting women and children at every stage of their development. Malnutrition contributes to an estimated 45% of child deaths worldwide¹⁹—in 2019, that was 2.3 million girls and boys under age five. For children who survive, the long-term effects are significant: by age three, 80% of a child's brain is formed—during this critical period, good health, nutrition and nurturing care are all foundational for children's development, future learning and abilities to achieve their potential.



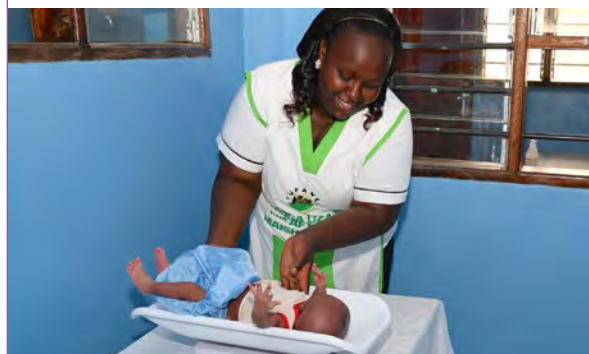
GLOBAL CHALLENGES

APPROACH + STRATEGY

RESULTS

PROGRAM HIGHLIGHT

STORY



So it's sobering that an estimated 149 million young children in lower- and middle-income countries are still chronically malnourished—known as “stunted”—a condition that restricts both physical growth and brain development, especially in the first 1,000 days of life. A staggering 45 million young children also suffer from wasting malnutrition²⁰ with low weight for their height; this failure to gain weight often results from insufficient quantity and quality of food or infections that cause weight loss, and those with the most severe cases of wasting are nine times more likely to die.²¹ With the combined economic and health system impacts of COVID-19, an additional 6.7 million children are now estimated to suffer from wasting malnutrition, with South Asia and sub-Saharan Africa bearing the bulk of the burden.²²

Stunting and wasting are not the only threats to girls and boys' good nutrition. Even before the pandemic, two out of five children suffered from anemia in lower- and middle-income countries,²³ making them vulnerable to infections and inhibiting their ability to learn. Iron deficiency anemia affects almost a third of girls and women of reproductive age,²⁴ a condition that saps the energy they need to live full and productive lives and hinders their capacity for learning. A recent review of data collected by the World Health Organization (WHO) from 29 countries across five regions suggests that during pregnancy, severe anemia doubles the risk of women dying during and after childbirth.²⁵

Disproportionate health challenges for women and adolescent girls

Every day, more than 800 women die from severe bleeding, infections and high blood pressure related to pregnancy and childbirth, with higher risks of complications among adolescent mothers than other women. A startling 94% of preventable maternal deaths happen in developing countries (sub-Saharan Africa and South Asia accounted for approximately 86% of global maternity deaths in 2017),²⁶ where more than 200 million women and girls of reproductive age would like to delay or prevent pregnancy, but can't access contraception because of limited availability or social and cultural barriers.²⁷ This unmet need is expected to rise in light of pandemic-related lockdowns that led to increases in early and forced marriage, while 44% of lower- and middle-income countries surveyed reported pandemic-related disruptions to family planning and contraception services in 2021.²⁸

It's important to note that mental health challenges currently contribute to 14% of the global burden of disease worldwide—and 81% of this burden is hitting families in low- and middle-income countries²⁹ where access to mental health and psychosocial support services are limited or non-existent. COVID-19 has led to an alarming rise in anxiety and major depression worldwide—53 million and 76 million additional cases respectively—with twice as many women and girls affected than their male counterparts.³⁰

Health and nutrition in fragile contexts

In fragile contexts and countries experiencing conflict, the health and nutrition situation exacerbated by the pandemic is worse. These settings account for:

- More than 70% of cases of epidemic-prone diseases, such as cholera, measles and meningitis;
- 60% of preventable maternal deaths;
- 53% of deaths in children under five; and
- 45% of infant deaths.

By 2030, 80% of the world's extreme poor will live in fragile contexts, and the majority will be children.³¹ Women, children and youth are uniquely and disproportionately affected by conflict and fragility, whether by gender-based violence, lack of adequate nutrition, broken state-societal relations or insurmountable barriers to basic quality health services.³²

In addition to the urgent action needed to save lives and address immediate nutritional, physical and mental health needs—now more than ever, the world's health systems must be strengthened to reach communities in ways that are effective and durable, while addressing the factors that drive fragility itself.³³





APPROACH + STRATEGY

- Engage families with essential knowledge and skills
- Empower communities to take ownership of their collective health and address existing gender barriers
- Partner with health systems to strengthen and support
- Influence governments for policies that protect the most vulnerable, particularly women and girls

World Vision 



Children, adolescent girls and women of reproductive age live full and healthy lives

World Vision's health and nutrition work is particularly focused on young children, infants, and women and girls of reproductive age. We build on scientific, evidence-based program approaches,³⁴ leveraging our strong community presence to foster positive changes in health, nutrition and hygiene behaviour; our responsiveness to save lives during humanitarian emergencies and in fragile contexts; and our strategic partnerships to reach more children.

Within communities, we:

- Equip health workers and volunteers to 1) reach families in their homes with health and nutrition education, and 2) teach caregivers the skills to rehabilitate their children from malnutrition while supporting their long-term health.
- Work with schools and youth groups to ensure adolescents—especially girls—are learning about nutrition and health, including their own sexual and reproductive health and rights, so they can make informed choices for the future.
- Promote women and adolescent girls' active involvement in community matters that affect their health and wellbeing.
- Empower communities to improve the availability, quality and accountability of their health care services through strong relationships between community groups, health workers and facilities, and constructive advocacy to (and alongside) service providers.

Within health systems, we:

- Collaborate with district, provincial and regional health management teams, running joint campaigns and outreaches, supporting the health workforce with training and building administrative capacities in planning, budgeting and management of health data systems.
- Equip and refurbish health facilities—especially in fragile contexts—so they can provide effective health and nutrition care.
- Lead and participate in strategic alliances with our peers in the humanitarian and development sectors, advancing health and nutrition movements³⁵ that influence national policies and accountability.



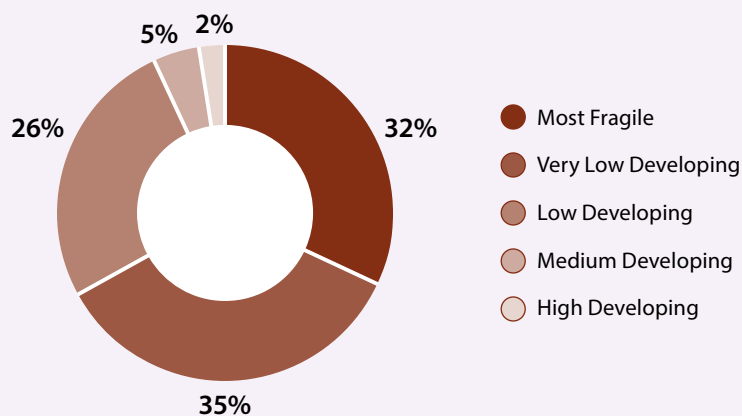
How we've adapted in the face of COVID-19

- Mobile devices and technology have allowed health providers to access COVID-19 information and technical resources.
- Health workers have received training and protective equipment, and community education campaigns have dispelled myths and misinformation about COVID-19 while promoting prevention and response methods.
- To lay the groundwork for COVID-19 vaccine readiness in rural communities, World Vision contributed to behavioural science research, identifying key factors for vaccine acceptance.³⁶ These findings will help formulate messages to encourage vaccine uptake when they become more available in the countries where we work.

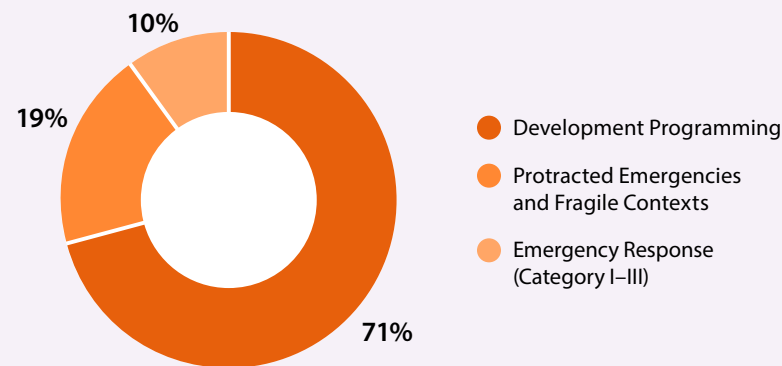
RESULTS

In 2021, \$74 million was invested in 122 projects that focused primarily on health approaches, reaching 3,172,291 girls, 3,047,477 boys, 2,357,639 women and 2,239,974 men. Of these investments, 67% went toward work in the **most fragile** and **very low developing** countries, with an emphasis on development programs (71%).

HEALTH EXPENDITURES BY LEVEL OF FRAGILITY



HEALTH EXPENDITURES BY PROGRAMMING TYPE



In the health sector, World Vision places particular emphasis on nutrition interventions in our work with children and families across countries in all levels of fragility. In 2021, we continued to lead the coalition of Canadian development partners on the [Gender Transformative Nutrition Framework](#)—a new evidence-informed, holistic approach to understanding the relationship between gender and nutrition—so that we can address the rising nutritional challenges that disproportionately affect women and girls and are being compounded by the COVID-19 pandemic.

We also applied our expertise as [thought leaders in the global community](#) of health and nutrition practice, where we are well-positioned to rally with faith-based actors to overcome misinformation and harmful attitudes that create barriers for children, adolescents and women to access life-saving health services—such as immunizations.

PROGRESS

Here are some key results from our 2021 progress in the health sector.

Nutrition

- 442,894 people, including 220,326 women and 94,267 men, participated in trainings, counseling or activities teaching healthy nutrition and feeding practices.
- 8,836 malnourished children, including 4,485 girls and 4,351 boys, recovered their health because of nutrition treatment.
- 24,761 girls and 24,293 boys under five received micronutrient supplementation such as vitamin A, zinc and micronutrient powders.
- 1,890,000 ready-to-use therapeutic food packets were distributed to 12,600 malnourished children, providing a full course of nutrition treatment.

Reproductive, maternal, newborn, child and adolescent health

- 21,520 community health workers and volunteers were trained in topics equipping them to provide good care for children and families.
- 257,196 patient consultations were provided by health professionals and 82,000 patient consultations were provided by community health workers, through projects supported by World Vision.
- 1,137 government health staff received training in topics relevant to their roles and responsibilities.
- 3,997 clean birthing kits were distributed to help with safe and healthy deliveries.
- 22,618 people, including 6,201 girls, 6,673 boys, 7,572 women and 2,176 men benefitted from psychosocial support activities appropriate for their age and gender.

Infectious and communicable diseases

- 25,349 children received age-appropriate immunizations to protect them against childhood illness.
- 4,940,488 people learned how to protect themselves against COVID-19 through awareness sessions.
- 3,568 government health workers and 1,289 community health workers received training on the prevention of COVID-19.
- 3,862,807 children received deworming treatment to support their health and development.
- 2,425,415 protective medical items were provided for health professionals and families, including medical masks, gloves, surgical gowns and eye protection.

LIFE ESSENTIALS PROVIDED, 2018–2021

	FY18	FY19	FY20	FY21
Number of ready-to-use therapeutic food (RUTF) packets shipped	1,890,000	4,590,000	2,025,000	1,890,000
Number of tablets of deworming medicine shipped	10,068,000	27,556,000	26,899,000	10,560,000
Number of birthing kits shipped	0	12,755	5,981	3,997

CHANGE

Efforts put in by families and communities over the past several years have contributed to measurable positive change. Here are some health examples we gathered in 2021.

In Buwatun, Mali between 2013 and 2021, the prevalence of diarrhea in children under five decreased from 31.5% to 5.4%.

In Seno, Mali, infants aged 6-23 months receiving the appropriate number of daily meals improved from 45% in 2020 to 79% in 2021.

In the Amhara region of Ethiopia between 2016 and 2021, women holding leadership positions on health committees increased from 15% to 56%, while healthcare providers with knowledge of at least two key standards of gender-responsive and adolescent-friendly service provision increased from 55% to 82%.

For more changes that we measured in 2021, see our [ENRICH cost-benefit analysis](#) and program highlight on [Community-based Management of Acute Malnutrition](#).



PROGRAM HIGHLIGHT I: ENRICH PROGRAM COST-BENEFIT ANALYSIS

About ENRICH

The *Enhancing Nutrition Services to Improve Maternal and Child Health in Africa and Asia* (ENRICH) program worked to improve the health and nutrition status of mothers, newborns and children in select regions of Bangladesh, Kenya, Myanmar and Tanzania.*

Running from 2016 to 2021, the program was funded by Global Affairs Canada with a total of \$52 million and implemented in partnership with Nutrition International, Harvest Plus, the Canadian Society for International Health and the University of Toronto.

The goal for ENRICH was **reducing maternal and child mortality** by addressing critical health issues for mothers, newborns and young children.



Cost-benefit analysis approach

In line with [our strategic approach](#), World Vision is beginning to systematically review and analyze our program data. This will provide a better understanding of our portfolio performance, and the insights will help to:

1. Improve data-led decision making and program designs
2. Demonstrate change and impact to our supporters

With ENRICH closing in 2021, a cost-benefit analysis (CBA) was conducted by [Limestone Analytics](#) to learn more about the program's benefits for the women and children, communities and wider societies it reached.

The analysis revealed that the ENRICH program was “very cost-effective” at improving health outcomes, under defensible and conservative assumptions using the World Health Organization's (WHO) definition for cost-effectiveness.³⁷

The CBA examined ENRICH interventions within the following three categories, which worked together to achieve the goal of reducing child and maternal mortality.

- Capacity building
- Promotion of high impact, low-cost nutritional practices
- Provision of micronutrients supplements

Lesson Learned

While the program used some interventions outside these categories, such as the promotion of biofortified crops and sexual and reproductive health and rights (SRHR) training, it was difficult to accurately measure their impact and they were excluded from the estimation of benefits.

For future program designs, the indicators we track should be compatible with the CBA methodology to ensure their contributions are captured.

* ENRICH was also implemented in Pakistan until 2018, when World Vision was one of 18 international NGOs ordered to leave the country. Because the Pakistan project did not continue through 2021, its results are not included in this cost-benefit analysis.

Using modeling to measure impact

ENRICH was designed with matching control areas to allow for a complete [impact evaluation](#) at the end of the program, but the pandemic prevented us from collecting data in those areas. In situations like this, data modeling provides an alternative for estimating a program's impact.

Instead of using one single model, it was decided that a range of assumptions would provide a more comprehensive analysis. Five models were selected, each relying on different assumptions to model the accrual of benefits and their impact.* On top of that, a best-practice sensitivity analysis of the main model provided more confidence in the final results.

These models are not perfect, but they attempt to bridge a gap, helping us to see how the same investment into different interventions—or group of interventions—can accomplish varied results in different fields. By using them in our analysis, they help to uncover the **efficiency and effectiveness** of our programs.

These are the main costs and benefits, including their impact channels, that were included in the analysis.

COSTS AND BENEFITS INCLUDED IN ANALYSIS

COSTS

C1 – Program implementation

C2 – Operations and maintenance

C3 – Opportunity cost of volunteers' time

BENEFITS

B1 – Neonatal mortality prevented

- Increased births attended by a skilled provider
- Increased Early Initiation of Breastfeeding
- Increased birth at health facilities

B2 – Under five mortality prevented

- Increased WASH practices
- Increased Exclusive Breastfeeding

B3 – Maternal mortality prevented

- Increased births attended by a skilled provider
- Increased Iron Folic Acid Consumption (during pregnancy)

B4 – Child morbidity prevented

- Increased WASH practices
- Increased consumption of micronutrient powders

B5 – Maternal morbidity prevented

- Increased Iron Folic Acid Consumption (during pregnancy)

* Models include combinations between baseline and evaluation data with similar projects' impact found in published literature, assumptions related to how benefits of multiple interventions positively or negatively interfere with each other, and the use of modeled control areas through available secondary data.

Disability-adjusted life year

A cost-benefit analysis relies on the ability to value both costs and benefits through monetary means. In this field, very complex and continued thought is put into creating modeling mechanisms that can better analyze and compare data. Through this work, economists try to assign value to both tangible and intangible results. For example, *how much benefit would one more year of schooling bring for a girl? Or, how much would it benefit her to never be malnourished, or anemic?*

Following WHO guidelines, the health benefits in this CBA were described in terms of their “overall burden of disease,” meaning the analysis did not only account for the mortality the program tried to prevent, but also for morbidity.* The [overall burden of disease](#) is assessed using a metric called [disability-adjusted life year](#) (DALY), a time-based measure that combines reduction in life expectancy and diminished quality of life. To improve the clarity of what this abstract metric means, the results of the ENRICH analysis are presented not only in terms of DALYs prevented, but also showing specific burdens that were prevented through the program’s impact.



Findings**

The analysis found that **for every Canadian dollar invested by stakeholders through ENRICH, five dollars were generated back to society in health benefits from 2016 until the end of 2021.** And because the program’s interventions focus on long-term, sustainable change, the benefits should continue far beyond 2021, with strengthened health systems and families equipped with new knowledge and habits.

- 1,024 deaths, 5,334 cases of stunting, 13,685 cases of child anemia and 18,755 cases of maternal anemia were prevented between 2016 and the end of 2021.
- Using moderate assumptions about the program’s sustainability, we expect ENRICH’s efforts to prevent another 3,192 deaths over the next 15 years.

Why does “stunting” matter?

Stunting results from poor nutrition and other factors during pregnancy and a child’s early years.

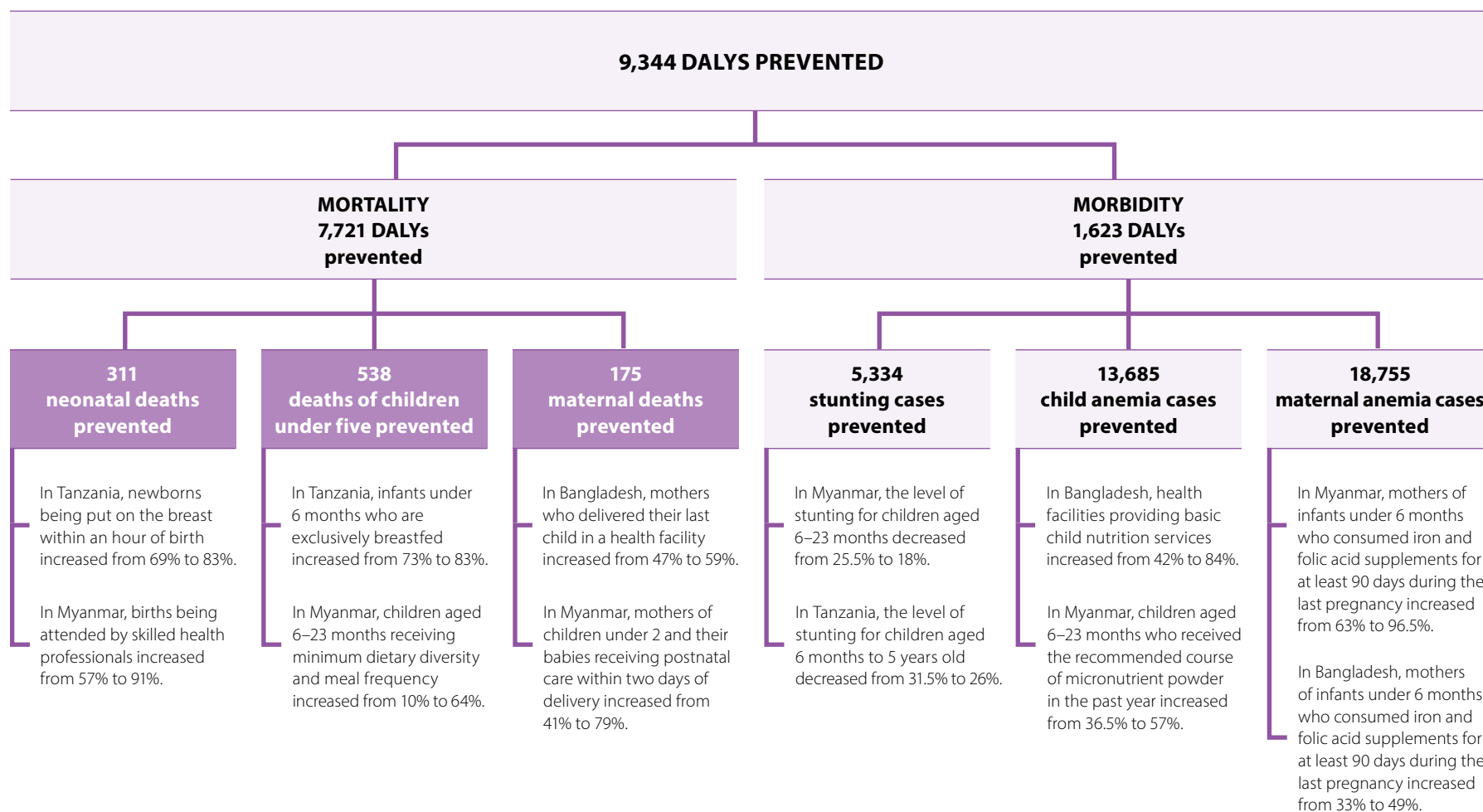
Stunted children are often a few inches shorter. Many experience cognitive damage and weakened immune systems, leaving them susceptible to diseases.

The effects of stunting are usually permanent.

* While mortality refers to death, morbidity is the condition of having a disease or illness.

** Results for Myanmar, Bangladesh and Tanzania are presented together using the Ex-Post Moderate Model (Model#4). Results from Kenya are presented using the Ex-Ante Conservative Model (Model#1) because delays due to COVID-19 prevented the analysis from being finalized before the conclusion of this report.

The following chart shows how positive changes in maternal and child health across all four countries contributed to decreased deaths and health conditions, including stunting and anemia, and an ultimate prevention of 9,344 DALYs.



PROGRAM HIGHLIGHT II: COMMUNITY-BASED MANAGEMENT OF ACUTE MALNUTRITION

In our work to address malnutrition worldwide, one of the approaches that World Vision uses is the [Community Management of Acute Malnutrition](#) (CMAM) model, which focuses on strengthening communities to identify and treat their malnourished children.

In fiscal year 2021, in collaboration with the World Vision Partnership, thanks to support from Canadians and donors around the world, we provided lifesaving treatment for girls and boys suffering from acute malnutrition, known as wasting, in both fragile and stable contexts.

- In collaboration with national ministries of health, World Vision treated 111,408 children under five for wasting malnutrition—including 37,757 for severe wasting and 73,651 for moderate wasting—using the CMAM model in 14 countries.*
- In addition, 42,523 pregnant and breastfeeding women in five countries received support through targeted supplementary feeding programs.**

Since 2010, more than 2.17 million women and children under five have been treated through World Vision's CMAM programs. **Between 2010 and 2021, 90% of the 552,123 severely wasted children we treated made a full recovery.**

As the table below shows, our CMAM performance outcomes have consistently exceeded global [Sphere standards](#), the minimum standards set out to ensure quality and accountability in humanitarian programming.

CMAM OUTCOMES OVER PAST FIVE YEARS

INDICATORS	FY17	FY18	FY19	FY20	FY21	SPHERE STANDARDS
# of children with severe wasting malnutrition treated	43,899	28,213	42,976	47,146	37,757	NA
Cure rate	85.8%	86.4%	89.9%	89.2%	92.6%	>75%
Death rate	0.9%	0.4%	0.7%	2.4%	0.7%	<10%
Default rate; non-recovered**	13.3%	13.2%	9.4%	8.5%	6.7%	<15%; NA

* In total, World Vision supported CMAM programming in 21 countries in 2021. However, the numbers reported here correspond only to the 14 countries that used the CMAM database.

** Non-recovered primarily due to underlying medical issues.

A FULL RECOVERY FOR CYNTHIA

Cynthia, 7, lives with her parents and four little brothers in Binza, eastern DRC. For several years the region has experienced conflict, war and kidnappings. Then the Ebola epidemic arrived, joined by the COVID-19 pandemic. [Now, shrinking farmland and climate change have put families into a large-scale food crisis.](#)

Farming is the only source of income for Cynthia's parents. Against these odds, keeping their children well-fed became an impossible task, and Cynthia became seriously malnourished.

When the [Childhood Rescue](#) project began in Binza, Cynthia was one of 2,000 children diagnosed with malnutrition. Because her condition was very serious, health workers moved Cynthia to a nutrition centre for intensive care where she was treated using the CMAM approach. After two weeks of therapeutic milk and treatment, she was transferred back to an outpatient unit, where she received therapeutic food to take home.

Cynthia's recovery did not take a straight line from there.

Suspicious of the therapeutic food she'd received, relatives persuaded Cynthia's father to abandon the nutrition therapy and take her to a local herbalist instead. Cynthia's nurse and a World Vision nutritionist coordinated quickly, meeting with the family to talk through their questions and explain how their daughter's life could be saved. In the end, they decided to resume Cynthia's treatment.

Two months later, to everyone's relief, Cynthia was completely cured.

Today, Cynthia's parents are members of a farmers' association, which provides agricultural training and seeds to help families through the food crisis and keep children like Cynthia healthy.

"My child was sick, and World Vision saved her," says Cynthia's mom. "God bless this organization because, without them, Cynthia would have died."



Fully recovered from acute malnutrition, Cynthia leans in for a photo during a visit from a World Vision worker.

EDUCATION



GLOBAL CHALLENGES

Significant global investments to improve access to education for the world's girls and boys have largely succeeded, with both the Millennium Development Goals (MDGs) and Sustainable Development Goals (SDGs) focusing on issues of access, quality and gender equity. The number of out-of-school girls—which is historically larger—has been moving toward parity with boys, while the gender gap among primary-age children has decreased.

Despite these encouraging trends, access to quality learning remains a challenge for the world's most vulnerable children, especially those living in conflict-affected and fragile contexts. In 2019, 127 million primary and secondary school-age children and youth—nearly half of the world's out-of-school population—were living in crisis-affected countries,³⁸ yet education received just 2.6% of total humanitarian funding, far below the target of 4% set by the United Nations in 2012.³⁹

With the COVID-19 pandemic heightening existing barriers to education, UNESCO now estimates that an additional 11 million primary and secondary school-age children and youth may not return to school. Even so, gaps in education spending are widespread, and the pandemic continues to place downward pressure on funding for development assistance around the world, including for education.





Effects of COVID-19 on girls' education

School shutdowns related to COVID-19 have been especially challenging for girls. Without the protective environment of school, they've become more exposed to gender-based violence, forced marriage and early pregnancy. The situation is particularly acute in sub-Saharan Africa, where [World Vision estimates](#) that over one million girls are in danger of never returning to school. The loss of education will have far-reaching effects—not just on girls, but on their children and entire communities. If young mothers in these countries aren't supported to continue their education, the region could see its economy suffer a loss of \$10 billion US in GDP above and beyond the immediate effects of COVID-19.⁴⁰

Beyond basic access to quality education, effective learning remains a challenge. Even before the pandemic, six out of ten children and adolescents worldwide—an estimated 617 million young people—were not achieving minimum skill levels in reading and math. Despite years of growing school enrolment rates in sub-Saharan Africa, more than 70 million girls—or 90%—were not on track to meet minimum literacy standards by the time they were of age to complete primary education.⁴¹

Disruptions to early childhood education and mental health concerns

Early access to literacy and numeracy programs ensures young people are equipped for successful lives. Ideally, this work begins with access to quality early childhood care and education (ECCE), but we know that in 2020, 155 million preschool-age children were affected by school closures.⁴² The economic return on investment in ECCE programs is equal to roughly ten times their cost through projects focused on children's early foundational learning and brain development.⁴³

Another concerning effect of COVID-19 is the worsened mental health of children and youth—a result of school shutdowns, lack of access to alternative learning options and in many cases, real loss and grief. Worldwide, more than 1.6 billion children have suffered some degree of lost education. The disruption to routines, learning, social interaction and recreation has left young people anxious, angry and worried about their futures.⁴⁴ Girls and boys report increased mental health problems—with girls reporting them more—and LGBTQI+ learners cite some of the highest levels of isolation and anxiety.⁴⁵

Access to and completion of quality education is key for children's future stability and success, and with so much at stake for a generation of learners, the protective aspects provided through safe school environments, positive peer relationships and caring adults is critical to restore.





APPROACH + STRATEGY

- *Work with children and their families from birth to stimulate brain development and early learning*
- *Support children to achieve foundational literacy and numeracy skills*
- *Equip adolescents and youth with skills to earn a living*
- *Influence governments to provide improved, gender-transformative and inclusive education services*
- *Partner with communities to address social, cultural and gender-related access barriers to learning*

World Vision 



Girls and boys have the knowledge and skills to lead fulfilling, productive lives

Educating girls and boys for life is the heart of World Vision’s approach to education. We invest in and provide access to quality education for millions of girls and boys—including the most vulnerable, hardest to reach and those with disabilities—in safe and nurturing learning environments.

- We provide **early childhood education** from infancy, working with parents and caregivers to stimulate children’s early brain development and establish the foundations for learning.
- Our **pre-school** programming focuses on pre-literacy, pre-numeracy and early social skills, preparing children for formal schooling.
- In the **early primary grades**, we prioritize girls’ and boys’ reading comprehension skills.
- With **adolescents and youth**, we cultivate abilities in entrepreneurship, employability and life skills that empower them in their future life planning and decisions.

While we’re focused on ensuring girls and boys are enrolled and staying in school, we use approaches that reach both in-school and out-of-school children with quality learning opportunities. Meanwhile, our gender-responsive community interventions address girls’ right to access education and reduce barriers such as early marriage and pregnancy, household poverty, gender-based violence and harmful traditional practices and beliefs.

Using research and impact evidence from our education projects, we advocate to national governments and policy makers for improved, gender-responsive and inclusive education services for girls and boys. Where formal education systems have been weakened or eroded by crisis, World Vision supports national ministries of education, strengthens the systems to respond to the needs of vulnerable children, adolescents and youth, and encourages resilience by preparing communities for future shocks to their education services.



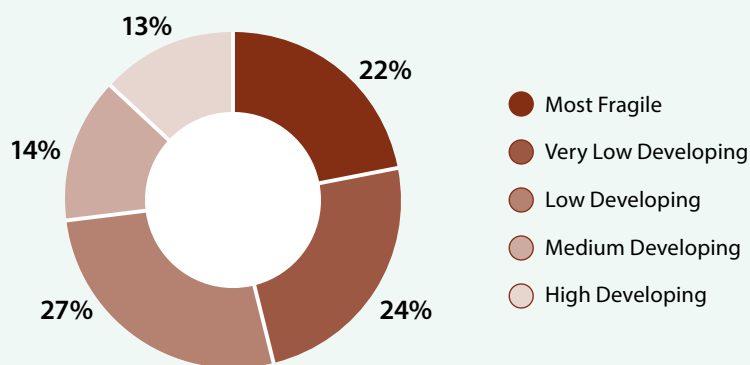
How we’ve adapted in the face of COVID-19

- The pandemic has significantly impacted the way World Vision conducts education programming—in both long-term development settings and during emergency responses – from methods of student instruction and teacher training to in-school safety protocols.
- Innovative no-tech, low-tech and hi-tech approaches including at-home learning, remote radio instruction and online instruction (where possible) have reached thousands of out-of-school girls, boys and youth with continuous learning, and supported their return to formal education when schools reopened.

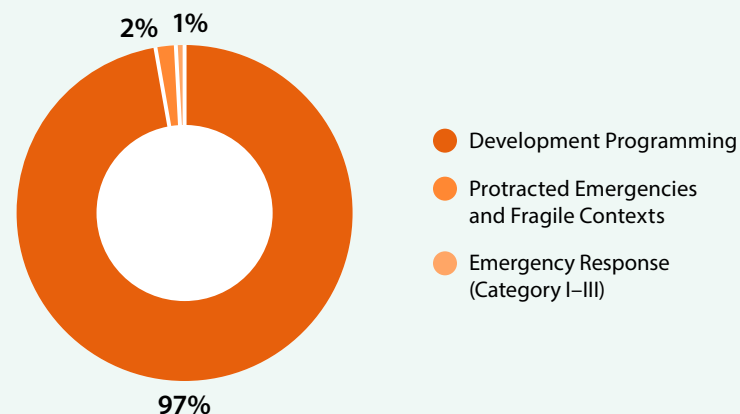
RESULTS

In 2021, \$42 million was invested in 111 projects that focused primarily on education approaches, reaching 618,956 girls, 597,582 boys, 97,582 women and 95,204 men. Nearly all of this investment (97%) went toward development programming. While this work is valuable, we are committed to finding sources of revenue that will ensure vulnerable children have access to education in less stable settings as well—particularly in protracted emergencies and fragile contexts. Even so, our breakdown of investment across countries in all levels of fragility shows that education spending happens broadly across all regions, with investments per region ranging from 13% to 27% of the portfolio.

EDUCATION EXPENDITURES BY LEVEL OF FRAGILITY



EDUCATION EXPENDITURES BY PROGRAMMING TYPE



Our education work in 2021 brought improvements in quality standards of instruction and learning, seen in [Unlock Literacy](#) classroom curriculum and community reading clubs, early childhood education and development programs and centres, teacher training, context appropriate reading and learning materials, and the adaptation of school infrastructure to be gender sensitive and inclusive of students with disabilities.

We continue to work with girls and boys throughout their education life cycle—from infancy and early childhood to formal pre-primary, primary and secondary schooling and youth job skills training—as we equip young people to acquire literacy skills and live productive and fulfilling lives.

PROGRESS

Here are some key results from our 2021 progress in the education sector.

Early childhood development

- 11,570 young girls and 11,328 young boys attended early childhood development centres.
- 489 centres were established or improved, meeting established quality standards for young children's education, and 226 early childhood development teachers received training to better support their students' learning.
- 1,193 parents and caregivers received training to support their children's early development, reading and numeracy skills through play-based learning approaches.

Primary and secondary education

- 55,561 girls and 54,727 boys attended in-school or after-school literacy activities.
- 698 Unlock Literacy reading clubs achieved established quality standards, creating fun and educational settings to enhance children's literacy, while 9,103 caregivers received training to support their children's early reading skills using the Unlock Literacy home learning approach.
- 15,129 community members were reached through awareness sessions and information on the importance of children's education, especially the right of equitable access to learning for girls.
- 9 schools offered adapted infrastructure for students with physical disabilities.
- 912 members from school management committees and parent teacher associations, including 462 women and 454 men, received training that equipped them to be effective in their roles.
- 3,347 teachers received training in topics such as literacy, early childhood development and child-centered approaches.
- 163,651 books were shipped, supporting children's literacy development.
- 483,821 girls and 464,773 boys received school supplies and resources for their education including books, backpacks, uniforms and bicycles.

Technical and vocational education

- 20,967 youth—10,539 female and 10,428 male—completed life skills training through World Vision programs.
- 2,103 female youth and 1,682 male youth completed values-based entrepreneurship and job skills training through the [Youth Ready](#) curriculum.

LEARNING ESSENTIALS PROVIDED, 2018–2021	FY18	FY19	FY20	FY21
Number of books shipped	15,330	2,157	399,333	163,651
Number of school supplies shipped	0	268,953	156,631	174,569

CHANGE

Efforts put in by schools, families and communities over the past several years have contributed to measurable positive change. Here are some education examples we gathered in 2021.

In Chingeltei, Mongolia, children who can read with comprehension increased from 74.1% in 2013 to 83.5% in 2021.

In Toroly, Mali, the primary school completion rate increased from 20.3% to 60% between 2014 and 2020.

In Eravur Pattu, Sri Lanka, children who can read with comprehension increased from 18% in 2014 to 65% in 2021.



PROGRAM HIGHLIGHT: VISION FOR VULNERABLE YOUTH INITIATIVE

The *Vision for Vulnerable Youth Initiative* is a program focused on increasing the social agency and economic development of teens and young adults in Central and South America. World Vision works with young people aged 14–29 who are both in and out of school using the Youth Ready curriculum—a holistic, multi-sectoral course that brings social, emotional and values-based learning together with life skills and literacy training.

Through the Youth Ready training, participants develop social, emotional, cognitive and communication skills that help with the development of their livelihoods. The ultimate outcome is empowered youth who are equipped to be engaged, productive citizens.

Running from 2019–2023, the *Vision for Vulnerable Youth Initiative* is underway in seven countries: El Salvador, Guatemala, Honduras, Peru, Colombia, Bolivia and Ecuador.



Project participants in Ecuador received food kits to help their families through the pandemic.

Progress in 2021

Because of the [COVID-19 pandemic](#), we've made changes in the way we [teach the Youth Ready curriculum](#). In 2021, we conducted training using both traditional face-to-face methods as well as a hybrid approach—combining face-to-face and virtual teaching using tools like Google Classroom, Google Meet and WhatsApp.

Participants worked through immense challenges in 2021—not just related to the pandemic, but also because of [hurricanes](#) and political or economic instability in some regions. Even so, ambitious, motivated youth can do great things. We've seen this as they develop life plans and engage in community projects, going far beyond themselves to understand and meet the needs in their neighbourhoods.

In fiscal year 2021:

- 3,827 participants were involved in the program, including 2,401 adolescent girls and young women.
- 1,619 youth (1,042 female) gave back to their neighbourhoods by participating in 90 community projects, which benefitted 22,040 people in total.
- 994 youth (720 female) participated in vocational and technical courses.
- 138 Youth Ready facilitators (92 female) received training.
- 55 partnerships were signed with governments, businesses and foundations, providing youth with opportunities for training, business support and higher education.

Participants who join Youth Ready move through the curriculum in two phases. During the second phase, they choose one of three “pathways” to focus their training—entrepreneurship, education or employment. All three pathways experienced roadblocks this year, requiring extra work and problem solving by the youth, staff and partners.

- The 324 participants in the **employment** pathway experienced the most challenges, as the pandemic and hurricanes that hit Central America brought severe repercussions to the labour market.
- For the 1,130 youth in the **education** pathway, pandemic-related school closures and limited higher education options created difficulties. (Even so, education remains as the program’s most chosen pathway, as young people see the benefits of studying for their long-term success.)
- Participants in **entrepreneurship** experienced the fewest obstacles, with the 534 participants finding that a successful small business can quickly improve their lives, particularly when formal job opportunities are scarce.

Of the phase 2 participants, 62% have managed to secure an opportunity in their chosen pathway, and our project staff continue supporting the others to find solutions that suit their goals.

Focus on gender

In 2021, **63% of the Youth Ready participants were female**, including 2,401 adolescent girls and young women. This strong female involvement is the result of a concerted effort by Youth Ready staff encouraging and empowering young women to join, while also ensuring men are part of the conversation.

- **In Honduras**, an agreement between World Vision and a government program for women called Ciudad Mujer allowed 85 young women to join Youth Ready and register in a technical beauty course, providing vocational training in nail art and hairdressing. Because of their involvement in Ciudad Mujer they also received access to ongoing health services including cervical screenings, dental treatment and counselling.
- **In Colombia**, 48% of the project participants engaged in gender awareness activities and “gender-sensitive opportunities” during guidance counselling and vocational training. More young men joined the program this year, enriching the discussions between both women and men as they expanded their understanding of gender roles.

A gender equality and social inclusion (GESI) review of the Youth Ready curriculum and its online components is planned, as we continue to improve the program’s implementation.

Young women in Honduras received technical training in nail art and hair dressing thanks to a partnership between World Vision and Ciudad Mujer, a government program.





ANTHONY'S BRACELET BUSINESS FORMS A LINK TO HIS FUTURE

The pandemic hit Anthony, 19, and his family particularly hard. Things were tough before the pandemic—their neighbourhood in La Libertad, Peru has a complete lack of potable water, for example—but when COVID-19 arrived, Anthony's father lost his job. Anthony gave up his dream of attending university and started scrambling for temporary work alongside his parents, just to cover their basic needs.

When Anthony learned about World Vision's *Vision for Vulnerable Youth Initiative* on social media, he joined immediately, and quickly learned two things: "I realized that many young people like me wanted to do great things, but the pandemic and the lack of money made it complicated," he says. Perhaps more importantly, Anthony came to believe that there were bigger dreams for him than temporary work.

"That's how the idea was born of having a business in something I like," he says.

With training and seed capital from World Vision, Anthony gained confidence to launch a bracelet-making business and began selling the jewelry online so his market could extend beyond his neighbourhood.

"With the seed money, I was able to buy materials to make more elaborate products that I worked on with my mom," he explains.

The profits, some of which have come from large group orders, help to cover home expenses for Anthony's family, and because he has a savings fund, the dream of university is back on the table—he plans to study Communication Sciences.

"I am very grateful to the project," says Anthony, "for all the help it has given my family."



Anthony's parents are supportive of his new business. His mom has joined the venture and helps him create the bracelets.

CHILD PROTECTION + PARTICIPATION



GLOBAL CHALLENGES

Every year, more than 1.7 billion girls and boys around the world experience emotional, physical and sexual violence.⁴⁶ This happens in spaces where young people are meant to feel safe—in their homes, communities, schools and workplaces, among others. The factors that allow for this violence and even create it are many, and unsurprising: poverty, harmful cultural norms, conflict and displacement, gender inequality and weak or non-existent safety nets.⁴⁷

Girls experience particular violations to their rights, including barriers to education, sexual and gender-based violence, and early or forced marriage. In times of humanitarian crisis, an increase in violence against girls makes them yet more vulnerable to unintended pregnancy, forced marriage and female genital mutilation (FGM).⁴⁸ The World Health Organization cites that in some countries, more than a third of girls report their first sexual encounter was coerced, and that girls who become pregnant before age 18 are more likely to experience violence within a marriage or partnership.⁴⁹



Increased risks due to COVID-19

The COVID-19 pandemic has increased child protection risks and rights violations worldwide—the number of unaccompanied and separated children has increased since 2020 and with economic instability and poverty rising, child labour, household tension and domestic violence have all gone up. Caregivers have reported children to be more distressed and children themselves report feeling less happy and less safe during the pandemic.⁵⁰



A 2021 study from [World Vision in partnership with War Child](#) looked at the impact of COVID-19 on children living in conflict-affected countries. It found that the number of refugee children expressing a need for mental health support has more than tripled, with 57% of children living in fragile and conflict-affected countries expressing a need for mental health and psychosocial support because of the pandemic and resulting lockdowns.⁵¹

When schools closed to curb the spread of COVID-19, children and youth lost spaces that provided them with learning, participation, social interaction and stability. In areas of conflict, this put young people at higher risk of being recruited into armed groups and forces. Girls have suffered disproportionately, with increases in FGM and early and forced marriage being reported.⁵²

Many governments have launched measures to ease the pandemic's immediate impacts on families and children, with the most critical ones focused on social protection systems. Even so, two out of three children worldwide have no access to any form of child or family benefit, and coverage is lowest where child poverty is highest.⁵³

Violence against children has lifelong impacts on their mental, physical and emotional health—and on their orientation toward relationships and family. Unaddressed, it contributes to cycles of harm for generations and places a real financial burden on societies, estimated at up to \$7 trillion US every year. Without the care and protection of boys and girls, communities cannot flourish. Coordinated, global action is needed to achieve a world free of violence against children.⁵⁴



APPROACH + STRATEGY

- *Strengthen the ability of all responsible parties to fulfill their child protection duties*
- *Build ties between communities and their formal child protection systems*
- *Address underlying causes of violence against children, especially those rooted in gender inequality*
- *Empower children and youth to be active agents of change*

World Vision 



Girls and boys are protected from abuse, neglect, exploitation and all forms of violence

World Vision is responding to the child protection challenges imposed by conflict and poverty—and further aggravated by COVID-19 and climate change—using a systems approach that addresses root causes of violence against girls and boys. Through this approach we empower key actors to work together to create a protective environment that cares for and supports all children, especially the most vulnerable.

1. We empower girls and boys with life skills, resilience, psychosocial wellbeing and support so they can become influential protection actors in their environment.
2. We work with children, parents, faith leaders and communities to transform harmful gender norms, attitudes and discriminatory behaviours into positive ones.
3. We strengthen the people, structures, services and supports around girls and boys in order to prevent violence in all its forms, protect them from violence in all its forms and respond to incidents of violence in all its forms.
4. We advocate at all levels to improve child protection laws and ensure accountability by duty bearers when those laws are broken.
5. We work across all sectors of development to ensure that we are addressing other root causes of vulnerability.



How we've adapted in the face of COVID-19

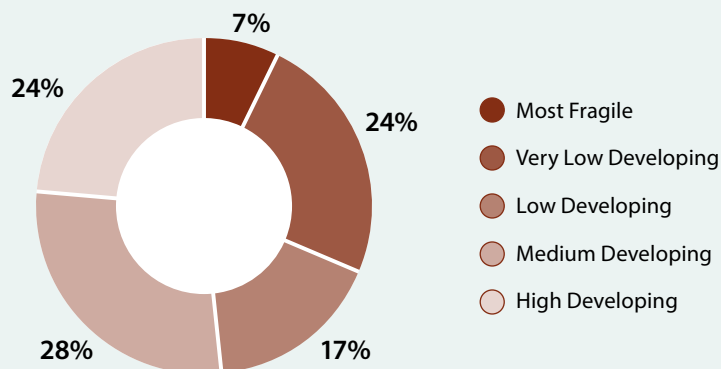
- Phones and online platforms have allowed us to provide case management and psychosocial services to the most vulnerable children—especially those subjected to sexual and gender-based violence—when face-to-face meetings are impossible.
- We've worked to strengthen social protection programs like cash-for-work, subsidies and universal health care to ensure that all vulnerable populations are protected from COVID-19 repercussions.
- We've prioritized locally based child protection services through partnerships with youth and women-led organizations, faith leaders and community leaders, increasing communities' abilities to safeguard their own children—especially as COVID-19 has limited access to certain rural populations.

RESULTS

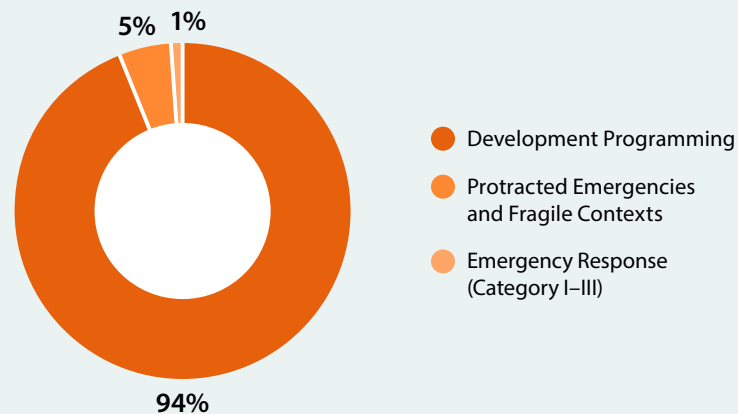
In 2021, \$35 million was invested in 253 projects that focused primarily on child protection and participation approaches, reaching 417,281 girls, 412,391 boys, 470,633 women and 466,378 men. Financial analysis shows that the vast majority (97%) of this investment went toward development programs. This is slightly misleading on a surface level, because World Vision’s humanitarian relief work incorporates child protection as a central priority, woven throughout our programming in fragile contexts and emergency settings. However, the categorization of projects does not always reflect that focus.

A breakdown of investment across countries in all levels of fragility shows child protection and participation as a backbone of World Vision’s work, particularly in **high** and **medium developing** regions (52% combined). This reflects the fact that beyond urgent survival situations, children need support from society to uphold their security and inclusion in all kinds of environments.

CHILD PROTECTION AND PARTICIPATION EXPENDITURES BY LEVEL OF FRAGILITY



CHILD PROTECTION AND PARTICIPATION EXPENDITURES BY PROGRAMMING TYPE



Strong collaboration across all levels of society is essential for children’s protection and participation. Our work in 2021 saw strong partnerships with communities seeking to understand and address root causes of vulnerability. Education on crucial child protection issues reached thousands of people including local leaders, faith leaders, caregivers and children themselves.

PROGRESS

Here are some key results from our 2021 progress in the child protection and participation sector.

Child protection

- 1,576 girls and 1,537 boys received birth certificates in the past year because of World Vision's work.
- 1,241 community organizations, faith-based organizations and other partners were actively working for the wellbeing of children, with 5,119 community leaders, faith leaders and local partners trained to understand and address underlying issues that make children vulnerable.
- 9,109 child protection cases received case management services, providing follow-up support on situations concerning gender-based violence, exploitation, neglect or abuse.
- 621,739 people, including 85,183 girls, 86,332 boys, 225,581 women and 224,699 men, participated in trainings on child protection, including gender-based violence, positive parenting, children's rights and early marriage.

Child participation and community empowerment

- 119,421 children and youth participated in activities aimed at ending violence against children.
- 60,978 young people participated in groups and clubs bringing them together with their peers to learn new skills and develop positive values.
- 21,678 people, including 4,886 children and 16,822 adults, were involved or trained in community-level advocacy and social accountability activities aimed at holding their governments responsible for the provision of basic services.
- 520 community groups engaged in Citizen Voice and Action activities, calling on their governments to deliver the basic services that have been promised.
- 2,622 service providers and institutions have improved performance capabilities because of additional equipment, capacity or budget.
- 1,003 community leaders and representatives from partner organizations received training, equipping them to be more effective in their roles.

CHANGE

Efforts put in by families and communities over the past several years have contributed to measurable positive change. Here are some child protection and participation examples we gathered in 2021.

In Toroly, Mali between 2014 and 2021, children under five holding a birth certificate increased from 43% to 94.6%.

In Khan Uul, Mongolia, families listening to their children's opinions and taking action when needed increased from 45.9% in 2013 to 65.7% in 2021.

In Baidoa, Somalia, 90% of the respondents in our final project evaluation agreed that activities and efforts in the community to protect children from harm, exploitation, violence and abuse had increased since the previous year.



PROGRAM HIGHLIGHT: CHILDHOOD RESCUE

By 2030, two thirds of the world's extreme poor will live in fragile contexts, and the majority will be children.⁵⁵ Surrounded by instability and disaster, they are susceptible to violence, poverty, abuse and exploitation. Because of our commitment to the world's most vulnerable, and our goal to see girls and boys flourishing in childhood, World Vision started *Childhood Rescue**—a program that responds to urgent and arising needs with life-saving interventions, crisis recovery programs and help in building a future for vulnerable children.

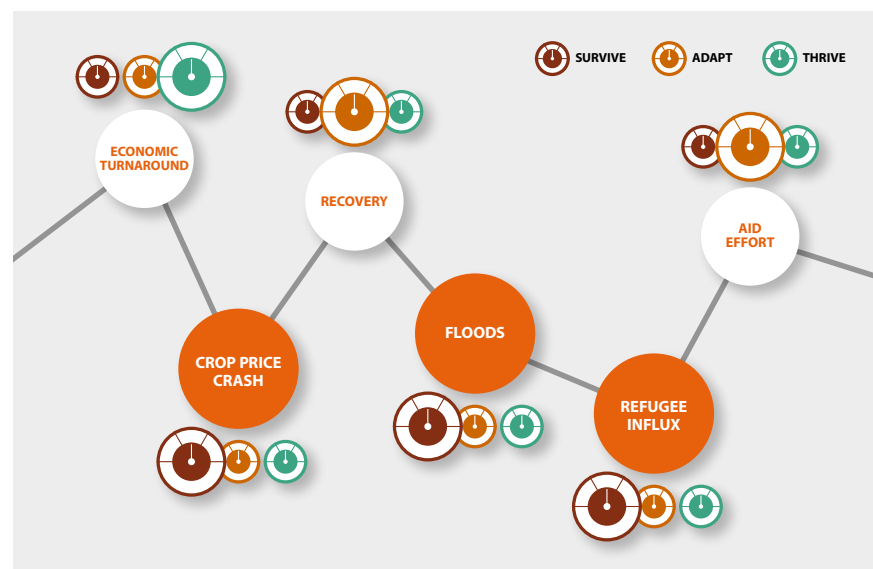
Our offices in Honduras, Afghanistan and the Democratic Republic of Congo (DRC) are currently piloting three-year *Childhood Rescue* projects using [World Vision's Fragile Context Programme Approach \(FCPA\)](#)—which brings diverse actors together, working toward shared goals that improve girls and boys' lives in a way that spans the [humanitarian, development and peacebuilding nexus \(HDPN\)](#). We believe this way of working will unleash the potential for deeper, transformational change to happen, even in the most challenging of contexts.

The approach aims to provide an environment where stakeholders can respond proactively and with flexibility to the shocks and stresses that are likely to occur, reducing their impact and supporting the peace and social cohesion that is necessary for communities to flourish.

Providing a structure for this flexibility, the FCPA uses three modes of working, known as "dials." These are **Survive**, **Adapt** and **Thrive**. The fluidity of these dials accounts for the fact that we aren't just working to address fragility, we're working in the midst of it. We can anticipate and respond to the often-shifting circumstances by changing modes—turning up the "dial" on a given focus—as we act during both crisis and recovery.

The FCPA's **Survive** dial involves quick, effective programming responses to rapidly deteriorating situations, prioritizing the survival of the most affected and most vulnerable girls, boys, families and communities. This work happens in very tenuous circumstances, meeting people's basic survival needs such as food, water and shelter according to humanitarian principles and strong security standards so that we can access the most vulnerable people and keep our staff safe from harm.

* In Canada, supporters can give to *Childhood Rescue* projects through [Raw Hope](#).



The **Adapt** dial focuses on resilience and recovery in the midst of instability, supporting families and communities to rebuild their lives and livelihoods, while strengthening their capacity to face future shocks and stresses.

The **Thrive** dial moves to programming models that build on hope, promote recovery, reduce dependency on assistance and help communities to deal effectively with risk, while also improving government capabilities and the provision of basic services.

Central to all three dials are peacekeeping and conflict mitigation, which happen through programs that strengthen the ties between families, social groups, communities and networks.

Close context monitoring is essential for the Fragile Context Programme Approach to be effective—this happens through a live online tool developed by World Vision to collect, report and analyze changes in the environment, equipping us to make informed project adjustments and decisions.

In fiscal year 2021, we identified and adapted to many operational context changes. Here are three significant examples:

1. HONDURAS was hit by hurricanes Eta and Iota in November 2020.

These catastrophes caused major damage, particularly in the Sula Valley area, resulting in landslides, floods, road closures and crop losses. People lost their homes and were forced to flee. Churches and schools provided temporary shelter, but the large number of displaced people combined with a pervading sense of hopelessness led to increased violence and crime. The impacts of the hurricanes hurt families that had already been struggling through the COVID-19 pandemic—unemployment jumped as factories and other employers were affected by the storms.

We adapted and responded by supporting World Vision Honduras' local [response efforts](#)—in the immediate neighbourhoods covered by the *Childhood Rescue* project and beyond, where needs were greater. Through this humanitarian assistance, 80 families received psychosocial support and 1,798 families received support through distributions of hygiene kits, care kits for children under five, blankets, water filters, wheelchairs and clothing.*



* Results of World Vision Canada's project between October 2020 and March 2021.

2. The situation in AFGHANISTAN became even more complex after the Taliban became the de facto authority in August 2021.

Afghanistan's people are contending with many emergencies simultaneously. Together, these threats have caused a full-blown humanitarian disaster that's both naturally occurring and man-made, brought by decades of conflict, climate change, drought, food insecurity, displacement and COVID-19. Children face starvation, malnutrition, water shortages and disease. They are vulnerable, displaced, and at risk of violence and harm, and the rights of girls and boys as equals is being threatened.

The situation is especially dire for women and girls, with **barriers to accessing healthcare and education** and several policies that curtail women's freedom of movement, expression and association. Many are deprived of the ability to earn an income. In addition, economic crisis has sent prices skyrocketing, while simultaneously diminishing people's purchasing power. With increasing desperation, families are taking on unmanageable debt burdens and relying on dangerous coping measures to survive, such as child labour and child marriage. Afghanistan's children are among the world's poorest and most vulnerable, and they urgently need support now, especially now given the change in leadership and the uncertainties this has brought since August 2021.

For 20 years, World Vision has worked to address massive life-saving humanitarian needs in Afghanistan, striving to protect girls and boys, provide them with an education, promote better health and sanitation and help to build livelihoods.

We adapted and responded to the impacts of August 2021 by temporarily placing our Childhood Rescue project in Herat into hibernation to ensure the immediate safety of our project participants and staff. Even so, World Vision Afghanistan is committed to remaining for the long term, with most of its 380+ staff being locals.

The [humanitarian crisis](#) can only be tackled if there is 1) safe and unhindered humanitarian access; 2) sufficient, flexible, and sustained international funding; and 3) ability for both male and female workers to operate as part of response teams. Females become invisible without women staff who can listen to them, engage with them and support them with appropriate assistance. World Vision has worked in liaison with the wider humanitarian community to press for assurances that women have equal rights to continue to serve as humanitarian staff, work in agency offices, travel to site locations and for women to benefit from our programs. With these assurances given, World Vision Afghanistan's humanitarian responses have restarted in the four provinces of work, including Herat.*

It is crucial that government sanctions or counterterrorism measures comply with international humanitarian law and international human rights law, and do not prevent impartial humanitarian and development activities.

Staff safety and security continues to be one of World Vision's priority concerns. Staff care and peer support processes have been in place for months, informed by context analysis and scenario planning. The commitment and strength of World Vision Afghanistan staff to the most vulnerable children and communities has been nothing short of exemplary.

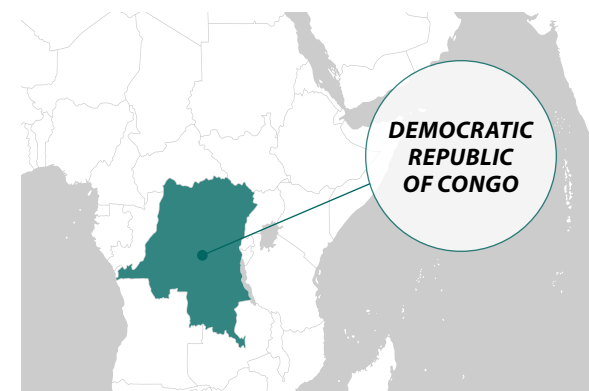


* Since August 2021, World Vision Canada has been unable to fund projects in Afghanistan due to Canadian laws. We continue advocating for a more flexible approach by the Canadian government that would allow humanitarian activities of Canadian NGOs to resume.

3. In DRC, national park boundary changes led to the creation of new armed groups, ethnic conflict and violence.

When the Congolese Institute for the Conservation of Nature (ICCN) redrew the boundaries of Virunga National Park beginning in 2019, people lost access to farmland, crippling their ability to earn a living. The land losses have created frustration and hopelessness, leading to ethnic conflicts and the formation of new local armed groups. In 2021, there were many instances of kidnappings, killings, looting and sexual violence, along with public demonstrations against the ICCN.

We adapted and responded by enforcing strict security monitoring and communication to prioritize the safety of staff and families involved in our projects. Staff movement was restricted and project activities were halted when necessary. Because families' ability to grow food and earn income has suffered, World Vision incorporated livelihoods projects into our ongoing health and water, sanitation and hygiene (WASH) activities, ensuring more holistic support.



2021 Progress

In fiscal year 2021, the *Childhood Rescue* projects in Honduras, Afghanistan and the Democratic Republic of Congo accomplished the following results using the **Fragile Context Programme Approach**.*

We met the immediate needs of the population by:

- Providing 2,473 families with cash distributions to meet their basic needs.
- Supporting country COVID-19 responses with the provision of 12 handwashing stations.

We built stability and capacity to adapt by:

- Building and rehabilitating WASH infrastructure, including four water sources and two latrine blocks.
- Establishing 32 savings groups for youth and adults.

We mitigated risks and drivers of fragility by:

- Working with 90 faith leaders to increase their COVID-19 prevention knowledge and strengthen child protection services.
- Engaging 26 actors from different municipal and community spheres—including representatives of civil society, community-based organizations and local government—to work together for the wellbeing of children.



* Results of World Vision Canada's projects between October 2020 and September 2021.

HELPING DESIGN A PEACEFUL FUTURE



At age 9, violence and trauma have already marked Kevin's life. Through the peace club in his neighbourhood, he's being encouraged to communicate his emotions through art.

Kevin's father was a gang leader in the violent Honduran neighbourhood of Sunseri—an area known for drug trafficking, domestic violence, murder and rape.

Too often, he brought his work “home from the office.”

Laughter, games and cuddles didn't really happen at Kevin's house. High-fives are tricky when dad's hands are clenched into fists. Hugs are impossible when he's winding up for the next blow.

Eventually, Kevin's dad landed in prison—and Kevin's life became difficult in new ways. The chief breadwinner was gone from the home, so his mother emigrated to the United States to try for a better future. Kevin made the courageous decision to stay in his Honduran community, with his grandparents.

At nine, he's now part of a World Vision-supported peace club, established in the neighbourhood through the *Childhood Rescue* project to help keep children safe. Engaged in sports and cultural activities, kids make friends, learn skills and build confidence. Off the streets, occupied and full of purpose, they're less likely to be lured into gangs.

Kevin's home life is now free from violence. But there are complications. With few job options for women in Sunseri, his grandmother sells bullets for a living. It's not her first choice, but she knows the children in her care need food and protection. She works hard to build peace in other ways.

“With my example, I teach the children to never stop fighting,” says Kevin's grandmother. She's not referring to turf battles or gun wars—but to her quest for a future filled with promise. “These children do not know about love,” she says. “I constantly struggle to show them the right path.”

Kevin isn't very talkative, perhaps because of all he's endured. But with his strong creative streak, he has learned to convey memories, emotions and hopes through artwork.

With the love of his grandparents, the influence of the peace club and a paint brush in his hand, Kevin is taking a different path from his father. He's using his hands to help shape the future.

WATER, SANITATION + HYGIENE



GLOBAL CHALLENGES

In the past two decades, substantial progress has been made to provide the world's population with better water, sanitation and hygiene (WASH).⁵⁶ Even so, [Sustainable Development Goal 6](#) set out to provide water and sanitation access for *all* by 2030 and to leave no one behind, yet at least 2 billion people are still drinking water contaminated with feces and living without basic sanitation facilities like toilets and latrines—and 673 million people still resort to defecating in the open.⁵⁷

The implications are significant, with more than 800 girls and boys under age five dying every day from diarrheal diseases caused by unsafe water, sanitation and hygiene.⁵⁸

Even as progress is made, we see deep inequalities related to water and sanitation on regional and national levels. For example, 3% of the global population (207 million people) currently travel more than 30 minutes to collect water—two thirds of them live in sub-Saharan Africa, with the burden falling disproportionately on women. Imbalances within countries are also common: between 2000 and 2017, basic water coverage in rural Haiti increased among the richest but decreased among the poorest, widening the gap between them.⁵⁹



Disparities like these are compounded by growing challenges like climate change, political instability, economic crises, and the yet unknown long-term impacts of COVID-19.⁶⁰

In reporting on the state of water, sanitation and hygiene in school settings across the world, UNICEF revealed that nearly one in three schools lack basic drinking water services, affecting almost 600 million children; over a third of schools lack basic sanitation services, affecting nearly 700 million children; and in the least developed countries, 49% of all schools have no handwashing facilities at all.⁶¹ Poor sanitation plays a particular role for women and girls. According to the World Bank, at least 500 million women and girls are lacking a safe, clean, private facility to manage their menstrual hygiene, and [this affects girls' education](#)—a meta-analysis by the World Bank found that a quarter of adolescent girls in India did not attend school during menstruation because of inadequate toilets.⁶²



Investing in WASH services has broad benefits to society. Sanitation deficits cost the global economy nearly \$223 billion in 2015;⁶³ however, a WHO study calculated a global return of \$5.50 US for every dollar spent in sanitation—seen in lower health costs, more productivity and fewer premature deaths.⁶⁴

Achieving universal access to water, sanitation and hygiene would bring remarkable change, with global reductions in waterborne disease, better nutrition outcomes, hundreds of daily deaths prevented—and the reality of a world that upholds the dignity, safety and future prospects of an entire generation.



APPROACH + STRATEGY

Collaborate with communities, organizations and governments to develop gender-responsive local water and sanitation systems

Teach gender-sensitive hygiene and sanitation practices that prevent the spread of disease

Provide emergency WASH services during humanitarian crises

Ensure schools and health centres are equipped with gender-responsive, accessible WASH facilities

World Vision 



Child and family health is protected through safe water, sanitation and hygiene services

World Vision's WASH programs bring safe drinking water, improved sanitation and hygiene practices to communities around the world. We prioritize making improved water sources and sanitation facilities accessible for the most vulnerable, including people with disabilities and those on the socio-economic margins—often women and girls.

Our water, sanitation and hygiene programs take place in both fragile and stable settings and are focused in four key areas.

In communities, WASH services are developed by residents in collaboration with NGOs, governments, the private sector and donors. The resulting water schemes serve diverse populations—from small collections of households to large communities accessing water taps and kiosks through piped systems. Women are instrumental in choosing the location of the water points and participate in water management committees, often as leaders of the committees themselves.

In schools, World Vision works to provide access to safe water and improved sanitation through upgraded gender-responsive latrines along with hygiene education, including menstrual hygiene management. Facilities are modified where needed so students with physical disabilities can access and use them.

In health facilities, we collaborate with local health authorities to support better access to WASH services, which are essential when providing basic health care to girls and boys.

In emergencies, we provide gender-responsive WASH services among disaster-struck populations and within camps for refugees or internally displaced people.



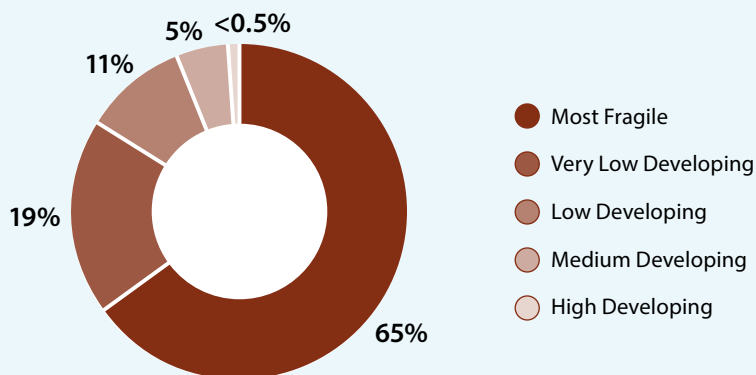
How we've adapted in the face of COVID-19

- The pandemic has intensified the need for water and hygiene in the countries where we work, making WASH programs a core part of our comprehensive multi-sectoral response.
- We have focused on stopping virus transmission through hygiene promotion and increased handwashing services—particularly in schools and health facilities.

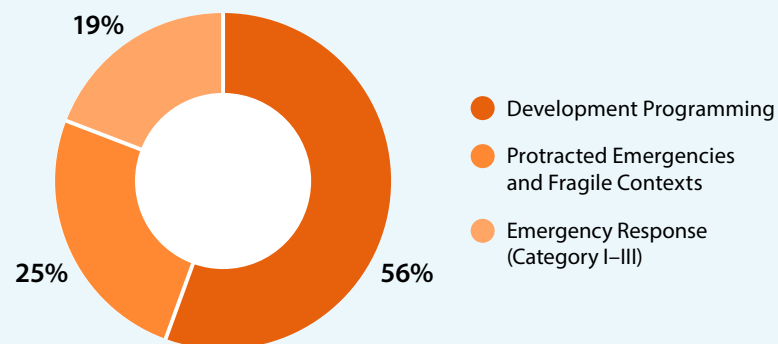
RESULTS

In 2021, \$7 million was invested in 26 projects that focused primarily on WASH approaches, reaching 247,660 girls, 225,631 boys, 444,500 women and 407,187 men. The majority of our investments (65%) were deployed in the **most fragile** countries—no projects with a primary WASH focus were implemented in **high developing** countries. Unique among our sector portfolios, WASH programming in 2021 had a general balance between development programming (56%) and emergency response and protracted emergencies and fragile contexts (44% combined). This reveals the two main avenues of our WASH work: rapid support—especially with training and hygiene resources—to address survival needs in urgent or unstable settings, and the strengthening of infrastructure and systems in more stable contexts.

WASH EXPENDITURES BY LEVEL OF FRAGILITY



WASH EXPENDITURES BY PROGRAMMING TYPE



In the midst of the COVID-19 pandemic, prioritizing WASH efforts around hygiene facilities and handwashing education has been a central focus in 2021. We anticipate this work will continue, along with our ongoing focus on functional and sustainable WASH infrastructure, which is essential for communities to thrive.

PROGRESS

Here are some key results from our 2021 progress in the WASH sector.

General

- 1,263,639 people were trained or involved in community water, sanitation or hygiene initiatives, with 293 WASH committees being established or reactivated and trained.

Water

- 307,394 people gained access to safe drinking water.
- 2,945 water sources were constructed, rehabilitated or improved, providing safe water for children and families to drink.
- 223 community members, including vendors, received training in water, sanitation and hygiene, including the management, construction and maintenance of WASH facilities.

Sanitation

- 3,610 sanitation facilities, including latrines and garbage disposals, were constructed or updated in schools, homes and health centres.
- 467,077 people, including 90,528 girls and 146,111 women, gained access to sanitation facilities at home or school.

Hygiene

- 828,135 people, including 367,969 children and 460,166 adults, had access to handwashing facilities at home or school.
- 99 schools had adequate menstrual hygiene management facilities in place.
- 11,430 reusable menstrual hygiene kits were distributed for adolescent girls and women.
- 253,458 people, including 70,157 girls and 123,650 women, received hygiene products and kits to support their health and wellbeing.

LIFE ESSENTIALS PROVIDED, 2018–2021	FY18	FY19	FY20	FY21
Number of reusable menstrual hygiene kits shipped	100	3,583	4,082	11,430

CHANGE

Efforts put in by families and communities over the past several years have contributed to measurable positive change. Here are some WASH examples we gathered in 2021.

202 communities were certified as “open defecation free” in 2021, meaning they have shifted to using toilets rather than defecating in the open. This plays a major role in preventing waterborne disease.

In Toroly, Mali between 2008 and 2021, household access to improved latrines increased from 8% to 74.6%.

In Buwatun, Mali, households using an improved water source within 30 minutes of their home increased from 7% in 1995 to 47.1% in 2021.

In the Amhara region of Ethiopia between 2016 and 2021, health facilities using environmentally safe waste disposal methods increased from 21.3% to 38.1%—hospitals increased from 50% to 66.7%, while health centres increased from 32.6% to 59.1%. Our [Born on Time](#) program contributed to these changes through renovated latrines, incinerators and other sanitation supports.

PROGRAM HIGHLIGHT: RISE UP DAUGHTERS OF INDIA

For many girls worldwide, access to a toilet can determine whether they continue their education.

In India, 23 million girls drop out every year because their schools don't have toilets where they can manage their periods with protection and dignity.⁶⁵ Girls face a greater risk of harassment, infection and disease without access to safe and private toilets at school. As a result, they can miss up to five days of class each month and are more likely to have poor academic performance.

The *Rise Up Daughters of India* (RUDI) project—currently being implemented in the sponsorship community of [Alwar, India](#)—is working to improve girls' education by ensuring they have access to clean water, handwashing facilities and toilets at school. The project is focused on girls, but boys' lives also improve with better hygiene and sanitation in their schools.

In fiscal year 2021:

- 2,168 girls and 1,935 boys directly benefitted from the project.
- 129 toilets, 12 incinerators and 25 handwashing stations were constructed in 14 schools.
- 2 basketball courts were constructed, providing recreation space for students.
- 403 girls benefitted from hygiene kits and training on personal hygiene.



"We used to go to nearby bushes for urination in the past, with insecure feelings, and were absent during menstruation days. The newly constructed toilet with incinerator, changing room and wash stations will help us to attend school daily and will bring changes in the days to come."

—Pushpa, secondary school student



Tania, a sponsored child, stopped skipping class during her period after a toilet was installed at school. Now with strong attendance, her grades are better than ever.

REMOVING BARRIERS TO GIRLS' EDUCATION WITH TOILETS AND HYGIENE SOLUTIONS

When Tania got her first period, she cried. She didn't know what was happening to her body, and it scared her. Her sister stepped in to help, teaching her to use old cloths and rags during that time of the month. Homemade hygiene solutions are common in India, and Tania's family couldn't afford pads.

Tania—typically an ambitious student—began to skip class for a week every month from that point on, because her school didn't have toilets.

That habit came to an end when World Vision ran a menstrual hygiene training session at her school.

"I learned that using a cloth, like I used to, could be detrimental to my health," she says. "Learning about menstrual hygiene empowered me and made me realize that we can do anything as girls. Nothing can stop us."

Tania joined a World Vision Girl Power Group, and together with 20 girls in her village, began saving money each month to purchase pads for every member. The group has continued on throughout the pandemic, advocating for menstrual hygiene in their community, sharing information with other women and girls in their village, and making sure they all have the supplies they need.

When World Vision constructed a toilet in Tania's school through the Rise Up Daughters of India (RUDI) project, she stopped skipping school and rose to the top of her class. Today, she dreams of becoming a doctor.

"Before World Vision built the toilets, a boy would always come first," she says. "Now, I don't miss a single class. I score above 90% and stand first."

A photograph of two women in traditional attire dancing in front of a green door. The woman on the left is wearing a bright red hijab and a matching long, flowing dress. The woman on the right is wearing a dark blue and black patterned hijab and a blue dress with a peacock feather pattern. They are both barefoot and appear to be in the middle of a dance, with their hands raised and fingers spread. The background is a weathered, light-colored wall with a green door and a window. The text '2021 PROGRAM FEATURES' is overlaid on the image in a large, bold font.

2021 PROGRAM
FEATURES

SPOTLIGHT ON: **ADVOCACY**

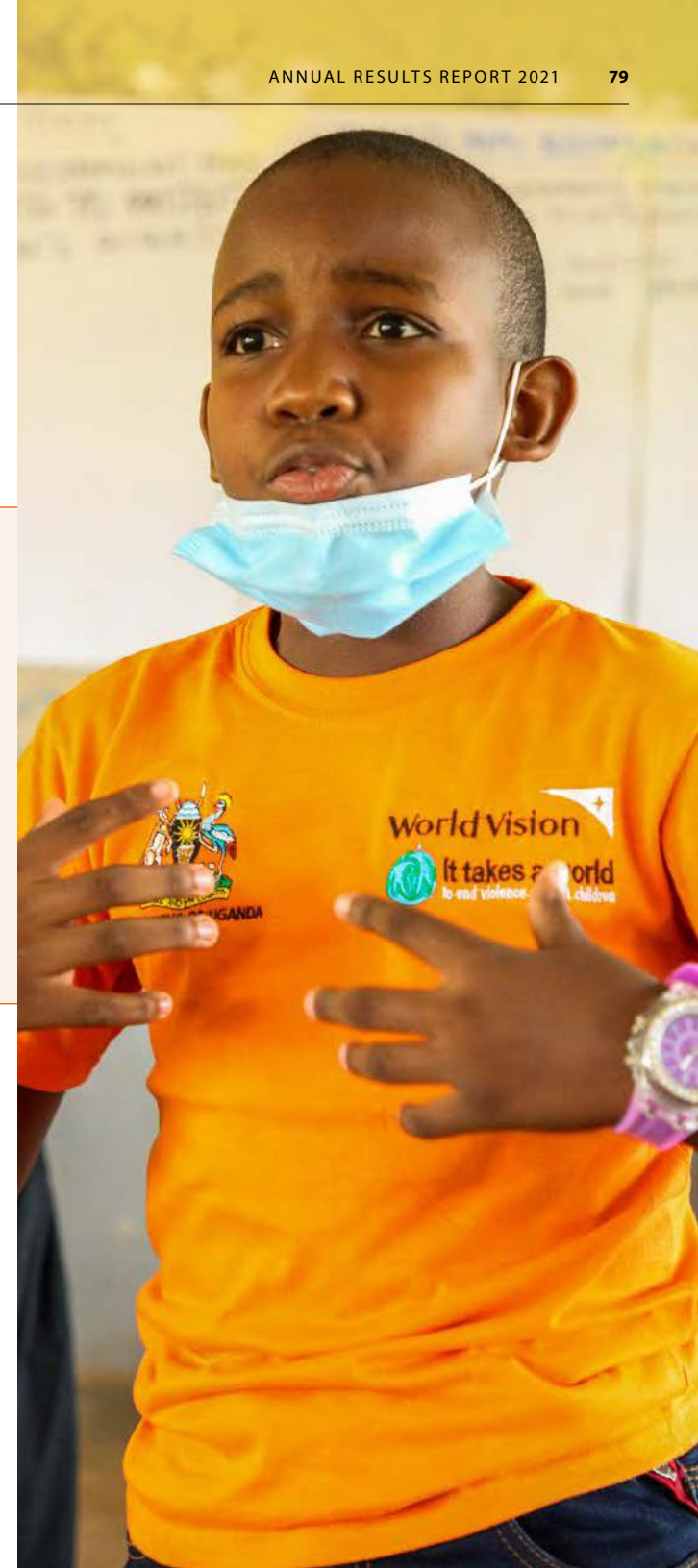
Advocacy stands as one of World Vision's three pillars, alongside our humanitarian relief and long-term development programs. Through our advocacy efforts, we elevate the voices of people who are facing problems, challenging policies, systems, structures, practices and attitudes that make it difficult for vulnerable children and their families to live full and flourishing lives. This kind of work happens at four levels.

- 1. With our partner communities**, World Vision's Citizen Voice and Action (CVA) approach empowers people to engage with their local governments, increasing accountability of politicians, officials and providers who use public resources in service of the community.
- 2. With national governments**, World Vision engages with leaders on laws and policies affecting children's rights and budget allocations for community services.
- 3. With international organizations including the UN**, we create space for community voices to speak up for their needs and we advocate for strong global policies—especially those surrounding humanitarian crises and fragile contexts.
- 4. At home in Canada**, we advocate for government policies that improve the wellbeing of children worldwide and allow for continued humanitarian work.

In this year's report, we're highlighting some key achievements from our advocacy here in Canada, where we're working to influence government policies in ways that 1) directly impact children's lives for the better, and 2) create additional funding pools for the work of World Vision and our peers in the Canadian humanitarian sector.

Advocacy and policy change take time—sometimes years of work. They require us to create clear goals and policy recommendations, work persistently for incremental change, demonstrate our program effectiveness, build relationships including coalition work with other organizations, and develop engagement and advocacy with the Canadian public. Just like our community-based programming around the world, this is long-term work. But when the moment is right, success can be achieved.

The following pages are some high points from World Vision's advocacy work in fiscal year 2021.



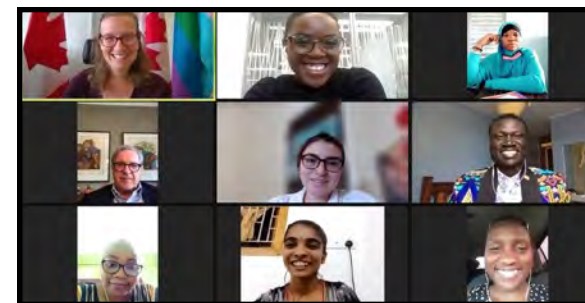
Refugee Education Council

In February 2021, the Refugee Education Council officially launched as part of the Canadian government's *#TogetherforLearning* campaign. It was an idea World Vision had proposed to the government in 2019.

Why did we bring this idea forward? As an organization, World Vision has seen great things happen when children and youth are given platforms to use their voices for change, and we believed we could replicate this approach with government policymaking here in Canada. In particular, we wanted to ensure the government's international development priorities would be informed by the voices of young people—especially those most affected by decisions on global education.

Together with the Canadian International Education Policy Working Group (CIEPWG), we advocated to multiple levels of government to put our proposal together and bring it to life. And when it was approved, World Vision was also asked to formally host the council with a \$100,000 grant from Global Affairs Canada. This funding was earmarked for council operations and helped to cover member honorariums, internet fees, training fees, translation and interpretation costs along with the hiring of a part-time coordinator. The grant was instrumental in removing barriers that may otherwise have prevented refugee and displaced youth from participating.

The council has now become a powerful group, involving 12 refugee and displaced youth living around the world. They worked closely with then International Development Minister Karina Gould, helping to both shape the *#TogetherforLearning* campaign and strengthen the Government of Canada's commitments to addressing the growing global displacement crisis. In their work, they've made presentations to Minister Gould, the World Bank, the Global Partnership for Education, many diplomats, and to Lloyd Axworthy, Chair of the World Refugee Council.



The council was initially convened to operate for a one-year term, but following our proof of concept in 2021, the Government of Canada has voiced intention to renew the Refugee Education Council by March 2022, with World Vision continuing as host.

Our advocacy “breakthrough” moment came following an international meeting on education with then International Development Minister Karina Gould and several other partners. Minister Gould was intrigued when Martine—one of our powerful youth advocates from the DRC—shared her personal experience participating in a youth parliament.

“We have seen that the education of girls is imperative,” shared Martine at the virtual roundtable with Minister Gould, “because it allows them to increase their knowledge and live up to their potential. It also empowers them to help eliminate poverty in their communities.”

Martine went on to emphasize the importance of inviting children to speak out, in local, national and global conversations about their wellbeing.

“We would like children to be able to be allowed to express themselves, not always be

represented by adults,” she said. “After all, as children, we do not abuse ourselves. Rather, if we are abused, it’s by our elders.”

The meeting highlighted why the voices of children and youth like Martine, especially the most marginalized, must be sought and included in the global decision-making that most affects them. Six months following Martine's plea for greater youth inclusion, the Government of Canada confirmed the launch of Canada's inaugural Refugee Education Council.



Learn more about Martine and why she's passionate about girl's rights in DRC.

NO CHILD FOR SALE — Ten years of working with Canadians to end child labour

In 2021, our *No Child for Sale* advocacy campaign marked its tenth anniversary. The campaign focuses on ending the worst forms of child labour by raising awareness about dirty, dangerous and degrading jobs that harm children's development and wellbeing. Our goal is government legislation that will require companies to implement due diligence processes that address child labour and forced labour. In the years since launching, World Vision has become a thought leader on the issue of child labour and the single largest driver advocating for supply chain transparency legislation in the country.

Here's a timeline of our progress over the decade.

NO CHILD FOR SALE progress over the decade

2011

Beginning under the name *Help Wanted* in 2011, the campaign breaks into the market as *No Child for Sale* in 2013.

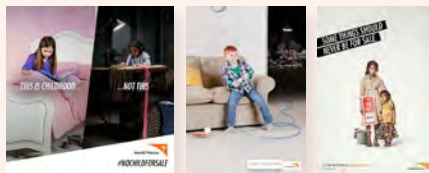


2013

The Scott Brothers, best known for their HGTV show the *Property Brothers*, visit [India](#) where they meet with vulnerable children and World Vision India staff.

2014

Three bold TV ads reach Canadians' hearts by connecting the products Canadian children use at home to the vulnerable children in low-income countries who make them.



2017

News story featuring [Canada's Child and Forced Labour Problem](#) report is picked up by hundreds of Canadian media outlets, including front-page coverage in the *Toronto Star*. The report reveals over 1,200 Canadian companies are connected to risky goods, amounting to over \$34 billion worth of imports each year.

2016

Our [Conscious Consumer Challenge](#) launches, inspiring 8,000 people to take part in changing their consumer habits by making ethical purchases that protect children.

2018

No Child for Sale wins an Achieving Communications Excellence PR award (Silver) for Government Relations Campaign of the Year.

2018

Our [Hidden Cost of Beauty Report](#) reveals how children as young as five are working to mine mica, a mineral found in many kinds of makeup.

2021

Our [Risky Canadian Grocery Report](#) explains that \$3.7 billion in "risky" food products that may have been produced by child labour were imported by Canada in 2019—a 63% increase over ten years.

No Child for Sale has given Canadians meaningful opportunities to bring systemic change, joining our government advocacy efforts to see corporate transparency mandated under Canadian law. Between 2011 and 2021:

- More than 150,000 Canadians signed our petition calling on the Government of Canada to create supply chain legislation in Canada that would require companies to publicly report and take action on human rights abuses in the production of goods they make and sell.
- Tens of thousands of Canadians have written directly to members of parliament, ministers and committee members asking to move the legislation process forward.
- Youth and students from across the country have loudly and consistently called for government action, raising awareness at university campuses via conferences, events and stunts.



Fiscal year 2021 was both rewarding and exciting, with new political commitments that have been a decade in the making.

- Senator Miville-Dechêne re-introduced the Modern Slavery Act as Bill S-216 in October 2020, which completed second reading before parliament was dissolved for the 2021 federal election.
- In March 2021, the government's Human Rights Subcommittee recommended that the Government of Canada develop a comprehensive human rights due diligence law for corporations.
- In June 2021, a report by the Standing Committee on Foreign Affairs and International Development recommended that Canada prioritize legislation that would strengthen supply chain integrity and combat modern slavery in global supply chains.
- For the first time, both the Conservative and Liberal parties committed to introducing some form of supply chain legislation in their 2021 election platforms.

What we've learned and where we're headed

Creating systemic change by pushing for new legislation is a long and arduous process. Bringing Canada's attention to the horrors of child labour—and the action we can take to end it—has made us more creative and tested our endurance along the way. But we're seeing momentum.

In November, Senator Miville-Dechêne re-introduced her bill, now S-211, *Fighting Against Forced Labour and Child Labour in Supply Chains Act*. And in December 2021 the government released their mandate letters for Ministers for the upcoming session of Parliament, with this directive included for the Minister of Labour: "introduce legislation to eradicate forced labour from Canadian supply chains." After a decade championing the cause, we're closer to our goal than ever. In 2022, we want to see the Canadian government finally make this legislation a reality.

Other high points from our advocacy work in 2021

1. On World Vision's recommendation, the Canadian parliament studied the effects of COVID-19 on vulnerable children worldwide.

While sharing our [Aftershocks reports on COVID-19](#) with members of parliament, World Vision recommended that the Foreign Affairs and International Development Committee study how the pandemic is putting children more at risk. They took our suggestion, holding hearings and seeking input from many stakeholders. After presenting to the committee on two occasions, our input was reflected in [two reports](#) produced by the committee. The [second report](#) focuses on recommendations for child rights and child protection services and systems, including calls from World Vision to:

- increase government funding for education to at least 10% of Canada's total budget for official development assistance.
- fully fund (and augment) the [#TogetherforLearning](#) campaign, under which we host the Refugee Education Council.

Backed by this committee report, World Vision continues advocating to the newly elected government to make its recommendations a reality, so that millions of girls and boys in some of the world's toughest places can access [quality education and achieve meaningful learning outcomes](#).

2. Through partnership with other NGOs, we secured additional COVID-19 response funding, including \$8.8 million for World Vision Canada.

Through an informal coalition of peer organizations from the international development sector, we advocated to the government to help respond to COVID-19 around the world by adding pandemic-specific aid to existing grants and humanitarian funding—of which World Vision received \$8.8 million.

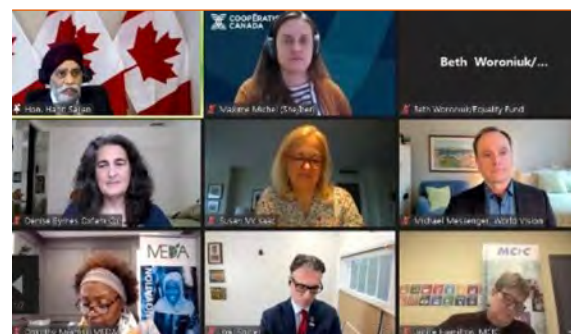
We also advocated for Canada to engage in vaccine-sharing through a joint policy brief with partner organizations and communications with multiple ministers, including Prime Minister Trudeau. World Vision International health experts and country office representatives joined discussions with government officials, adding insight into the crisis.

3. We participated in creating the first anti-racism framework for Canada's international cooperation sector.

In 2020, staff from World Vision began the work of initiating and co-leading the development of a sectoral [anti-racism framework](#). The first [baseline report](#) was published in June 2021. It outlines seven recommendations that organizations can pursue to make tangible anti-racist changes. Seventy-one organizations signed onto the framework in 2021, including World Vision. The framework and report are meant to help organizations like us address the legacy of racism and injustice that has permeated the sector through collaborative, proactive and quantifiable anti-racist measures. We are now exploring the implications of this work in our administration, human resources, communications and program operations.

4. Our President Michael Messenger was elected to the high-level steering group of Education Cannot Wait.

Education Cannot Wait (ECW) is a global fund that focuses on positioning education as a humanitarian priority. The group works toward collaboration among actors on the ground and fosters additional funding so that every crisis-affected child and young person can be in school and learning. With WVI Director of Education in Emergencies Marco Grazia also being elected to the executive committee, World Vision has opportunity to give leadership and insight on a crucial global issue.



Michael Messenger and other CEOs meet with new Minister of International Development Harjit Sajjan.

SPOTLIGHT ON: EMERGENCY RESPONSE



Little boys goof off at an evacuation centre following flooding and landslides in Timor-Leste.

The scale of global humanitarian need increased in 2021. Between the COVID-19 pandemic and the ongoing effects of climate change, crop failure and migration have led to a global hunger crisis, with 45 million people on the brink of famine.⁶⁶ The [2021 Sustainable Development Goals Report](#) reveals that this year, the global extreme poverty rate rose for the first time in over 20 years.⁶⁷

Families in much of the world find themselves in increasingly precarious situations, yet more vulnerable to environmental and political shocks. This reality only deepens World Vision's commitment to providing **emergency relief for children and families in crisis**.

Humanitarian emergencies result from many kinds of situations—from environmental disasters like drought or earthquakes to political conflicts that drive people from their homes. These crises can build slowly over time or strike suddenly and unexpectedly.

Our emergency response efforts prioritize saving lives in the short term, while working with communities to help them rebuild when immediate threats have passed. In all things, we keep girls and boys at the centre of our plans, concentrating on their physical and emotional safety and wellbeing—and this focus on children often sets us apart.

World Vision uses four categories as we assess emergencies and plan our responses.

CATEGORY III	are the most severe crises, where societies are unable to respond and recover without large scale external assistance.
CATEGORY II	are significant humanitarian crises that impact large numbers of people in societies that can respond and recover with limited external assistance.
CATEGORY I	are community level or subnational crises with localized impacts, where the community is able to respond and recover, with some assistance.
SUSTAINED HUMANITARIAN RESPONSES	are emergency responses that have been running for 24 months, and are projected to continue for at least another year.

In 2021, World Vision responded to 30 emergencies in 25 countries, reaching over 6.6 million people thanks to the partnership of supporters in Canada.

1. A deadly explosion struck the port of Beirut on August 4, 2020.

The explosion killed at least 218 people, injured more than 7,000 and left 80,000 children without homes. Felt as far as 10km away, the blast caused between \$3.8 and \$4.6 billion in material damage. Displaced families were forced to seek shelter in schools and government buildings, with as many as one million people needing humanitarian assistance. This explosion came during a time of economic collapse for Lebanon, which had begun in October 2019—on top of the COVID-19 pandemic—leading to more vulnerability and political instability.

World Vision declared a Category II emergency and launched a multi-sectoral response to assist children and families in Beirut.



A World Vision worker in Beirut leads activities in a child-friendly space, where children affected by the explosion can process their emotions and find a sense of normalcy.

Our response began in 2020 and continues thanks to multiple interconnected projects, including funding through the Humanitarian Coalition and Global Affairs Canada. These have provided support for families with shelter, education, child protection, water, sanitation and hygiene (WASH) and basic assistance including cash transfers. One of these projects came to a close in September 2021, having supported **162,085 people including 30,536 girls and 32,439 boys** in the greater Beirut area, with coordination between the World Vision Partnership (including World Vision Canada) and several other funding partners.

Because of support from donors in Canada:

- **2,533 children** and **1,061 parents and caregivers** were given access to mental health services.
- **249 households** received access to essential life-saving shelter, water and sanitation services.
- **8 schools** were repaired, rehabilitated and/or provided with furniture and equipment, benefitting over 2,000 girls and boys.
- **2,718 hygiene kits** were distributed, allowing families to take care of their basic hygiene needs during recovery.
- **3,538 disinfection kits** were distributed to help protect against the spread of COVID-19.
- **13 small and home-based businesses** received support, allowing them to resume operations.
- **4,029 families** received food assistance.

The situation in Lebanon by September 2021

A [UN rapid assessment](#) revealed the severe psychological consequences for children and the dire needs of families following the explosion. Seven in ten households requested basic assistance in the aftermath, and almost all still required support at the end of September 2021. A third of families with children younger than 18 reported that at least one child in their home was still showing signs of psychological distress.

The scale of the explosion emergency is now being dwarfed by a national economic crisis, with families facing hyper-inflation and destroyed savings that have resulted in food, fuel, medical and power shortages. Lebanon is experiencing four intertwined crises: the Syria refugee crisis, the economic crisis, the COVID-19 pandemic and the Beirut explosion.

2. Honduras was devastated by back-to-back hurricanes in November 2020.

Hurricane Eta hit Honduras on November 4 with torrential rains, river overflows, landslides and catastrophic floods. Homes were submerged and damage to the country's infrastructure and farming was severe. Two weeks later, the country was hit by Hurricane Iota, further exacerbating the situation for already-vulnerable families. Thousands of families were affected in the Sula Valley, many of them single mothers and child-headed households. These two hurricanes affected more than 7.5 million people in Central America.

World Vision declared a Category III emergency and responded to the basic survival needs of families in Honduras.*

We used diagnostic tools to make sure our efforts were prioritizing the most vulnerable families. **Of the 3,685 families we assisted, 81% were female-headed households.** With assistance from Global Affairs Canada through the Humanitarian Coalition Canadian Humanitarian Assistance Fund, as well as supporters in Canada:



Andy and his family were among those who received support from World Vision following the hurricanes in Honduras.

- **1,936 families received hygiene kits**, helping them to maintain hygiene, health and dignity during the recovery period. With input from community members, hygiene kits included gender-sensitive items to meet women's expressed needs.
- **100 cleaning kits** were delivered to temporary shelters, local entities including schools and churches, and the medical centre.
- **1,757 families** received cash vouchers, redeemable for food supplies at local supermarkets.
- Information sessions on COVID-19 prevention, motivational talks and "woman-friendly spaces" helped to support **women's resilience and socio-emotional needs**.
- Channels for asking questions, making suggestions or submitting complaints about World Vision's response were shared amongst people who benefitted from our assistance.

At the end of the project, **95%** of people surveyed reported that the assistance provided through World Vision addressed their urgent needs.

The situation in Honduras by April 2021

Many families in temporary shelters had returned to their homes, with most shelters having closed or reduced their capacities. Families have begun to recover and rehabilitate their homes, though conditions continue to be challenging. The current pandemic has added an extra layer of difficulty because of reduced economic opportunities and food insecurity.

* Category II responses were launched in Nicaragua and Guatemala. Category I responses were launched in Mexico and El Salvador.

3. Timor-Leste experienced disastrous flash floods and landslides beginning on March 29, 2021.

Heavy rains from Tropical Cyclone Seroja caused the country-wide catastrophe, with the capital city of Dili and its surrounding low-lying areas hit hardest. Over 13,000 people in Dili were forced into evacuation centres. With extensive flooding across the city, even residents who were not forced to evacuate still faced damage, loss and laborious clean-up efforts. On April 9, the Government of Timor-Leste declared a 30-day State of Calamity in Dili and appealed for international support.

World Vision declared a Category I emergency and responded with support through shelter, WASH and protection assistance for families in Timor-Leste.

With assistance from Global Affairs Canada through the Humanitarian Coalition Canadian Humanitarian Assistance Fund, as well as supporters in Canada:



Flooding and landslides following Tropical Cyclone Seroja caused mass damage in Timor-Leste.

- **1,030 families** received gender-sensitive **hygiene kits and household kits**.
- 830 families received **clean-up kits**.
- 250 women received **maternity kits**.
- **416 water trucks distributed 2,080,000 litres of water** directly to households, giving families safe water for drinking and clean-up.
- **14 child-friendly spaces** were set up and equipped with play and learning resources, giving 860 children a secure place to find normalcy and process their experiences.
- At 2 evacuation centres, 450 women and 330 men received information about **gender-based violence referral networks**, helping to create awareness about protection services during a time of vulnerability.
- A contracted support professional provided prevention and protection support to **14 abandoned mothers and survivors of gender-based violence**, referring six women to social and legal service providers and helping with their basic need.

During post-response monitoring, 97% of respondents said the help they received from World Vision met their needs, with 99% saying items received were either acceptable or good quality.

The situation in Timor-Leste by September 2021

Most families were eventually able to return home in May, June and July 2021. However, the widespread loss of household items and food was compounded by decreased income opportunities resulting from COVID-19 restrictions. Families in Timor-Leste were still struggling to meet their basic needs in September 2021.

SPOTLIGHT ON: GRADUATING CHILD SPONSORSHIP COMMUNITIES

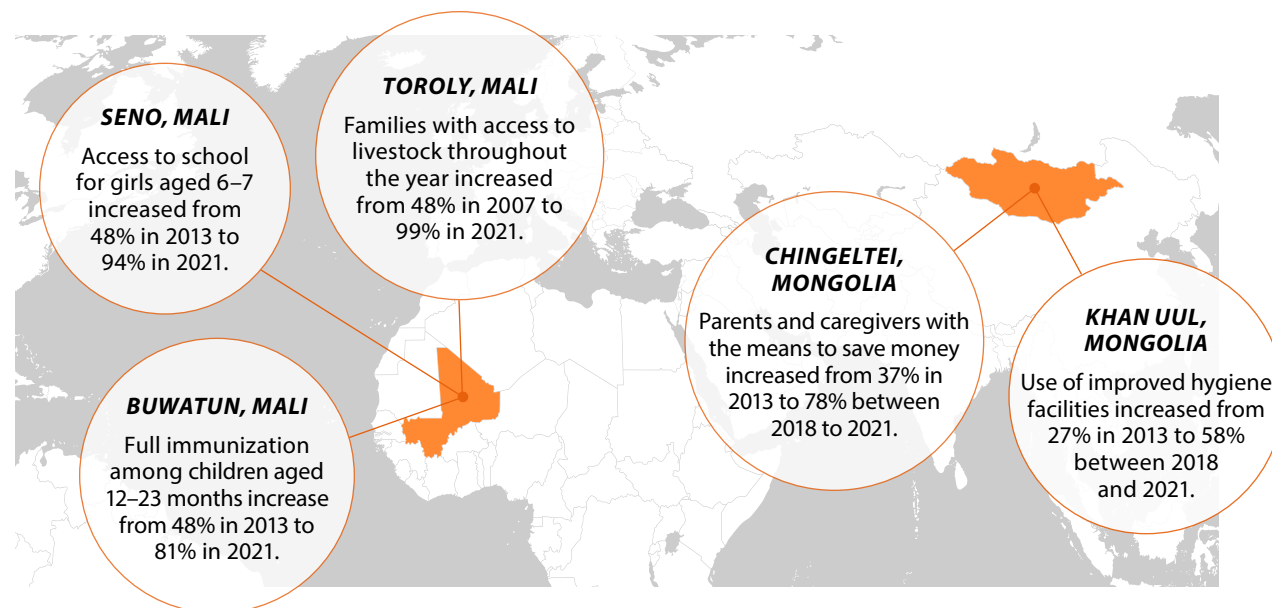


Throughout fiscal year 2021, World Vision Canada partnered with 173 sponsorship communities in 41 countries worldwide. By the end of the year, 17 of those communities had graduated.

A community's graduation is a good thing—every time World Vision partners with a community, we begin working toward the day when we will eventually leave. Our sponsorship programs typically run for 10–15 years. Over that course of time, World Vision staff focus on building relationships, investing in girls and boys' development, working collaboratively on projects, training families and strengthening local systems. Our partnership in an area comes to a close when, together with local leadership, we identify that sustainable changes have been set in motion and the community is equipped to move forward independently.

In the leadup to World Vision's transition out of a community, evaluations are conducted to understand the changes that have occurred over the course of the program. Because the transition process happens over a period of years, these evaluations may be conducted closer to or further from our exit point, depending on the local contexts.

Here are some highlights from recent evaluations done in communities in Mali and Mongolia that graduated in 2021.



Examples of positive change across sectors in graduating communities

LIVELIHOODS

Food

- In Buwatun, Mali, households with enough food for their families throughout the year increased from 16.9% in 2013 to 66.2% in 2021.
- In Chingeltei, Mongolia, households with enough food for their family needs throughout the year increased from 52.6% in 2013 to 74.4% in 2021.

Economic Empowerment

- In Buwatun, Mali, households with access to credit increased from 24.2% in 2013 to 89.6% in 2021.
- In Seno, Mali, households managing to meet their basic needs—including food, health and education—increased from 44% in 2013 to 67% in 2021.

Disaster Risk Reduction

- In Chingeltei, Mongolia, parents and caregivers using effective disaster risk reduction strategies increased from 72.8% in 2013 to 94.4% in 2021.
- In Khan Uul, Mongolia, the percentage of parents and caregivers who had been affected by disaster but were able to maintain their standard of living increased from 46% in 2013 to 55% in 2021.



HEALTH

- In Buwatun, Mali, the prevalence of diarrhea in children under five decreased from 31.5% in 2013 to 5.4% in 2021.
- In Seno, Mali, infants aged 6-23 months receiving the appropriate number of daily meals—including solid, semi-solid or soft foods—improved from 45% in 2020 to 79% in 2021.



EDUCATION

- In Chingeltei, Mongolia, children who can read with comprehension increased from 74.1% in 2013 to 83.5% in 2021.
- In Toroly, Mali, the primary school completion rate increased from 20.3% in 2014 to 60% in 2020.



CHILD PROTECTION & PARTICIPATION

- In Toroly, Mali, children under five holding a birth certificate increased from 43% in 2014 to 94.6% in 2021.
- In Khan Uul, Mongolia, families that listened to children's opinions and took action as needed increased from 45.9% in 2013 to 65.7% in 2021.



WATER, SANITATION & HYGIENE

- In Toroly, Mali, household access to improved latrines increased from 8.0% in 2008 to 74.6% in 2021.
- In Buwatun, Mali, the percentage of households using an improved water source within 30 minutes of their home increased from 7% in 1995 to 47.1% in 2021.



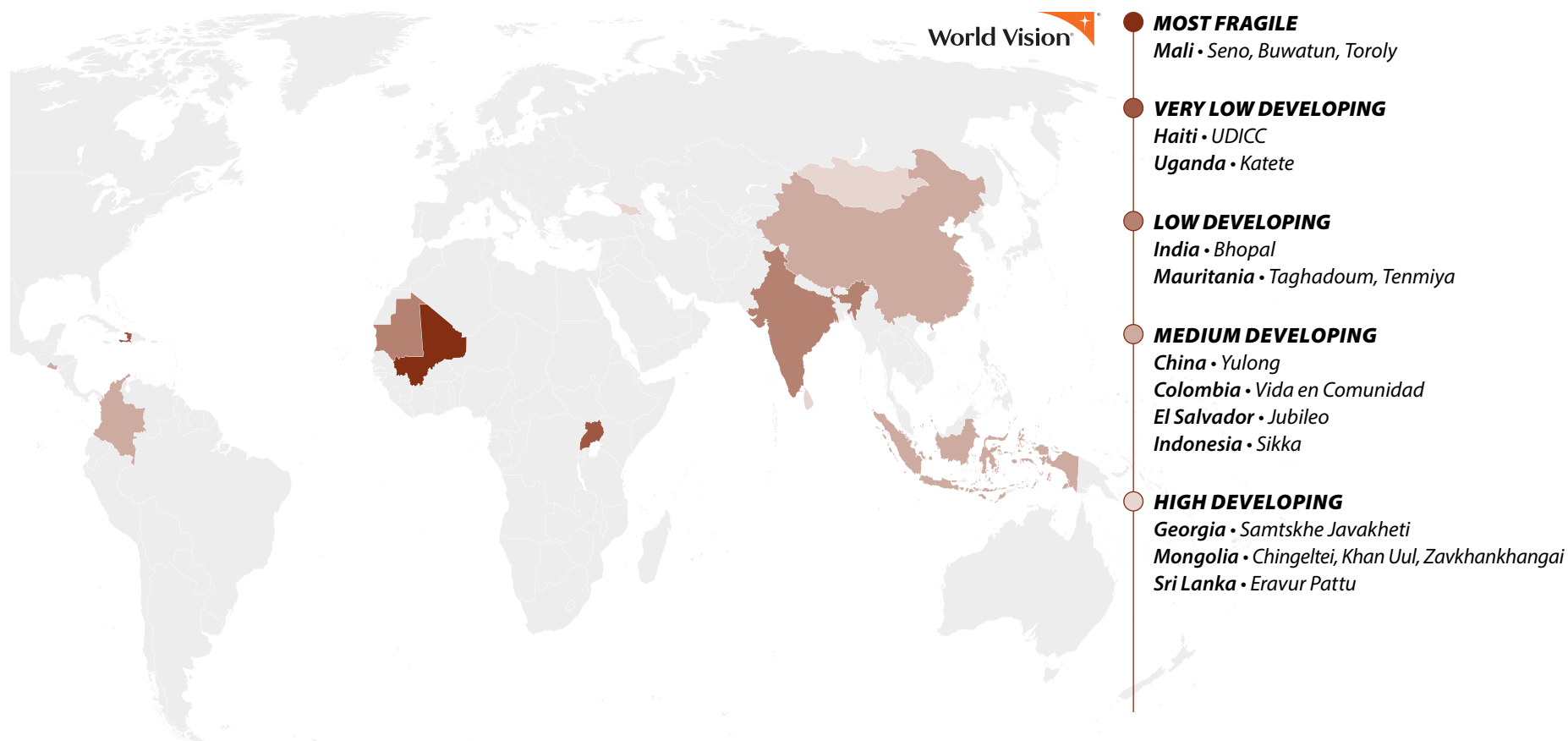
How our shift toward fragile contexts affects child sponsorship

As we focus on reaching the world's most vulnerable girls and boys, there are implications for the way World Vision plans our child sponsorship programs: while increasing our work in fragile contexts, we are transitioning away from less fragile contexts where we have worked in the past.

This transition is happening gradually. For example, sponsorship communities that graduated from Chile in 2014, Thailand in 2016, Romania and Costa Rica in 2017, and Armenia, Brazil, Mexico and South Africa in 2020, were the last ones supported by Canadians in those countries. This does not mean that work has ended there. Local funding and international grants continue to operate under local World Vision offices, as they serve their own areas of fragility and reach their most vulnerable children.

It's also important to note that our current child sponsorship model is not always to the best approach for every community or country. Some fragile contexts—especially those affected by conflict and instability—are better suited for other approaches, such as our [Fragile Context Programme Approach](#).

Here are the fragility categorizations of the 17 communities that graduated in 2021.





COUMBA'S STORY — A dream made possible through education

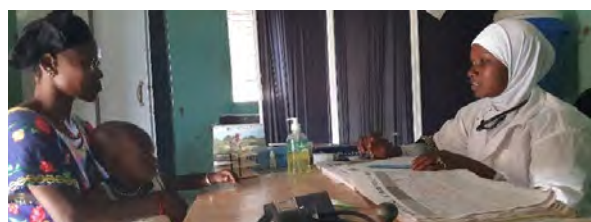
Toroly, Mali

When the news came that she'd been sponsored in 2006, Coumba's family was in a critical situation. Her parents were working as day labourers and could barely afford expenses like school fees.

Over time, the letters, cards and photos Coumba received from her sponsor motivated her to continue in her education, working hard toward a better future. And throughout the years, the quality of education in Toroly improved, with schools receiving teaching resources thanks to sponsors' contributions.

Coumba's parents and sponsor all encouraged her when, at 15, she shared her dream of becoming a nurse. Today she attends a training school for health workers and works as a nurse-in-training at her local health centre. Her whole community is cheering her on.

"I am very thankful to God and World Vision for changing my life, paying attention to me and other children from my community," she says. "Today, my dream has become a reality thanks to this support and care."



Coumba works as a nurse-in-training at her local health centre in Toroly, Mali.

The tables below show the fragility categorization for both graduating and new communities in fiscal years 2020, 2021 and 2022.

GRADUATING COMMUNITIES COUNTRY FRAGILITY RANKING	FY20	FY21	(TARGET) FY22	NEW COMMUNITIES COUNTRY FRAGILITY RANKING	FY20	FY21	(TARGET) FY22
Most Fragile	2	3	1	Most Fragile	3	0	3
Very Low Developing	4	2	5	Very Low Developing	1	1	9
Low Developing	6	3	3	Low Developing	2	0	5
Medium Developing	3	4	2	Medium Developing	3	0	0
High Developing	9	5	2	High Developing	0	0	1
Total Communities	24	17	13	Total Communities	9	1	18

* Please note that because of restrictions due to the COVID-19 pandemic, the start of new communities was disrupted in 2020 and 2021.

SPOTLIGHT ON: OUR INSTITUTIONAL PARTNERSHIPS



Strong partnerships are crucial to World Vision's work—with the backing and collaboration of multiple institutional donors, we're able to reach more children and families with high quality, evidence-based programs that transform lives.

In fiscal year 2021, 10 large-scale grant projects came to a successful close, while others are continuing in 2022, because of strong partnerships with UNICEF, the United Nations Office for the Coordination of Humanitarian Affairs (OCHA), the United Nations High Commissioner for Refugees (UNHCR), Global Affairs Canada (GAC) and the World Food Programme (WFP), to name a few. [Learn more about our work with WFP here.](#)

Important among our donors is the Canadian government through Global Affairs Canada. As a key partner, GAC funded projects that enhance maternal, newborn and child health, food security and economic empowerment in several priority countries, along with humanitarian relief and longer-term rebuilding projects for children and families in emergencies, disasters and conflict.

Fiscal year 2021 marked the successful completion of four GAC-funded, multi-year programs, three of which focused on maternal, newborn and child health and nutrition. These programs equipped families, community volunteers, frontline health workers, youth groups and even agriculture production groups with important knowledge, skills and advocacy experience—lessons that buffered some of the challenges brought by the pandemic, and will continue to shape their behaviour in the future.

More broadly, these programs equipped health systems in Africa and south Asia to elevate their care for women through pregnancy and delivery, prevent premature births, improve access to family planning, reduce malnutrition and innovate with appropriate technology. The strides made in these partnerships are significant and will continue to influence our ongoing and future programs.

Learn more about these programs and find their full reports on the next page.





ENRICH | *March 2016—September 2021*

The *Enhancing Nutrition Services to Improve Maternal and Child Health in Africa and Asia* (ENRICH) program worked to improve the health and nutrition status of mothers, newborns and children in select regions of Bangladesh, Kenya, Myanmar and Tanzania. Implemented by World Vision Canada and Nutrition International, ENRICH worked closely with other Canadian and international partners including HarvestPlus, the Canadian Society for International Health and the University of Toronto's Dall Lana School of Public Health.



Born on Time | *March 2016—March 2021*

Born on Time focused on improving newborn child survival in Bangladesh, Ethiopia and Mali through a five-year initiative that brought together the expertise and resources of World Vision, Plan International Canada and Save the Children, with additional funding from Johnson & Johnson.



SUSTAIN | *December 2016—June 2021*

Supporting Systems to Achieve Improved Maternal, Newborn, and Child Health (SUSTAIN) worked to improve the delivery of quality gender-responsive reproductive, maternal, newborn, child and adolescent health (RMNCAH) services and increase the use of these services by women and their families, with a focus on enhancing gender equality. The project was implemented by World Vision in the Kigoma region of Tanzania.



STEP | *December 2016—December 2020*

The *Skills Training for Employment Program* (STEP) focused on improving the employment prospects of young adults in Senegal, strengthening their technical, professional and entrepreneurial skills for successful integration into the labour market. The project was implemented by World Vision Canada and World Vision Senegal, in partnership with the Enblis Entrepreneurship Network and Développement International Desjardins.

2021 LEARNINGS

WISDOM GAINED FROM
FAILURES + SUCCESSES

In the section that follows, we highlight four areas of learning from fiscal year 2021.

COVID-19

How the pandemic is changing the way we teach our Youth Ready curriculum

GENDER EQUALITY

Five key pillars for effective programming

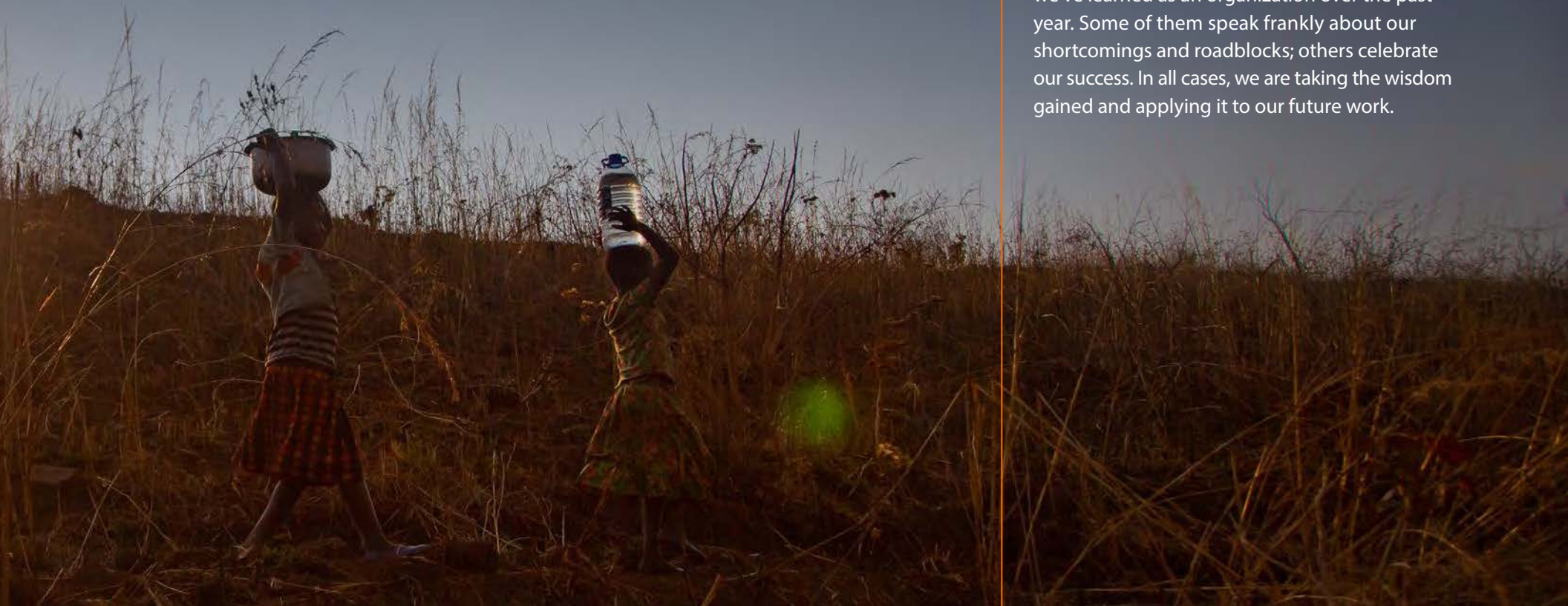
DATA CHALLENGES

Lessons learned with sex-disaggregation

IMPACT MEASUREMENT

What we've learned through World Vision's Agile transformation

These four are just a handful of the lessons we've learned as an organization over the past year. Some of them speak frankly about our shortcomings and roadblocks; others celebrate our success. In all cases, we are taking the wisdom gained and applying it to our future work.



COVID-19

How the pandemic is changing the way we teach our Youth Ready curriculum

The *Vision for Vulnerable Youth Initiative* focuses on developing the literacy, life skills and civic values of teens and young adults in Central and South America. The program works with young people aged 14–29 using the Youth Ready curriculum, which trains participants in emotional, cognitive and communication skills that help with the development of their livelihoods. The ultimate outcome is empowered youth who are equipped to be engaged, productive citizens.

Running from 2019–2023, the program is underway in seven countries, including El Salvador, Guatemala, Honduras, Peru, Colombia, Bolivia and Ecuador. [Learn more about the *Vision for Vulnerable Youth Initiative's* progress in 2021.](#)



Challenges and solutions related to COVID-19

The pandemic brought with it several challenges for the *Vision for Vulnerable Youth Initiative*. Adapting our methods was necessary for the program to continue effectively, and these changes provided several learning opportunities.

To evaluate our ability to adapt and respond, we developed the Center of Learning for Adolescents and Youth (CLAY) together with World Vision US. The partnership brought together our expertise in youth programming while creating standards and systems for gathering evidence data. This created a structure to collect project learnings, share information and coordinate research across countries where the *Vision for Vulnerable Youth Initiative* is implemented. A key goal was understanding the widespread, multi-dimensional effect of COVID-19 on the communities where the program takes place.

Using criteria developed by the Organization for Economic Cooperation and Development (OECD), the CLAY evaluation looked at relevance, coherence, effectiveness, efficiency, impact and sustainability to understand and analyze how the program responded and adapted in each country.

Fernando, 18, is a project participant from Bolivia. He received some tools and materials to help get his new shoe repair business off the ground and named his business La Bota Feliz, which means “the happy boot”.

1. Moving the curriculum online

At the beginning of the COVID-19 pandemic and its resulting lockdowns, teams across the seven countries moved quickly and collaboratively to shift the Youth Ready curriculum delivery online. After analyzing the multitude of platforms available and prioritizing the needs of the youth, the teams decided to use multiple options, including the Youth Ready App—a tool that had been developed before the pandemic—along with WhatsApp, Zoom, Google Classroom, YouTube, Moodle and Chamilo, an e-learning and collaboration software.

2. Ensuring access to training materials

Despite the quick pivot toward fully online curriculum using a variety of delivery options, only 56% of youth (53% of females and 57% of males) who were surveyed across all countries reported having adequate access to internet and/or devices for learning. Youth in urban areas were found to have more access; however, the majority of youth in the program are vulnerable and live in rural areas, creating barriers related to internet, smartphones and connectivity.

To ensure participants could access the Youth Ready curriculum, the program provided some youth with mobile data recharges, devices and

credits to access the internet. For those who needed physical copies, the teams got creative, using radio programs, USBs, DVDs and printed workbooks to reach youth without internet access or devices.

We learned that a virtual methodology was most relevant for urban areas—in part because of internet access issues, but also because urban learners were less likely to rely on oral traditions and had higher reading comprehension and math skills.

3. Working through “Zoom fatigue”

Once equipped with access to the curriculum, the program participants continued to face challenges completing and submitting assignments online and staying engaged in the virtual learning experience. Project facilitators learned to combat this with personalized follow-up calls, messages through WhatsApp and Zoom events designed to encourage collaboration and interaction among peers.

With the digital delivery of the program, most participants experienced the now widely understood effects of “Zoom fatigue” and digital exhaustion. To address the youth’s mental health concerns—which included digital exhaustion, depression and anxiety—workshop facilitators were offered virtual training on mental health and psychosocial support.

4. Alleviating strain on facilitators

Project facilitators faced increased workloads, responding to questions and concerns outside of business hours, searching for training resources and reviewing individual assignments. The project teams recognized this and started virtual workshops for staff across the seven countries to have dialogue, reflect on their experiences and share best practices.

In addition to the overarching lessons identified across all seven countries, our project staff highlighted learnings that were unique to their specific countries and communities. For example:

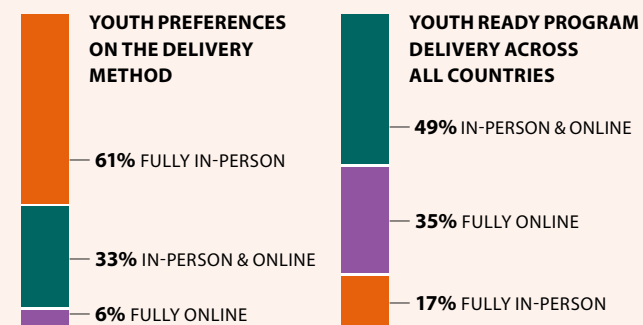
- **In Colombia**, project facilitators learned that sharing success stories and reinforcing the necessity of perseverance to achieve goals was a helpful tool to improve the youth’s retention and commitment.
- **In Peru**, staff learned that many participants had been pushed into informal work during the second wave of the pandemic, disrupting their schedules and making attendance at the Youth Ready virtual workshops more difficult. Regular contact with community leaders and Youth Ready facilitators allowed the youth to continue their training in a personalized way after their needs were understood.
- **In Guatemala**, the team is developing interactive approaches to reach youth in remote rural communities, including use of the radio.

Through the adaptations related to COVID-19 and resulting lessons learned, 91% of the youth participants (91% of males, 91% of females) completed the program in fiscal year 2021.

Participant delivery preferences

Full in-person delivery of the program is preferred by the majority of the youth as it increases:

1. Effectiveness of interacting with other young people and facilitators.
2. Ease of understanding the course content.
3. Ease of asking facilitators questions and receiving comments in real-time.



With the pandemic still unfolding, and case numbers continuing to fluctuate across Central and South America, we expect that the *Vision for Vulnerable Youth Initiative* will continue delivering the Youth Ready curriculum with a blended approach: both online and in-person. Moving forward, we’ll continue to finetune our methods and integrate the lessons shared—along with future ones—as we focus on keeping youth motivated and engaged.

GENDER EQUALITY

Five key pillars for effective programming

Ten-year review on World Vision's gender equality work

In 2021, World Vision conducted a review of our global programming over the past ten years, in order to 1) see how we are addressing a series of gender equality barriers previously identified in 2019, and 2) glean lessons that we can apply to future programming.

We found the majority of projects that effectively address both gender equality and the empowerment of women and girls contained five elements or “pillars”—applied in combination—as the foundation of their theory of change. Beyond those elements, the projects also simultaneously addressed *agency, relationships* and *structures* to achieve gender equality. This process has confirmed that our new Gender Equality, Empowerment & Human Rights Framework is grounded in approaches and strategies that work.

Here are the **five key pillars** we identified that have made World Vision's programming gender transformative.

1. Address gender equality and the empowerment of women and girls as both a core objective and a key contributor to change

World Vision approaches our Canadian grant projects first and foremost as gender equality projects. We believe that unless gender equality and the empowerment of women and girls is a core project objective, the achievement of all other project goals—food security, education, health, sexual and reproductive health and rights, child protection and more—are severely compromised.

2. Partner with women and girls

In both our development and humanitarian programs, we help women and girls build knowledge, confidence, participation, negotiation and leadership skills. We encourage them to find their voice and their power, to define and act on personal and collective goals, to make important life decisions and to participate in the economy and public life.

We support women and girls to exercise agency in different ways, both as individuals and collectively, at individual, household, community and institutional levels. An important part of empowering women and girls is [working with their husbands or partners](#)—along with other power-holders and gatekeepers—to accept women and girls' equal participation in decision making.

3. Foster enabling environments

We situate our gender equality projects within the local set of interrelated, interdependent structures and practices, including policies, laws, institutional mechanisms, resources, norms, beliefs, attitudes and practices that impact gender equality. Our work seeks to bring about sustainable and lasting changes by empowering women and girls as informed advocates for change, supported and enabled by their social and economic advancement.



4. Elevate the social value and position of women and girls

World Vision promotes equitable gender relations and the increased social value of women and girls by challenging the prevailing gender relations. The established norms often result in gender power imbalances that disadvantage women and girls. Our work involves promoting an appreciation among power-holders—and women and girls themselves—of the value of women’s knowledge, capabilities and contributions at all levels of society. We help them to understand the benefits experienced by everyone when gender-based barriers are dismantled.

5. Engage men and boys and leverage the influence of multi-faith and traditional leaders

World Vision provides a platform for community members and leaders to address the root causes of inequality and foster an environment that encourages transformative change, in both individuals and the broader community. We actively encourage and support men and boys; community, [faith-based](#) and traditional leaders; teachers; health care providers and other key stakeholders to critically reflect on and challenge the broadly held norms and power dynamics that perpetuate gender inequality. This work helps facilitate a process of transformation toward positive, equitable and inclusive values and practices that promote gender justice and equality.

Case Study: *Born on Time* Program

Between 2016 and 2021, we teamed up with Plan International Canada and Save the Children Canada as implementing partners, and the Government of Canada and Johnson & Johnson as funding partners, to implement *Born on Time*, the first public-private partnership dedicated to the prevention of preterm births. This \$30 million initiative was implemented over five years in Bangladesh, Ethiopia and Mali—three countries that together account for more than one million preterm births annually.

Born on Time was a gender-transformative program that worked to address the key risk factors for premature birth. By implementing all five gender equality pillars as a part of its strategy, the program made significant strides in the project areas.





After participating in Born on Time programs, Ehitnesh and her husband Ayelign both started challenging long-held ideas about their roles at home.

During Ehitnesh's first three pregnancies, she had been stressed and isolated, maintaining heavy workloads without support. Born on Time set the couple on a new trajectory, and the change was notable when Ehitnesh became pregnant with their fourth child.

"Ayelign took care of me. He encouraged me to eat healthy foods. ... he accompanied us to health centre visits, where we got vaccines. Ayelign didn't used to do laundry, but now he helps," Ehitnesh reports.

Five pillars of gender equality addressed in *Born on Time*

Born on Time was conceptualized as a gender equality program, understanding that to address the key risk factors of premature birth, it would be necessary to address gender equality issues related to maternal, newborn and reproductive health care. With this foundation, the program **addressed gender equality and the empowerment of women and girls as a core objective and key contributor to the outcomes of the project.**

Born on Time also **partnered with women and girls**, empowering them by investing in their health and nutrition-related knowledge, leadership and decision-making power. Women and girls were supported to apply their knowledge as members and leaders of community health committees and sexual and reproductive health and rights (SRHR) clubs for youth. Through this, the **social value and position of women and girls was elevated**, as women and girls claimed their voice and gained social visibility as important contributors to household and community decision making.

Born on Time also aimed to **foster an enabling environment**, working within the health care systems in Bangladesh, Ethiopia and Mali to promote institutionalized gender-responsive and adolescent-friendly health care services. This was done by building the capacity of health care providers, refurbishing health facilities and providing supportive supervision and mentoring.

Of particular significance, the program also **engaged men and boys as active partners for change.**

Men and boys in Bangladesh, Ethiopia and Mali were involved in social and behaviour change activities, including fathers' clubs, husbands' schools, male dialogue groups and adolescent boys' peer groups.

World Vision, with our partners, also engaged key influencers including community and religious leaders and mothers-in-law to help transform harmful gender norms and address gender-based discrimination that has negative and long-lasting effects on maternal and newborn health.

The implementation of all five gender equality pillars in *Born on Time* resulted not only in positive changes with gender equality—it also contributed to success in addressing the key risk factors of premature birth. Comparison between baseline analysis in 2016 and end-line analysis in 2020 revealed:

- In Bangladesh, women reporting equitable decision making within their households related to seeking health care information and services for themselves or their newborns jumped from 11.2% to 30.8%.
- In Ethiopia, male partners who consider a husband to be justified in hitting or beating his wife decreased from 67.4% to 46.8% over the life of the program.
- In Mali, the percentage of community health centres that have action plans for healthy pregnancy, delivery and care for newborns that adhere to gender-responsive and adolescent-friendly standards increased from 0 to 91%.

DATA CHALLENGES

Lessons learned with sex-disaggregation

World Vision Canada considers [gender equality a critical priority](#), and yet—an analysis of our 2021 data revealed that only 18.5% of the data points related to measuring “people” in our system are disaggregated by sex.

This finding varies across our portfolio. For example, among some program types, including grants with Global Affairs Canada (GAC), UN institutions and projects involving higher net worth donors, 70% of the data is sex disaggregated. However, these types of programs form a smaller portion of the dataset—just over 25% of the total number of data points.

That means the majority of our programs focused on long-term investments in communities supported through sponsorship do not have *any* sex-disaggregated data.

Roadblocks to solving the problem

Together with the countries that form our global World Vision Partnership, we capture and store a significant amount of data within a centralized database. While it had been specified that the 2021 data would be disaggregated by sex, when we received it there was no disaggregation.

In working to identify the source of the problem, we found that some data had, in fact, been collected in sex-disaggregated form. However, this was done through a parallel process not accounted for in the default data delivery method. Because of timeline constraints, we were unable to review and clean the data for use in our 2021 reporting, but we intend to adjust our process next year.

Why this failure is significant

1. Understanding the unique needs of the girls, boys, women and men in the communities we serve is vital as we partner with them to bring change. Data is an important way for us to gain insights into their particular needs as well as the ways

they are benefitting from World Vision’s projects. Yet without sex-disaggregated data, we are failing to even understand how many individual girls, boys, women and men are being reached through our work.

2. We need to know if we are reaching the people we set out to reach. Identifying an overall number of people is not sufficient; we need to know if we are helping the specific people we intended to—and because we focus on reaching the most vulnerable, that means women and girls in particular.

3. Sex-disaggregated data is necessary for better impact measurement. Without it, we have no way to test our assumptions and identify nuances between groups as we measure progress and change. For example, if we can’t confirm that 90% of our savings group members are women, we can’t say with certainty that the groups are supporting women’s empowerment. If we don’t know the breakdown of Youth Ready participants by sex, we can’t determine whether men and women are graduating at the same rate or follow up on specific gender barriers that may exist.

4. Without the disaggregation, we rely on estimations. We use country population databases from the UN and World Bank to fill in the breakdown of non-disaggregated data. These sources give us well-informed estimates but without the real data, the numbers are not precise.

Our plan to move forward

A review of our current data situation reveals some learnings.

- It appears that we’ve been more likely to capture

sex-disaggregated data in projects where the donor requires it, or when disaggregation is built into the project design. If not, it becomes more difficult to add later on, and falls lower in the priority order.

- When data is collected in sex-disaggregated format, we need to ensure that data management systems allow all parties involved in the analysis to have full access to the system—while maintaining people’s privacy and confidentiality—so that the full scope of data does not go unused.
- In projects where we are directly involved in the data management, we’ve been more likely to ensure the disaggregation is complete—yet we still have room to improve in this.
- Capturing sex-disaggregated data during emergency responses must be balanced against the need to reach people with urgent assistance, but we must also leverage better technology for efficient collection.

The sex-disaggregation of our data is a priority for World Vision as we raise our bar on impact measurement and reporting, and we have plans to ensure this moving forward.

For new projects: We will ensure sex disaggregation systems and processes are built into project designs as a standard practice.

For data that we directly control: We will build mechanisms to ensure project managers or those accountable are responsible for reviewing the disaggregation and updating it if needed.

For data that we do not directly control: We will take a more active role with the Partnership’s Global Centre to advocate for the disaggregation of the data and make sure the data we receive includes it.

By 2023, we aim to have more than 90% of our indicators disaggregated by sex.

IMPACT MEASUREMENT

What we've learned through World Vision's Agile transformation

Agile: A new way of working

In 2020, World Vision decided to comprehensively shift the way our teams in Canada work, with organizing around impact measurement as a priority area. We began the process of adopting the “Agile” methodology across the organization—it was and continues to be a monumental shift.

Agile is a nimble, reactive approach. Originally born in the software development world, it values getting work done through personal interactions, customer collaboration, flexible working solutions and adaptability.

This is quite different from the traditional approach that most workplaces have used to manage projects, known as the “Waterfall” approach. Waterfall follows a linear path toward completing a project. In this process, there are clear dependencies that need to be considered before the next step is taken, and the entire product is not delivered until the project's end.

The Waterfall method is ideal for many kinds of work—like building infrastructure, for example—but often has the tendency to:

- Create silos for work to get done.
- Allow for handoff delays and information to be lost in translation or corrupted.
- Prevent cooperation across silos because priorities are not aligned.

In a world that is constantly shifting, we need ways of working that are flexible and adaptable. The Agile approach prioritizes smaller deliverables within shorter timeframes as we continuously learn what customers want. It allows teams to “iterate” along the way, involving multiple people on the various pieces needed for a final product.

Agile gives teams a structure to try new things, to test, to invent and to fail—fast—while constantly learning and applying what they've learned.

Learn more about the [Agile methodology here](#).

Implications for World Vision's impact measurement work

One of the first groups at World Vision to adopt this Agile approach was the Impact Value Stream, a team whose focus runs from supporting in project design to data collection and analysis to results reporting.

This team united staff with diverse skills—including monitoring, evaluation accountability and learning (MEAL) professionals, data engineers, financial analysts and content specialists—with the common goals of 1) maximizing World Vision's ability to report impact to improve the lives of vulnerable girls and boys, and 2) showing our supporters how their contributions through World Vision achieve greater impact.

Advantages seen with Agile

Since adopting the Agile approach and structure, the Impact Value Stream has experienced several benefits.

1. **Collaboration has increased**, with teammates from five different departments now working together. People who did not work side by side—yet had dependencies on each other—now collaborate daily.
2. **Lag times have decreased** as a result because teams can prioritize work that is valuable to the organization without competing departmental priorities or delays.
3. **Project information has been consolidated** into one single source of truth where it once was stored in several different places.
4. **Respect for others' skills has grown** as people from different areas of the organization work closely together.
5. **Work is being done and corrected quickly**, allowing us to better meet the organization's needs.
6. **Our budgeting process is leaner**, not tied up in annual cycles but disbursed based on changing needs throughout the year, allowing us to access funding quicker in order to address high-priority needs.

Accomplishments in 2021

The team was busy and productive using the Agile approach in 2021, with two significant achievements to highlight.

1. We built essential project data infrastructure.

World Vision lacked the infrastructure needed to collect, manage and track World Vision's programmatic information and data, so in 2021, a new digital project management system was built.

This was a necessary step toward both maximizing and communicating the organization's impact. This new system allows us to track every project that World Vision is implementing along with its related data. Using it, we can analyze project results based on geography, sector, gender, intervention type and changes achieved.

In 2021 this new infrastructure was put to use supporting other areas of the organization by digitizing offline processes, with our grant management, fund alignment and gifts-in-kind processes all now leveraging the system. This consolidation has reduced staff worktimes and, more importantly, the data integration will allow for deeper insights in the future.

2. We developed a theory of change framework.

To understand how World Vision's results are connected at the project and portfolio level, the Impact Value Stream first needed to build a "theory of change"—a framework to connect each program sector goal to the interventions we use to achieve them. Under these interventions, standardized data indicators are now being developed for every sector and integrated into the digital project management system.

Once complete, we will have the ability to aggregate our results across our entire program portfolio—showing what has been accomplished within sectors or geographical regions according to the needs of the people we partner with. Using these indicators, we can establish benchmarks and set targets for the future—goals like how many people we expect to reach or what level of change we would expect to see within specific sectors of work.

Failures in 2021

Using the Agile approach has had clear benefits, but transitioning to a new methodology has come with difficulties as well. Several failures along the way have provided valuable learning opportunities. Here are some examples.

1. The digital project management system was built too quickly.

While building a quick solution helped with our lack of proper data infrastructure, it also created longer term issues that we have had to go back and fix. This additional work has delayed our ability to share data for internal decision making.

The quickly-built system has also limited our ability to provide performance data—which goes beyond the progress-level data we traditionally report, and incorporates change, impact and cost integration.

In our attempt to create a faster solution, performance data was entered into the system as raw percentages. However, because we do not have sample sizes for these figures, we must first go back and identify them before we can aggregate our performance data.

This work is important. Implementing performance management will allow for better reporting at the change level using the standardized indicators and will allow us to connect dollar figures to levels of change or progress. Our ultimate goal for this work is 1) understanding the value of each dollar our supporters give and 2) identifying which projects and interventions are the most efficient at delivering results. To date, it has been difficult for us to aggregate this data.

2. Agile has become a popular organizational approach, particularly in the technology sector. Translating it to the non-profit world has been challenging.

Humanitarian relief and development work comes with uncertainty—conflicts, environmental disasters and funding challenges, for example. These are risks that need to be managed and accounted for when defining our priority projects. On the surface, this kind of changing environment seems to fit the Agile approach well. In practice, adapting Agile principles to suit our specific context has been, at times, demanding.

Some of these challenges have included:

- **Collaborating with external actors.** Working toward shared objectives with implementing partners and other World Vision offices has come with particular challenges such as external dependencies and timeline differences.
- **Conflicting priorities between Agile and non-Agile teams.** As the organization undergoes its Agile transformation, some teams have transitioned earlier than others. This has allowed for a parallel set of priorities rather than unified organizational ones.
- **Shifting expectations around career growth.** Professional development traditionally involves increasing responsibility within a hierarchical structure, but the Agile approach favours gaining and improving skills within a flat structure. We are still adapting to this fundamental difference.
- **Creating space for innovation.** Some team members who transitioned to the Agile approach had “passion projects” that they worked on historically, and these have been difficult to balance while focusing on the organization’s high business value priorities. We understand the need to allow space for innovative and passionate work even when the organization may not see its immediate payoff.

The way forward

World Vision’s ongoing Agile transformation has been enlightening, stretching and productive. As one of many teams to take shape under this new approach, the Impact Value Stream has united people with diverse skills from across the organization, encouraging and maximizing their capabilities while focusing on work that holds highest value for the organization.

This transformation has not come without growing pains. By identifying and reflecting on them, we are better equipped to address areas of conflict, refine our processes and adapt this valuable Agile tool to our own context in the non-profit space.

2021

FINANCIAL ACCOUNTABILITY



FINANCIALS

World Vision Canada is committed to wisely stewarding the resources at our disposal. These resources are not our own—they've been entrusted to us from God through our partners and donors, and we are responsible for managing them in a way that brings maximum benefit for the people we serve.

Inviting accountability through financial transparency is an important part of our stewardship. We follow best practices by sharing our financial statements and donation breakdowns below. For external reviews of World Vision, visit [Imagine Canada](#), [Charity Intelligence Canada](#) and the [Canadian Centre for Christian Charities](#).

SUMMARIZED STATEMENT OF REVENUE & EXPENDITURES

Year ended September 30, 2021, with comparative figures for 2020
(in thousands of dollars)

	2021	2020
REVENUE		
Cash Donations	\$226,267	\$217,603
Gifts-in-Kind	\$140,951	\$116,222
Grants	\$71,885	\$59,766
Investment & Other Income	\$1,729	\$780
Total Revenue	\$440,832	\$394,371
EXPENDITURES		
Programs		
International Relief, Development & Advocacy	\$382,455	\$324,182
Public Awareness & Education	\$2,026	\$2,809
Fundraising	\$35,343	\$43,672
Administration		
Domestic	\$15,517	\$19,636
International	\$4,212	\$4,560
Total Expenditures	\$439,553	\$394,859
Excess (Deficiency) of Revenue over Expenditures	\$1,279	(\$488)

\$ EXPENDITURES

Programs 82.3%



Fundraising 12.0%



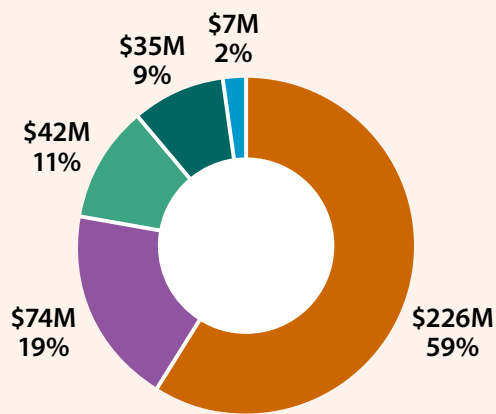
Administration 5.7%



This chart is based on a five-year average of World Vision Canada's annual statement of total expenditures.

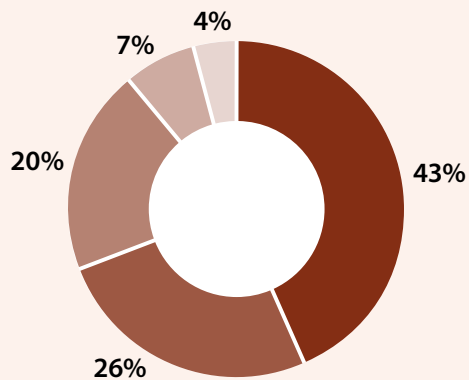
HOW DONATIONS WERE INVESTED IN 2021

PROGRAMS EXPENDITURE BY SECTOR



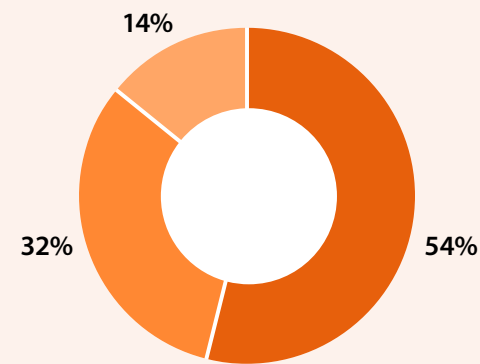
- Livelihoods
- Health
- Education
- Child Protection & Participation
- Water, Sanitation & Hygiene

PROGRAMS EXPENDITURE BY LEVEL OF FRAGILITY



- Most Fragile
- Very Low Developing
- Low Developing
- Medium Developing
- High Developing

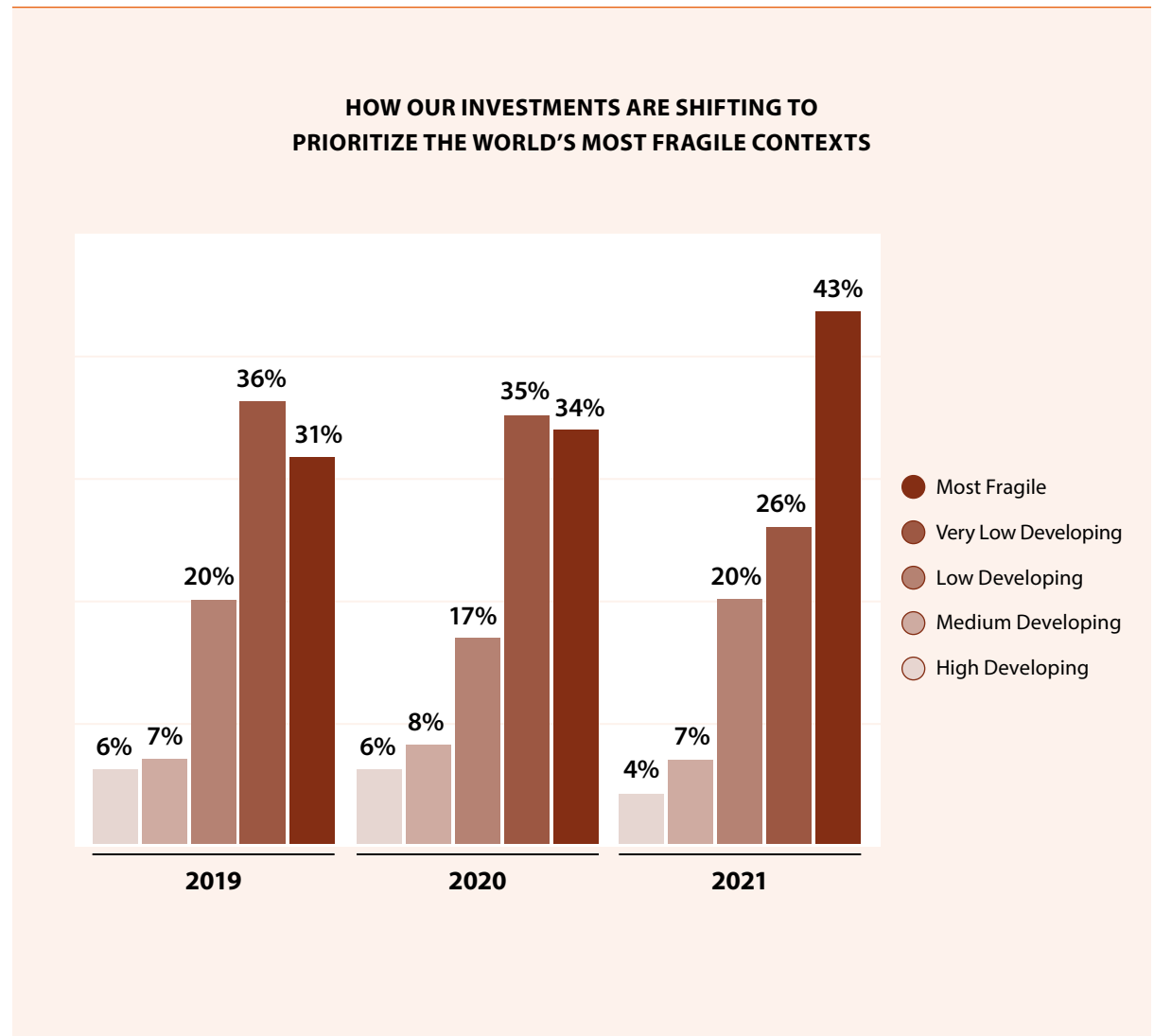
PROGRAMS EXPENDITURE BY PROGRAMMING TYPE



- Development Programming
- Protracted Emergencies and Fragile Contexts
- Emergency Response (Category I-III)

Programs Expenditure = International Relief, Development & Advocacy + Public Awareness & Education.

In [our strategic approach](#) and throughout this report, we discuss our shifting priority toward work in fragile contexts. This graph shows the ongoing change, with a steady increase in funding for **most fragile** across the past three years.



APPENDICES

PRESENTATIONS AND WORK PUBLISHED IN 2021

Conference Presentations & Workshops

Del Col, N., Philips, A., Iminza, R., Cikuru, J., Ataman, D., Tokwani, M. (2021). "COVID-19: World Vision's learning solutions to changing education contexts in Kenya, DRC and Zimbabwe." Comparative International Education Society (CIES2021).

Dibaba, A. (2020). "Ensuring enabling environment for use of multiple micronutrient powders for home fortification of foods consumed by infants and children 6–36 months of age in Myanmar." Micronutrient Forum 5th Global Conference.

Dibaba, A. (2021). "ENRICH adolescent girl power groups: impact assessment and COVID-19 analysis." International Society for the Prevention of Child Abuse & Neglect (IPSCAN). <https://www.wvi.org/child-protection/ispSCAN>

Holte-McKenzie, M., Saifullah, C., Donville, J. (2021). "Gender transformative health programming: Emerging best practices and common approaches." CanWaCH Global Health Impact Exchange.

O'Leary, M. (2020). "A gender-transformative framework for nutrition – understanding the gendered causes of malnutrition." Micronutrient Forum 5th Global Conference.

O'Leary, M. (2020). "Interweaving nutrition and gender equality in programming: The gender-transformative framework for nutrition." Canadian Conference for Global Health.

Ridley-Padmore, T. (2021). "A year of anti-racist cooperation: Where we've gotten, where we're going." OCIC AGM, Symposium & Dialogue Series.

World Vision Canada. (2020). "Building climate resilient and gender equitable health systems for improved SRH/MNH Outcomes." Canadian Conference for Global Health.

World Vision Canada. (2020). "The quality and completeness of MNH data in PHC facilities and their policy implications, Northern Ethiopia." Health Systems Research Symposium.

World Vision Canada. (2021). "Adolescent sexual health and reproductive health, the missing link in the continuum of care: A multi-country study and programming." CORE Group Global Health Practitioner Conference.

World Vision Canada. (2021). "Burden of maternal mental health disorders in Ethiopia, its consequences and recommended health system actions." National Reproductive Maternal Newborn Child and Adolescent Health Conference.

World Vision Canada. (2021). "Global health case report: Telehealth initiative to prevent COVID-19 in Koibarak community, Markawet West subcounty, and Elgeyo Markawet county in Kenya." CCGHR Student-Led Forum.

World Vision Canada. (2021). "Midterm studies and the case of course-correction: How evidence-based decision making supports stronger health programs." Canadian Evaluation Society Conference.

Events & Webinars

Holte-McKenzie, M., Grovers, W., WV youth reps: Sarafina (Ghana), Carlos (Brazil), Dola (Bangladesh), Steph (USA). (2021). "Mobilizing for change: Girls and boys to act now to end GBV." UN CSW65 Parallel Event.

Holte-McKenzie, M., Ogega, J., Douglas, Z., Morgan, C., Thandie Mbeye, N. (2021). "Through the GESI lens: A gender equality and social inclusion framework for inclusive development." UN CSW65 Parallel Event.

Kebede, L. (2021). "Understanding the challenge: Measuring girls' education access, learning and empowerment in fragile contexts." G7 Education Virtual Learning Series.

O'Leary, M. (2021). "Let's talk global women's health!" Women's Week McGill.

World Vision Canada. (2020). ENRICH COVID-19 Learning Series.

World Vision Canada. (2021). *Born on Time* Final Roundtable.

World Vision Canada. (2021). FIAP in action: Results and lessons from the *Born on Time* Project.

World Vision Canada. (2021). "How might we design better SRH/MNH programs to prevent preterm birth in LMICs?: Insights from the *Born on Time* study." Launch of JHU Global Research Webinar.

World Vision Canada. (2021). "Integration of COVID-19 response in an ongoing maternal and child health and nutrition program in Bangladesh, Kenya, Myanmar and Tanzania." CORE Group Global Health Practitioner Conference.

World Vision Canada. (2021). "Roundtable on child protection financing, to discuss the findings from counting pennies: A review of official development assistance to end violence against children." International Child Protection Network of Canada.

Journal Articles, Blogs & Reports

Aidam, B., MacDonald, C., Wee, R., Simba, J., Aubel, J., Reinsma, K., Webb, G. A. (2020). "An innovative grandmother-inclusive approach for addressing suboptimal infant and young child feeding practices in Sierra Leone." *Current Developments in Nutrition*. Vol. 4, Issue 12. <https://doi.org/10.1093/cdn/nzaa174>

Del Col, N. (2021). "Destroyed, alienated, enslaved: Education under attack." <https://www.worldvision.ca/stories/education/education-under-attack>

Dibaba, A. (2021). "Case report: Telehealth initiative project in Koibarak community, Markawet West subcounty, and Elgeyo Markawet county in rural Kenya." *Global Health Annual Review*. Issue 6. <https://journals.mcmaster.ca/ghar/article/view/2699>

Dibaba, A. (2021). "Determinants of COVID-19 vaccine acceptance in six lower- and middle-income countries." <https://assets.researchsquare.com/files/rs-444605/v3/649d4902-6a3f-4881-97db-7b4e2ad99151.pdf?c=1631881418>

Dibaba, A., Holte-McKenzie, M. (2021). "Adolescent Girl Power groups: Building resilience during COVID-19." https://1000dayjourney.ca/wp-content/uploads/enrich_1000dayjourney_covid-19_impact-report_summary.pdf

O'Leary, M. (2020). "A gender-transformative framework for nutrition – advancing nutrition and gender equality together." <https://www.gendernutritionframework.org/>

O'Leary, M. (2020). "New Canadian gender equality solution for global hunger, World Vision Canada website." <https://www.worldvision.ca/stories/gender-equality/canadian-gender-equality-solution-global-hunger>

Ridley-Padmore, T. (2020), "Children's voices at the centre: Lessons from World Vision's child participation models." Inter-agency Network for Education in Emergencies' Commitment to Change: Girls' EIE from Charlevoix to COVID-19 blog series. <https://inee.org/blog/childrens-voices-centre-lessons-world-visions-child-participation-models>

Schulz, S. (2021). "Girls advocating for girls' nutrition in Ethiopia." *Scaling Up Nutrition*. <https://scalingupnutrition.org/news/girls-advocating-for-girls-nutrition-in-ethiopia/>



KEY PARTNERS

Institutional donors contributing \$100,000 or more to World Vision Canada programs in 2021

Crown Agents
 European Union
 Global Affairs Canada
 Humanitarian Coalition
 International Development Research Centre
 International Organization for Migration (IOM)
 United Nations Children's Fund (UNICEF)
 United Nations Development Programme (UNDP)
 United Nations High Commissioner for Refugees (UNHCR)
 United Nations Office for the Coordination of Humanitarian Affairs (OCHA)
 World Bank/Government of Angola
 World Food Programme

Corporations contributing \$100,000 or more to World Vision Canada programs in 2021

Days for Girls International
 Food For Famine Society
 McCarthy Uniforms

Implementing partners

Action Contre la Faim/ Action Against Hunger
 Canadian Society for International Health (CSIH)
 CARE Canada
 Déjardins International Development
 Enablis
 Harvest Plus
 Make Music Matter
 Medair
 Nutrition International
 Plan International Canada
 SANKU Project Health Children
 Save the Children Canada
 Terre des Hommes
 War Child Canada
 World Vision Partnership, Support Offices and National Offices

Strategic research and innovation partners

Concordia University
 FOSDEH (Foro Social de la Deuda Externa y Desarrollo de Honduras)
 Lucky Iron Fish Enterprise
 MASIMO
 SickKids Centre for Global Child Health
 University of Ghana
 University of Ottawa
 University of Toronto
 Wilfrid Laurier University

DETAILED INDICATOR INFORMATION

Definition of indicators

The indicators that measure progress and change in this report are described using precise statements. As much as possible, World Vision works to standardize the indicators used within each of our sectors. This standardization is a priority that we continue to refine and improve.

Measurement and calculations

Data that measures the number of people reached by an intervention are, by and large, direct participants of the cited activity. Exceptions include awareness efforts that rely on media such as radio, and community-wide infrastructure improvements that count the population coverage of the specific area. For people reached by our gift-in-kind shipments, estimations are based on similar programming; they account for loss of resources and avoid double counting.

The overall reach of our sectors (and by extension, our overall portfolio) is calculated using the data extracted from numeric indicators measured by project monitoring, meaning these numbers are not population based and can be traced back to each intervention. Double counting is avoided by tracking all overlapping projects and, when necessary, making conservative assumptions.

Data sources

Data collected for this report came from two main processes:

- **Project monitoring** done continuously throughout the implementation of the project and allowing for shifts in programming. Collection includes participation records and secondary data on coverage.
- **Evaluation and baseline surveys** typically conducted at the beginning and end of a project. Since there is a monetary and human cost to these procedures, the evaluation may not be conducted if the benefits fail to outweigh the costs. When conducted, the main quantitative collection methodology is large-scale surveys.

Breakdown of numeric indicators

Livelihoods

- 9,533 people applied the farmer managed natural regeneration (FMNR) approach to restore and improve pasture, forest and agricultural land. 122 in Ethiopia, 9,411 in Uganda.
- 106 farm demonstration schools and sites were established for farmers to learn new techniques. 13 in Congo, Democratic Republic of the, 1 in Malawi, 12 in Nepal, 80 in Uganda.
- 2,951 active savings groups created settings for members to learn financial skills, save money collectively and gain access to small loans. 501 in Burundi, 18 in Chad, 313 in Congo, Democratic

Republic of the, 40 in Ethiopia, 19 in Ghana, 7 in Guatemala, 10 in Honduras, 25 in Indonesia, 22 in Kenya, 14 in Laos, 94 in Malawi, 162 in Mauritania, 76 in Mozambique, 13 in Niger, 51 in Philippines, 770 in Rwanda, 541 in Senegal, 5 in Sri Lanka, 105 in Tanzania, 160 in Uganda, 5 in Zimbabwe.

- 48,424 people were actively involved in savings groups, providing them with financial literacy training and access to small loans. 100 in Bangladesh, 6,930 in Congo, Democratic Republic of the, 249 in Ghana, 19 in Guatemala, 154 in Honduras, 321 in Laos, 2,010 in Malawi, 1,078 in Mali, 524 in Mauritania, 656 in Mongolia, 324 in Niger, 1,360 in Philippines, 23,104 in Rwanda, 3,562 in Senegal, 3,998 in Sierra Leone, 144 in Sri Lanka, 609 in Tanzania, 3,282 in Uganda.
- 514,705 trees were planted by volunteers and community organizations through reforestation efforts that prevent erosion and make environments more resilient to weather events. 514,705 in Honduras.
- 15,175 community members, including children, received training in disaster risk reduction. 363 in Bangladesh, 291 in China, 535 in Colombia, 64 in Dominican Republic, 5,804 in Ecuador, 38 in El Salvador, 576 in Ethiopia, 699 in Ghana, 6 in India, 157 in Jerusalem - West Bank - Gaza, 677 in Laos, 50 in Mali, 42 in Mauritania, 926 in Mongolia, 69 in Nepal, 30 in Niger, 48 in Philippines, 1,119 in Rwanda, 2,181 in Senegal, 1,328 in Uganda, 172 in Zimbabwe.
- 82,404 people were trained in agriculture and livestock techniques including food production, livestock handling, climate-smart techniques and post-harvest storage methods. 4,944 in Bangladesh, 202 in Bolivia, 3,452 in Burundi, 8 in Cambodia, 393 in Central African Republic, 364 in Chad, 1,500 in Congo, Democratic Republic of the, 1,274 in Ecuador, 783 in El Salvador, 192 in Ethiopia, 24 in Guatemala, 1,392 in Honduras, 1,873 in India, 496 in Indonesia, 21,189 in Kenya, 189 in Laos, 238 in Lebanon, 3,731 in Malawi, 24 in Mali, 110 in Mozambique, 215 in Myanmar (Burma), 338 in Nepal, 598 in Nicaragua, 28 in Niger, 86 in Peru, 16,475 in Rwanda, 564 in Senegal, 387 in Sri Lanka, 18,564 in Tanzania, 2,771 in Uganda.
- 8,468 people were trained in business and entrepreneurial skills, including financial literacy and income-generating activities outside of livestock-rearing and agriculture. 2,526 in Bangladesh, 504 in Cambodia, 10 in Central African Republic, 650 in Congo, Democratic Republic of the, 163 in Guatemala, 440 in Laos, 836 in Mongolia, 471 in Nepal, 560 in Philippines, 450 in Senegal, 513 in Sri Lanka, 1,345 in Uganda.
- 600 communities updated their disaster preparedness plans to provide guidance during emergency situations. 51 in Bangladesh, 2 in Brazil, 2 in China, 4 in Congo, Democratic Republic of the, 3 in Dominican Republic, 242 in Ethiopia, 17 in Guatemala, 132 in India, 3 in Mali, 13 in Mongolia, 12 in Mozambique, 1 in Niger, 3 in Peru, 4 in Senegal, 5 in Sierra Leone, 1 in Sri Lanka, 101 in Uganda, 4 in Zimbabwe.

- 1,755 producer groups were operational, with members working together to create or sell products. 2 in China, 200 in Congo, Democratic Republic of the, 5 in Ghana, 5 in Laos, 580 in Malawi, 25 in Mali, 22 in Mauritania, 2 in Mozambique, 100 in Rwanda, 123 in Senegal, 633 in Sri Lanka, 54 in Uganda, 4 in Zimbabwe.
- 2,119 large and small livestock were distributed as sources of income for families, including poultry, rabbits, goats, cows, pigs and fish. 142 in Bolivia, 1,881 in Burundi, 10 in India, 86 in Malawi.
- 87,019 metric tons of food was distributed to meet families' immediate survival needs. 423 in Angola, 786 in Bangladesh, 1,508 in Burundi, 2,682 in Central African Republic, 737 in Chad, 4,423 in Congo, Democratic Republic of the, 8 in Iraq, 25 in Jordan, 11,366 in Kenya, 11 in Mali, 707 in Niger, 1,483 in Somalia, 12,968 in Sudan, 12,392 in Sudan, South, 14,943 in Tanzania, 13,897 in Uganda, 8,660 in Zimbabwe.
- 1,178,168 people benefitted from cash transfers, giving them freedom and ability to meet their immediate household needs. 21,370 in Afghanistan, 146,849 in Bangladesh, 62,923 in Central African Republic, 27,286 in Colombia, 24,151 in Congo, Democratic Republic of the, 112,904 in Iraq, 27 in Jordan, 61,243 in Mali, 31,241 in Niger, 429,678 in Somalia, 186,572 in Sudan, 68,854 in Sudan, South, 5,070 in Uganda.
- 2,142,111 people benefitted from the provision of food assistance. 6,932 in Angola, 33,850 in Bangladesh, 88,816 in Burundi, 131,770 in Central African Republic, 26,433 in Chad, 172,346 in Congo, Democratic Republic of the, 4,198 in Iraq, 5,739 in Jordan, 273,813 in Kenya, 1,885 in Mali, 9,055 in Niger, 86,093 in Somalia, 280,089 in Sudan, 419,661 in Sudan, South, 228,626 in Tanzania, 211,520 in Uganda, 161,285 in Zimbabwe.
- 114,086 people received support with agricultural resources, including large and small livestock and seeds. 4,721 in Bangladesh, 564 in Bolivia, 56,766 in Burundi, 43 in Cambodia, 4,088 in Central African Republic, 2,600 in Congo, Democratic Republic of the, 4,472 in Ecuador, 202 in Ghana, 22 in Guatemala, 6,132 in Honduras, 52 in India, 970 in Indonesia, 764 in Kenya, 431 in Laos, 1,578 in Malawi, 498 in Nepal, 142 in Peru, 17,976 in Rwanda, 1,538 in Senegal, 895 in Sri Lanka, 9,632 in Tanzania.

Health

- 8,836 malnourished children recovered their health because of nutrition treatment. 793 in Bangladesh, 1,036 in Burundi, 16 in Cambodia, 560 in Chad, 72 in Congo, Democratic Republic of the, 158 in Ethiopia, 22 in Guatemala, 23 in Haiti, 64 in Malawi, 366 in Mali, 90 in Mauritania, 36 in Niger, 1,239 in Rwanda, 2,915 in Senegal, 21 in Sri Lanka, 595 in Sudan, South, 830 in Tanzania.
- 257,196 patient consultations were provided by health professionals through projects supported by World Vision. 59,569 in Afghanistan, 9,627 in Iraq, 40,115 in Somalia, 147,885 in Sudan, South.

- 82,000 patient consultations were provided by community health workers through projects supported by World Vision. 16,613 in Bangladesh, 976 in Burundi, 508 in Cambodia, 82 in China, 20,162 in India, 219 in Laos, 6,076 in Malawi, 212 in Mauritania, 328 in Niger, 32,489 in Rwanda, 3,288 in Senegal, 710 in Sierra Leone, 337 in Zimbabwe.
 - 22,618 people benefitted from psychosocial support activities appropriate for their age and gender. 14,774 in Afghanistan, 450 in Bangladesh, 358 in Lebanon, 4,551 in Mozambique, 2,485 in Sudan.
 - 25,349 children received age-appropriate immunizations to protect them against childhood illness. 1,870 in Chad, 124 in Laos, 3,298 in Mali, 714 in Mauritania, 9,923 in Somalia, 8,838 in Sudan, South, 582 in Zimbabwe.
 - 442,894 people participated in trainings, counseling or activities intended to teach healthy nutrition and feeding practices. 214,084 in Bangladesh, 318 in Bolivia, 67 in China, 570 in Congo, Democratic Republic of the, 2,430 in Ecuador, 9,307 in El Salvador, 162 in Ethiopia, 16 in Guatemala, 13,369 in India, 781 in Iraq, 44,305 in Kenya, 5,017 in Malawi, 1,679 in Mozambique, 8,757 in Myanmar (Burma), 1,289 in Senegal, 199 in Sri Lanka, 24,794 in Sudan, 61,125 in Sudan, South, 54,199 in Tanzania, 426 in Zimbabwe.
 - 4,940,488 people learned how to protect themselves against COVID-19 through awareness sessions. 668,884 in Bangladesh, 20,578 in Bolivia, 13,684 in Cambodia, 203,198 in Chad, 3,163 in Colombia, 10,054 in Dominican Republic, 18,962 in Ecuador, 3,683 in Ghana, 11,878 in Haiti, 66,330 in Indonesia, 5,622 in Iraq, 23,253 in Jerusalem - West Bank - Gaza, 300,536 in Kenya, 860 in Lebanon, 17,909 in Malawi, 15,348 in Mali, 44,816 in Mauritania, 1,594 in Mexico, 39,674 in Mongolia, 13,798 in Mozambique, 255,917 in Myanmar (Burma), 112 in Peru, 5,016 in Philippines, 43,484 in Senegal, 9,498 in Sri Lanka, 3,084,652 in Tanzania, 3,518 in Zambia, 54,467 in Zimbabwe.
 - 1,137 government health staff received training in topics relevant to their roles and responsibilities. 48 in Afghanistan, 0 in Bangladesh, 694 in Ethiopia, 0 in Kenya, 0 in Myanmar (Burma), 64 in Sudan, South, 331 in Tanzania.
 - 21,520 community health workers and volunteers were trained in topics equipping them to provide good care for children and families. 0 in Bangladesh, 44 in Bolivia, 114 in Cambodia, 19,398 in Ethiopia, 601 in Kenya, 19 in Laos, 70 in Mali, 119 in Mozambique, 559 in Myanmar (Burma), 102 in Philippines, 11 in Senegal, 98 in Sudan, 122 in Sudan, South, 263 in Tanzania.
 - 3,568 government health workers received training on the prevention of COVID-19. 406 in Bangladesh, 240 in Kenya, 852 in Myanmar (Burma), 2,070 in Tanzania.
 - 1,289 community health workers received training on the prevention of COVID-19. 38 in Congo, Democratic Republic of the, 774 in Indonesia, 21 in Jerusalem - West Bank - Gaza, 18 in Kenya, 64 in Mali, 58 in Mozambique, 210 in Senegal, 50 in Sri Lanka, 56 in Tanzania.
 - 3,862,807 people received deworming treatment to support their health and development. 689,993 in Burundi, 2,025,000 in Malawi, 22,814 in Mali, 1,125,000 in Sudan, South.
 - 49,054 children under five received micronutrient supplementation such as vitamin A, zinc and micronutrient powders. 23,333 in Bangladesh, 83 in Iraq, 0 in Kenya, 4,160 in Mali, 2,103 in Myanmar (Burma), 19,375 in Tanzania.
 - 12,600 malnourished children received full courses of nutrition treatment with life saving ready-to-use therapeutic food packets. 1,800 in Afghanistan, 2,700 in Angola, 1,800 in Burundi, 2,700 in Congo, Democratic Republic of the, 900 in Sierra Leone, 1,800 in Somalia, 900 in Sudan, South.
 - 2,425,415 protective medical items were provided for health professionals and families, including medical masks, gloves, surgical gowns and eye protection. 51,000 in Afghanistan, 294,860 in Bangladesh, 164,974 in Cambodia, 262,000 in El Salvador, 275,000 in Haiti, 5,000 in Honduras, 11,945 in India, 64,293 in Indonesia, 42,003 in Jerusalem - West Bank - Gaza, 254,250 in Kenya, 53,000 in Lebanon, 31,000 in Mauritania, 86,170 in Myanmar (Burma), 2 in Senegal, 600,000 in Somalia, 200,000 in Sudan, South, 15,400 in Tanzania, 14,518 in Zimbabwe.
 - 3,997 clean birthing kits were distributed to help with safe and healthy deliveries. 3,417 in Afghanistan, 580 in Sudan, South.
 - 1,890,000 ready-to-use therapeutic food packets were distributed, providing a source of emergency nutrition for malnourished children. 270,000 in Afghanistan, 405,000 in Angola, 270,000 in Burundi, 405,000 in Congo, Democratic Republic of the, 135,000 in Sierra Leone, 270,000 in Somalia, 135,000 in Sudan, South.
- ### Education
- 22,898 children attended early childhood development centres. 210 in Ethiopia, 638 in Ghana, 171 in Guatemala, 1,229 in India, 6,365 in Malawi, 1,934 in Mauritania, 5,545 in Rwanda, 94 in Senegal, 4,658 in Tanzania, 209 in Uganda, 1,845 in Zimbabwe.
 - 110,288 children attended in-school or after-school literacy activities. 24,268 in Burundi, 4,264 in Cambodia, 37,142 in Congo, Democratic Republic of the, 520 in Dominican Republic, 768 in Ethiopia, 1,741 in Ghana, 1,827 in India, 18,206 in Malawi, 1,146 in Nepal, 13,401 in Rwanda, 1 in Senegal, 5,339 in Uganda, 1,665 in Zimbabwe.
 - 20,967 youth completed life skills training through World Vision programs. 1,001 in Bangladesh, 688 in Bolivia, 1,686 in Burundi, 14 in China, 1,816 in Colombia, 34 in Dominican Republic, 514 in Ecuador, 2,649 in El Salvador, 48 in Ethiopia, 509 in Georgia, 4,423 in India, 448 in Indonesia, 238 in Jerusalem - West Bank - Gaza, 90 in Kenya, 398 in Lebanon, 222 in Mali, 42 in Mauritania, 250 in Mongolia, 402 in Nepal, 122 in Nicaragua, 96 in Peru, 4,640 in Philippines, 637 in Uganda.
 - 698 Unlock Literacy reading clubs achieved established quality standards, creating fun and educational settings to develop children's literacy. 15 in Bangladesh, 52 in Burundi, 47 in Cambodia, 37 in Chad, 19 in Dominican Republic, 55 in Ghana, 187 in India, 20 in Laos, 30 in Mali, 10 in Mauritania, 40 in Mozambique, 18 in Nepal, 52 in Nicaragua, 11 in Niger, 51 in Senegal, 10 in Sri Lanka, 32 in Tanzania, 8 in Uganda, 4 in Zambia.
 - 15,129 community members were reached through awareness sessions and information on the importance of education. 256 in Chad, 6,261 in Ghana, 8,612 in Sudan, South.
 - 3,785 female and male youth completed values-based entrepreneurship and job skills training through the Youth Ready curriculum. 367 in Bolivia, 257 in Colombia, 656 in Ecuador, 785 in El Salvador, 470 in Guatemala, 761 in Honduras, 489 in Peru.
 - 489 early childhood development centres were established or improved, meeting the established quality standards for young children's education. 12 in Bangladesh, 2 in China, 63 in India, 5 in Mauritania, 27 in Nicaragua, 344 in Rwanda, 1 in Senegal, 10 in Sri Lanka, 2 in Tanzania, 23 in Uganda.
 - 9 schools offered adapted infrastructure for students with disabilities. 3 in Nepal, 6 in Zimbabwe.
 - 226 early childhood development teachers received curriculum training, equipping them to better support young children's learning. 8 in Ethiopia, 39 in Georgia, 29 in Ghana, 69 in India, 11 in Jerusalem - West Bank - Gaza, 18 in Senegal, 52 in Uganda.
 - 1,193 parents and caregivers received training in ways to support their young children's early development, reading and numeracy skills through play. 374 in Bangladesh, 80 in Ethiopia, 119 in Georgia, 159 in India, 102 in Jerusalem - West Bank - Gaza, 40 in Mauritania, 319 in Uganda.
 - 9,103 caregivers received training to support their children's early reading skills using the Unlock Literacy approach. 299 in Bangladesh, 1,591 in Cambodia, 118 in Chad, 438 in Dominican Republic, 42 in Ethiopia, 11 in Guatemala, 201 in Laos, 313 in Nicaragua, 30 in Niger, 244 in Philippines, 3,996 in Rwanda, 781 in Senegal, 17 in Sri Lanka, 300 in Tanzania, 662 in Uganda, 60 in Zambia.
 - 912 members from school management committees and parent teacher associations received training, equipping them to be effective in their roles. 194 in Burundi, 26 in Dominican Republic, 32 in Ethiopia, 50 in Ghana, 20 in India, 209 in Malawi, 82 in Mauritania, 299 in Mozambique.
 - 3,347 teachers received training in topics such as literacy, early childhood development and child-centered approaches. 9 in Bangladesh, 64 in Burundi, 307 in Cambodia, 176 in Chad, 40 in Colombia, 6 in Dominican Republic, 614 in Ecuador, 48 in Ethiopia, 71 in Guatemala, 708 in Honduras, 56 in India, 86 in Indonesia, 30 in Laos, 8 in Lebanon, 405 in Malawi, 100 in Mali, 36 in Mozambique, 40 in Nepal, 56 in Niger, 112 in Peru, 62 in Philippines, 17 in Senegal, 74 in Sri Lanka, 54 in Tanzania, 152 in Uganda, 16 in Zambia.
 - 948,594 children received school supplies and resources for their education including books, backpacks, uniforms and bicycles. 2,073 in Afghanistan, 10,765 in Burundi, 799,103 in Chad, 1,765 in El Salvador, 8,313 in Honduras, 2,716 in Nicaragua, 5,958 in Sierra Leone, 7,826 in Sudan, South, 106,259 in Zambia, 3,816 in Zimbabwe.
 - 163,651 books were shipped, supporting children's education. 1,152 in Afghanistan, 1,293 in Burundi, 133,184 in Chad, 28,022 in Zambia.

Child protection & participation

- 3,113 children under 18 received birth certificates in the past year because of World Vision's work. 66 in Congo, Democratic Republic of the, 650 in Ethiopia, 1,880 in Mozambique, 478 in Niger, 39 in Zimbabwe.
- 60,978 young people participated in groups and clubs bringing them together with their peers to learn new skills and develop positive values. 3,884 in Burundi, 0 in Central African Republic, 5 in China, 10 in Ethiopia, 320 in Georgia, 73 in Ghana, 43,881 in India, 2,543 in Malawi, 3,370 in Mali, 350 in Mauritania, 3,220 in Somalia, 483 in Sri Lanka, 88 in Sudan, 1,362 in Tanzania, 1,389 in Uganda.
- 2,622 service-providers and institutions have improved performance capabilities because of additional equipment, capacity or budget. 11 in Bangladesh, 33 in China, 4 in Ethiopia, 1 in Ghana, 16 in Kenya, 2,500 in Malawi, 25 in Mali, 2 in Senegal, 10 in Sierra Leone, 14 in Tanzania, 6 in Zimbabwe.
- 119,421 children and youth participated in activities aimed at ending violence against children. 672 in Bangladesh, 20 in Bolivia, 1,960 in Burundi, 401 in Cambodia, 1,024 in Chad, 4 in China, 31 in Colombia, 86 in Dominican Republic, 780 in Ethiopia, 149 in Guatemala, 39,263 in India, 182 in Jerusalem - West Bank - Gaza, 476 in Kenya, 22 in Lebanon, 8,444 in Mali, 2,806 in Mongolia, 442 in Nepal, 8,607 in Nicaragua, 2,160 in Niger, 1,188 in Philippines, 45,854 in Rwanda, 200 in Sierra Leone, 2,448 in Tanzania, 2,202 in Uganda.
- 9,109 girls and boys received child protection case management services. 31 in Afghanistan, 5 in Bangladesh, 28 in Congo, Democratic Republic of the, 10 in Ethiopia, 95 in Georgia, 5,677 in India, 42 in Lebanon, 1,406 in Mozambique, 76 in Nicaragua, 1,287 in Somalia, 122 in Sudan, 319 in Uganda, 3 in Zambia, 8 in Zimbabwe.
- 621,739 children and adults participated in trainings on child protection, including gender-based violence, positive parenting, children's rights and early marriage. 3,487 in Afghanistan, 4,971 in Bangladesh, 584 in Bolivia, 2,596 in Burundi, 11,279 in Cambodia, 100 in Central African Republic, 7,164 in Chad, 539 in China, 8,532 in Colombia, 5,872 in Congo, Democratic Republic of the, 304 in Dominican Republic, 74 in El Salvador, 487,140 in Ethiopia, 141 in Georgia, 8,133 in Ghana, 167 in Guatemala, 6,722 in Haiti, 1,300 in Indonesia, 86 in Jerusalem - West Bank - Gaza, 214 in Kenya, 118 in Lebanon, 55 in Malawi, 23,586 in Mali, 454 in Mauritania, 3,754 in Mongolia, 804 in Mozambique, 1,415 in Nepal, 6,529 in Nicaragua, 636 in Niger, 2,988 in Peru, 430 in Philippines, 684 in Rwanda, 11,955 in Senegal, 128 in Sierra Leone, 1,118 in Sri Lanka, 7,757 in Sudan, 59 in Sudan, South, 814 in Tanzania, 6,248 in Uganda, 254 in Zambia, 2,548 in Zimbabwe.
- 21,678 people were involved or trained in community-level advocacy and social accountability activities aimed at holding their governments responsible for the provision of basic services. 190 in Bangladesh, 40 in Cambodia, 538 in Chad, 755 in Colombia, 60 in Dominican Republic, 1,770 in Ethiopia, 41 in Georgia, 4,537 in India, 219 in Kenya, 320 in Mali, 16 in Mauritania, 1,500 in Mongolia, 40 in Mozambique, 1,123 in Myanmar (Burma), 40 in Niger, 2,134 in Rwanda, 30 in Senegal, 8,064 in Tanzania, 261 in Zimbabwe.

- 1,241 community-based organizations, faith-based organizations and other community partners were actively working for the wellbeing of children. 18 in Burundi, 81 in Cambodia, 8 in Chad, 1 in China, 16 in Congo, Democratic Republic of the, 41 in Dominican Republic, 359 in Ethiopia, 55 in Ghana, 11 in Haiti, 261 in India, 121 in Kenya, 72 in Mali, 6 in Mauritania, 3 in Niger, 11 in Peru, 87 in Senegal, 9 in Sierra Leone, 81 in Tanzania.
- 520 community groups engaged in Citizen Voice and Action activities, calling on their governments to deliver the basic services that have been promised. 1 in Dominican Republic, 20 in Ethiopia, 5 in Ghana, 392 in Honduras, 1 in India, 3 in Malawi, 14 in Mali, 1 in Peru, 42 in Rwanda, 1 in Sri Lanka, 34 in Tanzania, 6 in Zimbabwe.
- 5,119 community leaders, faith leaders and local partners were trained to understand and address underlying issues that make children vulnerable. 769 in Bangladesh, 50 in Cambodia, 310 in Congo, Democratic Republic of the, 20 in Ethiopia, 18 in Ghana, 778 in Honduras, 2,315 in India, 274 in Indonesia, 428 in Kenya, 24 in Mali, 19 in Mozambique, 66 in Senegal, 10 in Sri Lanka, 24 in Tanzania, 14 in Uganda.
- 1,003 community leaders and representatives from partner organizations received training, equipping them to be more effective in their roles. 78 in Guatemala, 418 in Mali, 240 in Mauritania, 182 in Peru, 85 in Senegal.

Water, sanitation & hygiene

- 202 communities were certified as open defecation free, meaning they have shifted to using toilets rather than defecating in the open. 41 in Cambodia, 2 in Ethiopia, 4 in Ghana, 5 in Haiti, 6 in Mali, 3 in Senegal, 18 in Sudan, 33 in Tanzania, 90 in Zambia.
- 467,077 people gained access to sanitation facilities at home or school. 1,881 in Bangladesh, 688 in Bolivia, 15,224 in Burundi, 19,898 in Cambodia, 16,250 in Chad, 306 in Congo, Democratic Republic of the, 10,968 in Ethiopia, 582 in Ghana, 2,256 in Guatemala, 2,997 in India, 2,146 in Indonesia, 212 in Kenya, 7,346 in Mali, 485 in Nepal, 286 in Nicaragua, 18,598 in Niger, 256,526 in Rwanda, 596 in Senegal, 1,432 in Sri Lanka, 21,656 in Sudan, 68,110 in Tanzania, 18,634 in Zambia.
- 828,135 people had access to handwashing facilities at home or school. 3,086 in Bolivia, 8,028 in Burundi, 26,327 in Cambodia, 824 in Congo, Democratic Republic of the, 12,942 in Ethiopia, 1,400 in Ghana, 4,382 in Guatemala, 2,870 in Haiti, 8,627 in India, 5,420 in Mali, 1,370 in Niger, 638,227 in Rwanda, 10,550 in Senegal, 7,286 in Sierra Leone, 63,660 in Tanzania, 14,052 in Uganda, 19,084 in Zambia.
- 307,394 people gained access to safe drinking water. 2,422 in Bangladesh, 1,492 in Bolivia, 6,110 in Burundi, 9,216 in Cambodia, 32,890 in Chad, 7,798 in Ethiopia, 508 in Ghana, 1,913 in Guatemala, 13,672 in Honduras, 9,382 in Mali, 260 in Nicaragua, 79,998 in Niger, 70,525 in Rwanda, 0 in Senegal, 1,683 in Sri Lanka, 34,077 in Sudan, South, 28,560 in Tanzania, 6,888 in Zambia.
- 1,263,639 people were trained or involved in community water, sanitation or hygiene initiatives. 1,744 in Afghanistan, 90,387 in Bangladesh, 1,964 in Bolivia, 54 in Burundi, 42,052 in Cambodia, 15,811 in Chad, 12,718 in Congo, Democratic Republic of the, 7,560 in Dominican Republic, 1,562 in El Salvador, 38,998 in Ethiopia, 3,902 in Ghana, 451 in Guatemala, 6,233 in Haiti, 3,182 in Honduras, 4,901 in India, 5,959 in Iraq, 0 in Kenya, 11,465 in Malawi, 41,192 in Mali, 128 in Mauritania, 16,774 in Myanmar (Burma), 2,933 in Nicaragua, 1,930 in Niger, 647,190 in Rwanda, 80 in Senegal, 3,859 in Somalia, 974 in Sri Lanka, 13,286 in Sudan, South, 274,294 in Tanzania, 12,056 in Zambia.
- 99 schools had adequate menstrual hygiene management facilities in place. 2 in Congo, Democratic Republic of the, 6 in Nicaragua, 77 in Rwanda, 2 in Senegal, 12 in Tanzania.
- 293 water, sanitation and hygiene (WASH) committees were established or reactivated, with training for members. 8 in Bangladesh, 4 in Bolivia, 19 in Burundi, 29 in Cambodia, 2 in Congo, Democratic Republic of the, 1 in Dominican Republic, 6 in Ethiopia, 38 in Ghana, 7 in Guatemala, 1 in Haiti, 8 in Indonesia, 9 in Nicaragua, 22 in Niger, 29 in Senegal, 6 in Sri Lanka, 74 in Tanzania, 25 in Uganda, 5 in Zambia.
- 3,610 sanitation facilities, including latrines and garbage disposals, were constructed or updated in schools, homes and health centres. 200 in Chad, 0 in Congo, Democratic Republic of the, 2,095 in Guatemala, 217 in Haiti, 22 in India, 4 in Mali, 2 in Mozambique, 17 in Nicaragua, 924 in Rwanda, 48 in Senegal, 40 in Somalia, 5 in Sri Lanka, 36 in Tanzania.
- 2,945 water sources were constructed, rehabilitated or improved, providing safe water for children and families to drink. 508 in Cambodia, 0 in Congo, Democratic Republic of the, 3 in Ghana, 341 in Guatemala, 9 in Haiti, 10 in Honduras, 500 in India, 1 in Kenya, 1,432 in Rwanda, 40 in Senegal, 96 in Tanzania, 5 in Zambia.
- 223 community members, including vendors, received water, sanitation and hygiene (WASH) training, including the management, construction and maintenance of WASH facilities. 25 in Chad, 198 in Rwanda.
- 11,430 reusable menstrual hygiene kits were distributed for adolescent girls and women. 6,468 in Afghanistan, 4,962 in Somalia.
- 253,458 people received hygiene products and kits to support their health and wellbeing. 8,129 in Afghanistan, 2,449 in Burundi, 9,681 in Cambodia, 899 in Central African Republic, 122,864 in Chad, 2,123 in El Salvador, 13,628 in Honduras, 403 in India, 98 in Nepal, 88,222 in Rwanda, 4,962 in Somalia.

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Drew Fitch

Chair, World Vision Canada Board of Directors

“World Vision Canada’s independent Board of Directors unreservedly approves the financial statements in this Annual Report. As careful stewards of your gifts, our goal is to ensure that your donation helps transform the lives of the most vulnerable children around the world. We are deeply grateful for your support.”



WORLD VISION CANADA is federally incorporated and located in Mississauga, Ontario.

For more information, or for a copy of our latest audited financial statements, please visit our website at www.worldvision.ca.

You may also send an email to info@worldvision.ca or contact the Director, Operational Excellence at [1-800-268-4888](tel:1-800-268-4888).



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In this fiscal year, World Vision Canada anticipates raising \$384 million in total revenue for its community development, emergency relief and advocacy work, of which approximately 11.8% will be used for necessary fundraising. In cases where donations exceed what is needed or where local conditions prevent program implementation, World Vision Canada will redirect funds to similar activities to help people in need.