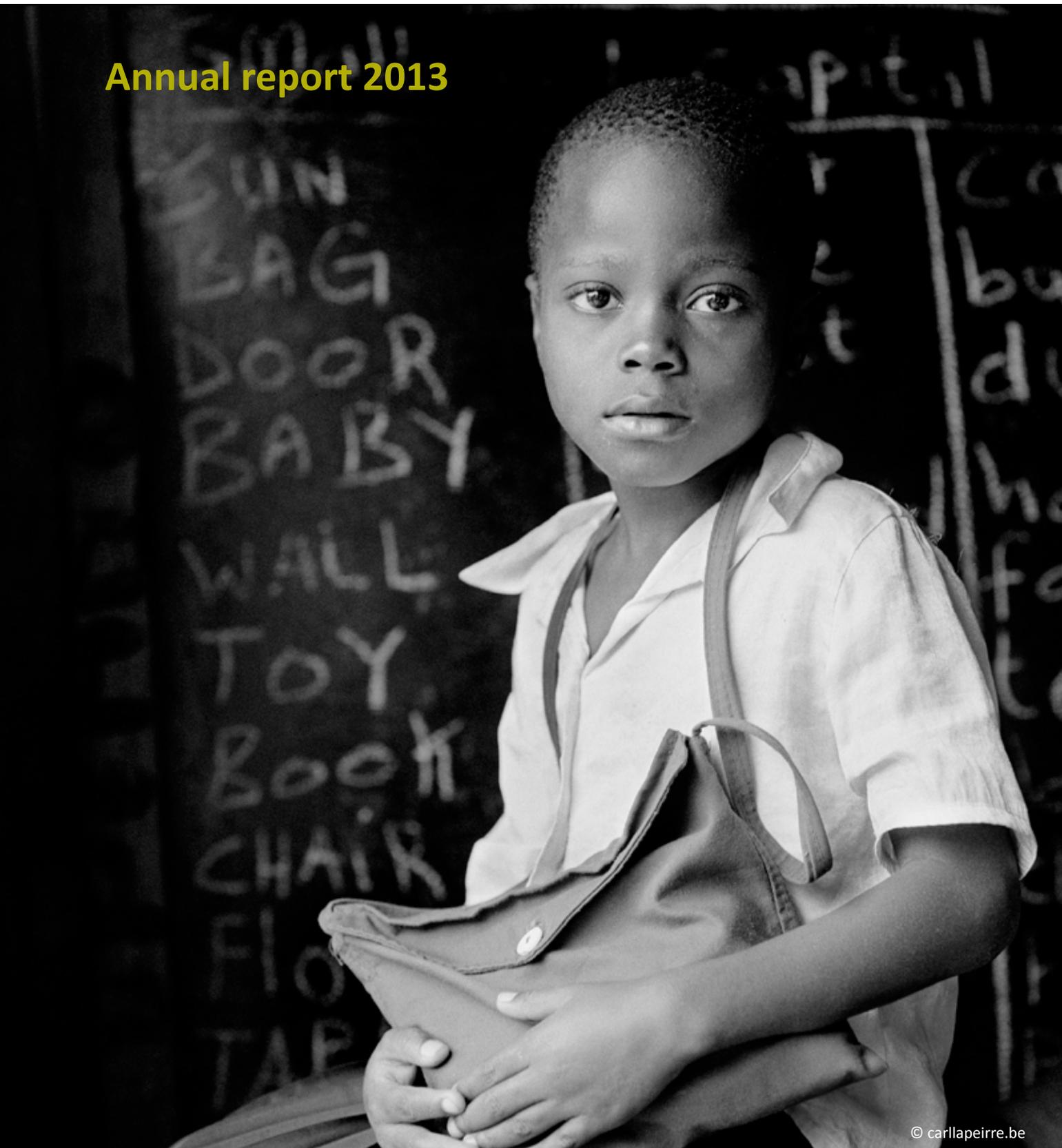


Annual report 2013



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NGO Brothers of Charity
International cooperation

mental health care

education

care for people with a disability



Centre for children with a physical disability in Gatagara, Rwanda ▲

President's message

It is with great pleasure that we present you the 2013 annual report of Fracarita International. It will give you an overview of the activities in our head office as well as in the different countries in Africa, Asia and Latin America where Fracarita International has its regional offices.

In 2013 we focused on capacity building. As an international NGO of the Congregation of the Brothers of Charity, it is Fracarita International's goal to improve the quality of the local services, to professionalise the local management, and to stimulate local fundraising. Seminars were organised for that purpose, both in Africa and in Asia, for the local managers and the regional coordinators. They were trained in leadership skills and were taught how to set up successful local fundraising projects and income-generating activities for the services.

This annual report presents the achievements in our focus countries, the countries that received our special attention this year. We realise that this new approach of striving for more self-reliance and capacity building requires a change in mentality within the organisation. It requires time and specific guidance. We are now implementing this new approach in the focus countries first and it is our intention to extend it to other countries later on. As a result, we will come to a new working method for the entire organisation over time.

“We want to be an advocate for those who cannot stand up for their own rights.”

The goals that Fracarita International has set for itself are challenging. They focus on an increase of quality of our service as Brothers of Charity in education, the care for people with disabilities, and mental health care. With this quality

increase, we aim to raise the quality of life of young people, people with a disability or mental illness and others in need who request our care. In the end, it is about improving and restoring the human dignity of those whose dignity has been affected because of their specific living conditions. As such, we want to be an advocate for those people who cannot stand up for their own rights. This is how we want to interpret our consultative status with the United Nations.

Fracarita International can draw upon a vast experience. In 1807, the Brothers of Charity started a network of support and care in Belgium. Today, they are active in 31 countries. In addition to having a clear inspiration, which has its roots in the Gospel and finds its strength in the conviction that God is love for all without exception, they want to put this charity into practice in a professional way. Real charity will indeed lead to a higher level of professionalism. And, as such, the Brothers of Charity reveal their specificity in the field of support and care. Charity is what makes the difference; charity as a dynamic process that has its roots in love, is guided by profound compassion, and is translated into professional support and care. It is always focused on the promotion of the person.

We thank those many people, groups, and organisations that supported us to help us realise these goals, and we hope that, in the end, the activities of Fracarita International can be noticeable and tangible in the lives of young people, the sick, people with disabilities, and the poor who are calling on our service.



Bro. René Stockman, PhD
President of Fracarita International



Vision & Mission

As NGO for development cooperation of the Brothers of Charity, Fracarita International wishes to dedicate itself to the challenge of improving the living conditions of the most vulnerable people. It is our mission to **increase their quality of life**.

To this end, we wish to focus on two core values:

- **their personal rehabilitation as unique human beings**
- **their reintegration in society as active members of their community**

“Increasing the quality of life of the most vulnerable people”

In order to increase the quality of life for these people, we want to mobilise people and financial resources in the North and set up, develop and support initiatives in the South together with local Brothers of Charity and other partners. Capacity building in the field of personal rehabilitation and social reintegration of our target groups is therefore crucial to us.

School for special education in Goma, DR Congo ▼



International governance

When the governance structure of Fracarita International was developed, special attention was paid to ensure that the organisation is not only in word but also in deed a truly **international** organisation. Brothers and co-workers from different parts of the world and with different cultural backgrounds are therefore involved in the governance structure and give direction to the organisation. Cultural diversity is really a gift for our organisation.

Another element that was incorporated into the governance structure is the principle of **subsidiarity**. Fracarita International is convinced that many tasks could be performed more effectively and in a more sustainable way at country level than at international level. That is why the 18 country offices form the centrepiece of our structure and are strongly encouraged to take responsibility with regard to local fundraising, monitoring and training. Nevertheless, Fracarita International continues to support the country offices by taking up activities that can best be organised at

international level such as international fundraising, stimulating the international solidarity within the congregation, providing training in capacity building to the country offices and international representation.

A third element that is typical of Fracarita International's organisation structure is that the NGO is still **embedded in the congregation**, unlike many other NGOs founded by religious orders. The leading and decision making positions within Fracarita International are still held by the Brothers of Charity themselves to ensure that the congregation and the NGO act along the same lines.

Governance structure:

General Assembly:

The General Assembly is Fracarita International's sovereign body. It meets at least once a year.

President: Bro. René Stockman (BEL)

Members: Bro. Jos Mathijssen (BEL), Bro. Jean Mbeshi (DRC), Bro. Victor Hugo Merine Conde (PER), Bro. Adrian Hartotanojo (IDN), Bro. Godfried Bekaert (BEL), Bro. Joel Ponsaran (PHL), Bro. Paulin Kindambu (DRC), Bro. Veron Raes (BEL)

Governing Board:

The Governing Board is the deliberative body responsible for controlling the management activities of the Executive Committee.

President: Bro. René Stockman (BEL)

Members: Bro. Adrian Hartotanojo (IDN), Bro. Jean Mbeshi (DRC), Bro. Victor Hugo Merine Conde (PER), Bro. Jos Mathijssen (BEL)

Executive Committee:

The Executive Committee is the executive body of Fracarita International and supervises the implementation of decisions taken by the General Assembly and Governing Board and represents the organisation at international level.

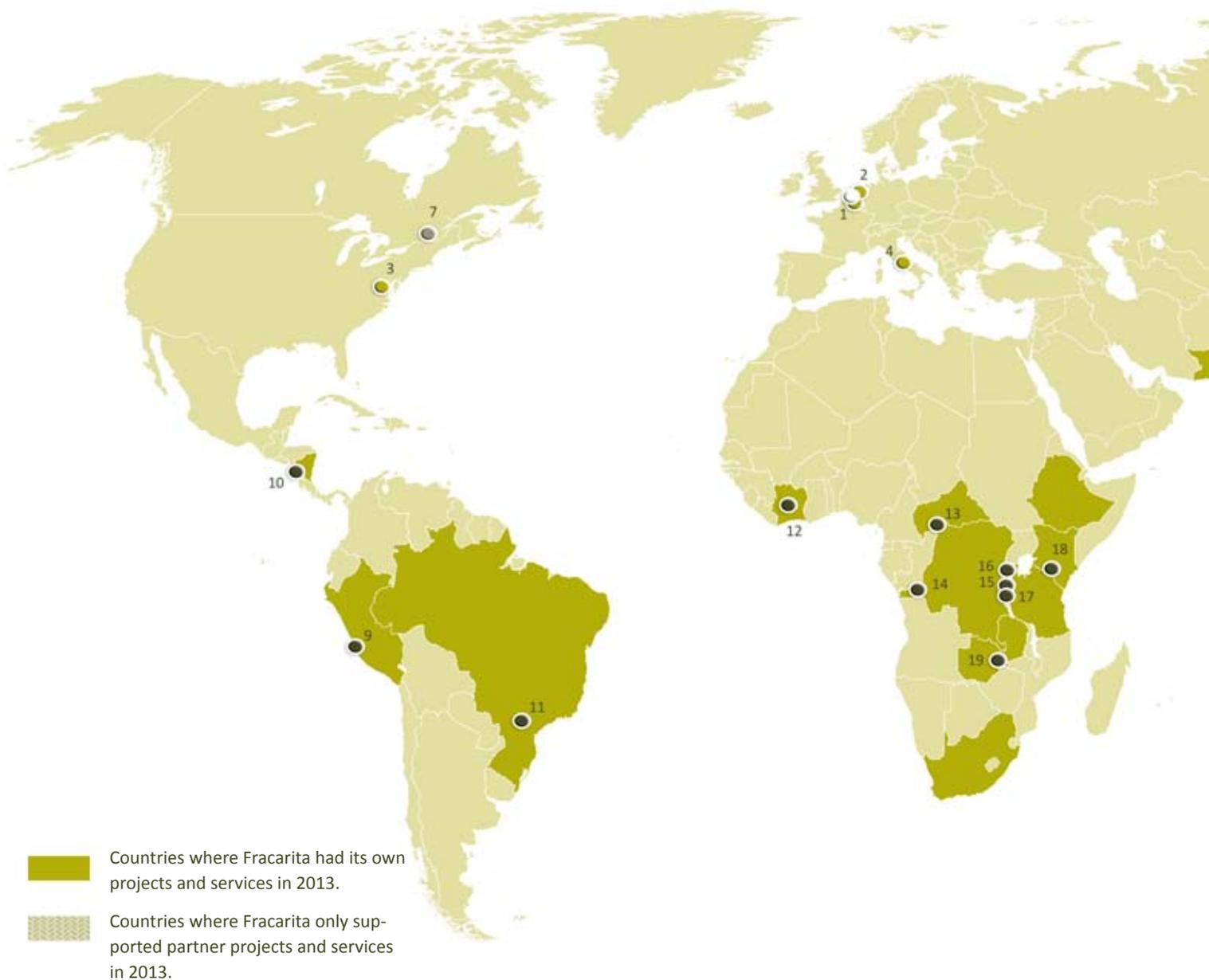
International Development Office:

This body coordinates and supports the different country offices of Fracarita.

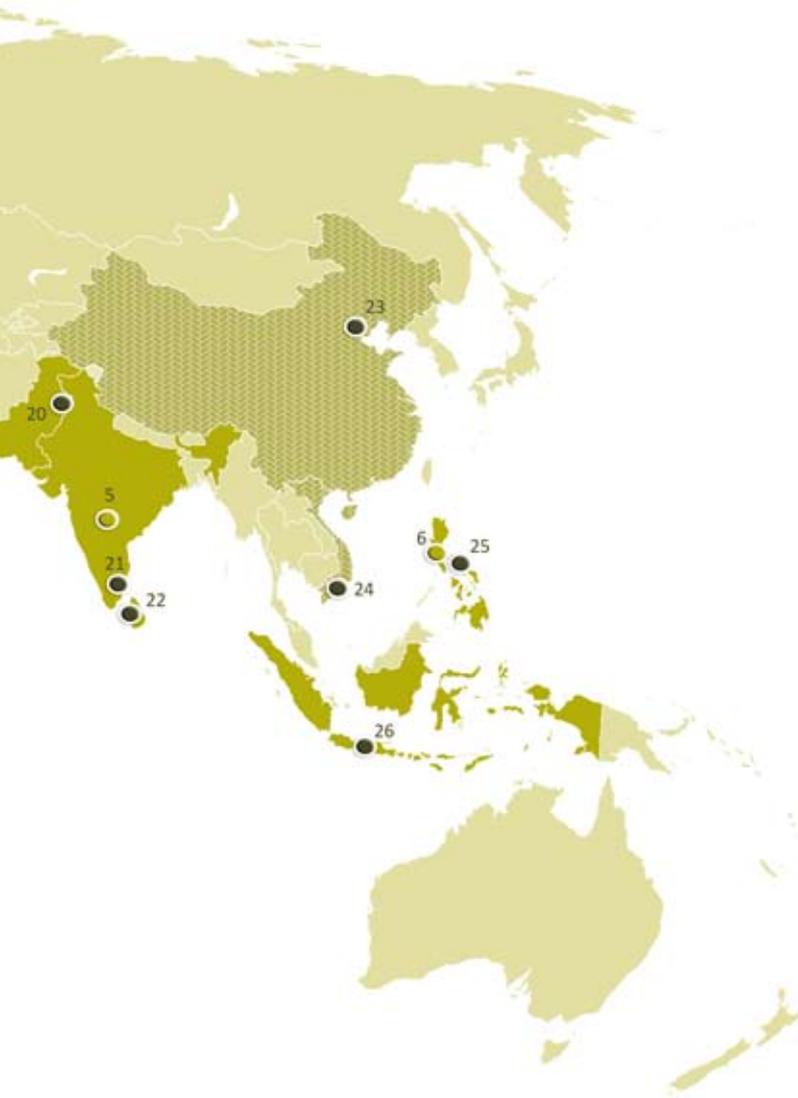
◀ See our organisation chart for an overview of our NGO's structure:



Where does Fracarita International work?



In 2013 Fracarita supported thousands of people through 106 services in 19 countries in Latin America, Africa and Asia.



Head office:

Central services, based in Bruges, Belgium.



Country offices:

Monitor the project implementation locally and are responsible for local fundraising and income generating activities.

Latin America:

- 9. Fracarita Peru, Lima
- 10. Fracarita Nicaragua, Granada
- 11. Fracarita Brazil, São Sebastião da Amoreira

Africa

- 12. Fracarita Ivory Coast, Yamoussoukro
- 13. Fracarita CAR, Bangui
- 14. Fracarita DRC, Kinshasa
- 15. Fracarita Burundi, Bujumbura
- 16. Fracarita Rwanda, Kigali
- 17. Fracarita Tanzania, Kigoma
- 18. Fracarita Ethiopia & Kenya, Nairobi (KEN)
- 19. Fracarita Southern Africa, Lusaka (ZMB)

Asia

- 20. Fracarita Pakistan, Lahore
- 21. Fracarita India, Karaikudi
- 22. Fracarita Sri Lanka, Ja Ela
- 23. Fracarita China, Beijing
- 24. Fracarita Vietnam, Ho Chi Minh
- 25. Fracarita Philippines, Tabaco
- 26. Fracarita Indonesia, Yogyakarta

Regional Fundraising Offices

Provide material, financial and professional support to the country offices.



Current

- 1. Fracarita Belgium, Ghent
- 2. Fracarita Netherlands, Eindhoven
- 3. Fracarita USA, Washington
- 4. Fracarita Italy, Rome
- 5. Fracarita India, Hyderabad
- 6. Fracarita Philippines, Manila



Planned

- Planned regional fundraising offices:
- 7. Fracarita Canada, Montreal



International representation

Representation on international bodies

- 27. ECOSOC, New York, USA
- 28. International Catholic Centre of Geneva, Switzerland

Focus Countries

Focusing and setting examples

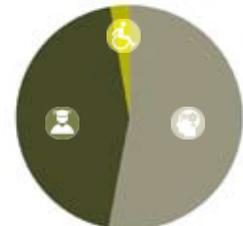
Fracarita International supports services in 19 countries in Latin America, Africa and Asia. In 2012 the organisation decided to select five country offices that would receive a closer and more specific follow-up by Fracarita International: **Tanzania, India, Indonesia, Peru and Nicaragua**. Their selection was based on their potential with regard to the development of new social projects, income generating activities and local fundraising and the human resources that were available. These country offices and their respective services should become models for the other 14 country offices, they should set an example to the other countries of how our core activities (education, mental health care and care for persons with a disability) can be continued in a sustainable way by upgrading the quality of the services and by increasing their financial self-reliance and decreasing their dependence on financial support from the North.

On the next pages, we would like to present you the activities and results of these five focus countries for 2013.

Data on the services in our five focus countries:

	<p>Mental health care:</p> <ul style="list-style-type: none"> • 7.500 men, women and children received mental health care (incl. addiction care) • Total expenses: € 375.805
	<p>Education:</p> <ul style="list-style-type: none"> • 6.275 children and adolescents received some form of education (primary, secondary or higher), training, or stayed at a youth centre • Total expenses: € 828.210
	<p>Care for persons with a disability:</p> <ul style="list-style-type: none"> • 383 children and adults with disabilities could gain greater independence through rehabilitation programmes and special needs education • Total expenses: € 341.710

Beneficiaries:



Expenses:



Income Generating Activities (IGA):



Traditionally, overseas funding has helped many NGOs in the South to get started, to develop their work and even to grow into substantial institutions. Today, most of the necessary funds to run our services come from the North. This is a weakness that we want to overcome by stimulating our country offices to set up income generating activities so that in the distant future they can continue regardless of whether or not they receive funds from the North. With that goal in mind, a number of income-generating projects will be pursued to generate revenue that can be reinvested in our services for mental health care, care for persons with a disability and education. In 2013, the services in our

focus countries could on average cover 1 % of their total expenses through income generating activities and 6 % by local fundraising. As most income generating activities are still at the planning stage today, we are confident that the percentage of income generating activities will continue to grow over the next years.

Handicrafts made by psychiatric patients in Ayacucho (Peru) as a small scale income generating activity ▼



Focus Tanzania

COUNTRY OFFICE:

Staff: 2

Coordination:

Bro. Gilbert Kilassa Kato

Office: Kigoma



SERVICES:

Number: 10

Beneficiaries: 8.324

Female beneficiaries: 50%

Staff: 146

Volunteers: 57

Total annual expenses: € 465.825

Income from IGA*: 2 %

Income from local fundraising: 13 %

* Income generating activity



Beneficiaries:



Expenses:



1

Education for refugees and vulnerable local youth

Problem

Kigoma Region in the West of Tanzania is one of the poorest regions of the country. The quality of education in the Region is often very poor and opportunities for higher education are very limited. Especially for the 60.000 Congolese who are living in the UNHCR refugee camps and for many local youth who struggle to survive and do not have the financial means to pay school fees.

How we help

Ahadi, the international institute for distance learning of the Brothers of Charity, organises the official national final exams for primary and secondary education in the Congolese refugee camps in collaboration with the Congolese Ministry of Education. In addition, Ahadi tries to upgrade the quality of education in the camps by training unqualified teachers. It also organises bachelor and advanced diploma programmes for refugees and deprived youth in Kigoma through distance learning: social work, management or economics. The social work programme can also be followed in a traditional residential learning environment at Ahadi's Newman Institute of Social Work in Kigoma. The Brothers of Charity also manage a High School in Kigoma where much attention is paid to the quality of education. Many of its students come from a poor socio-economic background. In order to improve the quality of education in the region, Ahadi set up an educational resource centre for teaching staff and students, including a library and two computer classes

Results

In 2013, 1.546 children obtained their official Congolese diploma of primary education in the camps and 514 adolescents obtained their diploma of secondary education. 104 teachers received an advanced training, 500 peace animators were trained and 97 students followed higher studies in social sciences, management or economy. 102 students studied at the Newman College, the high school of the Brothers of Charity in Kigoma.



Sheltered Home Bangwe, Kigoma, Tanzania ▲

2

Youth care for homeless children with special needs

Problem

The town of Kigoma has many disadvantaged children due to the poor economic situation of the region. Hundreds of them live in the streets as their family can no longer take care of them or as they have become orphans, often due to HIV. Others have a disability or are ill and were abandoned as their relatives could not offer treatment or appropriate care. In the street they get in touch with drugs and earn money by begging or doing the most humiliating jobs.

How we help

The Brothers of Charity set up the Maendeleo Youth Centre for homeless children and adolescents in Kigoma. The centre gives them hospitality and the chance to grow as human beings in a caring community. Children and adolescents with different backgrounds and different needs live together and learn to take responsibility and to take care of each other. They are given meals, medical treatment, a place to sleep, education. But what's most important: they are being listened to and feel understood.

For the specific target group of homeless children with a mental disability, the Sheltered Home Bangwe was set up. This home functions on the same principles as the Maendeleo Youth Centre, but gives very specific care and education in order to maximise the children's potential and self-reliance.

The Brothers of Charity also support a primary school for orphans and other disadvantaged children, called Mwocachi Primary School.

Results

In 2013, about 200 children were living in the Maendeleo Youth Centre or received support from it. The Youth Centre also supported the Mwocachi Primary School where some 70 disadvantaged children went to school. The Sheltered Home Bangwe took care of 34 children with a mental disability.

NEWSFACT 2013

Canadians with special needs conquer Mt. Kilimanjaro

On March 13th, a group of staff and special needs members of Lo-Se-Ca Foundation, an organisation in Canada (St. Albert) that provides an outlet for people with disabilities, climbed to the summit of Mt. Kilimanjaro, the highest mountain in Africa. The group had been training for a year and a half to prepare for this challenge. Their climb serves as a fundraiser for the Sheltered Home Bangwe, the project of the Brothers of Charity for children and adolescents with a mental disability in Kigoma.



3

Mental health care

Problem

Mental illness remains a taboo among many Tanzanians. That's why persons with a mental disorder in Tanzania often lead a hidden existence on the margins of society. Relatives of the patient lack the knowledge or the means to provide appropriate care. In some cases, the situation of the patients deteriorates and the family is no longer capable of taking care of their relative. As a consequence, the patients is locked up at home or is abandoned to the streets.

How we help

The Brothers of Charity raise awareness among the local population on mental illness and the positive impact of professional mental health care. They set up two psychiatric centres in the Kigoma Region. These are the only professional psychiatric facilities in a region the size of Denmark. The Saint Cornelius Mental Health Centre Kasaka offers ambulatory mental health care just outside the city of Kigoma. The centre also provides inpatient care for acute and chronic patients. The second centre, called Saint Dymphna, is a psychiatric rehabilitation centre and is located in the rural village Marumba. The peaceful environment creates an excellent setting to enable patients to recover through adapted therapy and medication.

Results

In 2013, both centres conducted more than 8.000 psychiatric consultations and hospitalised more than 200 patients. Most of them could reintegrate into society after an intensive rehabilitation program.

NEWSFACT 2013

Water for the psychiatric centre

Since September 2013, the Saint Cornelius Mental Health Centre of the Brothers of Charity in Kigoma, has its own borehole that ensures a constant supply of drinking water for the daily activities in the centre. Solar panels provide electricity to pump up the groundwater, which makes that the system can still function in case of a power failure of the local electricity network. The borehole was funded by Belgian donor organisations and private donors.



Saint Cornelius Mental Health Centre Kasaka , Kigoma, Tanzania ▼





Saint Cornelius Mental Health Centre Kasaka , Kigoma, Tanzania ▲



Income generating activities by Fracarita Tanzania:

- In April 2013, Fracarita Tanzania and the Burundian NGO Action Humanitaire contre la Délinquance (AHD) started the preparation of an innovative project in Kigoma. Vulnerable local youth will be trained in plumbing, electricity, welding and carpentry in order to increase their self-reliance: “better to teach them how to fish instead of just giving them fish” is the underlying idea. During their training, they will renovate a small hotel (Aqua Lodge) of which the future revenues will be used as a source of income for the many projects of Fracarita Tanzania in the field of mental health care, education and care for persons with a disability.
- In 2013, a new agricultural project was planned for the Saint Cornelius Mental Health Centre in Kasaka. The project, consisting of 10 acres of banana trees, 6 acres of cassava and 10 acres of corn, will allow the psychiatric centre to expand its range of occupational therapy activities for its patients and will generate income to cover part of the daily running costs of the centre.

NEWSFACT 2013

Fracarita International joins forces with Burundian NGO

Fracarita International signed a three year cooperation agreement with the Burundian NGO Action Humanitaire contre la Délinquance (AHD). Both NGOs decided to join forces in their search for funds to finance their current and new projects in Rwanda, Burundi and Tanzania.

AHD was founded some years ago by Gaston Niyonzima. In the aftermath of the Burundian civil war, he decided to set up a vocational training in car mechanics for the countless adolescents who lived on the streets, disoriented by the war. Today, AHD is training dozens of illiterate youngsters in Burundi. Those who graduated in the past years, are now employed in service stations in Bujumbura or have started their own business.

AHD, with their wide experience in entrepreneurial skills training, agreed to assist Fracarita International to train their staff to develop income generating activities for their social projects and to create sheltered workshops for Fracarita’s beneficiaries (people with disabilities or a mental disorder) in Burundi, Rwanda and Tanzania.

Focus: India

COUNTRY OFFICE:

Staff: 2

Coordination:

Bro. Wilfred Swamynathan
Office: Karaikudi, Tamil Nadu



SERVICES:

Number: 5

Beneficiaries: 236

Female beneficiaries: 30%

Staff: 17

Volunteers: 0

Total annual expenses: € 61.810

Income from IGA*: 0 %

Income from local fundraising: 0 %

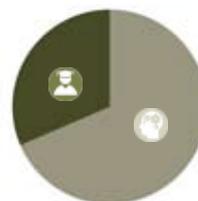
* Income generating activity



Beneficiaries:



Expenses:



1

Education for tribal children

Problem

The average literacy rate in the Northern Indian state of Jharkhand is 55 %, but among tribal children, particularly among girls, the literacy rate is as low as 10 %. Many of these children are involved in child labour and live in very poor conditions.

How we help

Lack of education perpetuates poverty and breaking this cycle is key to overcoming persistent poverty among tribal people in Jharkhand. That's why the Brothers of Charity run an English medium primary school in the rural tribal village of Simalia. School fees are set according to the financial situation of the parents so that poverty is not an obstacle to their education.

Results

In 2013, the Saint Peter's Primary School in Simalia provided education to 180 children. 58% are girls. 15 children have special needs and receive specific attention through inclusive education. Teachers were given intensive trainings to improve their teaching skills and upgrade the quality of education.

NEWSFACT 2013

World Day Against Child Labour

On June 12th, the primary school of the Brothers of Charity in Simalia observed World Day against Child Labour. A rally was organised with the central message "Education is a Birth Right". In the village where the school is situated, child labour used to be widespread, but thanks to the presence of the school and sensitisation towards parents, the Brothers managed to reduce child labour and increase school attendance rates.





Saint Peter's Primary school Simalia, Ranchi, India ▲

2

Mental health care

Problem In many parts of India, people suffering from a mental health disorder don't receive any form of psychiatric care, especially if they are poor or have no social or family network to fall back on. As a result, many of them are found wandering the streets or are locked up in case of aggressive behaviour.

How we help Fracarita India runs three small-scale psycho-social rehabilitation centres where psychiatric patients live in a community for a few months, receive individual therapy and are step by step prepared to live independently and to reintegrate into society. The centres are situated in Ranchi (Jharkhand), Karaikudi (Tamil Nadu) and Kozhikode (Kerala).

Results In 2013, the three rehabilitation centres offered psychiatric care to 56 patients. Each patient stayed in the centre for a period of 3 – 12 months, depending on his or her personal progress.

Psychiatric centre in Kozhikode, India ▼



3

Training professionals in mental health care

Problem India, with a population of 1 billion, has a lack of well-trained professionals in the mental health sector while the awareness and need for mental health care continues to grow.

How we help In 2013, the Brothers of Charity started a joint venture with Corsendonk Consultants and the Tata Institute of Social Sciences in Mumbai and established the Dr Guislain – Svastha Educational Trust (G-SET). The trust will be an academic centre of excellence in the field of mental health care, education, leadership and management. The objective is to improve the mental health care scenario in the country and to provide more professionals and experts in this sector.

Results In June 2014, the entrance exams will be held for an MA course in Social Work in Mental Health. The course is spread over two years and contains both theory and practical work (field work).

NEWSFACT 2013

G-SET signs MOU with the Tata Institute of Social Sciences

The Dr Guislain Svastha Mental Health Education Trust, signed a Memorandum of Understanding with the Tata Institute of Social Sciences, an Indian social sciences institute.

The final scope of this collaboration is to increase the quality of mental health care in India by training local people to become professional mental health workers and managers. A College for Academic Education and Professional Training in Mental Health Care will be constructed in Ranchi. Affiliated branches will be set up in Karaikudi (Tamil Nadu) and in Kozhikode (Kerala).





Income generating activities by Fracarita India

In 2013, Fracarita India was not yet generating any income for its services, but some IGA projects were already in the pipeline:

- Enforsa, a project developer active in the international green and renewable energy sector, built a small pilot project of 15 kWp on the premises of the Brothers of Charity in Simalia near Ranchi, enough to generate all the electricity needed for the primary school and the congregation. If successful, more solar panels will be built to generate income for the running costs of the services in India.
- On the same plot of Simalia, a property developer was asked to design a master plan for the future development of the whole estate. Part of the plot would be used for education (Saint Peters' primary school, G-SET, ...) and mental health care, and another part will become a housing area. Profit from the real estate will be reinvested in education.
- The Brothers of Charity also constructed some small shops near the psychiatric rehabilitation centre in Ranchi. The rent of the shops will be reinvested in the psychiatric centre.

Solar plant on the premises of the Brothers of Charity in Rwanda. A similar plant would be built on the congregation's property in Simalia, Ranchi, India ▼



Focus: Indonesia

COUNTRY OFFICE:

Staff: 1

Coordination:
Bro. Polikarpus Manaô
Office: Yogyakarta



SERVICES:

Number: 12

Beneficiaries: 1969

Female beneficiaries: 48%

Staff: 284

Volunteers: 0

Total annual expenses: € 525.023

Income from IGA*: 0 %

Income from local fundraising: 5 %

* income generating activity



Beneficiaries:



Expenses:



1

Education for poor children with a disability

Problem

In Indonesia, 2 % of children aged 0 to 14 years have a disability. They are the least likely to receive health care or go to school and are the most vulnerable to violence, abuse and exploitation. Many of them are neglected because of social stigma or the economic cost of raising them. As a result, children with disabilities are among the most marginalised people in Indonesia. Children living in poverty are the least likely to attend their local school. But those who live in poverty *and* have a disability are even less likely to do so.

How we help

The Brothers of Charity offer education to two specific groups of children on the island of Java: children with a hearing impairment and children with a mental disability. At the Don Bosco Institute for the deaf in Wonosobo deaf boys, aged between 5 and 16, receive primary education and vocational training. In Purworejo the Karya Bakti centre gives vocational training to children and adolescents with a mental disability in order to enable them to function independently in society. Both initiatives focus on children who live in poverty.

Results

In 2013, the Brothers of Charity educated 125 children with a hearing impairment and 115 children with a mental retardation.



Speech therapy at the Don Bosco School for the Deaf, Wonosobo, Indonesia ▲

2

Drug prevention and rehabilitation of drug addicts

Problem

Yogyakarta is a student city in Java. Unfortunately it has become a hub for drug abuse and distribution, particularly among students. According to the estimates of the National Narcotics Agency there are as many as 68.980 illicit drug users in the district of Yogyakarta. Many of them are infected with HIV and need medical care.

How we help

The Brothers of Charity set up a project for the prevention and treatment of drug abuse in Yogyakarta in collaboration with a Belgian drug prevention network (De Sleutel). It is called "Kunci" or "the Key". Drug users who are motivated to overcome their addiction can follow an individual rehabilitation programme. In addition, Kunci also organises awareness raising campaigns for groups at risk.

Results

In 2013, Kunci helped 20 drug addicts to overcome their addiction.

NEWSFACT 2013

Drug prevention at school

From September 3 till 5 the Kunci Rehabilitation Center in Yogyakarta organised a prevention campaign on drug abuse at a local high school for 160 students, their parents and teachers. Kunci was invited by the school as drug abuse seems to be a growing problem in Indonesian society. Statistics of the National Narcotics Agency in Indonesia indicate that the number of drug abusers has risen from 1.75 % of the population nine years ago to 2.2 % in 2011. The age of first drug abuse lowered from 20 years to 14 years old.



3

Quality education for the poor

Problem Although public education is free in Indonesia, there are only few poor children who obtain a degree higher than primary education. The quality of education in poor neighbourhoods is very low and in order to be allowed at quality schools, parents often have to pay bribes. This is not an option for those who are living in extreme poverty. That is why many poor children never make it to higher education and remain in poverty throughout their lives.

How we help The Brothers of Charity run one kindergarten, three elementary schools and two high schools on Java. All schools provide quality education and have a special focus on children from a poor socio-economic background.

Results In 2013, the schools of the Brothers of Charity in Indonesia provided quality education to 1.674 children and adolescents.

4

Mental health care

Problem In Indonesia, just like in many other developing countries, people with a mental illness are often left to their own devices because of poverty, ignorance or incapacity to offer appropriate care. According to the Indonesian Department of Mental Health Care, 90 % of Indonesians who have psychiatric problems do not receive any form of treatment at all. This leads to a deterioration of their mental state. Society often considers them as bewitched. They end up in the streets. Most of them live in extreme poverty.

How we help The Brothers of Charity in Indonesia provide psychiatric care through small-scale rehabilitation centres where patients can live in a community. They are observed, diagnosed and receive individual treatment. Once their situation is stabilised, they start to prepare themselves for their reintegration. Most patients stay in the centre for a period of 3 to 12 months. There is one rehabilitation centre in Purworejo (Java) and in 2013, a second rehabilitation centre was built on the island of Flores that will open in March 2014.

Results In 2013, 35 psychiatric patients stayed in the psychiatric rehabilitation centre "Sahabat Kita" on Java and received professional mental health care.

NEWSFACT 2013

Dutch support for the new psychiatric centre on Flores

On September 3rd 2012, Fracarita International signed a memorandum of understanding with Reinier van Arkel, a group of psychiatric facilities in the Netherlands. The Dutch organisation committed itself to establish a twinning program with the new psychiatric rehabilitation centre of the Brothers of Charity on Flores. As part of this partnership, two psychiatric nurses of Reinier van Arkel visited Flores in 2013 to advise the management of the future rehabilitation centre on the of planning of the different activities of the centre.



Income generating activities by Fracarita Indonesia

In 2013, Fracarita Indonesia was not yet generating any income for its services, but plans were made to give a new destination to part of the congregation's immovable property in Java in order to generate income. One of the options is to convert one of the former school buildings into a students' home. The rent would be reinvested in the services.

School of the Brothers of Charity in Indonesia ▼



Focus: Peru

COUNTRY OFFICE:

Staff: 1

Coordination:
Bro. Jimi Huayta-Rivera
Office: Lima



SERVICES:

Number: 2

Beneficiaries: 3.577

Female beneficiaries: 56 %

Staff: 35

Volunteers: 5

Total annual expenses: € 398.532

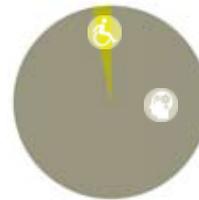
Income from IGA*: 2 %

Income from local fundraising: 16 %

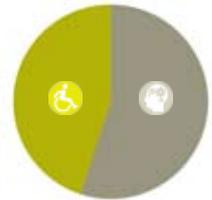
* Income generating activity



Beneficiaries:



Expenses:



1

Mental health care

Problem

The Ayacucho region of Peru is located in the Andes and holds the second-highest poverty rate and highest consumption rate of alcohol per capita in the country. During the guerilla of Shining Path from the 1980s-2000, it suffered incredible violence and trauma. Many citizens still bear the psychological scars of their traumatic experiences such as the disappearance or death of loved ones during that period.

How we help

Since 2010, the Brothers of Charity run the "Mental Health Commission of Ayacucho" or "COSMA". It is a specialised mental health centre that has developed a model according to the WHO guidelines for Latin America that emphasises community-based interventions and respect for the rights of the patient.

In addition COSMA develops educational activities and trainings in the field of mental health care for local health care professionals

Results

In 2013, COSMA provided mental health care to 3,474 vulnerable children, women and men. 610 among them were new clients.

NEWSFACT 2013

Fracarita Belgium raises € 117.189 for COSMA

In 2013, the different facilities and services of the Brothers of Charity in Belgium raised money for the psychiatric centre COSMA in Ayacucho by organizing a whole range of fundraising activities. Fracarita Belgium set up and coordinated the annual campaign and convinced the pupils, students, patients and clients in Belgium to take action and support the campaign.



2

Special education for children with a mental retardation

Problem People with a disability in Peru are often victim of social exclusion. They can hardly participate in the economic and social life of their communities and are forced into a situation of dependency. Institutional structures for people with disabilities hardly exist. According to Mental Health Epidemiologic Studies (EESM) developed by the Instituto Nacional de Salud Mental, about 26% of the inhabitants of Lima have some kind of disability.

How we help In 1998 the Brothers of Charity opened the Pedro José Triest Day Center (CEPETRI) for severely mentally challenged children in Lima. It adopts the “Natural Functional Curriculum” and is the only centre of this kind in the region. Self-reliance and inclusion are the main objectives. Most children come from the poor northern part of Lima. Many parents are not able to pay for education or medical care. That is why the centre offers its services free of charge. Parents, volunteer workers and the community at large are invited and encouraged to take part in the activities in order to prevent social exclusion.

Results In 2013 CEPETRI provided education to 86 children inside the centre. Another 17 children went to regular schools outside and attended the classes with non-disabled students.

NEWSFACT 2013

Awareness raising on children with special needs in Peru

In August, CEPETRI organised a gathering for 79 students from a mainstream school to raise awareness on the special needs of children with a learning disability. They could learn more on how to take care of their peers with special needs, how to focus on their abilities rather than their disabilities, how to motivate and encourage them in class, how to identify their talents etc. Mrs Gabriela Morote Calderon, director of CEPETRI, was very pleased with the enthusiasm of the participants and hopes that more and more schools in Lima will join the inclusion programme in the future.



Income generating activities by Fracarita Peru

In Ayacucho, the mental health centre set up a gift shop with products made and sold by the patients themselves. The gift shop generates income for the centre and is part of the patients’ reintegration process.

The staff of COSMA also organises conferences and trainings on mental health care for third parties such as the government and hospitals. The income from the fees is reinvested in the centre.



Focus: Nicaragua

COUNTRY OFFICE:

Staff: 1

Coordination:

Bro. Emmanuel Yéo Adama
Office: Granada



SERVICES:

Number: 2

Beneficiaries: 56

Female beneficiaries: 21 %

Staff: 17

Volunteers: 4

Total annual expenses: € 94.533

Income from IGA*: 0 %

Income from local fundraising: 0 %

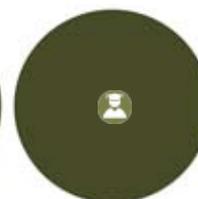
* Income generating activity



Beneficiaries:



Expenses:



1

Care for socially vulnerable youth

Problem

Nicaragua has one of the highest degrees of income inequality in the world. This means that many Nicaraguans live in extreme poverty: in five of the 17 departments, chronic malnutrition rates are above 30%, one third of the population has no access to a sustainable source of drinking water and only 46% goes to high school. Extreme inequality leads to exploitation. Children and adolescents are most affected. The Nicaraguan Ministry of Family Affairs reported an increase of child abuse, commercial sexual exploitation, pornography and trafficking .

How we help

In the city of Granada, the Brothers of Charity run two services. “Casa Hogar Amanecer” is a boys home for social orphans, children who have no adults looking after them, even though one or more parents are still alive. “Jesús Amigo” is a day care centre for drug addicted street children. Some of these children are engaged in prostitution so that they can buy drugs. The centre provides counselling, food, clothing and showers. It organises activities like sports, farming, recreation and workshops that help them to overcome their drug dependency.

Results

Through our residential service Casa Hogar Amanecer we provided total care to 16 young boys. They could go to school, received medical care, food and clothing. In our day service for street children “Jesús Amigo” we provided day care to 28 boys and 12 girls.



Casa Hogar Amanecer, Granada, Nicaragua ▲



Income generating activities by Fracarita Nicaragua

Fracarita Nicaragua is currently in the process of searching for opportunities to create income generating activities, especially in the field of agriculture, in order to decrease its dependence on funding from abroad.

Street children sniffing glue in the streets of Granada, Nicaragua ▼



Capacity building

Staff Training

Fracarita International wants to facilitate the learning of its local staff and volunteers at all levels as it is one of the most effective strategies for the sustainable development of our own organisation. In 2013, Fracarita International organised training programmes for its regional coordinators in Rwanda and Sri Lanka.

It was decided to give the training on two different locations as this gives the possibility to use a more cultural specific approach when addressing the different themes. The focus of both trainings was on the skills needed to increase the financial self-reliance of our projects in the South. Although Fracarita International is totally aware that 100%

self-reliance may not be achieved at short term in some of the least-developed or politically unstable countries where we run projects. But we get more and more convinced that it is crucial to continue to strive for self-reliance. Every euro that is donated or generated locally, is a step towards more financial sustainability in the long run. It also creates an important shift in mentality: from a belief that foreign aid is indispensable for change and development, toward a belief that development can only be sustainable if the local population is seen as the real motor for that development. This is the rationale underlying the decision to direct our efforts to trainings in self-reliance.

Training of our regional coordinators in Kigali, Rwanda ▼



Rwanda: May 27th - June 7th

All regional coordinators of our African and Latin American country offices gathered in Rwanda together with the regional bursars and regional superiors of the congregation for a two week training session. The main goal was to introduce the participants to different tools for setting up income generating activities, fundraising, strategic planning, project management, financial reporting, leadership, etc. Two of the guest speakers were Kenyan consultant Owen Koimburi of Mazars, a global audit, accounting and consulting group and Mr Gaston Niyonzima, coordinator of the Burundian NGO Action Humanitaire contre la Délinquance (AHD).



Sri Lanka October 17th - October 24th

All regional coordinators of our seven country offices in Asia were invited to Sri Lanka for a one week training session. The regional bursars and regional superiors of the congregation were also present. Main speaker of the training was Mr Soumitra Ghosh, Founder CEO of CSO Partners in India. He has been working with civil society initiatives in India for the last two decades and worked with several national and international agencies across the program sectors. The main focus of the training was on capacity building in order to make our country offices more self-reliable. The participants were introduced to concepts such as globalization, networking, fundraising, project management, reporting and leadership.



Awareness-raising: Giving a voice to the voiceless

Fracarita International is involved in advocacy for its vulnerable target groups. Through its special consultative status at ECOSOC¹, its presence in international organisations such as the International Catholic Centre of Geneva, its awareness raising campaigns and the celebration of international days, Fracarita International aims to make the “voice of the voiceless” heard by national and international policy makers.

¹ Economic and Social Council of the UN

UN meeting on Disability and Development

Fracarita International participated actively in New York at the UN High Level Meeting GA 23 September on Disability and Development (HLMD).

The international community achieved an extraordinary advance with the 2006 adoption of the Convention on the Rights of Persons with Disabilities. However, to realise equality and participation for persons with disabilities in society and development, they must also be included in development processes and, in particular, in an emerging post-2015 development framework.

While the Millennium Development Goals (MDGs) represent a concerted effort to address global poverty, there is a striking gap in the current MDGs and their inclusion of persons with disabilities. The estimated 1 billion people worldwide who live with disabilities are still excluded from equitable access to resources such as education, employ-

ment, healthcare and social and legal support systems. As a result persons with disabilities experience disproportionately high rates of poverty. Fracarita International strives for including the rights of persons with disabilities into the MDG's and the post-2015 agenda of the Sustainable Development Goals. Moreover the International Community sees mental health as an integral part of the non-communicable diseases and therefore as a part of the Convention on the rights of persons with disability. It was in that double aim to include mental health and the care for persons with disabilities that Fracarita International participated with success at this HLMD.

The HLMD resulted in a concise, action-oriented Outcome Document in support of the aims of the Convention on the Rights of Persons with Disabilities and the realisation of the Millennium Development Goals and other internationally agreed development goals for persons with disabilities.

More information: <http://www.un.org/disabilities>

World Mental Health Day

On October 10th 2013, the World Federation for Mental Health organises World Mental Health Day. Fracarita International gives its full support to this worldwide initiative.

In 2013, Fracarita International organised an academic session entitled “Breaking the chains of stigma” on World Mental Health Day in Mumbai (India). More than 60 professionals attended the conference in the Taj Mahal Palace Hotel. After an introduction by Prof. Dr. Katy Gandevia (Center for Health and Mental Health, Tata Institute of Social Sciences (TISS)) and Mr Prakash Goossens (International Representa-

tive Fracarita International), several Indian experts gave a lecture on their insight with regard to the stigmatization of people with a mental disorder: Prof. Dr. S. Parasuraman (Director TISS), Mr Santosh K. Samal (Director Dalit Foundation Delhi), Dr. Mohan Agashe (psychiatrist and actor), Prof. Dr. S. Maitra (Center for Health and Mental Health, TISS). In addition, Bro. Dr René Stockman, general superior of the Brothers of Charity and president of Fracarita International, gave a presentation on the strategies and methodology used by the mental health care services of the Brothers of Charity worldwide and, as an example, explained how the congregation managed to develop a psychiatric nursing home in Ivory Coast.

The psychiatric centres of the Brothers of Charity in the South were also invited to organise different activities at the occasion of World Mental Health Day (see below).

List of activities organised by the Brothers of Charity for World Mental Health Day:

Burundi

Centre Neuro-psychiatrique Kamenge (CNPK), (Bujumbura):

- Live radio broadcast: presentation by mental health workers and questions from the audience on mental health care
- Visit to the centre by the Minister
- Launch of the pilot project in mental health care initiated by the NGO HealthNet-TPO
- Launch of the decentralisation strategy of the hospitalisation of patients, initiated by the National Programme of the Fight against Chronic and Non-communicable Diseases
- Opening of mental health study programme at the National Institute of Public Health
- Powerpoint presentation by General Director Bro. Hippolyte Manirakiza

India

Param Mitra Sadan, Simalia (Ranchi):

- Seminar on "mental health issues related to youth" in collaboration with Xavier Institute for social services
- Gathering of residents and their families

Centre for Psychiatric Rehabilitation Saint Giuseppe Moscati (Sivagangai):

- Gathering of residents and their families
- Awareness raising in secondary school

Ivory Coast

Maison des soins psychiatriques Saint Vincent de Paul (Yamoussoukro):

- Programme in collaboration with the National Programme for Mental Health

Peru

Comisión de Salud Mental de Ayacucho (COSMA), (Ayacucho):

- Celebration of WMHD at Tambo district: promoting awareness and prevention of mental health problems in rural areas
- Parade "Celebrating The Mental Health Day"
- Workshop for students, workshop for teachers, workshop for families
- Depression, anxiety and alcohol problem screening at the park
- Dancing presentation at the school with an award for the best presentation. Organised in collaboration with the "Divine Master" school, the parish and local community of Tambo

Philippines

Holy Face Rehabilitation Center for Mental Health (Tabaco):

- Mental Health Congress: A collaborative effort and initiative of the Bicol Mental Health Partners (SIHSFI, Help Learning Centre, Department of Health, Simon of Cyrene and the Holy Face Rehabilitation Centre for Mental Health) with discussions and info sessions on

"Mental Health and Older Adults", held at La Piazza Hotel, Legazpi City.

- Slogan and Poster Making Contest: A one-day gathering of the residents and their families.

Rwanda

Ndera Neuropsychiatric Hospital, Ndera (Kigali):

- Celebration of World Mental Health Day in partnership with the Mental Health Division of the Ministry of Health. The activities focus on sensitizing the population on mental health by hosting programs on radio and TV and by visiting district hospitals.

Sri Lanka

Saint Benedict Menni Mental Rehabilitation Centre (Kalmunai):

- Street walk
- Sports meet
- Cultural programme

Tanzania

Saint Cornelius Mental Health Centre Kasaka, Kasaka (Kigoma):

- Staff members visit local hospitals to sensitise health care workers on issues of mental illness
- Education to patients and family members who are at our centre on understanding mental health disorders.
- Advanced staff training on mental health care

Dr. Guislain Award 2013

In 2013, Fracarita International also gave its support to the second edition of the Dr. Guislain Award, "Breaking the chains of stigma". The award, an Initiative of Janssen Research & Development and Museum Dr. Guislain, a Belgian museum on mental health care initiated by the Brothers of Charity, is given to a project, individual or organisation that has made an exceptional contribution in breaking the chains of stigma with regard to mental illness. In 2013, the prize was awarded on World Mental Health Day to Matrika Devkota, the Nepalese founder of the organisation Koshish. The word "koshish" means "making an effort" in Nepalese and the organisation

makes an effort to mainstream mental health and psychosocial disabilities. The organisation frequently serves as a lobbyist on behalf of those suffering from mental illness, and seeks to improve policy and public perception surrounding these conditions, while empowering patients to act as self-advocates.



Mr Matrika Devkota

Financial Figures

of Fracarita International and its regional fundraising offices

EURO	Fracarita International inzv	Fracarita Belgium	Fracarita Netherlands	Total 2013
COMBINED PROFIT AND LOSS ACCOUNT FOR 2013 - EURO				
EXPENSES				
Services and miscellaneous goods	416.474,37	80.881,32	330.327,00	827.682,69
Staffing costs	133.206,88	630.838,97	-	764.045,85
Depreciations	12.787,60	9.935,60	-	22.723,20
Other operational costs	-	3.202.979,12	-	3.202.979,12
Financial costs	876,67	542,13	15,00	1.433,80
Exceptional costs	1.437,70	1.581,09	-	3.018,79
TOTAL EXPENSES	564.783,22	3.926.758,23	330.342,00	4.821.883,45
REVENUES				
Donations, contributions, subsidies,...	443.183,54	3.698.668,47	325.612,00	4.467.464,01
Recovery	21.239,68	100.414,09	-	121.653,77
Financial revenues	3.271,28	17.017,97	115,00	20.404,25
Exceptional revenues	784,47	3.536,04	-	4.320,51
TOTAL REVENUES	468.478,97	3.819.636,57	325.727,00	4.613.842,54
NET ASSETS	-96.304,25	-107.121,66	-4.615,00	-208.040,91
COMBINED BALANCE SHEET FOR 2013 - EURO				
ASSETS				
Intangible fixed assets	-	4.578,09	-	4.578,09
Material fixed assets	322.332,67	16.594,36	-	338.927,03
Accounts receivable > 1 year	206.129,86	4.000,00	-	210.129,86
Accounts receivable < 1 year	15.838,14	161.023,93	-	176.862,07
Liquid assets	1.072.152,71	921.483,54	17.809,00	2.011.445,25
Deferred charges & accrued income	1.481,98	8.524,05	-	10.006,03
TOTAL ASSETS	1.617.935,36	1.116.203,97	17.809,00	2.751.948,33
LIABILITIES				
Funds of the association	1.231.836,02	502.208,21	22.424,00	1.756.468,23
Appropriated funds	-	4.654,17	-	4.654,17
Transferred loss	280.299,49	-	-	280.299,49
Accounts payable < 1 year	200.136,05	586.656,29	-	786.792,34
Accruals and deferred income	1.968,05	129.806,96	-	131.775,01
NET ASSETS	-96.304,25	-107.121,66	-4.615,00	-208.040,91
TOTAL LIABILITIES AND NET ASSETS	1.617.935,36	1.116.203,97	17.809,00	2.751.948,33

Donations, contributions and subsidies in 2012 and 2013:



USD

	Fracarita International izvz	Fracarita Belgium	Fracarita Netherlands	Total 2013
COMBINED PROFIT AND LOSS ACCOUNT FOR 2013 - USD				
EXPENSES				
Services and miscellaneous goods	573.318,62	111.341,23	454.728,15	1.139.387,99
Staffing costs	183.372,59	868.412,93	-	1.051.785,52
Depreciations	17.603,41	13.677,35	-	31.280,76
Other operational costs	0	4.409.221,06	-	4.409.221,06
Financial costs	1.206,82	746,30	20,65	1.973,77
Exceptional costs	1.979,14	2.176,53	-	4.155,67
TOTAL EXPENSES	777.480,58	5.405.575,38	454.748,80	6.637.804,76
REVENUES				
Donations, contributions, subsidies,...	610.086,46	5.091.587,02	448.237,48	6.149.910,96
Recovery	29.238,54	138.230,04	-	167.468,58
Financial revenues	4.503,24	23.426,94	158,31	28.088,49
Exceptional revenues	1.079,90	4.867,71	-	5.947,61
TOTAL REVENUES	644.908,15	5.258.111,70	448.395,79	6.351.415,64
NET ASSETS	-132.572,43	-147.463,68	-6.353,01	-286.389,12

COMBINED BALANCE SHEET FOR 2013 - USD

ASSETS				
Intangible fixed assets	-	6.302,20	-	6.302,20
Material fixed assets	443.723,15	22.843,80	-	466.566,95
Accounts receivable > 1 year	283.758,37	5.506,40	-	289.264,77
Accounts receivable < 1 year	21.802,78	221.665,54	-	243.468,33
Liquid assets	1.475.925,42	1.268.514,24	24.515,87	2.768.955,53
Deferred charges & accrued income	2.040,09	11.734,21	-	13.774,30
TOTAL ASSETS	2.227.249,82	1.536.566,39	24.515,87	3.788.332,07
LIABILITIES				
Funds of the association	1.695.745,47	691.339,82	30.868,88	2.417.954,17
Appropriated funds	-	6.406,93	-	6.406,93
Transferred loss	385.860,28	-	-	385.860,28
Accounts payable < 1 year	275.507,29	807.591,05	-	1.083.098,34
Accruals and deferred income	2.709,22	178.692,26	-	181.401,48
NET ASSETS	-132.572,43	-147.463,68	-6.353,01	-286.389,12
TOTAL LIABILITIES AND NET ASSETS	2.227.249,82	1.536.566,39	24.515,87	3.788.332,07

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