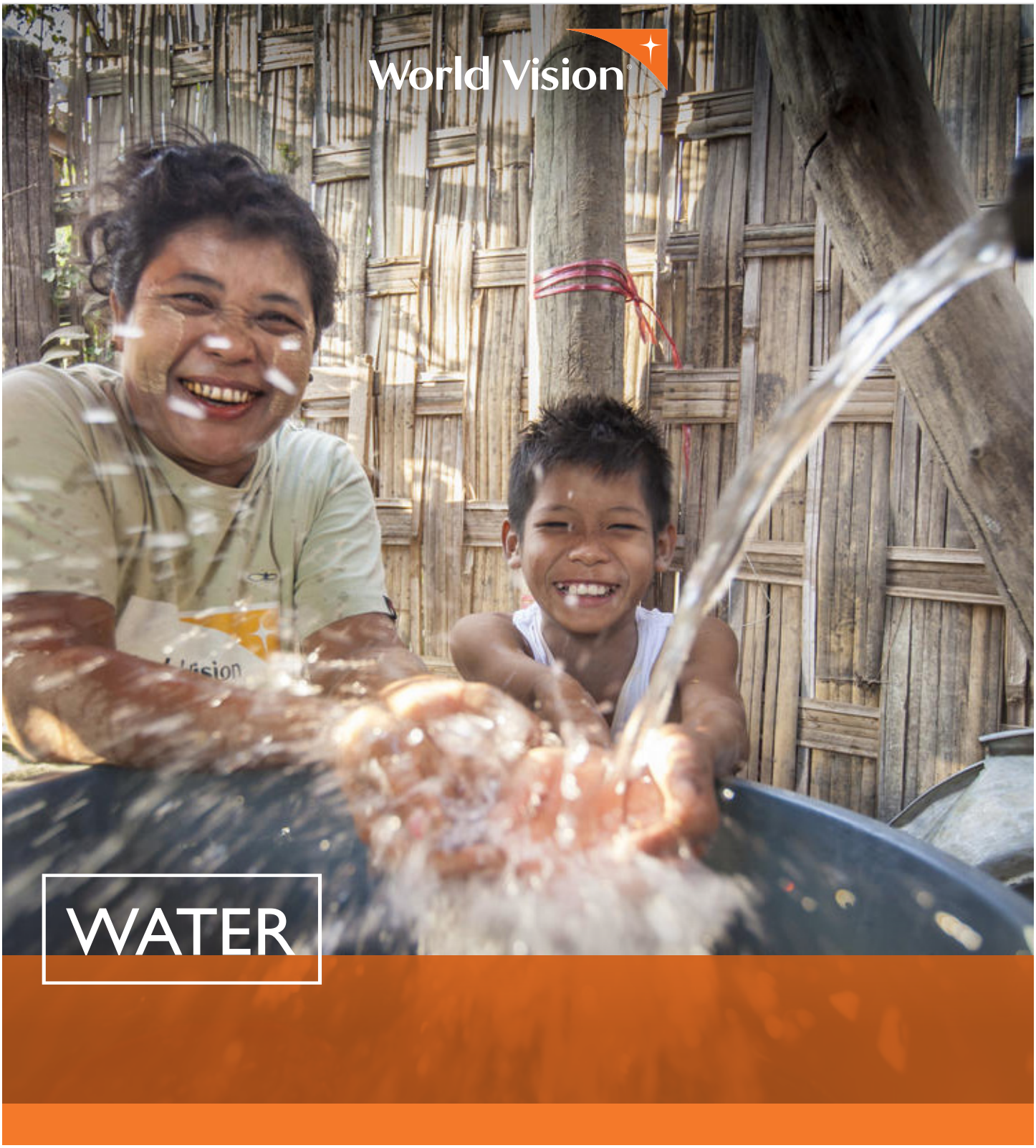

WHERE MOST NEEDED FUND »

ANNUAL REPORT: October 2018 through September 2019

Prepared February 2020

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GLOBAL SUMMARY

Dr. Greg Allgood, Vice President WASH, World Vision U.S.

We are pleased to share this 2019 annual report on World Vision's Global Water, Sanitation, and Hygiene (WASH) Program. It's been a year of tremendous impact for the most vulnerable, and we continue to learn and improve our efforts to ensure quality and sustainability. World Vision exceeded our yearly targets by reaching 3.4 million people with sustainable clean water, 2.6 million people with household sanitation, and 4.3 million people with hygiene behavior change promotion efforts. We also reached an additional 900,000 people with clean water during emergency situations.

World Vision is committed to reach everyone, everywhere we work with clean water by 2030, and we are on track to achieve our interim goal of reaching 20 million people with clean water between 2016 and 2020, having reached 16.1 million people in the first four years of our commitment. These commitments and our progress toward achieving them would not be possible without the support of our donors and partners.

During this reporting period, World Vision made a new commitment to reach 800 rural healthcare facilities with WASH services between 2019 and 2021, reaching nearly 7.2 million people who will use those facilities. This work is critical to ensuring a positive birthing experience for mothers and newborns, reducing healthcare-associated infections, and addressing antimicrobial resistance. It's saving lives. World Vision's leadership in both implementation and advocacy has played a significant role in bringing more resources to this effort. After just one year, we are ahead of schedule, reaching 399 healthcare facilities with clean water.

We continue to innovate and scale up proven approaches to positively impact behavior change to ensure improved sanitation, hygiene, and water quality. For example, World Vision reached 65,973 children this year with our school curriculum WASH UP! designed in partnership with Sesame Workshop, and trained 6,307 faith leaders so they can encourage their congregations to adopt healthy WASH behaviors. We are working with nurturing care groups to ensure better adoption of hygiene behaviors in communities. This work is currently underway in Ghana.

World Vision continues to scale up our work to provide more sustainable and cost-effective alternatives to hand pumps, including providing solar-powered piped-water systems. In partnership with Grundfos, we are equipping communities in Kenya with automated kiosks with solar-powered systems to provide for 24/7 water access and an effective fee collection system to support ongoing operations and maintenance. This innovation has been so effective, we are now expanding the automated kiosks beyond Kenya. World Vision is testing an innovative and affordable insurance system in Kenya and Zambia to provide communities with means for long-term operations and maintenance for solar-powered systems, which rarely break down but are more expensive to repair than hand pumps. In Ethiopia, World Vision created 70 WASH business centers that improve supply of WASH products and services by strengthening local businesses to increase economic opportunities, leading to overall sustainability of programing.

Going forward, we will continue to provide sustainable water, sanitation, and hygiene for communities, schools, and healthcare facilities. World Vision will continue to increase the capacity of our staff through the partnership with Drexel University and Desert Research Institute. We will continue to measure our impact and generate evidence to improve our work through our partnerships with The Water Institute at UNC and Stanford University, as well as increase our ability to specifically measure the impact of our WASH programming on women and girls through a grant provided by Imago Dei.

During the next six months, World Vision will develop a new five-year plan that will cover our work through 2025 and prepare to celebrate providing 20 million people with access to clean water.

We are thankful to our donors for being part of this journey with us. Together, we are transforming millions of lives.

GLOBAL REACH

3.4 MILLION PEOPLE
*provided with access to clean drinking water**

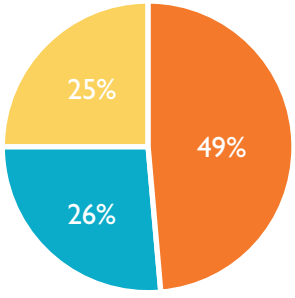
2.6 MILLION PEOPLE
gained access to improved household sanitation

4.3 MILLION PEOPLE
reached with hygiene behavior-change programming

2019 ANNUAL ACCOMPLISHMENTS

39,775 water points built	*2019 annual target: 36,148*	110%
469,983 sanitation facilities built	*2019 annual target: 381,807*	123%
490,087 hand-washing facilities built	*2019 annual target: 411,821*	119%
5,582 WASH committees formed	*2019 annual target: 5,795*	96%

2019 ANNUAL SPENDING



$141.3 MILLION *spent on global WASH programs during fiscal year 2019.*

- World Vision U.S. – Private Funding and Sponsorship ($68.7 million)
- Other World Vision Offices – Private Funding and Sponsorship ($37.4 million)
- Government, International, Local – Grants & Resource Development ($35.2 million)

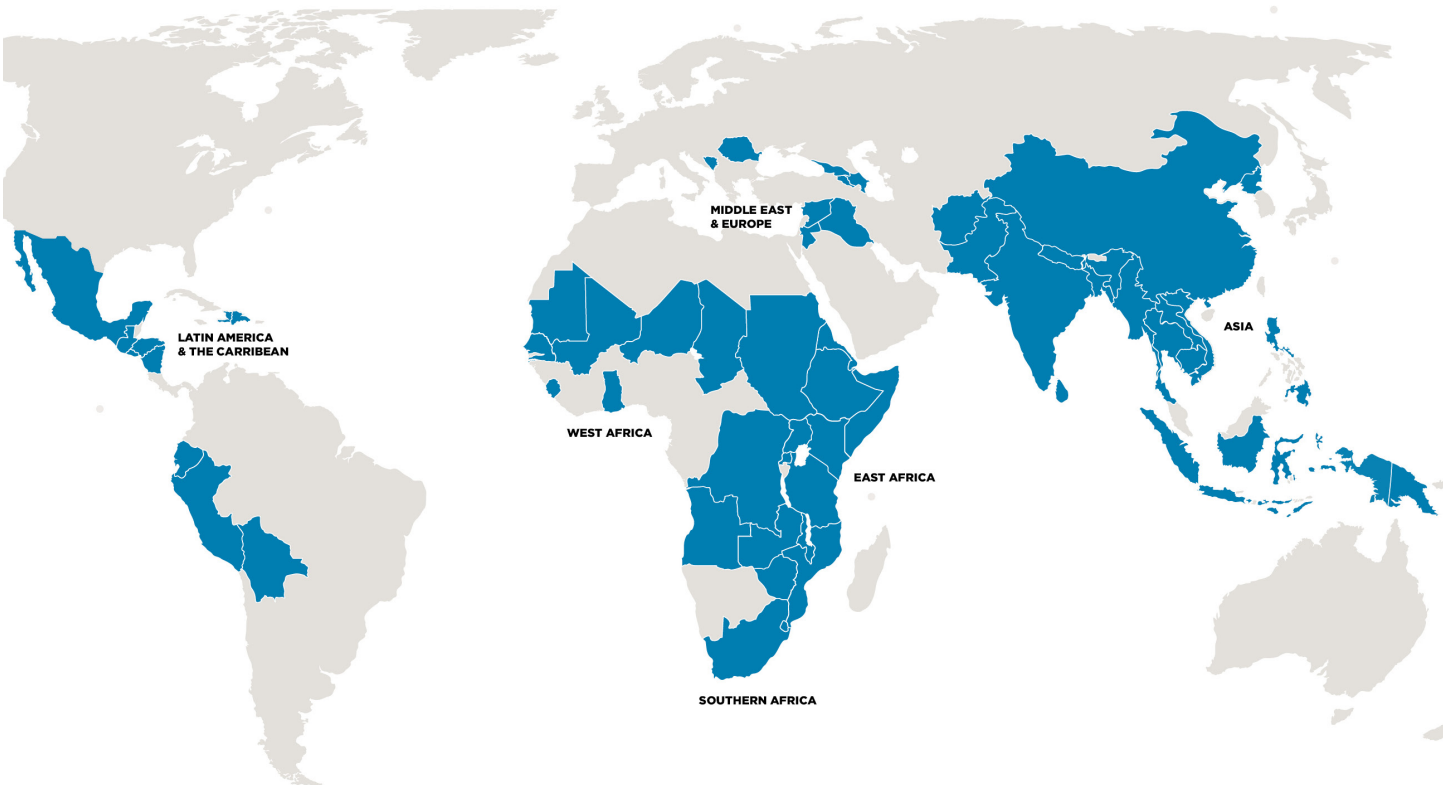
** This includes rural community water beneficiaries (2,909,010) and municipal water beneficiaries (493,666). Of these, 1,162,272 were reached with World Vision U.S. private funding. The 1.2 million people with access to water represents many of the same beneficiaries who received access to sanitation facilities and behavior-change programming. A total of 16.1 million people have accessed clean drinking water since FY16, including 4.5 million who were reached with World Vision U.S. private funding since FY16.*

GLOBAL ACHIEVEMENTS

2019 Annual Achievements	Global Annual Target	East Africa	Southern Africa	West Africa	Asia-Pacific	Latin America	Middle East	Global Annual Achieved	Global Achieved vs. Target
OUTCOME: Access to Safe Water									
People who gained access to a safe drinking water source in communities	2,598,976	1,362,219	598,611	391,147	337,888	113,941	105,204	2,909,010	112%
Children who gained access to a safe drinking water source at school	574,018	309,446	135,887	62,070	54,470	36,008	39,488	637,369	111%
Schools with a safe drinking water source installed	1,077	401	244	193	138	268	50	1,294	120%
Health centers with a safe drinking water source installed	451	184	55	57	80	18	5	399	88%
Successful boreholes completed and commissioned in communities, schools, and health centers	2,020	517	899	425	329	4	1	2,175	108%
Taps installed from successful water supply systems in communities, schools, and health centers	30,892	4,391	5,393	1,313	9,744	11,896	1,358	34,095	110%
Nonfunctioning water points rehabilitated in communities, schools, and health centers	3,236	845	825	141	889	700	105	3,505	108%
Households equipped with water-treatment products to disinfect drinking water	401,289	157,924	128,952	94,262	29,452	33,891	3,138	447,619	112%
OUTCOME: Access to Sanitation									
People who gained access to household sanitation	2,181,106	1,001,499	905,453	346,077	243,236	56,158	1,658	2,554,081	117%
Children who gained access to sanitation facilities at schools	435,926	204,651	191,156	56,984	89,330	43,188	40,331	625,640	144%
Household sanitation facilities constructed	375,027	194,512	169,266	42,868	44,811	11,461	259	463,177	124%
Communities certified as free from open defecation	4,287	1,156	1,924	367	158	63	3	3,671	86%
Improved, sex-separated sanitation facilities built at schools	5,539	1,844	1,741	505	679	749	462	5,980	108%
Schools that gained access to improved sanitation for children/youth with limited mobility	841	301	255	143	125	83	33	940	112%
Schools that gained access to improved sanitation for girls, with facilities to manage menstrual hygiene	818	211	234	68	105	86	15	719	88%
Improved, sex-separated sanitation facilities built at health centers	1,241	318	138	185	78	85	22	826	67%
Health centers that gained access to sex-separated sanitation facilities designed for people with limited mobility and appropriate for managing menstrual hygiene	329	120	36	53	33	23	5	270	82%
OUTCOME: Improved Hygiene Practices									
People who benefited from hygiene behavior-change promotion in communities	3,782,383	1,535,749	1,135,000	666,370	724,334	133,850	108,945	4,304,248	114%
Children who gained access to hand-washing facilities at schools	558,420	282,407	257,168	106,197	99,996	42,817	38,905	827,490	148%
Households that gained access to hand-washing facilities	411,821	178,108	170,632	64,553	56,821	18,687	1,286	490,087	119%
Schools that gained access to hand-washing facilities	1,984	526	464	919	630	187	62	2,788	141%
Health centers that gained access to hand-washing facilities	572	195	78	184	62	22	5	546	95%
OUTCOME: Improved Community Capacity for Sustainability									
WASH committees formed or reactivated with a financing system for maintenance and repair	5,795	1,570	1,441	1,167	997	286	121	5,582	96%
People trained in repair, maintenance, and construction of WASH facilities	5,958	1,667	1,856	1,404	1,627	303	-	6,857	115%
Functional Citizen Voice and Action groups focused on WASH	834	222	162	244	55	24	-	707	85%
Faith leaders who participated in hygiene, sanitation, or behavior-change programming	5,961	1,652	1,116	1,908	1,056	412	163	6,307	106%
School WASH clubs or programs established	2,090	882	432	607	537	181	202	2,841	136%
OUTCOME: Access to WASH in Urban Settings									
People with access to municipal water supply systems	547,150	-	-	-	-	-	493,666	493,666	90%
People with access to municipal sewage systems	54,680	-	-	-	-	-	56,152	56,152	103%
People with access to municipal solid waste disposal	22,000	-	-	-	-	-	189,265	189,265	860%
OUTCOME: Access to WASH in Emergency Settings									
People with access to emergency drinking water supplies	166,148	91,190	378,513	24,500	82,310	-	329,869	906,382	546%
People with access to emergency sanitation systems	114,930	62,376	205,751	6,508	1,050	-	87,096	362,781	316%
People with access to appropriate solid-waste disposal facilities	79,360	83,379	12,152	-	-	-	105,637	201,168	253%
People with access to emergency hygiene supplies	185,207	358,934	251,012	28,605	1,999	-	233,987	874,537	472%

GLOBAL MAP

WORLD VISION'S GLOBAL WASH PROGRAM REGIONS & COUNTRIES* IN 2019:



ASIA-PACIFIC
BANGLADESH
CAMBODIA
CHINA
INDIA
INDONESIA
MONGOLIA
MYANMAR
NEPAL
NORTH KOREA
PAPUA NEW GUINEA
PHILIPPINES
SOLOMON ISLANDS
SRI LANKA
TIMOR LESTE
THAILAND
VANUATU

LATIN AMERICA & CARIBBEAN
BOLIVIA
ECUADOR
EL SALVADOR
GUATEMALA
HAITI
HONDURAS
MEXICO
NICARAGUA

MIDDLE EAST & EUROPE
AFGHANISTAN
IRAQ
JORDAN
LEBANON
SYRIA

EAST AFRICA
BURUNDI
ETHIOPIA
KENYA
RWANDA
SOMALIA
SOUTH SUDAN
SUDAN
TANZANIA
UGANDA

SOUTHERN AFRICA
ANGOLA
D. REPUBLIC OF CONGO
ESWATINI**
LESOTHO
MALAWI
MOZAMBIQUE
SOUTH AFRICA
ZAMBIA
ZIMBABWE

WEST AFRICA
CENTRAL AFRICAN REPUBLIC
CHAD
GHANA
MALI
MAURITANIA
NIGER
SENEGAL
SIERRA LEONE

** This map includes all globally funded WASH programs.*

The following annual report features WASH programs supported by World Vision U.S. private funding.

** Formerly Swaziland

PARTNERSHIP UPDATES

World Vision's annual achievements were possible due to support from many committed partners.

charity: water: The Malawi, Mali, Mozambique, and Niger WASH teams completed charity: water grants in FY19, providing WASH to more than 216,450 children and adults in all four countries. The WASH programs are now implementing $5.35 million in charity: water grants that started in FY19, including a new grant in Malawi, and three continuing grants in Mali, Mozambique, and Niger. The WASH teams also proposed multiyear plans including a 5% to 20% funding increase year-over-year for quality improvements to WASH implementation, increased piped-water systems to bring water closer to homes, and to achieve WASH for all in districts served by World Vision.

Conrad N. Hilton Foundation: The Ethiopia WASH Program began its Hilton-funded WASH project in the Amhara region. The team led a start-up planning workshop with district stakeholders, selected communities to receive WASH services, hired staff for the project, and held a training to teach water-user associations how to use business models to sustain operation of WASH facilities.

In Ghana, the WASH team started its universal WASH project in Asutifi North district. Memorandums of understanding were signed between the district assembly and communities; 24 boreholes were drilled—some await hand pumps and others will be used to source piped-water systems; and 10 communities completed Community-Led Total Sanitation (CLTS).

A project extension was approved for the Mali WASH in health facilities project. Initially, the three-year, $3 million project was scheduled to end in September 2019. The extension will allow time to complete the project and a final evaluation.

The Niger $2 million proposal for WASH in health centers in Torodi and Makalondi communes was approved.

Golf Fore Africa: Golf Fore Africa provided $2.35 million to further WASH in Zambia and Zimbabwe. The majority of funds were allocated to the Zambia WASH Program to help close gaps in water coverage in select area programs (AP). This fiscal year, the WASH team constructed 12 mechanized piped-water systems and 60 boreholes with hand pumps. The Zimbabwe WASH Program focused on advancing WASH in 24 schools, including plans to equip latrines for girls for menstrual hygiene management (MHM). The latrines will complement the Sesame Workshop Girl Talk! Program, which promotes MHM education.

Grundfos: Nine country WASH programs (Ethiopia, Ghana, India, Mexico, Rwanda, Somalia, Tanzania, Zambia, and Zimbabwe) purchased more than 150 Grundfos pumps for mechanized piped-water systems, with some built in FY19 and the remainder planned for FY20. Additionally, 24 staff members from 12 countries in the East and Southern Africa regions joined Grundfos for a week-long training in Zambia.

Messiah College: The Affordable Sanitation Project is now complete, and the final report is expected before May 2020 from Messiah College. Preliminary findings revealed that latrine substructures lined with a rebar cage and plastic, as well as ferro-cement rings with concrete slabs, do not collapse in unstable soil conditions (such as during rainy season). Messiah College recommends WASH implementers, in addition to providing communities with CLTS, also ensure access to lining materials and ferro-cement rings, technical guidance to aid in proper latrine construction, and develop supply-driven marketing strategies (such as integrating sanitation marketing into ongoing interventions).

Procter & Gamble (P&G): World Vision continues to provide P&G household water purification (Purifier of Water) packets and filtration materials to ensure families have clean drinking water in humanitarian emergencies and as a bridge solution while communities wait for a permanent source of clean water. In FY19, P&G provided $2.8 million for water treatment packets; materials for water storage and handling; and training on safe drinking water treatment, household hygiene, and water safety.

During FY19, World Vision completed bridge solution projects in Cambodia, Mauritania, Mexico, Niger, Senegal, Sierra Leone, Somalia, and Zimbabwe. We also began a new project in Iraq to help internally displaced people who are returning to their homelands gain access to clean water. Funding for new projects to begin in FY20 will further deepen our impact and community engagement in Cambodia, Ghana, Indonesia, Kenya, Niger, the Philippines, and Somalia. We obtained emergency funding for projects in Malawi, Myanmar, and Zimbabwe in response to Cyclone Idai and monsoon floods.

PARTNERSHIP UPDATES

Sesame Workshop: World Vision hosted a WASH UP! evidence and learning workshop in Zambia. Each team shared best practices and challenges, and drafted a learning and improvement plan for FY20.

The WASH UP! program launched in India with full support from the District Magistrate, the highest government position in the district. In FY20, the WASH UP! curriculum will be piloted in 200 schools. The Rwanda WASH team and Sesame Workshop developed a WASH UP! storybook for children in early childhood development centers. It is being piloted with the expectation of scale-up to more centers in FY20.

In FY19, the WASH UP! program was awarded funding from the U.S. Agency for International Development for messages around neglected tropical diseases in West Africa, Dubai Cares for creation of menstrual hygiene curriculum in Zimbabwe, and the Stewardship Foundation for work in India and Kenya.

In FY20, the Mozambique WASH team will provide WASH UP! in 150 schools, thanks to a new Food for Education Grant from the U.S. Department of Agriculture requiring sanitation and hygiene education for schoolchildren.

University of North Carolina (UNC): The Water Institute at UNC completed the 14-country evaluation final report and several publishable manuscripts (such as peer-reviewed articles published in professional journals) using the evaluation data analysis. In FY20, the Water Institute will conduct a more detailed analysis of WASH data collected in health facilities and collaborate with World Vision for new funding opportunities from foundations and the U.S. government.

ENSURING OUR COMMITMENT TO QUALITY

Pauline Okumu, WASH Senior Director, World Vision International

As the new senior director of Global WASH operations, I look forward to steering our national office WASH programs through new opportunities and new challenges in the years ahead. I am new to this role, but not to the organization. I have been with World Vision for more than 17 years and most recently, I was the national director of World Vision Lesotho. I have seen the growth in our WASH programming and am proud we are considered the largest nongovernmental provider of water. However, our work and our responsibility does not stop there.

World Vision has committed to aligning with the U.N.'s Sustainable Development Goal (SDG) 6, which aims to ensure availability and sustainable management of water and sanitation for all. We take this commitment seriously. Currently, we are in development of a five-year global WASH business plan that has senior leadership support across the World Vision Partnership. This business plan is strategically aligned with the SDGs, which push us to strengthen and deepen our focus on quality.

Over the next five years, we aim to help improve household water quality, facilitate the opportunity for communities to have an insurance policy on their water systems, and ensure we make agreements with credible suppliers that offer certified, quality materials. Our work to create sustainable water services will incorporate plans for water security and resiliency, looking "beyond the pipe" to the broader integrity of ecosystems.

Over the next five years, we will continue to press for increased emphasis and quality improvement in our sanitation and hygiene behavior-change programming. Our efforts will incorporate a dedicated approach toward behavior change, guided by locally contextualized programming and ensuring that affordable and acceptable technology is available to facilitate these behaviors.

World Vision also is committed to continuous learning and improvement. We partner with many organizations and skilled professionals that challenge our staff to strive for excellence. We recently completed a 14-country WASH evaluation with our partners at the Water Institute at UNC. This evaluation is of value not only to World Vision, but to the entire WASH sector. We are using this database to make decisions about future programs. World Vision will build on these experiences and pay more rigorous attention to evidence-based programming and measuring impact of WASH services.

It is an honor for me to be a part of an organization with such a strong commitment to quality. I am excited for the years ahead, for all the people who will have better WASH services, opportunities for new collaborations and new partnerships, as well as all the advancements the WASH sector will make.

EAST AFRICA

1,362,219 PEOPLE
provided with access to clean drinking water

1,001,499 PEOPLE
gained access to improved household sanitation

1,535,749 PEOPLE
reached with hygiene behavior-change programming

OUTCOMES AND OUTPUTS	FY19 Annual Target	Burundi	Ethiopia	Kenya	Rwanda	Somalia	South Sudan	Sudan	Tanzania	Uganda	FY19 Annual Achieved	Achieved vs. Target
OUTCOME: Access to Clean Water												
People who gained access to a clean drinking water source in communities	1,297,169	48,045	351,709	186,275	159,028	81,992	129,613	153,100	130,743	121,714	1,362,219	105%
Children who gained access to a clean drinking water source at school	298,422	23,389	138,474	43,873	32,510	5,959	9,871	15,017	16,512	23,841	309,446	104%
Schools with a clean drinking water source installed	322	47	70	89	53	11	32	25	36	38	401	125%
Health centers with a clean drinking water source installed	177	5	14	24	19	19	30	27	32	14	184	104%
Successful boreholes completed and commissioned in communities, schools, and health centers	403	8	294	4	-	16	81	65	2	47	517	128%
Taps installed from successful water supply systems in communities, schools, and health centers	4,080	171	872	1,010	705	151	392	271	382	437	4,391	108%
Nonfunctioning water points rehabilitated in communities, schools, and health centers	736	98	80	54	118	45	160	224	37	29	845	115%
Households equipped with water-treatment techniques to disinfect drinking water	130,104	438	94,635	29,086	4,453	12,181	11,280	2,015	1,307	2,529	157,924	121%
OUTCOME: Access to Sanitation												
People who gained access to household sanitation	900,906	51,166	396,013	191,668	128,728	1,155	44,659	27,688	53,896	106,526	1,001,499	111%
Children who gained access to sanitation facilities at schools	189,650	9,439	99,338	14,065	28,498	2,862	7,974	3,390	19,791	19,294	204,651	108%
Household sanitation facilities constructed	168,128	10,961	80,252	29,745	31,815	204	6,563	4,398	9,900	20,674	194,512	116%
Communities certified as free from open defecation	1,067	13	823	212	-	-	5	28	-	75	1,156	108%
Improved, sex-separated sanitation facilities built at schools	1,835	114	396	250	360	40	57	74	290	263	1,844	100%
Schools that gained access to improved sanitation for children/youth with limited mobility	271	6	99	57	22	10	21	12	27	47	301	111%
Schools that gained access to improved sanitation for girls, with facilities to manage menstrual hygiene	227	-	56	41	21	7	19	4	27	36	211	93%
Improved, sex-separated sanitation facilities built at health centers	321	27	10	24	48	68	62	38	13	28	318	99%
Health centers that gained access to sex-separated sanitation facilities designed for people with limited mobility and appropriate for managing menstrual hygiene	106	4	10	16	5	21	27	20	7	10	120	113%
OUTCOME: Improved Hygiene Practices												
People who benefited from hygiene behavior-change promotion in communities	1,477,286	68,229	449,067	191,283	202,283	112,647	151,911	73,948	160,064	126,317	1,535,749	104%
Children who gained access to hand-washing facilities at schools	167,158	22,621	131,123	17,819	21,865	5,885	8,721	17,340	26,902	30,131	282,407	169%
Households that gained access to hand-washing facilities	146,278	10,231	52,670	31,148	33,178	283	6,634	5,414	16,170	22,380	178,108	122%
Schools that gained access to hand-washing facilities	431	43	128	67	55	13	26	27	93	74	526	122%
Health centers that gained access to hand-washing facilities	152	6	26	18	14	24	28	27	37	15	195	128%
OUTCOME: Improved Community Capacity for Sustainability												
WASH committees formed or reactivated with a financing system for maintenance and repair	1,146	101	661	92	-	70	161	63	77	345	1,570	137%
People trained in repair, maintenance, and construction of WASH facilities	1,464	38	129	431	196	18	77	250	53	475	1,667	114%
Functional Citizen Voice and Action (CVA) groups focused on WASH	111	8	9	33	35	-	3	-	113	21	222	200%
Faith leaders who participated in hygiene, sanitation, or behavior-change programming	1,437	219	297	329	177	20	43	111	139	317	1,652	115%
School WASH clubs or programs established	666	37	450	63	22	13	73	31	48	145	882	132%
OUTCOME: Access to WASH in Emergency Settings												
People with access to emergency drinking water supplies	98,571	-	33,500	-	1,732	34,828	10,030	-	-	11,100	91,190	NA
People with access to emergency sanitation systems	27,600	-	45,007	-	1,962	498	3,608	-	-	11,301	62,376	NA
People with access to appropriate solid-waste disposal facilities	20,800	-	63,394	-	1,962	7,210	7,521	-	-	3,292	83,379	NA
People with access to emergency hygiene supplies	124,247	-	287,645	1,152	1,962	21,638	21,833	-	-	24,704	358,934	NA

PROGRAM SUMMARY: EAST AFRICA

Regionwide, we achieved 105% of our target for bringing water to communities, while work to construct sanitation facilities topped out at 111% of target. Our hygiene education and awareness programs reached 104% of the target set for the year.

One reason we enjoyed these successes is because WASH teams were good stewards of the resources provided them, and strong advances were made in mobilizing more funding for this crucial work. For every $1 invested by World Vision U.S. private funding, approximately $3 more came in to support WASH efforts.

There is a continuing and strong need for WASH in emergency settings throughout the region. Drought and civil unrest have displaced millions, and we are working to bring WASH services to camps and host communities where displaced children and families have settled. Our work brought clean water to more than 91,000 people and sanitation to more than 60,000 people in emergency settings in Ethiopia, Somalia, Sudan, and South Sudan.

4,391 taps installed from successful water supply systems

882 school WASH programs established

1,652 faith leaders participated in WASH programming

Innovations and Partnerships

- In Ethiopia, the WASH Business Center Initiative was launched to address sustainability challenges. These are one-stop centers for production and sale of WASH products (sanitary pads, latrine slabs, etc.) and services. The government is fully engaged in these business centers, providing workspace and helping to create demand. Future plans include expanding into latrine construction and installing hand-washing facilities in institutions.
- In Kenya's Kirindon AP, staff members developed a campaign—*Mbuzi moja, choo bora* (one goat, a better toilet)—to encourage pastoralist families to invest in building latrines. The educational campaign emphasizes that the cost of a latrine can be covered by the sale of just one goat. Staff members reported they are seeing an increase in basic-level latrines, with many families confirming they financed their new latrines through the sale of chickens and/or goats.
- In Uganda, the Household Accountability Approach allows for door-to-door advocacy for hygiene and sanitation improvement. Uganda is overachieving on its community handwashing and latrine targets thanks to this approach, and 75 villages are registered as free from open defecation.

"The training I received helps me to take more care of my children at home. Now, they must wash their hands with water and soap before touching food."

—Rugaya, 28-year-old, mother of three in Blue Nile AP

Much credit for success goes to well-trained and talented staff members

World Vision is making great progress in East Africa, due largely to the experience and dedication of our field staff. We sent 13 staff members to the Desert Research Institute/Drexel WASH capacity-building program last year, and in FY20, we are sending 26, seven of whom are women.

Other training for staff in FY19 included solar power installation and troubleshooting and inspection of water systems. In Zambia, a detailed, hands-on training focused on how to properly size pumps had staff representation from Burundi, Ethiopia, Rwanda, Somalia, Sudan, and Tanzania.

HYGIENE CLUBS IMPROVE HEALTH AND WELL-BEING

Some of the simplest measures can make the greatest differences.

According to the Rwandan Ministry of Health data, clean water can reduce diarrhea—a common killer of young children—by 15%. But handwashing with soap can reduce diarrhea by more than 65%. Granted, in rural, isolated communities with poor access to water and soap, this is easier said than done.

To address this, the Rwanda WASH Program has established hygiene clubs in communities where it works to educate village residents on the best practices to protect health. These include building and using latrines and washing hands at critical times, such as after using the latrine and before handling or eating food.

Members of these clubs learn good hygiene practices and share them at home and with their neighbors. This positive peer pressure has been proven effective in community development settings. In some communities, clubs make and sell soap—a practice that provides a much-needed commodity and generates income for club members.

Members are thrilled with the results they've experienced by a change of habits. Not only are families experiencing better health, they are saving precious income by reducing medical costs.

"Before the creation of hygiene clubs, our community was suffering from the consequences of poor hygiene," said Theophile Ntawuhishimana, a club member. "Many of us practiced open defecation. We nearly never washed our hands after using the restroom. Our kids barely showered before going to school, and they would miss a lot of lessons because they would get sent home by their teachers. All these poor practices led to illness, and because we were already struggling to makes ends meet, seeking medical care was not an option."

> *"We're grateful to World Vision and their development partners for introducing community hygiene … Not only have our lives completely changed, they have given us a chance to educate those in our communities … especially our children."*
>
> *—Theophile Ntawuhishimana, a hygiene club member*

Janet Mukamuhinda has seen similar results in her home, and she is impressed by the health and economic opportunities that are associated with the clubs and improved lifestyles. Her children suffered from malnutrition due to chronic diarrhea, and she was underweight as well.

"Our testimonies are very visible. Today, my children are clean, healthy, and happy. Having access to clean water and proper hygiene and sanitation knowledge has given us a chance to give our children the childhood they deserve," she added.

"We produce soaps and lotion, and we have now established a market where we sell our products. Business has been going well," she said, adding that with the proceeds from selling soap, members have started a savings group. Savings groups use initial investments to create a loan fund from which members can borrow to invest in other economic pursuits.

Theophile predicts these changes will change habits and lifestyles for the long term. "These good hygiene practices will be passed down generations and will, in turn, prevent diseases and improve productivity amongst our communities."

SOUTHERN AFRICA

598,611 PEOPLE
provided with access to clean drinking water

905,453 PEOPLE
gained access to improved household sanitation

1,135,000 PEOPLE
reached with hygiene behavior-change programming

OUTCOMES AND OUTPUTS	FY19 Annual Target	Angola	DRC	Eswatini	Lesotho	Malawi	Mozambique	Zambia	Zimbabwe	FY19 Annual Achieved	Achieved vs. Target
OUTCOME: Access to Clean Water											
People who gained access to a clean drinking water source in communities	449,930	18,181	125,851	26,872	13,309	86,859	87,295	168,802	71,442	598,611	133%
Children who gained access to a clean drinking water source at school	123,825	13,941	28,054	10,262	6,712	10,867	9,000	12,281	44,770	135,887	110%
Schools with a clean drinking water source installed	267	14	43	38	17	18	27	20	67	244	91%
Health centers with a clean drinking water source installed	73	4	3	2	-	1	1	30	14	55	75%
Successful boreholes completed and commissioned in communities, schools, and health centers	788	22	45	8	6	188	166	443	21	899	114%
Taps installed from successful water supply systems in communities, schools, and health centers	2,845	101	394	3,726	238	79	56	532	267	5,393	190%
Nonfunctioning water points rehabilitated in communities, schools, and health centers	702	17	29	63	-	111	50	73	482	825	118%
Households equipped with water-treatment techniques to disinfect drinking water	110,617	2,264	22,000	19,713	6,288	41,039	12,099	10,334	15,215	128,952	117%
OUTCOME: Access to Sanitation											
People who gained access to household sanitation	648,798	38,020	80,717	12,096	3,156	499,045	73,890	174,150	24,379	905,453	140%
Children who gained access to sanitation facilities at schools	116,898	11,162	78,652	11,765	11,149	26,886	1,164	11,246	39,132	191,156	164%
Household sanitation facilities constructed	122,943	5,244	12,476	1,872	624	99,187	14,778	30,718	4,367	169,266	138%
Communities certified as free from open defecation	1,768	16	23	-	-	1,162	46	597	80	1,924	109%
Improved, sex-separated sanitation facilities built at schools	1,340	98	160	254	323	191	33	199	483	1,741	130%
Schools that gained access to improved sanitation for children/youth with limited mobility	185	12	44	24	37	29	3	16	90	255	138%
Schools that gained access to improved sanitation for girls, with facilities to manage menstrual hygiene	195	13	46	2	37	29	3	17	87	234	120%
Improved, sex-separated sanitation facilities built at health centers	222	18	14	9	-	30	6	41	20	138	62%
Health centers that gained access to sex-separated sanitation facilities designed for people with limited mobility and appropriate for managing menstrual hygiene	64	4	4	2	-	3	1	12	10	36	56%
OUTCOME: Improved Hygiene Practices											
People who benefited from hygiene behavior-change promotion in communities	885,733	43,598	114,109	47,467	25,770	435,289	49,951	152,516	266,300	1,135,000	128%
Children who gained access to hand-washing facilities at schools	165,101	11,162	81,049	14,546	22,119	37,960	1,164	25,350	63,818	257,168	156%
Households that gained access to hand-washing facilities	135,086	2,418	8,842	2,432	5,156	102,537	17,124	16,790	15,333	170,632	126%
Schools that gained access to hand-washing facilities	352	14	86	44	72	63	2	63	120	464	132%
Health centers that gained access to hand-washing facilities	133	4	3	4	1	3	19	18	26	78	59%
OUTCOME: Improved Community Capacity for Sustainability											
WASH committees formed or reactivated with a financing system for maintenance and repair	1,927	37	65	32	11	358	249	382	307	1,441	75%
People trained in repair, maintenance, and construction of WASH facilities	1,169	37	282	202	39	876	16	244	160	1,856	159%
Functional Citizen Voice and Action (CVA) groups focused on WASH	174	37	13	4	1	30	12	6	59	162	93%
Faith leaders who participated in hygiene, sanitation, or behavior-change programming	1,534	74	267	74	-	189	249	200	63	1,116	73%
School WASH clubs or programs established	273	14	64	18	29	109	31	47	120	432	158%
OUTCOME: Access to WASH in Emergency Settings											
People with access to emergency drinking water supplies	5,557	-	176,139	-	65,704	-	92,796	-	43,874	378,513	6811%
People with access to emergency sanitation systems	3,850	-	-	-	-	112,955	92,796	-	-	205,751	5344%
People with access to appropriate solid-waste disposal facilities	-	-	-	-	-	-	12,152	-	-	12,152	0%
People with access to emergency hygiene supplies	3,850	-	-	-	70,618	50,485	68,761	-	61,148	251,012	6520%

PROGRAM SUMMARY: SOUTHERN AFRICA

In FY19, the Southern Africa region installed 7,117 water points, representing a 60% growth from FY18. With an aim to ensure children and families have access to clean water closer to home, WASH teams accelerated their focus on piped-water systems, installing more than double the number of systems compared to FY18.

The eight country WASH teams in Southern Africa installed 5,393 taps from piped-water supply systems, constructed 899 boreholes with hand pumps, and rehabilitated 825 nonfunctioning water points.

In FY19 alone, more than 1,920 communities were certified as free from open defecation, a 43% increase from FY18. This achievement is a result of greater collaboration with governments, as seen with the Malawi WASH team.

WASH teams were called to respond to major emergencies, including Cyclone Idai in Malawi, Mozambique, and Zimbabwe, and an Ebola outbreak in the Democratic Republic of Congo. A total of 378,513 children and adults gained access to emergency drinking water supplies and 205,751 people gained access to emergency sanitation systems.

5,393 taps installed from successful water supply systems

432 school WASH programs established

1,116 faith leaders participated in WASH programming

Innovations and Partnerships

- Nearly 20,000 students in Angola were reached with hygiene messaging through our partnership with The Mentor Initiative.
- In Malawi, 179 (74 males and 105 females) faith leaders participated in hygiene, sanitation, and behavior-change programming. The trained faith leaders took the lead role engaging community members and students in the biblical understanding of WASH.
- In Mozambique and Zambia, water committees were actively involved in community saving groups, where they contributed resources to help ensure the ongoing functionality of WASH infrastructure.
- In Zimbabwe, local health workers trained families how to use P&G Purifier of Water packets. These packets enable households and schools to have clean water.

> *"I am so happy that today I have water near me for the first time in my life. Because of this [water system] in our community, we know that we now have water even during the drought."*
>
> *—Mapoloko, 40, Makhunoane AP, Lesotho*

Encouraging healthy practices in communities

Country WASH teams sought creative approaches to encourage sustained healthy hygiene behaviors within communities and schools. Pictured at right is an example from Eswatini. Some teams used "nudges," such as brightly painted pathways from the latrine to the hand-washing station at schools, or messages painted on WASH infrastructure such as community water reservoirs and tap stands in local languages as well as English.

Elizabeth (above left) with two of her grandchildren collecting clean water at the tap to take home.

Elizabeth and Mxobi, her grandson, hang up their clean laundry.

WASHING CLOTHES WORRY-FREE

Elizabeth Sdudla Maseko, a 61-year-old grandmother, used to worry about crocodiles while collecting dirty water to drink and for laundry in Mkhiweni area program of Eswatini.

Elizabeth and her family have lived near the Mjoli Dam for many years. The dam provided water for them until the El Niño drought in 2015 and 2016 dried up the majority of the water. The Mjoli area is very dry and has been affected by drought for many years.

After the drought, the surrounding area became home to crocodiles. "Before getting water, you would have to look around to see if a crocodile was nearby," said Elizabeth. "If so, you had to get sticks and stones to throw at it until it went back into the dam."

All five of Elizabeth's family members had seen crocodiles at the dam, but luckily none was ever injured. Because the dam was the only source of water before World Vision's intervention, they used the dirty water for drinking, washing, and bathing.

At first, Elizabeth was scared to get water from the dam, but eventually she overcame her fear. She also worried about protecting their cattle and goats, since the dam was their water source, too.

After World Vision installed a tap close to their home, she and her family were able to easily access clean water to drink as well as for other household activities, including washing clothes and taking care of the livestock.

"It was like a dream when it was announced that we can now go and get water from the water taps," exclaimed Elizabeth. "This water is very clean and tasty. We are now able to wash our clothes with ease and bathe every day. The younger children's skin is very healthy, and [they] no longer have skin rashes like before."

"We are grateful to World Vision for the clean water," said Elizabeth.

WHAT CAN BE

Jay Welker is the National Leadership Council co-lead for WASH and a donor. He and his wife, Judy, visited an area program in Zambia, where they were able to witness the change that clean water brings to communities. Here are his thoughts on the experience.

On a recent trip to Zambia, we had the opportunity to engage across a diverse spectrum of how World Vision partners with communities to deliver clean water, sanitation, and hygiene services.

We began our trip in Zolo, a village that did not have access to clean water. Health was poor, the prevalence of malnutrition and stunting in children was high. Women in the village shared their harrowing stories of getting water from a hand-dug source on steep and rocky terrain. We listened empathetically and prayed for their health and perseverance as World Vision staff members worked through the assessment process needed before a new improved water source could be developed in Zolo. It was hard to sleep that night. It's impossible to leave a village like Zolo unaffected. Your heart aches and tears flow as you relive that visit over and over again. We prayed for World Vision staff members and the work they would do to help Zolo begin to build a new foundation and unlock its potential by delivering clean water.

We ended our trip in Kafunka in the Kawaza area program. Talk about saving the best for last. World Vision had been working in Kafunka community for many years, and this village was thriving. It was the first village I had ever seen that was formally laid out in a grid structure (including the latrines, which were in neat rows behind the houses), and even had a roundabout in the center of the village. Kafunka had enjoyed clean water for several years, but due to considerable population growth, needed more than the current wells were supplying. World Vision worked with the village and local leaders to build a solar-powered mechanized system with a 10,000-liter (2,642-gallon) storage tank.

Clean water was now abundant and created long-term sustainability with a clean water supply that could handle substantial population growth, managed by a water committee. The water was delivered through distribution pipes throughout the village with dozens of water points reaching clusters of homes throughout Kafunka. The villagers were successfully engaged in farming and cattle, which had benefited from water access and agricultural productivity and economic empowerment programs by World Vision.

Visiting Kafunka was a true capstone to our visit to Zambia. It was a model that tangibly demonstrated what can be for rural villages everywhere. It also showcased just how good World Vision is at getting the job done, partnering with and empowering village leaders to create a path for transformation and sustainable economic empowerment.

As Kafunka thrives, resources can now be shifted to repeat the cycle and show the people of Zolo what can be for them as they begin their partnership with World Vision.

WEST AFRICA

391,147 PEOPLE
provided with access to clean drinking water

346,077 PEOPLE
gained access to improved household sanitation

666,370 PEOPLE
reached with hygiene behavior-change programming

OUTCOMES AND OUTPUTS	FY19 Annual Target	Chad	Ghana	Mali	Mauritania	Niger	Senegal	Sierra Leone	FY19 Annual Achieved	Achieved vs. Target
OUTCOME: Access to Clean Water										
People who gained access to a clean drinking water source in communities	366,850	29,000	86,982	143,150	10,168	101,100	20,247	500	391,147	107%
Children who gained access to a clean drinking water source at school	46,175	2,648	9,702	15,400	11,740	19,500	3,080	-	62,070	134%
Schools with a clean drinking water source installed	130	13	41	51	36	30	22	-	193	148%
Health centers with a clean drinking water source installed	86	2	16	19	11	9	-	-	57	66%
Successful boreholes completed and commissioned in communities, schools, and health centers	422	43	148	138	-	86	10	-	425	101%
Taps installed from successful water supply systems in communities, schools, and health centers	911	-	171	482	260	288	112	-	1,313	144%
Nonfunctioning water points rehabilitated in communities, schools, and health centers	237	41	49	5	8	36	1	1	141	59%
Households equipped with water-treatment techniques to disinfect drinking water	87,420	3,119	5,925	15,510	8,603	41,925	14,275	4,905	94,262	108%
OUTCOME: Access to Sanitation										
People who gained access to household sanitation	357,799	42,595	41,585	106,200	16,475	98,224	36,488	4,510	346,077	97%
Children who gained access to sanitation facilities at schools	47,020	5,171	7,561	7,283	11,740	18,557	4,514	2,158	56,984	121%
Household sanitation facilities constructed	42,507	6,085	6,493	11,382	2,746	11,619	3,620	923	42,868	101%
Communities certified as free from open defecation	624	34	99	70	24	19	81	40	367	59%
Improved, sex-separated sanitation facilities built at schools	892	48	56	70	189	72	40	30	505	57%
Schools that gained access to improved sanitation for children/youth with limited mobility	132	16	9	24	36	26	27	5	143	108%
Schools that gained access to improved sanitation for girls, with facilities to manage menstrual hygiene	132	-	9	12	36	3	3	5	68	52%
Improved, sex-separated sanitation facilities built at health centers	289	9	64	43	59	10	-	-	185	64%
Health centers that gained access to sex-separated sanitation facilities designed for people with limited mobility and appropriate for managing menstrual hygiene	69	3	12	23	10	5	-	-	53	77%
OUTCOME: Improved Hygiene Practices										
People who benefited from hygiene behavior-change promotion in communities	676,477	22,617	141,252	142,510	32,777	249,872	58,715	18,627	666,370	99%
Children who gained access to hand-washing facilities at schools	116,359	5,473	45,534	17,170	12,081	16,325	2,683	6,931	106,197	91%
Households that gained access to hand-washing facilities	60,499	651	13,315	19,688	9,578	15,405	4,691	1,225	64,553	107%
Schools that gained access to hand-washing facilities	786	21	649	70	39	59	39	42	919	117%
Health centers that gained access to hand-washing facilities	159	8	66	42	11	5	-	52	184	116%
OUTCOME: Improved Community Capacity for Sustainability										
WASH committees formed or reactivated with a financing system for maintenance and repair	743	61	348	312	70	181	175	20	1,167	157%
People trained in repair, maintenance, and construction of WASH facilities	1,620	49	580	237	-	400	120	18	1,404	87%
Functional Citizen Voice and Action (CVA) groups focused on WASH	204	9	87	99	6	38	-	5	244	120%
Faith leaders who participated in hygiene, sanitation, or behavior-change programming	1,710	386	608	537	51	99	107	120	1,908	112%
School WASH clubs or programs established	500	20	254	138	38	129	5	23	607	121%
OUTCOME: Access to WASH in Emergency Settings										
People with access to emergency drinking water supplies	6,000	23,000	-	-	-	1,500	-	-	24,500	NA
People with access to emergency sanitation systems	13,420	2,980	-	-	-	3,528	-	-	6,508	NA
People with access to appropriate solid-waste disposal facilities	7,000	-	-	-	-	-	-	-	-	NA
People with access to emergency hygiene supplies	1,200	26,412	920	-	-	1,273	-	-	28,605	NA

PROGRAM SUMMARY: WEST AFRICA

In FY19, all seven country WASH teams in the West Africa Region (WAR) WASH Program helped provide 391,147 vulnerable children and adults with access to clean water. WASH teams did so despite the myriad of challenges faced throughout the region—including ongoing civil unrest in Mali and Niger, and hyperinflation in Sierra Leone. Teams also focused on WASH accessibility, quality, and sustainability.

During the reporting period, the WAR WASH Program installed 1,313 taps from successful water supply systems in communities, schools, and health centers—exceeding the annual target of 911 taps. Today, girls and women living in these communities can now access clean water closer to home, avoid traveling long distances to collect water, and have reduced risks of attacks or harassment.

WASH teams also trained 94,262 families to use water treatment techniques to disinfect water before drinking or using it. In FY20, to further ensure water quality, all WAR WASH teams will submit water samples to the World Vision laboratory in Ghana for microbiological, chemical, and physical tests on water and environmental samples.

1,313 taps installed from successful water supply systems

607 school WASH programs established

1,908 faith leaders participated in WASH programming

Innovations and Partnerships

- In Ghana, the WASH team joined with local and international partners to launch a groundbreaking universal WASH project in Asutifi North district. By 2022, the project aims to provide all families living in the district with access to WASH services. See next page for the full story.
- The Mali WASH team, in partnership with World Health Organization, Centers for Disease Control and Prevention (CDC), and the Mali Ministry of Health, helped promote WASH in healthcare facilities using a tool called WASH Fit. This model requires functional WASH facilities (which World Vision provides), and biomedical waste management, among other things. The number of healthcare centers meeting the standard increased from two to 18 after just six months.
- The Niger WASH Program prioritized water quality efforts. Area program WASH facilitators were trained and equipped with portable kits to conduct on-site water quality analysis, and household water quality analysis.
- In Sierra Leone, the WASH team worked with the Ministry of Health and Sanitation to organize a one-day "Break the Silence" event. The event welcomed 250 students and community members, inviting them to learn about and openly discuss menstruation. Following the event, 13 school health clubs were formed to teach hygiene and sanitation practices with a focus on menstrual hygiene.

> *"Before the intervention of World Vision, we had no boreholes. We suffered from lack of water. Our children had stomachaches and diarrhea. Since the borehole was constructed, the cases of diarrhea and stomachaches have decreased. We are now healthy, and our children can play and go to school."*
>
> *—Larmadji Martine from Madana village in Ngourkosso AP, Chad*

Empowering women through integrated WASH programming

In FY19, World Vision Senegal's WASH and Economic Empowerment programs joined together to train Senegalese women on soap making and hygiene promotion. Equipped with lessons learned, the new entrepreneurs began to make and sell soap in their communities, resulting in increased household incomes, greater access to soap, and more communities practicing healthy hygiene behaviors. This also helped drive demand for latrine construction, as the women also participated in savings groups to save money for home latrines. Demand for latrines in the community is now on the rise.

Young Agbenyo of Ghana splashes water while visiting the community well provided by World Vision. Soon, other Ghanian children will joyfully do the same. World Vision is working on a groundbreaking project to provide WASH to all families living in the Asutifi North district of Ghana.

UNIVERSAL WASH FOR FAMILIES IN GHANA

World Vision has joined with local and international partners to implement a four-year universal access to WASH project in the Asutifi North district in Ghana. The project is to provide sustainable clean water access to 32,000 children and adults, as well as sanitation and hygiene services to 56 communities, 15 schools, and seven healthcare facilities by 2022.

The universal WASH project is being implemented with key partners, including Aquaya Institute, the Asutifi North District Assembly, IRC WASH in Ghana, Netcentric Campaigns, and Safe Water Network. Funding is provided by the Conrad N. Hilton Foundation.

"[We are targeting] communities with no water service at all and those with limited water service," explained Robel Lambisso, WASH program manager for World Vision in Ghana. "[Our] total estimated budget is $3.5 million, of which $3 million is for water interventions and a half million is for sanitation and hygiene in the district."

This first year, the project focused on improving sustainable management and governance of water facilities by promoting community-level capacity through forming Water and Sanitation Management Teams (WSMTs) in 30 communities, schools, and healthcare facilities. Agreements with communities, the district assembly, and World Vision will help ensure sustainable management of water facilities. Training of WSMTs is in progress.

Additionally, the project set out to provide 30 improved water sources (25 wells and five limited, mechanized piped-water systems). So far, 24 productive wells have been drilled. Also, construction work on one limited, mechanized system has begun, and preparations are being made to begin construction on the other two limited, mechanized systems for large communities. Plans are underway to drill two wells for mechanization at two healthcare facilities.

Another key focus of the project is to promote improved sanitation and hygiene behaviors and practices in households, communities, and institutions. Community-Led Total Sanitation (CLTS) is one approach used to influence behavior change and increase demand for sanitation services at the household level. To date, CLTS has been conducted in 10 communities. Also, two institutions (one healthcare facility and one school) will receive institutional latrines based on the CDC recommendations for sanitation in healthcare facilities and schools.

Community-level campaigns are planned to increase awareness of the need to pay for WASH services and advocate for improved WASH systems. These will take place in 30 communities in the Asutifi North district and will be carried out in collaboration with Netcentric Campaigns.

"[This is] historic," said the Ahafo regional minister at the project launch ceremony in early 2019. "We are launching the first investment phase in line with the master plan to achieve full coverage of water and sanitation by 2030 in Asutifi North district. I commend Conrad N. Hilton Foundation and grantees on behalf of the government of Ghana, and entreat all to work hard, partner strongly, and collaborate to ensure this investment gets to the most vulnerable in the district."

ASIA-PACIFIC

337,888 PEOPLE
provided with access to clean drinking water

243,236 PEOPLE
gained access to improved household sanitation

724,334 PEOPLE
reached with hygiene behavior-change programming

OUTCOMES AND OUTPUTS	FY19 Annual Target	Cambodia	India	Sri Lanka	Bangladesh	PNG	Indonesia	Philippines	FY19 Annual Achieved	Achieved vs. Target
OUTCOME: Access to Clean Water										
People who gained access to a clean drinking water source in communities	313,963	37,095	161,497	14,597	92,789	2,700	2,930	26,280	337,888	108%
Children who gained access to a clean drinking water source at school	65,616	12,431	19,468	10,717	2,902	-	862	8,090	54,470	83%
Schools with a clean drinking water source installed	164	56	-	49	7	-	4	22	138	84%
Health centers with a clean drinking water source installed	78	12	36	16	2	-	-	14	80	103%
Successful boreholes completed and commissioned in communities, schools, and health centers	398	116	42	-	171	-	-	-	329	83%
Taps installed from successful water supply systems in communities, schools, and health centers	10,455	1,735	2,899	3,280	1,821	-	-	9	9,744	93%
Nonfunctioning water points rehabilitated in communities, schools, and health centers	1,089	20	251	545	73	-	-	-	889	82%
Households equipped with water-treatment techniques to disinfect drinking water	43,141	10,283	7,122	5,483	850	-	-	5,714	29,452	68%
OUTCOME: Access to Sanitation										
People who gained access to household sanitation	206,350	42,302	124,019	6,980	62,916	5,145	1,874	-	243,236	118%
Children who gained access to sanitation facilities at schools	42,177	7,194	46,161	12,107	14,581	1,625	-	7,662	89,330	212%
Household sanitation facilities constructed	28,556	8,793	21,296	1,582	12,128	1,012	-	-	44,811	157%
Communities certified as free from open defecation	774	71	85	-	-	2	-	-	158	20%
Improved, sex-separated sanitation facilities built at schools	653	124	360	90	20	50	10	25	679	104%
Schools that gained access to improved sanitation for children/youth with limited mobility	113	31	65	-	-	4	-	25	125	111%
Schools that gained access to improved sanitation for girls, with facilities to manage menstrual hygiene	114	31	53	1	-	12	-	8	105	92%
Improved, sex-separated sanitation facilities built at health centers	166	-	66	5	7	-	-	-	78	47%
Health centers that gained access to sex-separated sanitation facilities designed for people with limited mobility and appropriate for managing menstrual hygiene	43	-	27	6	-	-	-	-	33	77%
OUTCOME: Improved Hygiene Practices										
People who benefited from hygiene behavior-change promotion in communities	581,825	57,762	283,673	11,792	354,102	10,332	-	6,673	724,334	124%
Children who gained access to hand-washing facilities at schools	57,877	10,627	65,034	9,973	8,457	-	-	5,905	99,996	173%
Households that gained access to hand-washing facilities	41,136	7,784	36,515	1,462	8,261	507	2,053	239	56,821	138%
Schools that gained access to hand-washing facilities	212	87	307	38	174	-	-	24	630	297%
Health centers that gained access to hand-washing facilities	81	12	40	7	3	-	-	-	62	77%
OUTCOME: Improved Community Capacity for Sustainability										
WASH committees formed or reactivated with a financing system for maintenance and repair	1,734	191	121	63	538	3	34	47	997	57%
People trained in repair, maintenance, and construction of WASH facilities	1,594	560	757	79	181	50	-	-	1,627	102%
Functional Citizen Voice and Action (CVA) groups focused on WASH	280	-	23	5	25	2	-	-	55	20%
Faith leaders who participated in hygiene, sanitation, or behavior-change programming	791	-	654	81	321	-	-	-	1,056	134%
School WASH clubs or programs established	260	104	100	80	172	58	-	23	537	207%
OUTCOME: Access to WASH in Emergency Settings										
People with access to emergency drinking water supplies	-	-	66,140	16,170					82,310	NA
People with access to emergency sanitation systems	-	-	-	1,050					1,050	NA
People with access to appropriate solid-waste disposal facilities	-	-	-	-					-	NA
People with access to emergency hygiene supplies	-	-	-	1,999					1,999	NA

NOTE: World Vision U.S. directly supports Cambodia, India, and Sri Lanka through private funding. This report highlights our World Vision WASH work across the Asia-Pacific region, including additional countries funded by other World Vision support offices.

PROGRAM SUMMARY: ASIA-PACIFIC

This past fiscal year, the Asia-Pacific WASH Program made especially great progress on WASH in schools, filling in the gaps in Bangladesh, Cambodia, India, Papua New Guinea, Sri Lanka, Indonesia, and the Philippines.

A total of 54,470 students at 138 schools were provided with a source of clean drinking water. In addition, 89,330 children gained access to 679 improved, sex-separated latrines at their schools, more than double the annual target. At 125 schools, children with limited mobility also gained access to latrines, and at 105 schools, girls gained access to facilities to manage menstrual hygiene.

In terms of hygiene, 630 schools, almost triple the annual target, gained access to hand-washing facilities for close to 100,000 students. And 537 school WASH clubs were established to effect long-term WASH behavior change both with students and at home with their families and communities.

9,744 taps installed from successful water supply systems

537 school WASH programs established

1,056 faith leaders participated in WASH programming

Innovations and Partnerships

- In Bangladesh, people with disabilities were given priority for water management committee membership to ensure their involvement in decision-making and resource allocation.
- In partnership with World Food Program and Department of Education, the Cambodia WASH Program installed new handwashing and latrine technology in which water is pumped to an elevated tank in 14 schools without electricity.
- In India, World Vision partnered with UNICEF to strengthen WASH services in healthcare facilities and schools to improve women's and children's health outcomes.
- In Papua New Guinea, sanitation for homes built on stilts over the sea has required innovative solutions. World Vision is testing different waterless toilet technologies to find an acceptable solution.
- In Sri Lanka, the WASH Program is using a rights-based approach to ensure communities receive WASH services and facilities from the government, with a focus on governance and advocacy to address WASH gaps.

"This [hand-washing] device works like magic. I could have built a house with the money I spent just on buying medicine [for worms] due to lack of awareness about proper handwashing."

—Shahina, 32, Bangladesh

Several times a year, Shahina and her family of five suffered from intestinal issues until she learned from World Vision that handwashing with soap prevents many diseases.

Students learn personal hygiene through games

Children love to play games, which can be used as a learning tool at schools to teach them important and practical lessons on personal hygiene. In India, World Vision uses WASH games as a creative way to teach children about the importance of drinking only clean water, how to store water and keep it safe from contamination, proper sanitation practices, and good hygiene habits. Student WASH club members take an active part in leading the games and reinforcing lessons with other students.

> *We are now healthy and feel safe."*
>
> *—Sreb Oeun, 64*

A GRANDMOTHER TRANSFORMS HER FAMILY

With just a $60 loan from a microfinance institution, a grandmother is able to greatly improve her family's health and well-being by building a latrine and practicing proper sanitation and hygiene.

Sreb Oeun, 64, lives with her 3-year-old grandson in Thma Puok district, Cambodia. Her children have migrated to Thailand for work, but come back to visit a few times a year.

Although Sreb and her grandson live in the middle of a village with many neighbors who have latrines, her family never had one until July 2019. Instead, they would walk about 328 yards from their home to defecate in the open, which caused them not only embarrassment, but also created safety concerns.

"When my daughter and I walked to defecate away from home at night, we were really afraid of snake bites, sexual abuse, and violence," Sreb said. In addition to embarrassment and danger, they also faced health issues. Her grandson got severe diarrhea early last year and went to the hospital for treatment, which cost 20,000 riels ($50).

When World Vision started using the CLTS approach in her village, Sreb says her situation changed. She participated in hygiene promotion sessions and decided to take out a microloan of $60 from a private microfinance institution to pay for latrine construction.

Sreb also saved money sent from her children working in Thailand to purchase improved water from a piped-water system.

"Since we have had our latrine and clean water, we have saved more time and money because we don't get ill often like before," Sreb said. "We are now healthy and feel safe."

WASH UP! A PARTNERSHIP THAT'S GROWING UP WITH ITS AUDIENCE

Abigail Bucuvalas, Senior Director, Education Programs, International Social Impact, Sesame Workshop

Five years ago, Sesame Workshop and World Vision launched their partnership with the vision of establishing a school-based educational program about water, sanitation, and hygiene in at least 100 schools in 15 countries by 2020. At the end of 2019, we're quite close to achieving our goal, with WASH UP!, currently reaching children in schools in Afghanistan, Ghana, Honduras, Iraq, Jordan, Lebanon, Malawi, Mali, Niger, Rwanda, Zambia, and Zimbabwe. India just began its pilot in 25 schools, and conversations are underway for implementation in Kenya and Mozambique.

Sesame and World Vision partner together and complement each other in a unqiue way. We both believe young children are benefiting from the combination of our commitment to meaningful program outcomes, as well as our respective organizational strengths. WASH UP! is expanding geographically, capturing lessons learned and using these lessons to inform the development of new content for each new context.

The program also has been adapted to incorporate related topic areas, such as disability-inclusive WASH and neglected tropical diseases in West Africa, and social-emotional learning in the Syrian response region. The original program and these expansions have reached children ages 5 to 9 years old and their educators, most often through public primary schools.

Over the past two years, with generous support from Dubai Cares, Sesame and World Vision have leveraged the WASH UP! partnership to create Girl Talk, a menstrual hygiene management (MHM) and puberty education program for girls and boys ages 10 to 14 years old in rural Zimbabwe. This program enables WASH UP! graduates to continue their Sesame Muppet-hosted learning experiences as they grow and encounter new challenges, helping to address the enormous impact of the onset of menstruation on adolescent girls' ability to continue participating fully in school. The program is implemented in World Vision-supported public schools and aims to improve participating children's knowledge about puberty and menstruation, attitudes about menstruation, and self-reported behaviors related to MHM.

The Sesame Workshop and World Vision relationship is undoubtedly a key factor in the success of the new Girl Talk program.

LATIN AMERICA & CARIBBEAN

113,941 PEOPLE
provided with access to clean drinking water

56,158 PEOPLE
gained access to improved household sanitation

133,850 PEOPLE
reached with hygiene behavior-change programming

OUTCOMES AND OUTPUTS	FY19 Annual Target	Haiti	Honduras	Nicaragua	Bolivia	Mexico	El Salvador	Guatelmala	FY19 Annual Achieved	Achieved vs. Target
OUTCOME: Access to Clean Water										
People who gained access to a clean drinking water source in communities	118,474	42,307	47,311	2,508	14,591	4,694	-	2,530	113,941	96%
Children who gained access to a clean drinking water source at school	21,080	8,520	5,556	9,413	120	7,451	4,948	-	36,008	171%
Schools with a clean drinking water source installed	164	30	70	51	3	23	18	73	268	163%
Health centers with a clean drinking water source installed	22	6	8	-	4	-	-	-	18	82%
Successful boreholes completed and commissioned in communities, schools, and health centers	9	3	-	-	-	1	-	-	4	44%
Taps installed from successful water supply systems in communities, schools, and health centers	11,239	339	9,687	88	1,389	287	-	106	11,896	106%
Nonfunctioning water points rehabilitated in communities, schools, and health centers	420	14	75	604	7	-	-	-	700	167%
Households equipped with water-treatment techniques to disinfect drinking water	20,007	8,870	5,724	1,494	2,093	12,009	3,701	-	33,891	169%
OUTCOME: Access to Sanitation										
People who gained access to household sanitation	56,643	46,488	7,310	424	979	180	-	777	56,158	99%
Children who gained access to sanitation facilities at schools	18,281	12,824	4,418	9,658	2,741	3,724	2,394	7,429	43,188	236%
Household sanitation facilities constructed	11,401	8,856	1,542	106	252	31	-	674	11,461	101%
Communities certified as free from open defecation	48	35	23	-	-	-	-	5	63	131%
Improved, sex-separated sanitation facilities built at schools	547	275	200	215	15	37	7	-	749	137%
Schools that gained access to improved sanitation for children/youth with limited mobility	112	39	20	22	1	-	1	-	83	74%
Schools that gained access to improved sanitation for girls, with facilities to manage menstrual hygiene	135	39	34	10	-	3	-	-	86	64%
Improved, sex-separated sanitation facilities built at health centers	138	48	19	-	18	-	-	-	85	62%
Health centers that gained access to sex-separated sanitation facilities designed for people with limited mobility and appropriate for managing menstrual hygiene	32	8	6	-	9	-	-	-	23	72%
OUTCOME: Improved Hygiene Practices										
People who benefited from hygiene behavior-change promotion in communities	84,062	57,763	15,125	6,348	8,660	38,070	5,884	2,000	133,850	159%
Children who gained access to hand-washing facilities at schools	21,825	12,824	4,418	9,364	2,741	5,497	7	7,966	42,817	196%
Households that gained access to hand-washing facilities	17,320	11,971	4,648	1,733	252	83	-	-	18,687	108%
Schools that gained access to hand-washing facilities	157	39	53	56	15	24	-	-	187	119%
Health centers that gained access to hand-washing facilities	32	8	5	-	9	-	-	-	22	69%
OUTCOME: Improved Community Capacity for Sustainability										
WASH committees formed or reactivated with a financing system for maintenance and repair	217	149	66	26	19	4	-	22	286	132%
People trained in repair, maintenance, and construction of WASH facilities	111	-	303	-	-	-	-	-	303	273%
Functional Citizen Voice and Action (CVA) groups focused on WASH	65	16	8	-	-	-	-	-	24	37%
Faith leaders who participated in hygiene, sanitation, or behavior-change programming	458	266	126	20	-	-	-	-	412	90%
School WASH clubs or programs established	179	38	31	72	-	38	2	-	181	101%

In FY19, World Vision U.S. supported Haiti, Honduras, and Nicaragua with private funding. This report highlights our World Vision WASH work across the Latin America-Caribbean region, including additional countries funded by other World Vision support offices.

PROGRAM SUMMARY: LATIN AMERICA & CARIBBEAN

The need for clean water continues to increase in Latin America and Caribbean area programs. In each country, the WASH program is working with governments to integrate hygiene behavior-change practices and other health modules into school curriculums as well as meeting with community leaders to fill in the gaps to reach children and families.

More than 42,000 students gained access to hand-washing facilities at 187 schools, reaching 196% of the annual target. More than 36,008 schoolchildren were provided with clean drinking water at 268 schools, achieving 171% of the annual target.

Through the construction of 749 improved, sex-separated latrines, 43,188 students gained access to improved sanitation. In addition, 86 schools benefited from improved sanitation for girls to manage menstrual hygiene while at school, and 83 schools gained access to improved sanitation for students with limited mobility.

11,896 taps installed from successful water supply systems

181 school WASH programs established

412 faith leaders participated in WASH programming

Innovations and Partnerships

- During healthcare facility visits in Bolivia, 7,513 patients were taught about waterborne diseases and hygiene practices to prevent transmission, which resulted in fewer visits for treatment.
- With UNICEF, the Haiti WASH program reached 8,520 children with access to clean water and sanitation facilities, achieving 176% of the target.
- In Honduras, 66 WASH committees were trained on how to efficiently manage and operate water systems and protect watersheds to maintain functional systems and good water quality for their communities.
- In Mexico, 12,009 households received P&G Purifier of Water packets, and 38,070 people participated in hygiene and sanitation behavior-change programs. The project concluded its activities far exceeding its goals.

"Together with World Vision, we have achieved many things: restored some forests, taught farmers to cultivate with environmentally friendly technologies, and declared some micro-watersheds as protected areas with management plans. As a result, there is now a greater production of water in the micro-watershed, and greater water availability for families."

—Darwin Benítez, 22, Honduras

New latrines and hygiene practices transform families

For more than 20 years, Polès Mompremier (pictured right) and his family have lived in La Renos, Haiti. In his community, homes are far apart, vegetation is scarce and dry, and essential infrastructure is nonexistent. Unfortunately, seven of his children died, one from cholera, which ravaged the community. Through a meeting at his church, Polès learned about the importance of practicing hygiene as well as why a latrine is necessary for the health of his family. After construction of the latrine, he and his family, as well as the community, are now aware that practicing good hygiene is key to staying healthy.

> *Now I dedicate more time to my daughters. Those five hours that I would bring water, now I spend more time with them and take my youngest daughter to school."*
>
> *—Xiomara, mother of two*

JOY IN CLEAN WATER

Xiomara (pictured left) is a 36-year-old single mother of two daughters in Nicaragua. Before having access to clean water, she and her eldest daughter would travel at least five hours to collect unclean water to use in their home.

Xiomara's day frequently began at midnight, when she would leave her home to collect water. The moonlight, a handheld lamp, and a bucket were her early morning companions during her first trip of the day to the only water source in her community.

The road to La Chorrera was a narrow, muddy slope that took more than an hour to access. Although the area seemed to have ample water, more than 180 people used this water source for drinking, bathing, and other household chores, as well as watering animals.

"There we bathed, washed our clothes, and then brought a water can to the house," said Xiomara. "When I was taking a bath, I would tell my daughter to keep watch to make sure no one else would come. Then she would bathe, and I would do the same for her."

Xiomara and Darling, her daughter, preferred to run the risk of being seen when bathing in La Chorrera in order to preserve more water in their home. Darling made one trip per day, while Xiomara spent five hours carrying water back and forth.

"At some point, my head would hurt because of where I carried the water canister," said Xiomara. "I carried between four to five gallons each trip." Many other women in her community also made this sacrifice for their families. The water from La Chorrera was not clean and caused many to get sick.

"When World Vision was about to start the project, they began to announce that they were going to hold a meeting," she said. They discussed their community participation in the construction, in which everyone was eager and willing to help.

With the support of the community, the project began. They knew bringing water closer to their homes would improve living conditions and decrease risks faced by women and children.

Once the project was complete, their water system included installation of a pressure pump, purification system, and two 2,600-gallon water tanks. In addition, training and workshops were provided to the Drinking Water and Sanitation Committee and other community members on water system maintenance and how to strengthen its sustainability.

"World Vision has helped this community a lot, has cared enough for us, has donated barrels and filters for our water," said Xiomara. The most significant change in her life was not having to carry a bucket of water on her head and bring wet clothes home over her shoulder.

Now, instead of spending hours collecting water, Xiomara is able to spend those hours doing something more important—spending time with her daughters.

MIDDLE EAST

598,870 PEOPLE*
provided with access to clean drinking water

57,810 PEOPLE**
gained access to improved household sanitation

108,945 PEOPLE
reached with hygiene behavior-change programming

OUTCOMES AND OUTPUTS	FY19 Annual Target	Afghanistan	Iraq	Jordan	Lebanon	Syria	FY19 Annual Achieved	Achieved vs. Target
OUTCOME: Access to Clean Water								
People who gained access to a clean drinking water source in communities	52,590	104,381	-	-	-	823	105,204	200%
Children who gained access to a clean drinking water source at school	18,900	1,533	23,266	14,689	-	-	39,488	209%
Schools with a clean drinking water source installed	30	2	32	16	-	-	50	167%
Health centers with a clean drinking water source installed	15	2	3	-	-	-	5	33%
Taps installed from successful water supply systems in communities, schools, and health centers	1,362	311	477	108	-	462	1,358	100%
Nonfunctioning water points rehabilitated in communities, schools, and health centers	52	89	-	16	-	-	105	202%
Households equipped with water-treatment techniques to disinfect drinking water	10,000	-	3,138	-	-	-	3,138	31%
OUTCOME: Access to Sanitation								
People who gained access to household sanitation	10,610	727	-	-	-	931	1,658	16%
Children who gained access to sanitation facilities at schools	21,900	1,893	22,942	14,689	807	-	40,331	184%
Household sanitation facilities constructed	1,492	139	-	-	-	120	259	17%
Communities certified as free from open defecation	6	3	-	-	-	-	3	50%
Improved, sex-separated sanitation facilities built at schools	272	15	222	225	-	-	462	170%
Schools that gained access to improved sanitation for children/youth with limited mobility	28	3	20	9	1	-	33	118%
Schools that gained access to improved sanitation for girls, with facilities to manage menstrual hygiene	15	1	5	9	-	-	15	100%
OUTCOME: Improved Hygiene Practices								
People who benefited from hygiene behavior-change promotion in communities	77,000	97,685	6,000	393	3,567	1,300	108,945	141%
Children who gained access to hand-washing facilities at schools	30,100	1,533	20,762	15,803	807	-	38,905	129%
Households that gained access to hand-washing facilities	11,502	184	1,000	-	-	102	1,286	11%
Schools that gained access to hand-washing facilities	46	2	29	26	5	-	62	135%
Health centers that gained access to hand-washing facilities	15	2	3	-	-	-	5	33%
OUTCOME: Improved Community Capacity for Sustainability								
WASH committees formed or reactivated with a financing system for maintenance and repair	28	121	-	-	-	-	121	432%
Faith leaders who participated in hygiene, sanitation, or behavior-change programming	31	159	4	-	-	-	163	526%
School WASH clubs or programs established	212	46	8	25	123	-	202	95%
OUTCOME: Access to WASH in Urban Settings								
People with access to municipal water supply systems	547,150	-	255,020	-	-	238,646	493,666	NA
People with access to municipal sewage systems	54,680	-	-	-	7,400	48,752	56,152	103%
People with access to municipal solid waste disposal	22,000	-	3,600	-	-	185,665	189,265	860%
OUTCOME: Access to WASH in Emergency Settings								
People with access to emergency drinking water supplies	56,020	-	1,778	-	-	328,091	329,869	NA
People with access to emergency sanitation systems	70,060	8,880	2,005	9,867	-	66,344	87,096	NA
People with access to appropriate solid-waste disposal facilities	51,560	-	1,778	-	-	103,859	105,637	NA
People with access to emergency hygiene supplies	55,910	146,081	1,778	-	-	86,128	233,987	NA

**This includes rural community water beneficiaries (105,204) and municipal water beneficiaries (493,666).*
***This includes rural household sanitation (1,658) and municipal sewage system beneficiaries (56,152).*

PROGRAM SUMMARY: MIDDLE EAST

In FY19, World Vision partnered with donors, governments, community groups, and faith leaders to advance quality WASH services in Middle East states. Emergency WASH was provided to families affected by armed conflicts in Afghanistan, Iraq, Jordan, Lebanon, and Syria. WASH teams also worked to strengthen WASH infrastructure in urban settings, helping nearly 500,000 people gain access to municipal water supply systems.

School WASH UP! clubs equipped thousands of students with the knowledge and skills to promote healthy hygiene and sanitation practices, and to be change agents in their families and among their peers. Additionally, WASH teams throughout the region successfully advocated for women's greater participation in WASH activities and decision-making on latrine design, site selection for water systems, and other WASH infrastructure.

While the region faces many challenges, WASH teams are helping communities become more resilient and providing vulnerable families with hope.

1,358 taps installed from successful water supply systems

202 schools WASH programs established

163 faith leaders participated in WASH programming

Innovations and Partnerships

- To increase water conservation, 350 Afghan households constructed rainwater and snow-melt reservoirs (called "dabbas"), benefiting 2,450 people. World Vision also developed Afghanistan's first solar-powered reverse osmosis units to reduce chemical pollutants in drinking water.
- WASH in Islam curriculum was finalized in Afghanistan and 159 mullahs were trained to educate their communities on good hygiene practices from the viewpoint of Islam.
- In Iraq, the WASH team helped train 21 district government staff members in water systems management, while the team in Syria held a water safety workshop for partner nonprofit organizations.
- World Vision worked with the Ninewa Directorate of Health in Iraq to improve access to WASH services at three healthcare facilities, benefiting 33,000 people living with disabilities.
- Awareness-raising campaigns helped more than 280,000 people in Afghanistan, Iraq, and Lebanon communities and emergency settings develop good habits related to hygiene and water conservation.
- In Jordan, solid waste recycling in the Azraq refugee camp provided cash for work to 160 new Syrian refugees.

> *"In the past I had to go a long way to fetch water. The stream was too high, and it was so difficult for me to fill the jerrycans and pull them up from the stream … It took me a lot of time, and I had less time to play, and write my homework. Now water is near my home, and I come to fetch water whenever I have the opportunity. It's just as fun and enjoyable as playing."*
>
> *—Wakil, 9, Afghanistan*

Hygiene training positions girls to be intergenerational influencers

In Afghan families, it often is the mother's responsibility to train children in personal hygiene. However, after years of war, economic insecurity, and geographic displacement, many mothers lack hygiene education or capacity for normalizing good hygiene behavior in the home. Given these challenges, World Vision launched a hygiene education program that equips schoolgirls to influence their family's hygiene habits while providing skills that will be important should they eventually become mothers themselves.

After practicing better hygiene, Homaira, 12 (pictured)—a student at Ismail High School in Badghis province—was pleased to notice the changes to her body. "I was not interested to practice hygiene at home before because I did not know the benefits," she says. "My hands were rough and so dirty. When I observed hygiene … [they became] very clean and soft. My brothers and sisters have been very surprised to see the changes in my appearance, and they are eager to do the same. I'm going to teach my family what I've learned."

HOPE AMONG THE RUINS

In northern Iraq, access to clean water is helping villages devastated by armed conflict begin to recover and rebuild.

"Once [the terrorist militant group ISIS] took over the area, our life became a hell," says Masoud Hashim Ismael (pictured top left). As residents of Sefdinan, a small village located on the Khazir River in northern Iraq, Masoud and his relatives were displaced for more than two years when the area became a front line between ISIS and Kurdish military forces. "Every nice thing in our village [was] damaged," Masoud says. "It was really very dramatic seeing all your history burned before your eyes."

During the conflict, Sefdinan's water infrastructure—the boreholes, pipe networks, and water treatment plant along the river—also were destroyed. After the fighting subsided, villagers, including Masoud and his six nieces and nephews (pictured), returned from displacement camps to find they had no access to clean water and would have to collect untreated water directly from the river. Masoud remembers the river as filthy, polluted by "remnants of war and [human remains]."

Using untreated water increased incidents of sickness in Sefdinan, with villagers suffering from diarrhea, skin conditions, and inflammation of the kidneys. The community asked local and international organizations for help, at first receiving little response. Then World Vision began working with the people of Sefdinan, training them on water treatment methods and installing water filters in 31 households.

"World Vision visited our village and asked about people's needs and requirements," says Masoud. After a period of learning about water filtration, and using treated water on a daily basis, villagers saw the frequency of waterborne illnesses in their community significantly reduced.

Meanwhile, access to clean water has affected not only people's physical well-being; it is promoting the economic well-being of the whole community. "The families living in Sefdinan village who benefited from this project [will not] need more money for medicine anymore," Masoud says, "but they can use the money on health, schooling, and food. Finally, we can drink pure water."

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