

GLOBAL » ANNUAL REPORT October 2017 through September 2018

World Vision U.S. Prepared January 2019

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Water, sanitation, and hygiene (WASH) changes the trajectory of a child's future by supporting improved health and opportunity.



GLOBAL SUMMARY

Dr. Greg Allgood, World Vision United States, Vice President WASH

We are pleased to share this 2018 annual report of World Vision's global water, sanitation, and hygiene (WASH) program. It's been a year of tremendous impact, reaching an incredible 4 million people with clean water, 2.8 million with sanitation, and 5 million with hygiene. We continue to have an industry leading effort that is reaching one new person with clean water every 10 seconds!

We remain committed to reaching everyone, everywhere we work with clean water by 2030—an ambitious but achievable goal that means reaching 50 million people between 2015 and 2030. As an interim goal—and to make sure we remain on track—we've committed to reach 20 million people between 2015 and 2020. This report demonstrates that we are on track to fulfill that commitment, having reached 12.7 million people with clean water in the first three years of this five year commitment.

This has also been a year of continuing to learn and improve. We completed a 14 country evaluation of our WASH efforts in collaboration with the University of North Carolina Water Institute. This is one of the largest evaluations ever conducted of it's kind, involving 35,000 households, 2,700 schools, 2,000 health care facilities, 2,500 community water points, and more than 11,000 microbial water samples. We believe that World Vision is making significant progress in providing people

with access to clean water, particularly in the countries where we have invested the most including Ethiopia and Zambia. The results also showed that the entire WASH sector has room to improve in behavior change efforts to ensure water quality at the household level and improve sanitation and hygiene behaviors. That's why, for example, we're investing more in our work with faith leaders and other traditional leaders so that they effectively encourage habit change among their communities.

This report also includes the perspective of three World Vision leaders: Margaret Schuler on the importance of our integrated approach, Enock Oruko on our work with the faith community, and Ray Norman on how we're continuing to learn and improve.

Going forward, we will continue to focus on providing effective WASH in homes, schools, and health clinics using an integrated approach that empowers local stakeholders to adopt and sustain these life-transforming behaviors and to ensure that water continues to flow.

We thank you for being part of this journey with us and for being part of this historic effort to end the global water and sanitation crisis within our lifetimes.

GLOBAL REACH

4 MILLION PEOPLE

provided with access to clean drinking water*

2.8 MILLION PEOPLE

gained access to improved household sanitation

5 MILLION PEOPLE

reached with hygiene behavior-change programming



2018 ANNUAL ACCOMPLISHMENTS



2018 ANNUAL SPENDING



^{*} This includes rural community water beneficiaries (3,242,291) and municipal water beneficiaries (760,023). The 4 million people with access to water represent many of the same beneficiaries that received access to sanitation facilities and behavior-change programming. Of these, 1,210,523 were reached with World Vision U.S. private funding.

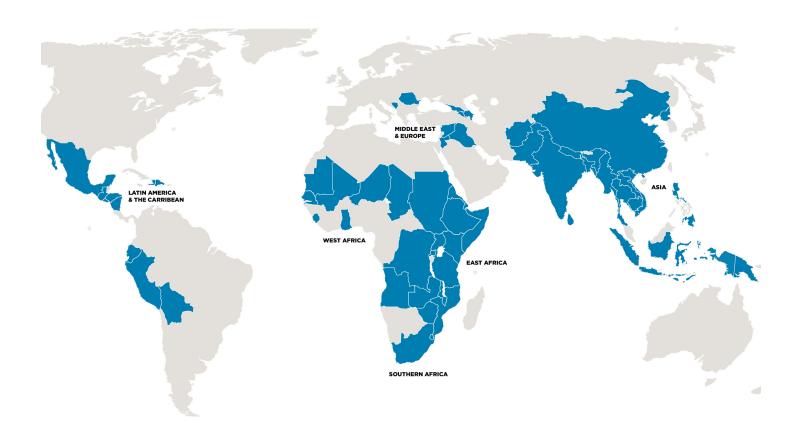
A total of 12.7 million people have accessed clean drinking water since FY16, including 3.3 million who were reached with World Vision U.S. private funding since FY16.

GLOBAL ACHIEVEMENTS

Color		Global	-	€ _		u	g	d)	FY18 Global	Global
Propriet to grand access to a claim d'avaire water source in control of the con	2018 Annual Achievements		iast frica	ithe	Vest	sia- acific	atin neric	iddle		Achieved
Papels with agriend access to a clean driving water course in communities (Children who gained access to a clean driving water source at exhibit to who gained access to a clean driving water source at exhibit to whole a clean driving water source at exhibit to whole a clean driving water source at exhibit to whole a clean driving water source stabled 1,666 406 333 156 229 166 07 1,141 883 1,141		Target	. 4	Sou	> ∢	4 5	An	Σ	Achieved	vs. Target
Communicies	OUTCOME: Access to Clean Water									
Seminariates		4 1 1 4 5 1 5	1 594 109	402 020	300 704	417514	107 346	47 590	3 242 291	79%
Symbol 184.75 197.262 186.76 31.10		4,110,313	1,376,106	663,737	307,704	417,316	107,346	47,376	3,242,271	77/6
Sebola while a dean drivibling water source installed 1,006 406 333 156 229 166 400 1,140 88% 1440 1,200 1,2		598,302	184,215	192,262	86,478	53,171	32,156	42,451	590,733	99%
Successful boreholes completed and commissioned in communities 3.381 508 887 403 752 19 . 2.539 755		1,606	406	393	156	229	166	60	1,410	88%
Tags installed from successful water supply systems in 29,938 5,012 2,581 1,227 5,896 9,917 1,239 25,902 87% communities, schools, and health centers Nonlinuctioning water points rehabilisated in communities, schools, and health centers Nonlinuctioning water points rehabilisated in communities, schools, and health centers Thousands are points of the point of th	Health centers with a clean drinking water source installed	569	127	53	63	74	9	7	333	59%
2,798 3,012 2,598 1,217 3,599 3,012 2,598 3,012 2,598 3,012 2,598 3,799 3,012 2,598 3,799 3,012 2,598 3,799 3,79	Successful boreholes completed and commissioned in communities,	3,381	508	857	403	752	19	-	2,539	75%
Non-introceomic water points rehabilitated in communities, achoost, 15,365 862 1,015 228 22,548 477 249 23,389 4775; transitrotic expegned with water-reatment techniques to disnified; 279,892 71,557 157,018 96,840 65,538 17,948 6,066 414,977 1485; transitional expensional	1 1 1	29,938	5,012	2,581	1,237	5,896	9,917	1,259	25,902	87%
Proceedible equipped with water-creatment exchiniques to disinfect inchining water		5.365	862	1.015	238	22.548	477	249	25.389	473%
## OUTCOME: Access to Sanitation Proprie who gained access to household sanitation 3,855,522 1,078,397 882,019 345,962 314,223 49,718 9,813 2,680,132 70%	• .								-	
People who gained access to household saviation 3,855.522 1,078.397 882,019 345,962 314,223 497,16 9,813 2,860,132 70% Children who gained access to sanitation facilities at schools 598,295 52,2690 148,590 56,659 52,437 33,852 45,509 5595,377 94% 10%	drinking water	2/9,832	/1,56/	157,018	96,840	65,538	17,948	6,066	414,9//	148%
People who gained access to household saintation 3,855,522 1,079,397 882,019 345,962 314,223 497,16 9,813 2,860,132 70%	OUTCOME: Access to Sanitation									
Nousehold sanitation facilities constructed		3,855,522	1,078,397	882,019	345,962	314,223	49,718	9,813	2,680,132	70%
Communities certified as free from open defecation 5,729 1,664 1,338 339 288 14 20 3,658 64%	Children who gained access to sanitation facilities at schools	598,295	222,690	148,590	56,459	52,437	33,852	45,509	559,537	94%
Improved, see-separated sanitation facilities built at schools	Household sanitation facilities constructed	449,163	201,332	176,266	44,965	59,606	8,646	1,541	492,355	110%
Schools that gained access to improved sanitation for childrenly-outh with limited mobility childrenly-outh with limited mobility and appropriate of the facilities to manage menstrual hygiene 1,527 225 169 109 95 76 15 689 45% 15%	Communities certified as free from open defecation	5,729	1,664	1,338	339	283	14	20	3,658	64%
Communities Children who gained access to hand-washing facilities Access to hand-washing facilit	Improved, sex-separated sanitation facilities built at schools	14,514	2,328	1,251	767	531	913	363	6,153	42%
children/youth with limited mobility of the properties of the prop	Schools that gained access to improved sanitation for	1.098	326	171	198	113	44	29	881	80%
Improved, sex-separated sanitation facilities built at health centers 1,542 354 95 108 85 28 66 736 48%	·	,,,,,								
Health centers that gained access to sex-separated sanitation facilities designed for people with limited mobility and appropriate 499 102 50 38 37 6 12 245 49% for managing menstrual hygiene Practices People who benefited from hygiene behavior-change promotion in 4.672,903 1,706,248 1,669,352 876,457 1,118,891 57,875 123,700 4,952,523 106% communities Children who gained access to hand-washing facilities at schools 770,094 254,863 378,268 154,011 210,484 40,055 47,112 1,084,793 1,141% Households that gained access to hand-washing facilities 476,966 230,083 172,777 53,099 56,727 8,016 365 494,067 104% Schools that gained access to hand-washing facilities 9,01 135 121 186 31 8 6 487 54% 104,000 104,0		1,527	225	169	109	95	76	15	689	45%
facilities designed for people with limited mobility and appropriate dromanging menstrual hygiene Application	Improved, sex-separated sanitation facilities built at health centers	1,542	354	95	108	85	28	66	736	48%
DUTCOME: Improved Hygiene Practices People who benefited from hygiene behavior-change promotion in communities 4,672,903 1,706,248 1,069,352 876,457 1,118,891 57,875 123,700 4,952,523 106% Children who gained access to hand-washing facilities at schools 770,094 254,863 378,268 154,011 210,484 40,055 47,112 1,084,793 141% Households that gained access to hand-washing facilities 2,186 528 698 1,017 1,225 202 82 3,752 172% 172% 1,225 202 82 3,752 172% 1,225 202 82 3,752 1,72% 1,225 1,										
People who benefited from hygiene behavior-change promotion in communities 4,672,903 1,706,248 1,069,352 876,457 1,118,89 57,875 123,700 4,952,523 106% 1,060,355 106% 1,060,355 1,060,		499	102	50	38	37	6	12	245	49%
People who benefited from hygiene behavior-change promotion in communities	for managing menstrual nygiene									
Children who gained access to hand-washing facilities at schools 770,094 254,863 378,268 154,011 210,484 40,055 47,112 1,084,779 141% Households that gained access to hand-washing facilities 476,966 203,083 172,777 53,099 56,727 8,016 365 494,067 104% Schools that gained access to hand-washing facilities 2,186 528 698 1,017 1,225 202 82 3,752 172% Health centers that gained access to hand-washing facilities 901 135 121 186 31 8 6 487 54% OUTCOME: Improved Community Capacity for Sustainability WASH committees formed or reactivated with a financing system for maintenance and repair People trained in repair, maintenance, and construction of WASH 8,739 1,413 1,464 2,195 2,564 93 38 7,767 89% facilities Functional Citizen Voice and Action (CVA) groups focused on 844 108 371 342 102 50 - 973 115% Faith leaders who participated in hygiene, sanitation, or behavior-change programming School WASH to programs established 2,396 747 633 731 451 547 135 3,244 135% OUTCOME: Access to WASH in Urban Settings People with access to minicipal sewage systems 581,540 756,496 760,023 131% People with access to municipal sewage systems 151,670 157,638 157,638 104% People with access to municipal sewage systems 257,1455 63,119 4,194 5,275 79,124 - 39,480 191,192 70% People with access to emergency drinking water supplies 357,720 265,642 33,849 19,000 120,457 747 96,754 536,449 150% People with access to emergency drinking water supplies 357,720 265,642 33,849 19,000 120,457 747 96,754 536,449 150% People with access to emergency drinking water supplies 357,720 265,642 33,849 19,000 120,457 747 96,754 536,449 150% People with access to emergency drinking water supplies 357,720 265,642 33,849 19,000 120,457 747 96,754 536,449 150% People with access to emergency drinking water supplies 357,720 265,642 33,849 19,000 120,457 747 96,754 536,449 150% People with access to emergency drinking water supplies 357,720 265,642 33,849 19,000 120,457 747 96,754 536,449 150% People with access to emergency drinking water supplie	OUTCOME: Improved Hygiene Practices									
Households that gained access to hand-washing facilities 476,966 203,083 172,777 \$3,099 \$6,727 8,016 365 494,067 104% Schools that gained access to hand-washing facilities 2,186 528 698 1,017 1,225 202 82 3,752 172% Health centers that gained access to hand-washing facilities 901 135 121 186 31 8 6 487 54% OUTCOME: Improved Community Capacity for Sustainability WASH committees formed or reactivated with a financing system for maintenance and repair People trained in repair, maintenance, and construction of WASH facilities Functional Citizen Voice and Action (CVA) groups focused on 844 108 371 342 102 50 - 973 115% Faith leaders who participated in hygiene, sanitation, or behavior-change programming 5chool WASH dulbs or programs established 2,396 747 633 731 451 547 135 3,244 135% OUTCOME: Access to WASH in Urban Settings People with access to municipal sewage systems 151,670 756,496 760,023 131% People with access to municipal saverage systems 151,670 10,000 - 133,318 143,318 0% OUTCOME: Access to WASH in Emergency Settings People with access to emergency drinking water supplies 357,720 265,642 33,849 19,000 120,457 747 96,754 536,449 150% People with access to emergency drinking water supplies 357,720 265,642 33,849 19,000 120,457 747 96,754 536,449 150% People with access to emergency sanitation systems 271,455 63,119 4,194 5,275 79,124 - 39,480 191,192 70% People with access to appropriate solid-waste disposal 405,853 59%	1	4,672,903	1,706,248	1,069,352	876,457	1,118,891	57,875	123,700	4,952,523	106%
Schools that gained access to hand-washing facilities 2,186 528 698 1,017 1,225 202 82 3,752 172% Health centers that gained access to hand-washing facilities 901 135 121 186 31 8 6 487 54% OUTCOME: Improved Community Capacity for Sustainability	Children who gained access to hand-washing facilities at schools	770,094	254,863	378,268	154,011	210,484	40,055	47,112	1,084,793	141%
Health centers that gained access to hand-washing facilities 901 135 121 186 31 8 6 487 54%	Households that gained access to hand-washing facilities	476,966	203,083	172,777	53,099	56,727	8,016	365	494,067	104%
OUTCOME: Improved Community Capacity for Sustainability WASH committees formed or reactivated with a financing system for maintenance and repair People trained in repair, maintenance, and construction of WASH facilities Functional Citizen Voice and Action (CVA) groups focused on R44 H108 H118 H118 H118 H118 H118 H118 H118	Schools that gained access to hand-washing facilities	2,186	528	698	1,017	1,225	202	82	3,752	172%
WASH committees formed or reactivated with a financing system for maintenance and repair 6,147 1,811 2,411 955 1,351 155 52 6,735 110% People trained in repair, maintenance, and construction of WASH facilities 8,739 1,413 1,464 2,195 2,564 93 38 7,767 89% Functional Citizen Voice and Action (CVA) groups focused on WASH 844 108 371 342 102 50 - 973 115% Faith leaders who participated in hygiene, sanitation, or behavior-change programming 6,289 1,857 6,561 1,534 1,505 1,515 136 13,108 208% School WASH clubs or programs established 2,396 747 633 731 451 547 135 3,244 135% OUTCOME: Access to WASH in Urban Settings People with access to municipal sewage systems 581,540 3,527 - - - 756,496 760,023 131% People with access to municipal solid waste disposal - - - - -	Health centers that gained access to hand-washing facilities	901	135	121	186	31	8	6	487	54%
for maintenance and repair People trained in repair, maintenance, and construction of WASH facilities People trained in repair, maintenance, and construction of WASH facilities Functional Citizen Voice and Action (CVA) groups focused on WASH 1184 108 371 342 102 50 - 973 115% Faith leaders who participated in hygiene, sanitation, or behavior-change programming School WASH clubs or programs established 2,396 747 633 731 451 547 135 3,244 135% OUTCOME: Access to WASH in Urban Settings People with access to municipal water supply systems 581,540 3,527 756,496 760,023 131% People with access to municipal solid waste disposal 10,000 - 133,318 143,318 0% OUTCOME: Access to WASH in Emergency Settings People with access to emergency drinking water supplies 357,720 265,642 33,849 19,000 120,457 747 96,754 536,449 150% People with access to emergency sanitation systems 271,455 63,119 4,194 5,275 79,124 - 39,480 191,192 70% People with access to appropriate solid-waste disposal facilities 687,360 97,100 13,200 - 105,750 - 189,803 405,853 59%	OUTCOME: Improved Community Capacity for Sust	ainability								
For maintenance and repair People trained in repair, maintenance, and construction of WASH facilities Functional Citizen Voice and Action (CVA) groups focused on WASH Faith leaders who participated in hygiene, sanitation, or behavior- change programming School WASH clubs or programs established 2,396 747 6.289 1,857 6,561 1,534 1,505 1,515 136 13,108 208% COUTCOME: Access to WASH in Urban Settings People with access to municipal sewage systems 151,670 157,638 157,638 104% People with access to municipal solid waste disposal 10,000 - 133,318 143,318 0% COUTCOME: Access to WASH in Emergency Settings People with access to emergency drinking water supplies 357,720 265,642 33,849 19,000 120,457 747 96,754 536,449 150% People with access to emergency sanitation systems 271,455 63,119 4,194 5,275 7,9124 39,480 191,192 70% People with access to appropriate solid-waste disposal facilities 687,360 97,100 13,200 - 105,750 - 189,803 405,853 59%		,	1.011	2.411	055	1.251	155		4 725	1.100/
Facilities 8,739 1,413 1,464 2,195 2,564 93 38 7,767 89%	·	6,14/	1,811	2, 4 11	755	1,351	155	52	6,/35	110%
WASH 844 108 371 342 102 50 - 973 115% Faith leaders who participated in hygiene, sanitation, or behavior-change programming 6,289 1,857 6,561 1,534 1,505 1,515 136 13,108 208% School WASH clubs or programs established 2,396 747 633 731 451 547 135 3,244 135% OUTCOME: Access to WASH in Urban Settings People with access to municipal water supply systems 581,540 3,527 - - - 756,496 760,023 131% People with access to municipal sewage systems 151,670 - - - - 157,638 157,638 104% People with access to municipal solid waste disposal - - - - - 150,000 - 133,318 143,318 0% OUTCOME: Access to WASH in Emergency Settings People with access to emergency drinking water supplies 357,720 265,642 33,849 19,000 120,457	facilities	8,739	1,413	1,464	2,195	2,564	93	38	7,767	89%
Faith leaders who participated in hygiene, sanitation, or behavior-change programming 6,289	, ,,, .	844	108	371	342	102	50	-	973	115%
Change programming Change										
OUTCOME: Access to WASH in Urban Settings People with access to municipal water supply systems 581,540 3,527 - - - 756,496 760,023 131% People with access to municipal sewage systems 151,670 - - - - 157,638 157,638 104% People with access to municipal solid waste disposal - - - - 10,000 - 133,318 143,318 0% OUTCOME: Access to WASH in Emergency Settings People with access to emergency drinking water supplies 357,720 265,642 33,849 19,000 120,457 747 96,754 536,449 150% People with access to emergency sanitation systems 271,455 63,119 4,194 5,275 79,124 - 39,480 191,192 70% People with access to appropriate solid-waste disposal facilities 687,360 97,100 13,200 - 105,750 - 189,803 405,853 59%		6,289	1,857	6,561	1,534	1,505	1,515	136	13,108	208%
People with access to municipal water supply systems 581,540 3,527 756,496 760,023 131% People with access to municipal sewage systems 151,670 157,638 157,638 104% People with access to municipal solid waste disposal 10,000 - 133,318 143,318 0% OUTCOME: Access to WASH in Emergency Settings People with access to emergency drinking water supplies 357,720 265,642 33,849 19,000 120,457 747 96,754 536,449 150% People with access to emergency sanitation systems 271,455 63,119 4,194 5,275 79,124 - 39,480 191,192 70% People with access to appropriate solid-waste disposal facilities 687,360 97,100 13,200 - 105,750 - 189,803 405,853 59%	School WASH clubs or programs established	2,396	747	633	731	451	547	135	3,244	135%
People with access to municipal sewage systems 151,670 157,638 157,638 104% People with access to municipal solid waste disposal 10,000 - 133,318 143,318 0% OUTCOME: Access to WASH in Emergency Settings People with access to emergency drinking water supplies 357,720 265,642 33,849 19,000 120,457 747 96,754 536,449 150% People with access to emergency sanitation systems 271,455 63,119 4,194 5,275 79,124 - 39,480 191,192 70% People with access to appropriate solid-waste disposal facilities 687,360 97,100 13,200 - 105,750 - 189,803 405,853 59%	OUTCOME: Access to WASH in Urban Settings									
People with access to municipal solid waste disposal 10,000 - 133,318 143,318 0% OUTCOME: Access to WASH in Emergency Settings People with access to emergency drinking water supplies 357,720 265,642 33,849 19,000 120,457 747 96,754 536,449 150% People with access to emergency sanitation systems 271,455 63,119 4,194 5,275 79,124 - 39,480 191,192 70% People with access to appropriate solid-waste disposal facilities 687,360 97,100 13,200 - 105,750 - 189,803 405,853 59%	People with access to municipal water supply systems	581,540	3,527	-	-	-	-	756,496	760,023	131%
OUTCOME: Access to WASH in Emergency Settings People with access to emergency drinking water supplies 357,720 265,642 33,849 19,000 120,457 747 96,754 536,449 150% People with access to emergency sanitation systems 271,455 63,119 4,194 5,275 79,124 - 39,480 191,192 70% People with access to appropriate solid-waste disposal facilities 687,360 97,100 13,200 - 105,750 - 189,803 405,853 59%	People with access to municipal sewage systems	151,670	-	-	-	-	-	157,638	157,638	104%
People with access to emergency drinking water supplies 357,720 265,642 33,849 19,000 120,457 747 96,754 536,449 150% People with access to emergency sanitation systems 271,455 63,119 4,194 5,275 79,124 - 39,480 191,192 70% People with access to appropriate solid-waste disposal facilities 687,360 97,100 13,200 - 105,750 - 189,803 405,853 59%	People with access to municipal solid waste disposal	-	-	-	-	10,000	-	133,318	143,318	0%
People with access to emergency sanitation systems 271,455 63,119 4,194 5,275 79,124 - 39,480 191,192 70% People with access to appropriate solid-waste disposal facilities 687,360 97,100 13,200 - 105,750 - 189,803 405,853 59%	OUTCOME: Access to WASH in Emergency Settings									
People with access to appropriate solid-waste disposal facilities 687,360 97,100 13,200 - 105,750 - 189,803 405,853 59%	People with access to emergency drinking water supplies	357,720	265,642	33,849	19,000	120,457	747	96,754	536,449	150%
	People with access to emergency sanitation systems	271,455	63,119	4,194	5,275	79,124	-	39,480	191,192	70%
		687,360	97,100	13,200	-		-	189,803	405,853	59%
People with access to emergency hygiene supplies 252,821 183,584 35,679 30,835 93,229 4,864 201,086 549,277 217%		252,821	183,584	35,679	30,835	93,229	4,864	201,086	549,277	217%

GLOBAL MAP

WORLD VISION'S GLOBAL WASH PROGRAM REGIONS & COUNTRIES* IN 2018:



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
LESOTHO
MALAWI
MOZAMBIQUE

SOUTH AFRICA SWAZILAND** 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.

^{**} King Mswati III announced in April 2018 that Swaziland will now have a new name—the Kingdom of Eswatini—to mark the 50th anniversary of its independence. World Vision will start recognizing this new name in FY19.

PARTNERSHIP UPDATES

Our annual achievements were possible due to support from many committed partners. Here are some partner highlights:

charity: water: In West Africa, Mali and Niger are currently implementing two charity: water grants, each ending in February 2019. In Southern Africa, Malawi and Mozambique successfully completed charity: water grants in FY18, reaching 44,983 Malawians and 33.889 Mozambicans with clean water.

Also in FY18, World Vision met with charity: water to determine three-year partnership projections, forging a stronger collaboration and commitment to providing WASH in charity: waterfunded countries.

Conrad N. Hilton Foundation:

In Mali, World Vision continues to implement WASH in healthcare facilities. This is a \$3 million, three-year grant that will end in September 2019. World Vision Ghana, Mali, and Niger received a \$800,000 planning grant, which will result in multiyear grant proposals for each country submitted to the Conrad N. Hilton Foundation for board approval. In Ghana, we received approval on a four-year grant for \$3 million, which will begin in December 2018.

Golf Fore Africa: The group has set a fundraising target of \$10 million to support transformational programs in Zambia between 2016 and 2021. In FY18, Golf Fore Africa raised \$1,407,500, funding eight mechanized systems, including equipping one healthcare facility to better support mothers and babies, and 60 drilled wells.

Grundfos: Eighteen country offices used Grundfos solar water solutions in FY18 to provide sustainable water supplies to 958,238 beneficiaries. (This increased from 10 countries in FY17.) Country offices purchased and installed varieties of 241 highly efficient

Grundfos-designed submersible pumps, 25 mini SQ flex pumps, and 19 AQTap water dispensing units to build reliable solar-powered water supply systems.

Messiah College: World Vision continues to partner with Messiah College in two areas of study in Ghana. The Intelligent Water project seeks to develop real-time monitoring of hand pump functionality. The Affordable Sanitation project, which involves the development of a long-lasting and affordable latrine liner for households, had a survey conducted this year in June. Due to heavy rains and flooding this year, 62 percent of the control latrines had damage of some kind. Analysis of the damage will help improve the latrine design.

P&G: World Vision continues to provide P&G household water purification packets and filtration materials to ensure families have clean drinking water access in humanitarian emergencies and as a "bridge solution" while communities wait for a permanent source of clean water. In FY18, World Vision finished drought response projects in Kenya and Somalia, responded to new flood emergencies in India and Myanmar, and provided support to earthquake-affected areas in Indonesia. Bridge projects from FY17 continued in 11 countries, while new projects opened in Afghanistan, the Philippines, Senegal, and Zimbabwe.

Sesame Workshop: Sesame Workshop and World Vision are now implementing the WASH UP! curriculum in 11 countries. We are currently planning the expansion of WASH UP! to India, Kenya, and Rwanda.

Additionally, World Vision and Sesame Workshop have launched two innovations to the WASH UP! program. In Zimbabwe, we launched Girl Talk! which is designed for children ages 10 to 14 and focuses on girls'



empowerment and menstrual hygiene management. In Mali and Niger, we created additional content for children with disabilities, and added advocacy sessions to better incorporate these students in the program.

United Solar Initiative:

World Vision is planning with Grundfos and United Solar Initiative to provide joint training tailored to the needs of the field to provide an in-depth, handson approach on solar-powered pumps for all participants.

University of North Carolina:

World Vision has a six-year partnership with UNC to conduct ongoing multicountry evaluations and research. Data collection occurred largely over the summer of 2017 in 14 countries. UNC completed preliminary data analysis. We are now working with national and regional offices to further discuss these findings and adopt programming improvements. World Vision also is expanding its work with UNC on potential water quality challenges. We are currently broadening research and analysis on water quality looking at E.coli, fluoride, arsenic, and other trace metals rarely tested for in water samples.

Wells Bring Hope: This donor is in its 10th year of providing wells in Niger, and has provided 500 wells to date, with plans to fund 500 more.



SPOTLIGHT: LEVERAGING IMPACT

COURAGE TO ENSURE COLLECTIVE IMPACT: MOVING TOWARD ONE WASH

Margaret Schuler, Senior Vice President of International Programs, World Vision United States

The Sustainable Development Goals have thrown down the gauntlet for development practitioners, above and beyond the more access-focused Millennium Development Goals (MDGs). Today, with 17 SDGs, we are held to a much higher level of service quality. To achieve an SDG-level of WASH services, we must move beyond individual outputs or siloed approaches to collective impact — something I call 'One WASH.'

In July 2013, while I was the National Director for World Vision in Ethiopia, the government instituted the One WASH National Program, bringing together technical ministries and development partners to implement one national WASH strategy aiming for universal WASH access by 2020. The approach requested individual organizations to do away with individual agendas, projects, and programs, and align with the national government-led strategy and One WASH program. It is still being implemented today. Like any program, this plan has challenges and limitations, but the goal is to move WASH toward collective impact and solidify national government ownership of WASH goals for Ethiopia. Government and community ownership is key to ensuring sustainability of programming.

At World Vision, we work to apply the 'One WASH' principle in resource

mobilization and field programming. In resource mobilization, we work to leverage various resource streams to meet overarching WASH goals. In field programs, we are working to break out of a traditional sector silo approach focusing on the distinct goals of WASH, health, education, etc. Applying this principle to our WASH programming, we can share common goals and keep the ultimate outcome in mind—ensuring greater scale and impact in our programming. From a short-term standpoint, siloed approaches are often simpler and give the illusion of efficiency but can limit learning, long-term impact, scalability, and risk exhausting our most important partners in development the community members themselves.

In my current role leading International Programs for World Vision United States, I instituted a new vision to aim for even greater integration, leveraging, and maximizing resources to the field while also ensuring high-quality programming and evidence of impact. We are already seeing the fruits of these stronger collective efforts. If we as WASH practitioners globally owned a One WASH vision, imagine the improvements we could realize in the lives of women, children, and families across the world.

World Vision, as one of the largest nongovernmental WASH implementers in the developing world, has an opportunity to influence the culture of the WASH sector."

— Margaret Schuler

EAST AFRICA WASH

1.6 MILLION PEOPLE

provided with access to clean drinking water

1.1 MILLION PEOPLE

gained access to improved household sanitation

1.7 MILLION PEOPLE

reached with hygiene behavior-change programming



OUTCOMES AND OUTPUTS	FY18 Annual Target	Burundi	Ethiopia	Kenya	Rwanda	Somalia	South	Sudan	Tanzania	Uganda	FY18 Annual Achieved	Achieved vs. Target
OUTCOME: Access to Clean Water					·		,					
People who gained access to a clean drinking water source in communities	1,356,276	51,102	466,000	186,757	66,594	114,095	217,770	218,100	166,306	109,384	1,596,108	118%
Children who gained access to a clean drinking water source at school	164,920	8,431	31.806	49.539	27.193	6,699	7,694	4,500	18,150	30.203	184.215	112%
Schools with a clean drinking water source installed	359	18	63	17,557	38	16	17	1,500	43	49	406	113%
Health centers with a clean drinking water source installed	134	4	12	9	10	13	19	17	26	17	127	95%
Successful boreholes completed and commissioned in communities, schools, and												
health centers	665	I	313	-	-	- 1	52	73	13	55	508	76%
Taps installed from successful water supply systems in communities, schools, and												
health centers	4,095	88	915	1,735	496	547	278	268	234	451	5,012	122%
Nonfunctioning water points rehabilitated in communities, schools, and health center	907	65	182	68	51	100	147	203	15	31	862	95%
Households equipped with water-treatment techniques to disinfect drinking water	67,256	- 03	6,949	24,327	539	27,645	4,073	2,110	5,243	681	71,567	106%
Trouseholds equipped with water-dieautient techniques to disinfect drinking water	07,230		0,747	27,327	337	27,043	7,073	2,110	3,273	001	71,307	100/6
OUTCOME: Access to Sanitation												
People who gained access to household sanitation	1,399,888	60,852	330,763	162,895	95,285	46,894	48,833	40,700	201,544	90,631	1,078,397	77%
Children who gained access to sanitation facilities at schools	117,749	28,770	51,394	21,359	33,182	6,726	11,644	8,300	37,529	23,786	222,690	189%
Household sanitation facilities constructed	192,703	16,672	67,579	26,917	23,138	4,027	4,239	2,055	38,788	17,917	201,332	104%
Communities certified as free from open defecation	2,022	288	1,167	131	-	8	-	24	7	39	1,664	82%
Improved, sex-separated sanitation facilities built at schools	1,862	125	320	484	303	76	106	26	372	516	2,328	125%
Schools that gained access to improved sanitation for children/youth with limited mobility	230	24	80	65	26	16	15	6	9	85	326	142%
,					-							
Schools that gained access to improved sanitation for girls, with facilities to manage menstrual hygiene	217	10	42	65	23	8	12	5	14	46	225	104%
Improved, sex-separated sanitation facilities built at health centers	436	4	44	39	42	45	46	44	31	59	354	81%
Health centers that gained access to sex-separated sanitation facilities designed for people with limited mobility and appropriate for managing menstrual hygiene	106	2	П	10	5	12	19	12	18	13	102	97%
OUTCOME: Improved Hygiene Practices												
People who benefited from hygiene behavior-change promotion in communities	1,695,995	93,269	342,886	196,091	169,802	183,172	193,110	74,200	324,765	128,953	1,706,248	101%
Children who gained access to hand-washing facilities at schools	144,236	40,025	63,394	13,878	45,489	6,239	12,671	6,360	26,156	40,651	254,863	177%
Households that gained access to hand-washing facilities	227,095	15,846	58,598	28,976	15,294	8,228	9,833	11,770	41,073	13,465	203,083	89%
Schools that gained access to hand-washing facilities	381	65	118	72	61	19	34	21	69	69	528	138%
Health centers that gained access to hand-washing facilities	209	7	12	7	8	14	20	- 11	31	25	135	65%
OUTCOME: Improved Community Capacity for Sustainability												
WASH committees formed or reactivated with a financing system for maintenance	1.815	240	673	113	148	95	139	65	77	261	1.811	100%
WASH committees formed or reactivated with a financing system for maintenance and repair	, , ,	-										
WASH committees formed or reactivated with a financing system for maintenance and repair People trained in repair, maintenance, and construction of WASH facilities	1,856	28	673 404	379	140	20	139 68	65 105	53	216	1,413	76%
WASH committees formed or reactivated with a financing system for maintenance and repair People trained in repair, maintenance, and construction of WASH facilities Functional Citizen Voice and Action (CVA) groups focused on WASH	1,856 178	28	404	379 29	140	20	68	105	53 41	216	1,413	76% 61%
WASH committees formed or reactivated with a financing system for maintenance and repair People trained in repair, maintenance, and construction of WASH facilities Functional Citizen Voice and Action (CVA) groups focused on WASH Faith leaders who participated in hygiene, sanitation, or behavior-change	1,856 178 1,594	28 2 56	404	379 29 221	140 26 98	20	68 - 22	105 1 350	53 41 265	216 9 175	1,413 108 1,857	76% 61%
WASH committees formed or reactivated with a financing system for maintenance and repair People trained in repair, maintenance, and construction of WASH facilities Functional Citizen Voice and Action (CVA) groups focused on WASH	1,856 178	28	404	379 29	140	20	68	105	53 41	216	1,413	76% 61%
WASH committees formed or reactivated with a financing system for maintenance and repair People trained in repair, maintenance, and construction of WASH facilities Functional Citizen Voice and Action (CVA) groups focused on WASH Faith leaders who participated in hygiene, sanitation, or behavior-change School WASH clubs or programs established OUTCOME: Access to WASH in Urban Settings	1,856 178 1,594	28 2 56	404	379 29 221	140 26 98	20	68 - 22 83	105 1 350	53 41 265	216 9 175	1,413 108 1,857 747	76% 61% 116% 125%
WASH committees formed or reactivated with a financing system for maintenance and repair People trained in repair, maintenance, and construction of WASH facilities Functional Citizen Voice and Action (CVA) groups focused on WASH Faith leaders who participated in hygiene, sanitation, or behavior-change School WASH clubs or programs established	1,856 178 1,594	28 2 56	404	379 29 221	140 26 98	20	68 - 22	105 1 350	53 41 265	216 9 175	1,413 108 1,857	76% 61%
WASH committees formed or reactivated with a financing system for maintenance and repair People trained in repair, maintenance, and construction of WASH facilities Functional Citizen Voice and Action (CVA) groups focused on WASH Faith leaders who participated in hygiene, sanitation, or behavior-change School WASH clubs or programs established OUTCOME: Access to WASH in Urban Settings	1,856 178 1,594	28 2 56 12	404 - 633 327	379 29 221 96	140 26 98	20 - 37 24	68 - 22 83	105 1 350 22	53 41 265	216 9 175	1,413 108 1,857 747	76% 61% 116% 125%
WASH committees formed or reactivated with a financing system for maintenance and repair People trained in repair, maintenance, and construction of WASH facilities Functional Citizen Voice and Action (CVA) groups focused on WASH Faith leaders who participated in hygiene, sanitation, or behavior-change School WASH clubs or programs established OUTCOME: Access to WASH in Urban Settings People with access to municipal water supply systems	1,856 178 1,594	28 2 56 12	404 - 633 327	379 29 221 96	140 26 98	20 - 37 24	68 - 22 83	105 1 350 22	53 41 265	216 9 175	1,413 108 1,857 747	76% 61% 116% 125%
WASH committees formed or reactivated with a financing system for maintenance and repair People trained in repair, maintenance, and construction of WASH facilities Functional Citizen Voice and Action (CVA) groups focused on WASH Faith leaders who participated in hygiene, sanitation, or behavior-change School WASH clubs or programs established OUTCOME: Access to WASH in Urban Settings People with access to municipal water supply systems OUTCOME: Access to WASH in Emergency Settings	1,856 178 1,594 599	28 2 56 12	404 - 633 327	379 29 221 96	140 26 98 34	20 - 37 24	68 - 22 83 3,527	105 1 350 22	53 41 265 113	216 9 175 36	1,413 108 1,857 747	76% 61% 116% 125%
WASH committees formed or reactivated with a financing system for maintenance and repair People trained in repair, maintenance, and construction of WASH facilities Functional Citizen Voice and Action (CVA) groups focused on WASH Faith leaders who participated in hygiene, sanitation, or behavior-change School WASH clubs or programs established OUTCOME: Access to WASH in Urban Settings People with access to municipal water supply systems OUTCOME: Access to WASH in Emergency Settings People with access to emergency drinking water supplies	1,856 178 1,594 599	28 2 56 12	404	379 29 221 96	140 26 98 34	20 - 37 24 - 50,225	68 - 22 83 3,527	105 1 350 22	53 41 265 113	216 9 175 36	1,413 108 1,857 747 3,527	76% 61% 116% 125%

PROGRAM SUMMARY: EAST AFRICA

The East Africa region hosted the global WASH forum in Rwanda in April 2018, where we shared with staff, supporters, and partners the results of the multicountry WASH evaluation conducted by UNC. Five East African countries participated in the evaluation, and were motivated to improve their performance, particularly on household water quality and handwashing with soap. Near the end of FY18, the region began revising country business plans, realigning annual targets to address the gaps in sanitation and hygiene, and addressing the current fundraising landscape (donor interest in water provision and emergency response).

Additionally, the regional WASH director strengthened country WASH teams in implementing integrated WASH programs and supported recruitments of WASH managers in Rwanda, South Sudan, and Uganda. Finally, the Rwanda WASH Program welcomed the first female WASH leader in the region. Her strength and vision will lead the way for universal water access in Rwanda by 2022.



71,567 households equipped with watertreatment techniques



225 schools accessed improved sanitation with menstrual hygiene facilities



183,584 people gained access to emergency hygiene supplies

Innovations and Partnerships

- In Burundi, local churches joined us to design projects, and were involved in community mobilization and the construction process.
 In addition, 56 faith leaders participated in hygiene, sanitation, and behavior-change programming.
- The Kenya WASH Program
 piloted creating an umbrella water
 committee, with representation
 from all community water projects
 from a targeted area. Issues that
 cannot be solved by individual water
 committees are referred to the
 umbrella body.
- In Somalia, many camp sanitation facilities do not have proper desludging facilities. We have designed lime stabilization ponds, which treat wastewater and can

- help break down human waste and remove pathogens. We submitted proposals for this design in FY18.
- The South Sudan WASH team focused on training government staff in water point operation and maintenance. Training the government was an important first step in locally led sustainability.
- In Sudan, we coordinated with local authorities and established two hand pump spare parts centers.
 Communities can use the fees collected for the use of the water point to purchase available spare parts and hire local artisans.
- The Uganda WASH Program used the Follow up Mandona approach (participatory mentorship), radio

talk shows, drama shows, and sanitation marketing to help community members improve sanitation and hygiene practices collectively.

A student came to my house, he told me he had come to discuss hygiene. I was a little surprised ... what did a child know about hygiene? I saw that the boy was speaking sense. Before, we would keep the cows inside our house, but after being taught by the schoolchildren, now we keep them outside."

—Alfred, a father living in Burundi

Soap Matters

World Vision in Ethiopia, alongside the local government, established WASH Business Centers and provided training on maintenance of water facilities and production of sanitation inputs including pit latrine slabs, reusable sanitary pads, hand-washing basins, and liquid soap. In Enemore Area Program, the center (consisting of seven young men and women) already produced and sold 235 latrine slabs, 34 hand-washing basins, and 183 liters of liquid soap (pictured right). The products are contributing to healthy hygiene behaviors as the locally made products are more financially accessible for families.





Salomon shows off the new toilet at school. The grab bars allow him to use the bathroom quickly, safely, and with dignity.



Innocent (pictured left) and Salomon now enjoy going to school and spending time with friends.

IMPACT STORY: EAST AFRICA

DIGNITY AND COMFORT

In 2018, Salomon and Innocent were pleasantly surprised to find that their school, supported by World Vision, had acquired an additional toilet specifically designed to accommodate their disabilities.

Salomon, 12, and Innocent, 13, both have lower body disabilities, and this significantly limits their mobility. Children living with disability face not only social discrimination, but also barriers to accessing services such as health, education, and transportation as the environment and infrastructure are not designed to accommodate their needs.

For Salomon and Innocent, the most difficult part was using the previous school latrines. These were common squat-style latrines that made it very difficult for the two boys to relieve themselves when they wanted to.

"I had to sit on the floor in the toilet. Sometimes there was urine everywhere. It would get on my hands and clothes," Salomon sadly recalled. "My classmates would always laugh at me because of the smell," he added.

Innocent resented the school headmaster and teachers who could not help in his misery. "I thought that they were bad people for constructing these latrines that I hated," he said.

The situation had gotten so bad that both Salomon and Innocent did not want to go to school at all. They would spend weeks at home before their parents would decide to make them return to school.

"My dad forced me to go back, otherwise I would have stopped going to school. It was all too embarrassing for me," Innocent recalled.

The Rwanda WASH Program responded and built an inclusive toilet facility for students with special needs. The toilet has grab bars on each side of the toilet seat. In addition, enough space was left in the room for a caregiver if necessary.

"When I used it for the first time, it took me only five minutes to finish and get back in class. It was comfortable and fun to use," Innocent said.

"The toilet keeps me clean. My friends don't make jokes about me anymore," Salomon happily added.

World Vision's WASH program in Rwanda is helping address the gaps to providing dignity and comfort by working to increase access to WASH infrastructure for people with disabilities. We thank you for joining us in prayer and support so that all children, including the most vulnerable, have equitable access to WASH services at home and at school.

We focus on assuring disability inclusion in all WASH projects. Our disability-inclusive WASH in schools reduces social discrimination and helps children with disabilities attend and stay in school."

—Nicaise Ugabinema, Health and WASH program manager

SOUTHERN AFRICA WASH

683,939 PEOPLE

provided with access to clean drinking water

882,019 PEOPLE

gained access to improved household sanitation

1.07 MILLION PEOPLE

reached with hygiene behavior-change programming



OUTCOMES AND OUTPUTS	FY18 Annual Target	Angola	Congo, DR	Lesotho	Malawi	Mozambique	South Africa	Swaziland	Zambia	Zimbabwe	FY18 Annual Achieved	Achieved vs. Target
OUTCOME: Access to Clean Water												
People who gained access to a clean drinking water source in communities	887.845	29.667	126.317	10.559	137.329	55.350	8.262	55.756	133,200	127,499	683,939	77%
Children who gained access to a clean drinking water source at school	166.085	4,958	6,347	5.891	17,457	11.555	2,686	35,482	30,582	77,304	192,262	116%
Schools with a clean drinking water source installed	395	13	14	25	14	39	5	90	52	141	393	99%
Health centers with a clean drinking water source installed	186	7	6		7	5	-	-	12	16	53	28%
Successful boreholes completed and commissioned in communities, schools, and health centers	1.306	95	30	П	199	184	-	34	283	21	857	66%
Taps installed from successful water supply systems in communities, schools, and health centers	1,161	16	253	123	217	51	312	964	530	115	2.581	222%
Nonfunctioning water points rehabilitated in communities, schools, and health centers	1,040	34	18	1.23	125	34		44	58	701	1.015	98%
Households equipped with water-treatment techniques to disinfect drinking water	70,382	4.553	17.938	3.056	89.362	26.186	1.570	407	13.078	868	157.018	223%
Households equipped with water-tileautient techniques to disiliect drinking water	70,302	7,333	17,730	3,030	07,302	20,100	1,370	407	13,070	000	137,010	223/6
OUTCOME: Access to Sanitation												
People who gained access to household sanitation	1,100,449	47,123	26,634	239	450,240	208,395	-	4,550	126,055	18,783	882,019	80%
Children who gained access to sanitation facilities at schools	186,056	5,550	12,937	7,453	87,664	10,274	1,350	4,257	11,701	7,404	148,590	80%
Household sanitation facilities constructed	122,123	9,000	5,742	68	96,906	41,679	-	650	18,793	3,428	176,266	144%
Communities certified as free from open defecation	1,337	90	8		609	42	-	-	543	46	1,338	100%
Improved, sex-separated sanitation facilities built at schools	1,935	94	91	244	251	218	14	78	176	85	1,251	65%
Schools that gained access to improved sanitation for children/youth with limited mobility	178	13	25	35	44	22	2	5	14	П	171	96%
Schools that gained access to improved sanitation for girls, with facilities to manage	685	15	24	35	45	22	1	_	14	13	169	25%
menstrual hygiene							•					
Improved, sex-separated sanitation facilities built at health centers	303	-	25	2	2.1	-	-	-	18	29	95	31%
Health centers that gained access to sex-separated sanitation facilities designed for people with	180	-	5	-	13	-	-	-	5	27	50	28%
limited mobility and appropriate for managing menstrual hygiene												
OUTCOME: Improved Hygiene Practices												
People who benefited from hygiene behavior-change promotion in communities	994,259	45.258	76.675	18.557	332.924	106.550	3,776	30,916	126,210	328,486	1.069.352	108%
Children who gained access to hand-washing facilities at schools	214,206	16.385	63,391	11.652	127,758	18,955	2,686	4.527	29,471	103,443	378.268	177%
Households that gained access to hand-washing facilities	129,692	8,151	13.591	2,843	86,865	34,794	1.500	658	16,077	8.298	172,777	133%
Schools that gained access to hand-washing facilities	430	26	76	52	159	34	5	7	53	286	698	162%
Health centers that gained access to hand-washing facilities	268	10	5	8	53	2	-	-	15	28	121	45%
OUTCOME: Improved Community Capacity for Sustainability												
WASH committees formed or reactivated with a financing system for maintenance and repair	2,233	93	37	12	455	252	8	109	398	1,047	2,411	108%
People trained in repair, maintenance, and construction of WASH facilities	1,318	6	155	30	459	39	-	242	251	282	1,464	111%
Functional Citizen Voice and Action (CVA) groups focused on WASH	110	3	7	Ī	I	27	5	8	3	316	371	337%
Faith leaders who participated in hygiene, sanitation, or behavior-change programming	1,809	202	489	15	4,889	513	22	88	335	8	6,561	363%
School WASH clubs or programs established	266	26	35	51	146	73	10	44	89	159	633	238%
OUTCOME: Access to WASH in Emergency Settings												
· , · ·								10.403	15.166		33.849	
People with access to emergency drinking water supplies	-		-	-	-	-	-	18,683	-,		,-	-
People with access to emergency sanitation systems	-	-	-	-	-	-	-	-	4,194	- 12 200	4,194	-
People with access to appropriate solid-waste disposal facilities	-	-	-	-	19.342	-	-	-	2,796	13,200	13,200 35,679	-
People with access to emergency hygiene supplies	-	-	-	-	17,542	-	-	-	2,796	15,541	33,6/9	-

PROGRAM SUMMARY: SOUTHERN AFRICA

Across the Southern Africa region, families, schoolchildren, and patients at health facilities now access clean water and improved sanitation, and practice healthy hygiene habits. In FY18, you helped make possible 4,453 new and rehabilitated wells and water points, 177,612 latrines, and 172,777 household hand-washing facilities. The result: stronger and healthier families and communities.

We celebrate these achievements, recognizing they were made amidst many challenges—cholera outbreaks, extreme drought and flooding, and refugee crisis. Through your faithfulness and support, all nine WASH teams were able to persist, providing vulnerable families (including children) with much-needed WASH.

Rejoice in the Lord always. I will say it again: Rejoice! (Philippians 4:4, NIV)



2,411 WASH committees formed and trained



698 schools gained access to hand-washing facilities



35,679 people gained access to emergency hygiene supplies

Innovations and Partnerships

 Across the region, country WASH programs worked to increase engagement with faith leaders.
 Overall, WASH teams helped train 6,561 faith leaders to further hygiene and sanitation messages throughout communities.

In Malawi alone, 4,889 faith leaders were trained, more than five times its annual target. (This was due in part to a recent cholera outbreak.) In partnership with the Malawi WASH team, community health workers, and trained faith leaders, families completed Community-Led Total Sanitation (CLTS) training, and went on to construct and use household latrines and hand-washing facilities. In FY18,

- 609 communities in Malawi were certified as Open Defecation Free.
- Schoolchildren in the region also gained access to WASH facilities and were empowered to take leadership roles in 633 newly formed WASH clubs. Eight country WASH programs (all except for Swaziland) constructed latrines equipped for menstrual hygiene management, enabling girls to maintain privacy and dignity, and to regularly attend school. In Zimbabwe, WASH clubs engaged in Sesame Workshop's Girl Talk! program, shifting attitudes and behaviors around puberty (including the importance of menstrual hygiene management for girls).
- 157,018 households learned ways to purify water (such as boiling), making it safe to drink.
- ... The quantity of water for all family uses was not sufficient. ... The water at the sources was limited, and women used to fight for it.
 But since the new water point was installed, everything has changed. ... We thank God who inspired the donors to support us, because without water, our life was so painful."

—Carolina Alde, 36, Mozambique

Jesus: The Source of Living Water

Across the region, WASH teams are dedicated to providing children and their families with access to clean water, and improved sanitation and hygiene. In response to World Vision's Christian perspective, they also take care to introduce families to the core Christian principle of Jesus Christ as the source of "living water". In the Democratic Republic of Congo (DRC), Lesotho, Malawi, Mozambique, and Zambia, WASH teams equipped faith leaders with "Jesus: The Source of Living Water" devotional handbooks and training which expound upon biblical teachings on safe WASH practices as well as important life principles as taught by Jesus Christ. As a result, 15,512 children in the DRC were reached with WASH messages, eight churches in Lesotho constructed handwashing facilities on their premises, and 7,705 Zambian adults and children were trained in a biblical understanding of WASH.





IMPACT STORY: SOUTHERN AFRICA

WATER IS LIFE

"Water is life" is a saying we often hear. This saying is true in Nanthowo village, where the availability of clean water has made life much easier and healthier for people living there.

As long as everyone could remember, there had never been clean water drawn from a pump in Nanthowo village in Malawi, home to 38 families. In dire need, villagers used water from unsafe sources such as open wells and rivers.

Women and girls spent half the day trekking long distances to find water, after which, they would return home to finish more chores. Girls often missed school, and women had no time for economic endeavors.

Sadly, waterborne diseases, such as diarrhea, were a frequent occurrence.

"Sometimes I couldn't even cook for my family because there was no clean water, and we couldn't bathe or complete household chores," explained Lusiya Chambala, a mother of five. "Worse still, we would sustain injuries trying to escape from wild animals as we searched for water."

But all that changed, thanks to your generosity and partnership with World Vision. The Malawi WASH team partnered with the community to drill a borehole in Nanthowo and equip it with a hand pump, helping the people's dream of readily available clean water to come true.

The community participated in the project by contributing sand, bricks, stone, and labor to help construct the borehole. A WASH committee was formed and trained to maintain and repair the hand pump, and manage fees that each family pays monthly to support maintenance costs.

"Life is much easier now," said Lusiya. "We can save time, too. I have more time for farming and tending to my family, especially my children."



(5(5) Life is much easier now. ... I have more time for farming and tending to my family, especially my children."

> —Lusiya, mother of five

Pastor Elizabeth speaks about the difference clean water has made to her community in Kalawa Area Program, Kenya.

SPOTLIGHT: FAITH INTEGRATION

FAITH AS A CATALYST FOR CHANGE

Enock Oruko, WASH Associate Director, World Vision Kenya

Poor sanitation is directly linked to poor health outcomes, yet achieving sanitation access remains a challenge in the development community. A recent evaluation conducted in Kenya by The Water Institute at the University of North Carolina revealed that access to basic sanitation by households is only 46 percent, while 25 percent still practice open defecation.

In Kenya, some of the barriers to achieving improved sanitation access are social norms and taboos related to perceptions about privacy and about sharing of latrines, including a belief in some communities that children shouldn't share latrines with adults. Community leaders, notably elders, are key custodians of a community's culture and practices.

In our struggle to address social norms and taboos around sanitation, World Vision's Kenya WASH team has learned that it is essential to partner with the faith community. Behaviors are driven by motivations, thoughts, and feelings, and ultimately by underlying values and beliefs. Thus, faith leaders, who have strong moral authority and credibility when speaking about beliefs, can strongly influence values in a population. The sacred texts of many faiths include teachings around cleanliness.

We started partnering intentionally with faith communities in an area called Osilgi. Faith leaders met together with public health officials and resolved to speak out on sanitation matters right from the pulpits. During their routine visits to their members' homes, they also encouraged households to construct latrines.

This approach expanded to other communities including Meto. Within three months, 142 households constructed new sanitation facilities in the target areas. Three pastors from Meto moved beyond their call of speaking in pulpits to initiate and sustain education in the community on best practices in sanitation. Based on the saying, 'Cleanliness is next to Godliness,' the pastors enlisted the support of two more pastors and sustained campaigns against open defecation in three villages within Meto. The pastors carried out demonstrations on how to construct low-cost latrines in their communities. This work is still ongoing in these communities.

On the whole, WASH actors perhaps do not fully realize the potential that partnering with faith leaders can have to reverse negative trends in sanitation behaviors. The Kenya WASH Program is working to replicate this approach of working with faith leaders in enhancing sanitation behaviors across the country. We are working to develop guidelines to guide us, and hopefully others, to meaningful behavior change around sanitation.

We work to ensure partnerships and networks are established with mutual respect, shared values, and accountability. Community integration and participation is paramount to address individual and household attitudes, values, beliefs and practices related to sanitation and other WASH behaviors."

—Enock Oruko

WEST AFRICA WASH

389,784 PEOPLE

provided with access to clean drinking water

345,962 PEOPLE

gained access to improved household sanitation

876,457 PEOPLE reached with hygiene behavior-change programming



OUTCOMES AND OUTPUTS	FY18 Annual Target	Chad	Ghana	Mali	Mauritania	Niger	Senegal	Sierra Leone	FY18 Annual Achieved	Achieved vs. Target
OUTCOME: Access to Clean Water										
People who gained access to a clean drinking water source in communities	453,900	28,800	70,200	138,700	20,828	109,800	11,506	9,950	389,784	86%
Children who gained access to a clean drinking water source at school	103,800	6,599	14,809	10,920	3,445	40,690	3,265	6,750	86,478	83%
Schools with a clean drinking water source installed	185	21	42	43	13	21	7	9	156	84%
Health centers with a clean drinking water source installed	149	3	21	20	6	12	-	I	63	42%
Successful boreholes completed and commissioned in communities, schools, and health centers	650	48	124	109	-	122	-	-	403	62%
Taps installed from successful water supply systems in communities, schools, and health centers	859	2	144	637	104	237	45	68	1,237	144%
Nonfunctioning water points rehabilitated in communities, schools, and health centers	342	69	66	29	9	58	6	- 1	238	70%
Households equipped with water-treatment techniques to disinfect drinking water	48,068	792	7,929	57,336	6,261	3,694	3,144	17,684	96,840	201%
OUTCOME: Access to Sanitation										
People who gained access to household sanitation	513,630	42,847	83,358	81,109	7,104	82,928	30,890	17,726	345,962	67%
Children who gained access to sanitation facilities at schools	57,600	1,193	10,820	9,757	1,142	22,900	3,897	6,750	56,459	98%
Household sanitation facilities constructed	50,970	6,121	11,051	10,386	1,184	10,366	3,089	2,768	44,965	88%
Communities certified as free from open defecation	1,166	19	156	81	9	62	7	5	339	29%
Improved, sex-separated sanitation facilities built at schools	1,192	20	181	102	20	206	94	144	767	64%
Schools that gained access to improved sanitation for children/youth with limited mobility	229	8	38	32	-	78	18	24	198	86%
Schools that gained access to improved sanitation for girls, with facilities to manage	204	-	38	20	4	5	18	24	109	53%
menstrual hygiene Improved, sex-separated sanitation facilities built at health centers	617	12	24	21	14	20	2	15	108	18%
Health centers that gained access to sex-separated sanitation facilities designed for people with	617	12	27	21	17	20		13	100	10/6
limited mobility and appropriate for managing menstrual hygiene	174	-	4	15	6	10	-	3	38	22%
OUTCOME: Improved Hygiene Practices										
People who benefited from hygiene behavior-change promotion in communities	834,930	29,563	225,255	202,623	18,685	306,735	59,039	34,557	876,457	105%
Children who gained access to hand-washing facilities at schools	146,050	1,344	60,202	13,613	4,387	51,995	11,520	10,950	154,011	105%
Households that gained access to hand-washing facilities	42,414	2,433	16,225	16,946	1,696	6,807	6,242	2,750	53,099	125%
Schools that gained access to hand-washing facilities	517	10	619	86	17	179	82	24	1,017	197%
Health centers that gained access to hand-washing facilities	346	5	90	19	6	63	-	3	186	54%
OUTCOME: Improved Community Capacity for Sustainability										
WASH committees formed or reactivated with a financing system for maintenance and repair	889	130	268	316	- 11	171	8	51	955	107%
People trained in repair, maintenance, and construction of WASH facilities	1,233	70	920	355	25	578	243	4	2,195	178%
Functional Citizen Voice and Action (CVA) groups focused on WASH	265	11	138	109	17	29	23	15	342	129%
Faith leaders who participated in hygiene, sanitation, or behavior-change programming	1,460	268	512	480	28	63	143	40	1,534	105%
School WASH clubs or programs established	549	8	202	235	8	154	66	58	731	133%
OUTCOME: Access to WASH in Emergency Settings										
People with access to emergency drinking water supplies	-	12,000	-	- [-	7,000	-	-	19,000	NA
People with access to emergency sanitation systems	-	700	-	-	-	4,575	-	-	5,275	NA
People with access to emergency hygiene supplies	-	700	-	-	-	30,135	-	-	30,835	NA

PROGRAM SUMMARY: WEST AFRICA

In June 2018, Godfrey Mawaa was engaged as the West Africa WASH director to provide technical support and leadership to WASH programs in the region. Godfrey is a water and environmental engineer with vast professional experience in the WASH sector, especially in emergency response.



I,237 taps installed from water supply systems

Also in June, a regional workshop was organized to extensively review results from the University of North Carolina WASH evaluation and program areas that need attention. Country-specific action plans were created based on learnings, and programmatic shifts were applied to improve sanitation, hygiene, and water quality interventions.



56,459 children gained access to sanitation facilities at school



30,835 people gained access to emergency hygiene supplies

This past fiscal year, the Mali WASH Program provided support to people displaced by civil conflict in Central Mali. Similarly, the WASH programs in Chad and Niger included an emergency response component. In Chad, emergency support was provided to internally displaced people in the Lake Chad refugee camps. The Niger WASH program responded to an influx of refugees from the Boko Haram insurgency which continues in the Diffa region.

Highlights

- For the second year in a row, World Vision was recognized as "The Best Development Actor" by Niger's Ministry of Water and Sanitation
- In Ghana, 156 communities were certified as Open Defecation Free after being mobilized with CLTS— 142 percent of our annual target.
- The Mali WASH team made great progress in schools this fiscal year, establishing WASH programs in 235 schools.
- In FY18, the Mauritania WASH Program reached twice the number of community members and students with clean water than in FY17
- Sierra Leone strategically shifted away from drilling boreholes with hand pumps in FY18 to installing exclusively solar-mechanized systems with taps. This shift aligns with the SDG standards of bringing a sustainable source of water closer to households.

With the mechanized water tank, our school got a tap stand. Now all schoolchildren and teachers use this tap stand. We are no longer late or tired before class because of water chores. I really love World Vision."

—Yagara, 15, Mali

Improved Access to Sanitation Helps Students Excel

Inadequate hygiene and sanitation facilities make it hard for students to concentrate, put children and staff at risk of disease, and often mean the difference between children continuing or suspending their studies, especially young girls. Khadija (right), a 6th grade student, attends a school that, until recently, had only one broken and doorless latrine for more than 100 students. "I couldn't use that latrine," she said. "... I preferred to go hide behind a bush." Thankfully, her school was one of 78 educational facilities equipped with proper sanitation infrastructure in Niger in 2018. Today, Khadija and 22,900 students across Niger can more easily focus on their studies.





We have been enlightened [and] strengthened on many WASH practices that can help us in our daily lives. Between World Vision and Tlokoro, trust has been established and strengthened ... and we wish for a lasting partnership with World Vision."

—Solomane Coulibaly, 43

IMPACT STORY: WEST AFRICA

WASH AND FAITH

Tlokoro is an Islamic village in Didieni commune, Baoule Area Program. In the past, Tlokoro struggled to find a development organization to partner with the community. However, World Vision partnered with Tlokoro to bring health and well-being to children and families through WASH.

"My name is Solomane Coulibaly. I'm 43 years old. I am the deputy chairman of the WASH committee of our community, Tlokoro.

"In 2018, in search of a solution to our water problem, we asked for a partnership with World Vision through the mayor's office. World Vision responded favorably to our request but on the condition to conduct a package of activities to add to access to water, including sanitation and hygiene practices.

"The implementation of CLTS, facilitated by World Vision, allowed us to discover that despite our strongly Islamic character, we were living in conditions that were not conducive to the good practice of our faith.

"The village as a whole was unhealthy, open defecation was common Animal droppings and garbage piles were visible all over the village, leaking sewage that flowed in all the alleys

"Our health center recorded many cases of diarrheal and infectious diseases in children.

"This implementation of the CLTS approach was an awareness that led us to commit ourselves to making our village a WASH community model.

"The whole village was engaged and has taken over the activities to honor this commitment. Each household was provided with a well-equipped latrine, the pumps were fitted out, no more feces are seen everywhere, and the women sweep the village every week.

"The Tlokoro effort was appreciated and rewarded by the partners, which earned us the place of the first among the 30 competing villages that reached the Open Defecation Free state. Today Tlokoro has a new face. ... As a resident, I am proud to see my village so clean. ... For some time we have noticed that there are fewer child diseases thanks to these good hygiene and sanitation practices.

"... We thank World Vision for its dedication and support, because these actions resulting from our collaboration have been rays of light on our village."

ASIA-PACIFIC WASH

417,516 PEOPLE

provided with access to clean drinking water

314,223 PEOPLE

gained access to improved household sanitation

1.1 MILLION PEOPLE

reached with hygiene behavior-change programming



OUTCOMES AND OUTPUTS	FY18 Annual Target	Bangladesh	Cambodia	India	Papua New Guinea	Sri Lanka	FY18 Annual Achieved	Achieved vs. Target
OUTCOME: Access to Clean Water								
People who gained access to a clean drinking water source in communities	900,208	52,786	68,320	181.009	3.687	111,714	417,516	46%
Children who gained access to a clean drinking water source at school	105,231	6,050	24,167	6,145	5,363	11,446	53,171	51%
Schools with a clean drinking water source installed	395	25	110	23	13	58	229	58%
Health centers with a clean drinking water source installed	66	39	15	7	8	5	74	112%
Successful boreholes completed and commissioned in communities, schools, and health centers	680	496	169	72	-	15	752	111%
Taps installed from successful water supply systems in communities, schools, and health centers	5,528	881	2,028	442	93	2,452	5,896	107%
Nonfunctioning water points rehabilitated in communities, schools, and health centers	1,632	117	10	584	50	21,787	22,548	1382%
Households equipped with water-treatment techniques to disinfect drinking water	73,703	8,925	26,433	23,652	1,494	5,034	65,538	89%
OUTCOME: Access to Sanitation								
People who gained access to household sanitation	642,023	80,951	70,259	146,335	5,336	11,342	314,223	49%
Children who gained access to sanitation facilities at schools	171,847	5,800	11,011	16,551	5,363	13,712	52,437	31%
Household sanitation facilities constructed	35,529	13,492	13,541	28,856	973	2,744	59,606	168%
Communities certified as free from open defecation	120	15	43	225	-	-	283	236%
Improved, sex-separated sanitation facilities built at schools	1,328	52	176	152	80	71	531	40%
Schools that gained access to improved sanitation for children/youth with limited mobility	398	9	44	42	13	5	113	28%
Schools that gained access to improved sanitation for girls, with facilities to manage menstrual	294	10	44	18	13	10	95	32%
Improved, sex-separated sanitation facilities built at health centers	84	13	24	21	16	- 11	85	101%
Health centers that gained access to sex-separated sanitation facilities designed for people with limited mobility and appropriate for managing menstrual hygiene	13	8	8	8	8	5	37	285%
minico modility and appropriate for managing menserual hygiene	ļ ļ	L.	L.	Į.	Į.		ļ.	
OUTCOME: Improved Hygiene Practices								
People who benefited from hygiene behavior-change promotion in communities	824,580	621,909	21,271	438,433	20,609	16,669	1,118,891	136%
Children who gained access to hand-washing facilities at schools	158,847	400	29,740	160,266	3,120	16,958	210,484	133%
Households that gained access to hand-washing facilities	42,256	7,837	8,469	38,981	1,119	321	56,727	134%
Schools that gained access to hand-washing facilities	649	2	116	1,037	13	57	1,225	
Health centers that gained access to hand-washing facilities	49	9	4	7	8	3	31	63%
OUTCOME: Improved Community Capacity for Sustainability								
WASH committees formed or reactivated with a financing system for maintenance and repair	1,009	678	349	171	28	125	1,351	134%
People trained in repair, maintenance, and construction of WASH facilities	3,881	85	1,975	456	48	-	2,564	66%
Functional Citizen Voice and Action (CVA) groups focused on WASH	176	Ш	-	86	4	- 1	102	58%
Faith leaders who participated in hygiene, sanitation, or behavior-change programming	959	901	-	466	110	28	1,505	
School WASH clubs or programs established	649	151	162	94	16	28	451	69%
OUTCOME: Access to WASH in Emergency Settings								
People with access to emergency drinking water supplies	-	88,500	2,905	29,052	-	-	120,457	NA
People with access to emergency sanitation systems	-	77,200	-	1,924	-	-	79,124	1
People with access to appropriate solid-waste disposal facilities	-	105,750	-	-	-	-	105,750	
People with access to emergency hygiene supplies	-	87,744	-	-	5,485	-	93,229	NA

PROGRAM SUMMARY: ASIA-PACIFIC

In Asia-Pacific, World Vision focused on providing WASH services for long-term development as well as responding to a series of natural and man-made disasters. In Cambodia, India, Indonesia, Myanmar, and the Philippines, our partnership with P&G served thousands of families with household water-treatment options and hygiene education. In North Korea, water points were equipped with Grundfos pumps to serve several hard-to-reach communities with clean water.

The number of household latrines increased throughout the region, mainly led by the India WASH Program and our partnership with the Indian government to eliminate open defecation by 2019. As local masons were trained around the region, we anticipate an increase in the number of households, schools, and health centers that access improved toilets. Local solutions to both hygiene and sanitation are key, such as the Healthy Island Concept in Papua New Guinea, which is a participatory community engagement, planning, and monitoring approach unique to the Pacific Islands.



65,538 households equipped with water-treatment techniques



113 schools accessed improved sanitation for children with limited mobility



120,457 people gained access to emergency water supplies

Innovations and Partnerships

- The Bangladesh WASH team trained water committees on local advocacy and relationship building. Topics included: meeting regularly with village development committees, engaging local government representatives, and implementing WASH activity plans.
- In Cambodia, we piloted a hygiene messaging approach called m-WASH. By partnering with a private telecommunication company, we sent voice mails to 400 phone numbers. Four different messages were sent, and 66 percent of recipients completely listened to the messages.
- The India WASH Program partnered with communities to reuse runoff water from

- handwashing for backyard kitchen gardens. In West Bengal state, 52 families adopted this method and have seen a reduction of stagnant pools that breed mosquitoes. In addition, families are now growing more nutritious produce.
- In Papua New Guinea, we partnered with churches to host the one-hour nighttime outreach sessions for hygiene promotion, recommended household water treatment, and proper waste disposal. Mass text messaging on proper waste disposal also was sent, with 500 texts sent three times a week, for two months.
- In Sri Lanka, World Vision scaled up our urban WASH work, with a focus on improved latrine and

solid and liquid waste management. By partnering with the local government, we provided improved sanitation facilities to 3,762 people.

It would have been better and more cost-effective if I had decided to build the toilet earlier, because the money I spent on medicines and consultation was far greater than what it took to build a new toilet. Thanks to the Sanitation Action Groups for all the encouragement and help, I now have a toilet."

—Mouk, a mother living in Cambodia

A Teacher's Story: Developing WASH Private Entrepreneurs

Shibbir Ahmed, 47, lives in Aharkandi village in Bangladesh. He is one of the successful entrepreneurs (pictured right) who received specialized training on sanitation marketing. He was a teacher at a local high school for 10 years, but he had to resign due to an eye problem. Learning local mason skills, he could not make enough money to support his family. He also needed small business skills and additional competence to make latrine materials and market his knowledge. World Vision trained Shibbir and 14 other local entrepreneurs on sanitation marketing and how to produce quality latrine materials for different latrine options. The trainings helped him to produce demand-based sanitation products, while increasing local sanitation coverage.





Gaudi is proud to be a positive influence for his community, especially when it comes to empowering his son Lejon to also be a sanitation advocate.



Gaudi leads the hand-washing demonstration in his community during Global Handwashing Day.

IMPACT STORY: ASIA-PACIFIC

POSITIVE INFLUENCE

In Papua New Guinea, Hanuabada village is one of the largest indigenous communities of the capital city, Port Moresby. Living on the coastline, families in Hanuabada are considered the historical caretakers of the city, however with changes in the environment and limited sanitation knowledge and responsibility, families face unique WASH challenges.

Hanuabada, with its population of 20,000, has severe water, sanitation, and hygiene challenges. With most houses built on stilts over the water, there are no toilets. Raw sewage from more than 12,000 families discharges directly into the sea, exposing most of the community, especially children, to waterborne and skin diseases.

For generations, families have used hanging toilets from the stilt houses and have openly thrown their garbage into the ocean. To positively impact and change the health trajectory of this village, World Vision has focused on community mobilization and advocacy, and hygiene and behavior-change education.

Gaudi ,50, is a community resource volunteer and was trained to address the hygiene behavior issues in his community. His journey began with World Vision in 2016, and since then he has influenced and empowered neighbors and friends to reduce waste and practice good hygiene.

He shared, "World Vision's intervention in my community has enabled me to educate my people and

become a role model, especially for my 4-year-old son, Lejon.

"He follows me to gatherings and awareness meetings and watches me talk to the community about how to dispose their waste, save water, and critical handwashing times," Gaudi happily shared.

"One day I found Lejon picking some plastic rubbish after his mother, and I realized that he was beginning to do what I was talking about in gatherings and awareness. I was a happy man when seeing my son doing the right thing, cleaning his environment." he said.

Gaudi continues to support the project and contributes to global and national events hosted in his community. Recently during Global Handwashing Day, he brought his family with him to be part of the handwashing awareness event in the community, where he was the master of ceremony.

Community resource volunteers like Gaudi have become change makers in their community and role models to their families.

I am well informed about the dangers that waste and other issues around sanitation and hygiene are causing to my environment and to my people."

—Gaudi 50, community leader in Papua New Guinea



SPOTLIGHT: SHIFTING OUR APPROACH

GLOBAL DEVELOPMENT GOALS AND WORLD VISION'S WASH PROGRAM

Ray Norman, Senior Director for WASH, World Vision International

The MDGs, imperfect as they were, taught us that having time-bound, universal goals mobilizes the global community, spurring stronger government ownership and greater stakeholder collaboration. Like the MDGs, the SDGs provide a framework for the fight against extreme poverty, but they add the challenges of ensuring more equitable and sustainable development, and put stronger emphasis on the process of collaboration—globally, nationally, and locally.

SDG 6, aiming for clean water and sanitation for all, calls for a significant shift from simply improving access to focusing on service quality and universal access—essentially a shift from an output-focused approach to an outcome-focused approach. It moves us from counting things, such as water points constructed, to measuring the sustained impact that WASH provides in communities. SDG 6 also calls for greater collaboration and partnership within the global WASH sector to achieve impact.

As part of our efforts to strengthen evidenced-based WASH programming, World Vision partnered with UNC to conduct a 14-country evaluation. The evaluation results provide a unique and timely snapshot of our WASH program, and establish a baseline in the context of the new SDG paradigm. Findings reveal that

while access to improved water for households is high there is substantial room for improvement for the entire sector in the areas of water quality at the point of consumption, use of limited or basic sanitation, and hygiene practice.

In the early years of our WASH work, we focused primarily on the provision of safe and reliable water to communities. We soon learned that the provision of safe water alone, without sanitation and hygiene, does not always result in improved health of children and their communities. We then began to promote the use of latrines and promoted good hygiene practice at the household. We have also expanded WASH programs to schools and health facilities. We have conscientiously tried to learn, grow, and provide a full coverage of WASH services. The WASH evaluation results and the guidance of SDG 6 illuminate areas we need to strengthen to improve program quality and impact.

If the achievement of the WASH SDG is truly to be a collaborative effort among all stakeholders, we need to ask what is World Vision's strength and contribution? As we review our evaluation results and look to our role in achieving the SDGs, we are increasingly seeing a need to critically and innovatively focus our programs and approaches to ensure sustainable and lasting impact for the communities and children we serve.

Essentially, while we in the WASH sector have made notable progress in providing access to safe water, sustained behavior change continues to lag behind, especially in the area of hygiene behaviors."

—Ray Norman

LATIN AMERICA & CARIBBEAN WASH

107,346 PEOPLE

provided with access to clean drinking water

49,718 PEOPLE

gained access to improved household sanitation

57,875 PEOPLE

reached with hygiene behavior-change programming



OUTCOMES AND OUTPUTS	FY18 Annual Target	Bolivia	Haiti	Honduras	Mexico	Nicaragua	FY18 Annual Achieved	Achieved vs. Target
OUTCOME: Access to Clean Water								
People who gained access to a clean drinking water source in communities	127,137	8.282	52,449	40.951	4,949	715	107.346	84%
Children who gained access to a clean drinking water source at school	17,164	380	8,336	5,669	2,429	15,342	32,156	187%
Schools with a clean drinking water source installed	150	8	16	54	26	62	166	110%
Health centers with a clean drinking water source installed	19	-	-	7	2	-	9	47%
Successful boreholes completed and commissioned in communities, schools, and health centers	26	1	- 11	1	5	- 1	19	73%
Taps installed from successful water supply systems in communities, schools, and health centers	11.487	707	329	8,307	502	72	9,917	
Nonfunctioning water points rehabilitated in communities, schools, and health centers	682	10	25	46	156	240	477	70%
Households equipped with water-treatment techniques to disinfect drinking water	13,358	608	8,607	3.000	2,992	2,741	17,948	134%
Trouserious equipped with water-deatheric techniques to disinfect drinking water	15,550	000	0,007	3,000	2,772	2,7 11	17,770	13476
OUTCOME: Access to Sanitation								
People who gained access to household sanitation	55,182	3,063	37,420	6,446	1,707	1,082	49,718	90%
Children who gained access to sanitation facilities at schools	15,190	2,743	9,342	6,432	-	15,335	33,852	223%
Household sanitation facilities constructed	10,878	568	6,116	1,305	419	238	8,646	79%
Communities certified as free from open defecation	74	-	-	12	-	2	14	19%
Improved, sex-separated sanitation facilities built at schools	189	74	252	221	-	366	913	483%
Schools that gained access to improved sanitation for children/youth with limited mobility	27	-	21	9	-	14	44	164%
Schools that gained access to improved sanitation for girls, with facilities to manage menstrual	100	_	21	32	_	23	76	76%
hygiene								
Improved, sex-separated sanitation facilities built at health centers	37	-	-	28	-	-	28	77%
Health centers that gained access to sex-separated sanitation facilities designed for people with limited mobility and appropriate for managing menstrual hygiene	19	-	-	6	-	-	6	31%
innited mobility and appropriate for managing mensu daringstene			J					1
OUTCOME: Improved Hygiene Practices								
People who benefited from hygiene behavior-change promotion in communities	73,581	8,999	20,381	13,225	14,038	1,232	57,875	79%
Children who gained access to hand-washing facilities at schools	14,788	2,743	13,633	4,924	4,115	14,640	40,055	271%
Households that gained access to hand-washing facilities	12,179	667	3,130	3,293	475	451	8,016	66%
Schools that gained access to hand-washing facilities	119	12	30	40	63	57	202	170%
Health centers that gained access to hand-washing facilities	19	-	-	6	2	-	8	42%
OUTCOME: Improved Community Capacity for Sustainability								
WASH committees formed or reactivated with a financing system for maintenance and repair	142	20	37	35	60	3	155	109%
People trained in repair, maintenance, and construction of WASH facilities	97	20	5	67	1	18	93	96%
Functional Citizen Voice and Action (CVA) groups focused on WASH	52	-	10	39	<u>'</u>	-	50	96%
Faith leaders who participated in hygiene, sanitation, or behavior-change programming	426	-	1,395	112	5	3	1.515	356%
School WASH clubs or programs established	259	-	1,373	51	269	57	547	211%
School 177 Girl Class of Programs established	237	- 1	170	31	207	37	547	211/0
OUTCOME: Access to WASH in Emergency Settings								
People with access to emergency drinking water supplies	NA	-	-	-	747	-	747	0%
People with access to emergency hygiene supplies	NA	-	-	-	4,864	-	4,864	0%

PROGRAM SUMMARY: LATIN AMERICA & CARIBBEAN

This past fiscal year, the Latin America and Caribbean WASH Program made great progress on WASH in schools, filling in the gaps as needed and exceeding all related regional targets.

9,917 taps installed from water supply systems

More than 40,000 students gained access to hand-washing facilities at 202 schools, reaching 170 percent of the annual target. In total, 32,156 school-children were provided with clean drinking water at 166 schools, achieving 110 percent of the annual target.



547 schools WASH programs established



1,515 faith leaders participated in WASH programming

In terms of sanitation, 33,852 students were reached through the construction of 913 improved, sex-separated sanitation facilities, reaching nearly five times the annual target. In addition, 76 schools benefited from improved sanitation for girls to manage menstrual hygiene while at school, and 44 schools gained access to improved sanitation for students with limited mobility.

Innovations and Partnerships

- In partnership with the Ministry of Water and Sanitation, communities in Haiti were mobilized using Community-Led Total Sanitation, and subsequently families constructed 6,116 household latrines
- The Mexico WASH Program collaborated with the Social Value Institute to systematize program knowledge and best practices through development and documentation of the social value chain for sanitation. Mapping the value chain moves past procurement and looks to limit risk.

- and add value at each stage of the chain to increase WASH access.
- In Honduras, 5,564 children participated in WASH UP! at 189 schools, learning about healthy hygiene behaviors and becoming agents for change in their communities.
- The Nicaragua WASH Program partnered with the Ministry of Health to implement a local hygiene behavior-change methodology. Ministry officers participated in household awareness-raising visits, and they led cleanup campaigns at the community level.

GG They built such great latrines at the school. Now, they are divided into latrines for girls and latrines for boys. They even built some small latrines for younger children for them not to be afraid of falling in the hole. ... Nowadays we do not have to leave the school to ask neighbors to let us use their latrines Now, I can go by myself because [the latrine] doors are safe, and I am sure that nobody will open them. Now, I am not afraid of using the latrine."

—Amina, 12, Nicaragua

Improving Health Through WASH in Schools

Vilma, 10, pictured at right, studies at the Utavi school in Bolivia, and she has four little brothers. Before clean water was provided at her school and home through the Bolivia WASH Program, she had to collect water from the nearest river, for which she had to walk for 20 minutes. Now that there is clean water available, Vilma and other students are healthier and have more time to do homework and play.

With a smile, Vilma shared, "We do not get sick in the house, and my companions do not get sick as before when they did not have water. In their house, they can already bathe, wash their hands, and wash their clothes."





Thanks to God and World Vision, we are clean and happy, and joyfully attend our classes every day."

—Lesby, 12

IMPACT STORY: LATIN AMERICA & CARIBBEAN

PRACTICING GOOD HYGIENE WITH THE MUPPETS

In Ocotepeque, Honduras, 12-year-old Lesby (pictured above, center) explains how students at Manuel de Jesús Sandoval school benefited in partnership with World Vision's Honduras WASH Program.

"Our school used to have a sanitary module [latrine block], but the earthquakes completely destroyed them, and the children were left without access to latrines, defecating in the open air, and without a handwashing station.

"A few months ago, World Vision visited us to obtain information about the current situation of latrines in the school. At that time, we felt hope in our hearts, because we were very sad and worried about the need for a new sanitary module. In addition, the staff of World Vision selected our school to implement the WASH UP! methodology [child-focused hygiene videos and games].

"With the support of World Vision, the Municipality of Labor, and parents, a health module was built in the school. Now, my classmates and I have access to a sanitary facility and a station to wash our hands.

"We are very happy for all the learning obtained through the WASH UP! methodology. At the end of the construction of the sanitary module, my classmates and I played in the patio, and it occurred to us to paint Elmo on the wall of the sanitary module to remind us of everything we had learned in the WASH UP! training sessions.

"With all we have learned, now we wash our hands with soap and water after going to the bathroom, before eating, and after playing. It is impressive how our hygiene behaviors have changed.

"We will take care of our health module and will promote with other children to continue practicing good hygiene habits."

MIDDLE EAST WASH

804,094 PEOPLE

provided with access to clean drinking water. An additional 96,754 people were reached with emergency water supply.

167,451 PEOPLE

gained access to improved household sanitation

123,700 PEOPLE

reached with hygiene behavior-change programming



OUTCOMES AND OUTPUTS		istan		an	non	,e	FY18	Achieved
OUTCOMES AND OUTPUTS	Annual Target	Afghanistan	Iraq	Jordan	Lebanon	Syria	Annual Achieved	vs. Target
OUTCOME: Access to Clean Water								
People who gained access to a clean drinking water source in communities	391,150	43,019	-	-	-	4,579	47,598	12%
Children who gained access to a clean drinking water source at school	41,103	12,677	16,177	7,764	-	5,833	42,451	103%
Schools with a clean drinking water source installed	121	13	19	14	-	14	60	50%
Health centers with a clean drinking water source installed	15	4	2	-	- 1	-	7	47%
Successful boreholes completed and commissioned in communities, schools, and health centers	53	-	-	-	-	-	-	0%
Taps installed from successful water supply systems in communities, schools, and health centers	6,807	238	256	114	-	651	1,259	18%
Nonfunctioning water points rehabilitated in communities, schools, and health centers	762	197	-	50	2	-	249	33%
Households equipped with water-treatment techniques to disinfect drinking water	7,067	6,066	-	-	-	-	6,066	86%
OUTCOME: Access to Sanitation								
People who gained access to household sanitation	144,350	5,234	-	-	-	4,579	9,813	7%
Children who gained access to sanitation facilities at schools	49,853	13,677	16,177	7,764	2,058	5,833	45,509	91%
Household sanitation facilities constructed	36,960	1,000	-	-	-	541	1,541	4%
Communities certified as free from open defecation	1,010	20	-	-	-	-	20	2%
Improved, sex-separated sanitation facilities built at schools	8,007	89	126	52	-	96	363	5%
Schools that gained access to improved sanitation for children/youth with limited mobility	36	14	14	1	-	-	29	80%
Schools that gained access to improved sanitation for girls, with facilities to manage menstrual hygiene	26	4	-	11		-	15	58%
Improved, sex-separated sanitation facilities built at health centers	65	56	10	-	_	-	66	102%
Health centers that gained access to sex-separated sanitation facilities designed for people with								
limited mobility and appropriate for managing menstrual hygiene	7	10	2	-	-	-	12	171%
OUTCOME: Improved Hygiene Practices								
People who benefited from hygiene behavior-change promotion in communities	249,558	50,672	_	1,300	7,370	64,358	123,700	50%
Children who gained access to hand-washing facilities at schools	91,967	12,677	16,177	8.006	2,252	8.000	47,112	51%
Households that gained access to hand-washing facilities	23,330	365	_	-		_	365	2%
Schools that gained access to hand-washing facilities	90	13	19	14	8	28	82	91%
Health centers that gained access to hand-washing facilities	10	4	2	-	-	-	6	57%
OUTCOME: Improved Community Capacity for Sustainability								
WASH committees formed or reactivated with a financing system for maintenance and repair	59	26	_		_	26	52	89%
People trained in repair, maintenance, and construction of WASH facilities	355	38	_	-	_	-	38	11%
Functional Citizen Voice and Action (CVA) groups focused on WASH	64	-	_	_	_	-	-	0%
Faith leaders who participated in hygiene, sanitation, or behavior-change programming	41	135	- 1	-	_	-	136	332%
School WASH clubs or programs established	73	58	49	17	- 11	-	135	185%
OUTCOME: Access to WASH in Urban Settings								
People with access to municipal water supply systems	581,540	-	412,000	-	5,491	339,005	756,496	130%
People with access to municipal sewage systems	151,670	-	-	-	340	157,298	157,638	104%
People with access to municipal solid waste disposal	-	-	-	-	-	133,318	133,318	0%
OUTCOME: Access to WASH in Emergency Settings								
People with access to emergency drinking water supplies	267,955	55,573	5,698	1,708	4,824	28,951	96,754	36%
People with access to emergency sanitation systems	266,955	120	4,948	1,708	7,339	25,365	39,480	15%
People with access to appropriate solid-waste disposal facilities	672,360	-	4,948	53,128	-	131,727	189,803	28%
People with access to emergency hygiene supplies	237,821	16,396	4,948	5,148	-	174,594	201,086	85%

PROGRAM SUMMARY: MIDDLE EAST

In FY18, World Vision provided emergency WASH to families critically affected by drought in Afghanistan, and to children and adults impacted by conflict throughout the region. Also, WASH services were provided to strengthen municipal infrastructure serving vulnerable families in communities, schools, and health facilities.

WASH teams supported water networks (such as providing submersible pumps, generators, fuel, and maintenance support for water pumping stations), repaired water pipes and expanded water networks, constructed new taps, repaired and/or expanded sewage networks, and built hand-washing stations.

While this region remains fragile, WASH teams in Afghanistan, Iraq, Jordan, Lebanon, and Syria are committed to helping families to be healthy and strong.



60 schools and seven health centers received access to clean water



82 schools and six health centers were provided hand-washing facilities



189,803 people gained access to solid-waste disposal facilities in emergency settings

Innovations and Partnerships

- Beyond conflict, water scarcity also plagues the Middle East. It is due in part to the effects of climate change such as frequent droughts and declining rainfall. World Vision helps families prepare for waterscarce conditions. In Afghanistan, the WASH team constructed 650 household rainwater/snow-melt reservoirs to enable households to conserve water to use during droughts. In Iraq, 122,076 people engaged in behavior-change activities in urban areas, learning risks of water scarcity and how to conserve water.
- Across the region, teams helped advance WASH in schools, providing 42,451 students access to
- clean water, 45,509 schoolchildren with access to improved sanitation, and 47,112 students with access to hand-washing facilities. Also, WASH teams helped to establish 135 school WASH clubs (many of which use Sesame's WASH UP! program). Also, in Jordan, the WASH team formed child parliaments in 10 schools, encouraging cooperation between Jordanian and Syrian students. The parliaments will address, among other topics, ways to improve WASH in schools.
- The Lebanon WASH team developed a mobile application for the Bekaa Water Establishment (regional government office)

to allow water users to receive municipality news and to submit complaints about water supply and management. The application launch is scheduled for FY19.

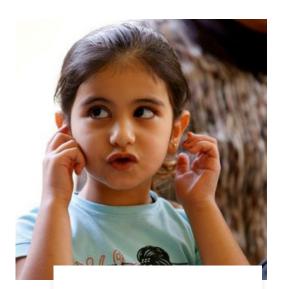
Raya taught her friend Elmo [both Sesame Muppets] how to stay healthy, and I am doing the same. I always share the information I have with my brothers and sisters [and] explain to them about germs and how we can easily fall sick!"

—Rim, 5, WASH UP! þarticiþant

Helping Families Access Emergency WASH

In FY18, while all five country WASH programs responded to emergency WASH needs, the response by Afghanistan and Syria WASH teams was most expansive. In Afghanistan, families faced one of the country's worst droughts in years, causing many of them to travel to neighboring provinces to find water. The Afghanistan team provided emergency water trucking to homes and camps (for internally displaced persons), serving 55,573 people dwelling in Ab Kamari and Jawand districts of the Badghis province. In Syria, ongoing conflict continued to drive families to seek refuge in nearby cities or countries. The Syria WASH team provided daily water trucking, sewage and trash removal, and hygiene kits to internally displaced persons in Al Rayan, Bab Al Nour, Bab Al Salama, Killy, Sijjo, and Shimarein camps. A total of 28,951 people received new access to water, while 57,322 people who remained in camps from prior years still access clean water.





She offers to do the dishes, dust the house, and take the garbage out. She never paid attention to what I do around the house before."

—Fatima, mother, sharing of the impact of WASH UP!

IMPACT STORY: MIDDLE EAST

SESAME'S WASH UP! BRINGS SMILES

... all while teaching children to form and practice safe WASH habits and to stay clean and healthy. In FY18, your support made it possible for country WASH programs to engage children in WASH UP! where they had lots of fun learning lessons from Muppet characters Raya and Elmo.

"Raya keeps the bacteria away. She is the star of super health!" exclaimed 5-year-old Rim (pictured left).

Rim is a Syrian refugee who lives with her family in an informal tented settlement in Lebanon. She and her family have lived in the settlement since 2012, after fleeing violence in Syria. "I couldn't handle being afraid all the time," admitted Rim's mother, Fatima (pictured below).

Recently, Fatima enrolled Rim in World Vision's Early Childhood Education Program (ECE), offered at a safe center nearby. WASH UP! is a part of the program. As Rim began to participate in WASH UP! she became amazed by Raya and wanted to be just like her.

"Raya taught her friend Elmo how to stay healthy, and I am doing the same. I always share the information I have with my brothers and sisters," continued Rim. "I explained to them about germs and how we can easily fall sick!"

Beyond being a WASH super star (as encouraged by Raya) to her siblings, Rim began volunteering to help clean their small, one-room home with a single latrine. "She offers to do the dishes, dust the house, and take the garbage out. She never paid attention to what I do around the house before." Fatima said with a smile.

Rim is one of the 10,111 children participating in WASH UP! since it first launched in the region in FY17. In partnership with Sesame Workshop, World Vision launched WASH UP! with the Lebanon WASH team, followed by the Afghanistan, Iraq, and Jordan WASH teams in FY18. These teams went on to train 463 teachers in WASH UP! The Syria WASH team plans to launch WASH UP! in FY19.





For more information, contact your World Vision representative.

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







