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 its 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

53,830 water points built

499,244 sanitation facilities built

494,067 hand-washing facilities built

6,735 WASH committees formed

2018 ANNUAL SPENDING

$145.6 MILLION spent on global WASH programs during 2018.

* 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

### 2018 Annual Achievements

<table>
<thead>
<tr>
<th>OUTCOME: Access to Clean Water</th>
<th>Global Annual Target</th>
<th>East Africa</th>
<th>Southern Africa</th>
<th>West Africa</th>
<th>Asia-Pacific</th>
<th>Latin America</th>
<th>Middle East</th>
<th>FY18 Global Achieved</th>
<th>Global Achieved vs. Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>People who gained access to a clean drinking water source in communities</td>
<td>4,116,515</td>
<td>1,596,108</td>
<td>683,939</td>
<td>389,784</td>
<td>417,516</td>
<td>107,346</td>
<td>47,598</td>
<td>3,242,291</td>
<td>79%</td>
</tr>
<tr>
<td>Children who gained access to a clean drinking water source at school</td>
<td>598,302</td>
<td>184,215</td>
<td>192,262</td>
<td>86,478</td>
<td>53,171</td>
<td>32,156</td>
<td>42,451</td>
<td>590,733</td>
<td>99%</td>
</tr>
<tr>
<td>Schools with a clean drinking water source installed</td>
<td>1,606</td>
<td>406</td>
<td>393</td>
<td>156</td>
<td>229</td>
<td>166</td>
<td>60</td>
<td>1,410</td>
<td>88%</td>
</tr>
<tr>
<td>Health centers with a clean drinking water source installed</td>
<td>569</td>
<td>127</td>
<td>53</td>
<td>63</td>
<td>74</td>
<td>9</td>
<td>7</td>
<td>333</td>
<td>59%</td>
</tr>
<tr>
<td>Successful boreholes completed and commissioned in communities, taps installed from successful water supply systems in communities, schools, and health centers</td>
<td>3,381</td>
<td>508</td>
<td>857</td>
<td>403</td>
<td>752</td>
<td>19</td>
<td>1</td>
<td>2,539</td>
<td>75%</td>
</tr>
<tr>
<td>Nonfunctioning water points rehabilitated in communities, schools, and households equipped with water-treatment techniques to disinfect drinking water</td>
<td>279,832</td>
<td>71,567</td>
<td>157,018</td>
<td>96,840</td>
<td>65,538</td>
<td>17,948</td>
<td>6,066</td>
<td>414,977</td>
<td>148%</td>
</tr>
</tbody>
</table>

### OUTCOME: Access to Sanitation

| People 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% |
| 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% |
| Household sanitation facilities constructed | 449,163 | 201,332 | 68,266 | 44,965 | 59,606 | 8,646 | 1,541 | 492,355 | 110% |
| Communities certified as free from open defecation | 5,729 | 1,644 | 1,338 | 339 | 283 | 14 | 20 | 3,658 | 64% |
| Improved, sex-separated sanitation facilities built at schools | 14,514 | 2,328 | 1,251 | 767 | 531 | 913 | 363 | 6,153 | 42% |
| Schools that gained access to improved sanitation for children/youth with limited mobility | 1,098 | 326 | 171 | 198 | 113 | 44 | 29 | 881 | 80% |
| Schools that gained access to improved sanitation for girls, with facilities to manage menstrual hygiene | 1,527 | 225 | 169 | 109 | 95 | 76 | 15 | 689 | 45% |
| 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 for managing menstrual hygiene | 499 | 102 | 50 | 38 | 37 | 6 | 12 | 245 | 49% |

### OUTCOME: 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 | 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 | 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 | 397 | 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 | 637 | 731 | 451 | 547 | 335 | 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 | - | - | - | - | 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 emergency hygiene supplies | 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

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

** SOUTH AFRICA
  - SWAZILAND**
  - ZAMBIA
  - ZIMBABWE

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

** MIDDLE EAST & EUROPE
  - AFGHANISTAN
  - IRAQ
  - JORDAN
  - LEBANON
  - SYRIA

** SOUTHERN AFRICA
  - ANGOLA
  - D. REPUBLIC OF CONGO
  - LESOTHO
  - MALAWI
  - MOZAMBIQUE

* 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.
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: water-funded 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 AQTTap 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.

**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, hands-on approach on solar-powered pumps for all participants.

**University of North Carolina:** World Vision has a six-year partnership with UNCG to conduct ongoing multicountry evaluations and research. Data collection occurred largely over the summer of 2017 in 14 countries. UNCG 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 UNCG 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
## Outcomes and Outputs

### Outcome: Access to WASH in Emergency Settings

- **People with access to a clean drinking water source in communities**: 1,356,276
- **Children who gained access to a clean drinking water source at school**: 164,920
- **Schools with a clean drinking water source installed**: 359
- **Health centers with a clean drinking water source installed**: 134
- **Successful boreholes completed and commissioned in communities, schools, and health centers**: 665
- **Taps installed from successful water supply systems in communities, schools, and health centers**: 4,095
- **Non-functioning water points rehabilitated in communities, schools, and health centers**: 907
- **Households equipped with water-treatment techniques to disinfect drinking water**: 67,256

### Outcome: Access to WASH in Urban Settings

- **People who gained access to a clean drinking water source in communities**: 1,399,888
- **Children who gained access to sanitation facilities at schools**: 117,749
- **Household sanitation facilities constructed**: 192,703
- **Schools that gained access to improved sanitation for children/youth with limited mobility**: 1,862
- **Non-functioning water points rehabilitated in communities, schools, and health centers**: 134
- **Schools that gained access to improved sanitation for girls, with facilities to manage menstrual hygiene**: 527
- **Health centers with a clean drinking water source installed**: 134
- **Schools with a clean drinking water source installed**: 359
- **People who gained access to household sanitation**: 1,399,888
- **Achieved vs. Target**

### Outcome: Improved Hygiene Practices

- **People who benefited from hygiene behavior-change promotion in communities**: 1,695,995
- **Children who gained access to hand-washing facilities**: 144,238
- **Households that gained access to hand-washing facilities**: 227,995
- **Schools that gained access to hand-washing facilities**: 381
- **Health centers that gained access to hand-washing facilities**: 209
- **people with limited mobility and appropriate for managing menstrual hygiene**: 106

### Outcome: Improved Community Capacity for Sustainability

- **WASH committees formed or reactivated with a financing system for maintenance and repair**: 1,815
- **People trained in repair, maintenance, and construction of WASH facilities**: 1,856
- **Functional Citizen Voice and Action (CVA) groups focused on WASH**: 178
- **Faith leaders who participated in hygiene, sanitation, or behavior-change**: 1,594
- **School WASH clubs or programs established**: 599

### Outcome: Access to WASH in Rural Settings

- **People who gained access to a clean drinking water source in communities**: 1,356,276
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**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.

**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 Mandonia 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.
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
## OUTCOMES AND OUTPUTS

### OUTCOME: Access to Clean Water

<table>
<thead>
<tr>
<th>FY18 Annual Target</th>
<th>Angola</th>
<th>Congo, DR</th>
<th>Lesotho</th>
<th>Malawi</th>
<th>Mozambique</th>
<th>South Africa</th>
<th>Swaziland</th>
<th>Zambia</th>
<th>Zimbabwe</th>
<th>FY18 Annual Achieved</th>
<th>Achieved vs. Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>People who gained access to a clean drinking water source in communities</td>
<td>887,041</td>
<td>29,667</td>
<td>126,317</td>
<td>10,559</td>
<td>137,729</td>
<td>35,550</td>
<td>122,200</td>
<td>127,499</td>
<td>682,019</td>
<td>80%</td>
<td></td>
</tr>
<tr>
<td>Children who gained access to a clean drinking water source at school</td>
<td>144,061</td>
<td>4,958</td>
<td>6,347</td>
<td>5,891</td>
<td>17,545</td>
<td>11,555</td>
<td>2,686</td>
<td>35,482</td>
<td>30,582</td>
<td>116%</td>
<td></td>
</tr>
<tr>
<td>Schools with a clean drinking water source installed</td>
<td>395</td>
<td>13</td>
<td>14</td>
<td>25</td>
<td>14</td>
<td>29</td>
<td>5</td>
<td>90</td>
<td>52</td>
<td>99%</td>
<td></td>
</tr>
<tr>
<td>Health centers with a clean drinking water source installed</td>
<td>186</td>
<td>7</td>
<td>6</td>
<td>-</td>
<td>7</td>
<td>3</td>
<td>-</td>
<td>-</td>
<td>12</td>
<td>16</td>
<td>53%</td>
</tr>
<tr>
<td>Successful boreholes completed and commissioned in communities, schools, and health centers</td>
<td>1,306</td>
<td>95</td>
<td>30</td>
<td>11</td>
<td>199</td>
<td>184</td>
<td>-</td>
<td>34</td>
<td>282</td>
<td>64%</td>
<td></td>
</tr>
<tr>
<td>Taps installed from successful water supply systems in communities, schools, and health centers</td>
<td>1,161</td>
<td>16</td>
<td>253</td>
<td>123</td>
<td>217</td>
<td>51</td>
<td>312</td>
<td>944</td>
<td>530</td>
<td>115</td>
<td>222%</td>
</tr>
<tr>
<td>Households equipped with water-treatment techniques to disinfect drinking water</td>
<td>70,382</td>
<td>4,553</td>
<td>17,938</td>
<td>3,056</td>
<td>89,362</td>
<td>26,186</td>
<td>1,570</td>
<td>407</td>
<td>13,078</td>
<td>868</td>
<td>157,018</td>
</tr>
</tbody>
</table>

### OUTCOME: Access to Sanitation

<table>
<thead>
<tr>
<th>FY18 Annual Target</th>
<th>Angola</th>
<th>Congo, DR</th>
<th>Lesotho</th>
<th>Malawi</th>
<th>Mozambique</th>
<th>South Africa</th>
<th>Swaziland</th>
<th>Zambia</th>
<th>Zimbabwe</th>
<th>FY18 Annual Achieved</th>
<th>Achieved vs. Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>People who gained access to household sanitation</td>
<td>1,100,449</td>
<td>47,123</td>
<td>26,634</td>
<td>239</td>
<td>450,240</td>
<td>208,395</td>
<td>-</td>
<td>4,550</td>
<td>126,055</td>
<td>18,783</td>
<td>882,019</td>
</tr>
<tr>
<td>Children who gained access to sanitation facilities at schools</td>
<td>186,056</td>
<td>5,550</td>
<td>12,937</td>
<td>7,453</td>
<td>87,664</td>
<td>10,274</td>
<td>1,350</td>
<td>4,137</td>
<td>11,701</td>
<td>7,404</td>
<td>148,590</td>
</tr>
<tr>
<td>Household sanitation facilities constructed</td>
<td>122,123</td>
<td>9,000</td>
<td>5,742</td>
<td>68</td>
<td>96,906</td>
<td>41,679</td>
<td>-</td>
<td>650</td>
<td>18,793</td>
<td>3,428</td>
<td>176,366</td>
</tr>
<tr>
<td>Communities certified as free from open defecation</td>
<td>1,337</td>
<td>95</td>
<td>8</td>
<td>-</td>
<td>609</td>
<td>62</td>
<td>-</td>
<td>543</td>
<td>46</td>
<td>1,338</td>
<td>100%</td>
</tr>
<tr>
<td>Improved, sex-separated sanitation facilities built at schools</td>
<td>1,935</td>
<td>94</td>
<td>91</td>
<td>244</td>
<td>251</td>
<td>218</td>
<td>14</td>
<td>78</td>
<td>76</td>
<td>85</td>
<td>1,251</td>
</tr>
<tr>
<td>Schools that gained access to improved sanitation for children/youth with limited mobility</td>
<td>178</td>
<td>13</td>
<td>25</td>
<td>35</td>
<td>44</td>
<td>22</td>
<td>2</td>
<td>5</td>
<td>14</td>
<td>11</td>
<td>171</td>
</tr>
<tr>
<td>Schools that gained access to improved sanitation for girls, with facilities to manage menstrual hygiene</td>
<td>685</td>
<td>15</td>
<td>24</td>
<td>35</td>
<td>45</td>
<td>22</td>
<td>1</td>
<td>-</td>
<td>14</td>
<td>13</td>
<td>169</td>
</tr>
<tr>
<td>Improved, sex-separated sanitation facilities built at health centers</td>
<td>303</td>
<td>-</td>
<td>25</td>
<td>2</td>
<td>21</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>18</td>
<td>29</td>
<td>95</td>
</tr>
<tr>
<td>Health centers that gained access to sex-separated sanitation facilities designed for people with limited mobility and appropriate for managing menstrual hygiene</td>
<td>180</td>
<td>-</td>
<td>5</td>
<td>-</td>
<td>13</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>5</td>
<td>27</td>
<td>50</td>
</tr>
</tbody>
</table>

### OUTCOME: Improved Hygiene Practices

<table>
<thead>
<tr>
<th>FY18 Annual Target</th>
<th>Angola</th>
<th>Congo, DR</th>
<th>Lesotho</th>
<th>Malawi</th>
<th>Mozambique</th>
<th>South Africa</th>
<th>Swaziland</th>
<th>Zambia</th>
<th>Zimbabwe</th>
<th>FY18 Annual Achieved</th>
<th>Achieved vs. Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>People who benefited from hygiene behavior-change promotion in communities</td>
<td>994,259</td>
<td>45,258</td>
<td>76,675</td>
<td>18,557</td>
<td>332,924</td>
<td>106,550</td>
<td>3,776</td>
<td>30,916</td>
<td>126,210</td>
<td>328,486</td>
<td>1,069,352</td>
</tr>
<tr>
<td>Children who gained access to hand-washing facilities at schools</td>
<td>214,206</td>
<td>16,385</td>
<td>63,391</td>
<td>11,652</td>
<td>87,664</td>
<td>10,274</td>
<td>1,350</td>
<td>4,137</td>
<td>11,701</td>
<td>7,404</td>
<td>148,590</td>
</tr>
<tr>
<td>Households equipped with water-treatment techniques to disinfect drinking water</td>
<td>70,382</td>
<td>4,553</td>
<td>17,938</td>
<td>3,056</td>
<td>89,362</td>
<td>26,186</td>
<td>1,570</td>
<td>407</td>
<td>13,078</td>
<td>868</td>
<td>157,018</td>
</tr>
<tr>
<td>Successful boreholes completed and commissioned in communities, schools, and health centers</td>
<td>1,161</td>
<td>16</td>
<td>253</td>
<td>123</td>
<td>217</td>
<td>51</td>
<td>312</td>
<td>944</td>
<td>530</td>
<td>115</td>
<td>2,581</td>
</tr>
<tr>
<td>Health centers that gained access to hand-washing facilities</td>
<td>129,692</td>
<td>8,151</td>
<td>13,591</td>
<td>2,843</td>
<td>86,865</td>
<td>34,979</td>
<td>1,300</td>
<td>658</td>
<td>16,077</td>
<td>8,298</td>
<td>172,777</td>
</tr>
<tr>
<td>Schools that gained access to hand-washing facilities</td>
<td>430</td>
<td>26</td>
<td>76</td>
<td>52</td>
<td>159</td>
<td>36</td>
<td>5</td>
<td>7</td>
<td>53</td>
<td>286</td>
<td>698</td>
</tr>
<tr>
<td>Health centers that gained access to hand-washing facilities</td>
<td>186</td>
<td>7</td>
<td>6</td>
<td>3</td>
<td>13</td>
<td>3</td>
<td>-</td>
<td>-</td>
<td>12</td>
<td>16</td>
<td>53%</td>
</tr>
</tbody>
</table>

### OUTCOME: Improved Community Capacity for Sustainability

<table>
<thead>
<tr>
<th>FY18 Annual Target</th>
<th>Angola</th>
<th>Congo, DR</th>
<th>Lesotho</th>
<th>Malawi</th>
<th>Mozambique</th>
<th>South Africa</th>
<th>Swaziland</th>
<th>Zambia</th>
<th>Zimbabwe</th>
<th>FY18 Annual Achieved</th>
<th>Achieved vs. Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>WASH committees formed or reactivated with a financing system for maintenance and repair</td>
<td>2,232</td>
<td>93</td>
<td>27</td>
<td>12</td>
<td>455</td>
<td>252</td>
<td>8</td>
<td>109</td>
<td>398</td>
<td>1,047</td>
<td>2,411</td>
</tr>
<tr>
<td>People trained in repair, maintenance, and construction of WASH facilities</td>
<td>1,318</td>
<td>6</td>
<td>155</td>
<td>20</td>
<td>499</td>
<td>39</td>
<td>-</td>
<td>342</td>
<td>251</td>
<td>282</td>
<td>1,944</td>
</tr>
<tr>
<td>Functional Citizen Voice and Action (CVA) groups focused on WASH</td>
<td>110</td>
<td>3</td>
<td>7</td>
<td>1</td>
<td>27</td>
<td>5</td>
<td>8</td>
<td>3</td>
<td>316</td>
<td>371</td>
<td>316</td>
</tr>
<tr>
<td>Faith leaders who participated in hygiene, sanitation, or behavior-change programming</td>
<td>1,809</td>
<td>202</td>
<td>489</td>
<td>15</td>
<td>4,899</td>
<td>513</td>
<td>22</td>
<td>88</td>
<td>335</td>
<td>8</td>
<td>6,561</td>
</tr>
<tr>
<td>School WASH clubs or programs established</td>
<td>264</td>
<td>26</td>
<td>25</td>
<td>3</td>
<td>146</td>
<td>73</td>
<td>10</td>
<td>44</td>
<td>89</td>
<td>159</td>
<td>633</td>
</tr>
</tbody>
</table>

### OUTCOME: Access to WASH in Emergency Settings

<table>
<thead>
<tr>
<th>FY18 Annual Target</th>
<th>Angola</th>
<th>Congo, DR</th>
<th>Lesotho</th>
<th>Malawi</th>
<th>Mozambique</th>
<th>South Africa</th>
<th>Swaziland</th>
<th>Zambia</th>
<th>Zimbabwe</th>
<th>FY18 Annual Achieved</th>
<th>Achieved vs. Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>People with access to emergency drinking water supplies</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>18,683</td>
<td>15,166</td>
<td>-</td>
</tr>
<tr>
<td>People with access to emergency sanitation facilities</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>4,194</td>
<td>4,194</td>
<td>-</td>
</tr>
<tr>
<td>People with access to appropriate solid waste disposal facilities</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>13,200</td>
<td>13,200</td>
<td>-</td>
</tr>
<tr>
<td>People with access to emergency hygiene supplies</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>2,796</td>
<td>13,541</td>
<td>-</td>
</tr>
</tbody>
</table>

## 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

---

**SOUTHERN AFRICA WASH**

... provided with access to clean drinking water

... reached with hygiene behavior-change programming

... gained access to improved household sanitation
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 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)

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 hand-washing facilities on their premises, and 7,705 Zambian adults and children were trained in a biblical understanding of WASH.
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.”

“Life is much easier now. . . . I have more time for farming and tending to my family, especially my children.”

—Lusiya, mother of five
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
### OUTCOMES AND OUTPUTS

#### OUTCOME: Access to Clean Water
People who gained access to hand-washing facilities at schools

- **Children**
  - 146,050
  - 1,344
  - 219
  - 63
  - 52
  - 204
  - 99
  - 36
  - 131

- **Households**
  - 42,414
  - 2,433
  - 1,162
  - 71
  - 46
  - 21

**OUTCOME: Improved Hygiene Practices**

- **Children who gained access to hand-washing facilities at schools**
  - 413,900
  - 1,460
  - 70

- **Schools that gained access to hand-washing facilities**
  - 12,000
  - 700
  - 700

**OUTCOME: Access to WASH in Emergency Settings**

- **People with access to emergency drinking water supplies**
  - 389,784
  - 12,000
  - 7,000

- **People with access to emergency sanitation systems**
  - 345,962
  - 700
  - 4,575

- **People with access to emergency hygiene supplies**
  - 876,457
  - 700
  - 30,135

**OUTCOME: Improved Community Capacity for Sustainability**

- **Children who gained access to clean drinking water source at school**
  - 513,620
  - 1,990
  - 10,821

- **Health centers with clean drinking water source**
  - 389,784
  - 12,000

- **Communities certified as free from open defecation**
  - 48,068
  - 700

**OUTCOME: Access to Sanitation**

- **Schools that gained access to improved sanitation for girls, with facilities to manage menstrual hygiene**
  - 1,192
  - 20

- **Health centers that gained access to sex-separated sanitation facilities designed for people with limited mobility and appropriate for managing menstrual hygiene**
  - 517
  - 10

- **Functional Citizen Voice and Action (CVA) groups focused on WASH**
  - 265
  - 11

- **Children who gained access to a clean drinking water source at school**
  - 103,800
  - 6,599

- **Schools with a clean drinking water source installed**
  - 149
  - 3

- **Health centers with a clean drinking water source installed**
  - 149
  - 3

- **Successful boreholes completed and commissioned in communities, schools, and health centers**
  - 453,900
  - 28,800

- **Target boreholes completed**
  - 342
  - 69

- **Health centers that gained access to hand-washing facilities**
  - 346
  - 130

- **Children who gained access to hand-washing facilities at schools**
  - 146,050
  - 1,344

- **Schools that gained access to improved sanitation for girls, with facilities to manage menstrual hygiene**
  - 12,000
  - 700

- **Households that gained access to hand-washing facilities**
  - 42,414
  - 2,433
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.

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.

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.

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

<table>
<thead>
<tr>
<th>OUTCOMES AND OUTPUTS</th>
<th>FY18 Annual Target</th>
<th>Bangladesh</th>
<th>Cambodia</th>
<th>India</th>
<th>Papua New Guinea</th>
<th>Sri Lanka</th>
<th>FY18 Achieved</th>
<th>Achieved vs. Target</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>OUTCOME: Access to Clean Water</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>People who gained access to a clean drinking water source in communities</td>
<td>900,208</td>
<td>52,786</td>
<td>68,320</td>
<td>181,009</td>
<td>3,687</td>
<td>111,744</td>
<td>417,516</td>
<td>46%</td>
</tr>
<tr>
<td>Children who gained access to a clean drinking water source at school</td>
<td>105,231</td>
<td>6,050</td>
<td>24,167</td>
<td>6,145</td>
<td>5,363</td>
<td>11,446</td>
<td>53,171</td>
<td>51%</td>
</tr>
<tr>
<td>Schools with a clean drinking water source installed</td>
<td>395</td>
<td>23</td>
<td>110</td>
<td>23</td>
<td>13</td>
<td>58</td>
<td>229</td>
<td>58%</td>
</tr>
<tr>
<td>Health centers with a clean drinking water source installed</td>
<td>66</td>
<td>39</td>
<td>15</td>
<td>7</td>
<td>8</td>
<td>5</td>
<td>74</td>
<td>112%</td>
</tr>
<tr>
<td>Successful boreholes completed and commissioned in communities, schools, and health centers</td>
<td>680</td>
<td>496</td>
<td>169</td>
<td>72</td>
<td>-</td>
<td>15</td>
<td>752</td>
<td>111%</td>
</tr>
<tr>
<td>Taps installed from successful water supply systems in communities, schools, and health centers</td>
<td>5,528</td>
<td>881</td>
<td>2,028</td>
<td>442</td>
<td>93</td>
<td>2,652</td>
<td>5,876</td>
<td>107%</td>
</tr>
<tr>
<td>Nonfunctioning water points rehabilitated in communities, schools, and health centers</td>
<td>1,632</td>
<td>117</td>
<td>10</td>
<td>584</td>
<td>50</td>
<td>21,787</td>
<td>22,548</td>
<td>1382%</td>
</tr>
<tr>
<td>Households equipped with water-treatment techniques to disinfect drinking water</td>
<td>73,703</td>
<td>8,925</td>
<td>26,433</td>
<td>23,652</td>
<td>1,494</td>
<td>5,034</td>
<td>65,538</td>
<td>89%</td>
</tr>
<tr>
<td>Communities certified as free from open defecation</td>
<td>120</td>
<td>15</td>
<td>43</td>
<td>122</td>
<td>-</td>
<td>-</td>
<td>120</td>
<td>100%</td>
</tr>
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<tr>
<td><strong>OUTCOME: Access to Sanitation</strong></td>
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<td></td>
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<td></td>
</tr>
<tr>
<td>People who gained access to sanitation facilities at schools</td>
<td>171,847</td>
<td>5,800</td>
<td>11,011</td>
<td>16,551</td>
<td>5,363</td>
<td>13,712</td>
<td>52,437</td>
<td>31%</td>
</tr>
<tr>
<td>People who gained access to household sanitation</td>
<td>642,023</td>
<td>80,951</td>
<td>70,259</td>
<td>146,335</td>
<td>5,336</td>
<td>11,342</td>
<td>314,223</td>
<td>49%</td>
</tr>
<tr>
<td><strong>OUTCOME: Access to WASH in Emergency Settings</strong></td>
<td></td>
<td></td>
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<td></td>
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<td></td>
<td></td>
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<tr>
<td>People with access to emergency sanitation systems</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>120,457</td>
<td>NA</td>
</tr>
<tr>
<td>People with access to appropriate solid-waste disposal facilities</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>105,750</td>
<td>NA</td>
</tr>
<tr>
<td>People with access to emergency hygiene supplies</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>93,229</td>
<td>NA</td>
</tr>
<tr>
<td><strong>OUTCOME: Improved Hygiene Practices</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>People who benefitted from hygiene behavior-change promotion in communities</td>
<td>824,380</td>
<td>621,909</td>
<td>21,271</td>
<td>438,433</td>
<td>20,609</td>
<td>16,669</td>
<td>1,118,891</td>
<td>136%</td>
</tr>
<tr>
<td>Children who gained access to hand-washing facilities at schools</td>
<td>158,847</td>
<td>402</td>
<td>29,740</td>
<td>160,266</td>
<td>3,120</td>
<td>16,958</td>
<td>210,484</td>
<td>133%</td>
</tr>
<tr>
<td>Households that gained access to hand-washing facilities</td>
<td>42,256</td>
<td>7,817</td>
<td>8,469</td>
<td>38,981</td>
<td>1,119</td>
<td>23,611</td>
<td>56,727</td>
<td>134%</td>
</tr>
<tr>
<td>Schools that gained access to hand-washing facilities</td>
<td>649</td>
<td>116</td>
<td>1,037</td>
<td>13</td>
<td>57</td>
<td>1,225</td>
<td>189%</td>
<td></td>
</tr>
</tbody>
</table>
| Health centers that gained access to hand-washing facilities | 49 | 9 | 4 | 8 | 8 | 5 | 38 | 28%
| **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 | 11 | - | 86 | 4 | 1 | 102 | 58% |
| Faith leaders who participated in hygiene, sanitation, or behavior-change programming | 959 | 901 | - | 466 | 110 | 28 | 1,595 | 157% |
| 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 | NA |
| People with access to appropriate solid-waste disposal facilities | - | 105,750 | - | - | - | - | 105,750 | NA |
| People with access to emergency hygiene supplies | - | 87,744 | - | 5,485 | - | - | 93,229 | NA |
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.
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
## OUTCOMES AND OUTPUTS

### OUTCOME: Access to Clean Water

| People who gained access to a clean drinking water source in communities | 127,137 | 82,882 | 52,249 | 40,951 | 4,494 | 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 | 26 | 62 | 166 | 134% |
| 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 | 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 | 86% |
| 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 | 2,992 | 2,741 | 17,948 | 134% |

### OUTCOME: Improved Hygiene Practices

| People who benefited from hygiene behavior-change promotion in communities | 73,581 | 8,999 | 20,381 | 13,225 | 14,038 | 1,323 | 57,875 | 79% |
| Children who gained access to hand-washing facilities at schools | 14,788 | 1,124 | 3,212 | 2,215 | 712 | 912 | 3,417 | 24% |
| Households that gained access to hand-washing facilities | 19 | - | 6 | - | - | 6 | 31% |

### 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 | 7,116 | 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 | 252 | 221 | - | 366 | 713 | 483% |
| Schools that gained access to improved sanitation for children/youth with limited mobility | 27 | - | 9 | - | 14 | 164% |
| Schools that gained access to improved sanitation for girls, with facilities to manage menstrual hygiene | 100 | - | 21 | 32 | - | 23 | 76% |
| 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% |

### OUTCOME: Improved Community Capacity for Sustainability

| WASH committees formed or reactivated with a financing system for maintenance and repair | 142 | 30 | 20 | 13,225 | 14,038 | 1,323 | 109% |
| People trained in repair, maintenance, and construction of WASH facilities | 97 | 5 | 67 | 1 | 18 | 93 | 96% |
| Functional Citizen Voice and Action (CVA) groups focused on WASH | 52 | - | 10 | 9 | 1 | - | 50 | 96% |
| Faith leaders who participated in hygiene, sanitation, or behavior-change programming | 426 | - | 1,395 | 112 | 4 | 3 | 1,515 | 356% |
| School WASH clubs or programs established | 259 | - | 170 | 51 | 269 | 57 | 547 | 211% |

### 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.

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.

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.

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.”
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 hand-washing 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.”

― Lesby, 12

Thanks to God and World Vision, we are clean and happy, and joyfully attend our classes every day.”
804,094 PEOPLE
provided with access to clean drinking water. An additional
96,754 people were reached with emergency water supply.

167,451 PEOPLE
accessed improved household sanitation

123,700 PEOPLE
managed menstrual hygiene

MIDDLE EAST WASH

<table>
<thead>
<tr>
<th>OUTCOMES AND OUTPUTS</th>
<th>FY18 Annual Target</th>
<th>Afghanistan</th>
<th>Iraq</th>
<th>Jordan</th>
<th>Lebanon</th>
<th>Syria</th>
<th>FY18 Annual Achieved</th>
<th>Achieved vs. Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>OUTCOME: Access to Clean Water</td>
<td></td>
<td>391,150</td>
<td>43,019</td>
<td>-</td>
<td>-</td>
<td>4,579</td>
<td>47,598</td>
<td>12%</td>
</tr>
<tr>
<td>People who gained access to a clean drinking water source in communities</td>
<td>41,103</td>
<td>12,677</td>
<td>16,177</td>
<td>7,764</td>
<td>-</td>
<td>5,833</td>
<td>42,451</td>
<td>103%</td>
</tr>
<tr>
<td>Children who gained access to a clean drinking water source at school</td>
<td>121</td>
<td>13</td>
<td>19</td>
<td>14</td>
<td>-</td>
<td>14</td>
<td>60</td>
<td>50%</td>
</tr>
<tr>
<td>Schools with a clean drinking water source installed</td>
<td>15</td>
<td>4</td>
<td>2</td>
<td>-</td>
<td>-</td>
<td>7</td>
<td>47%</td>
<td></td>
</tr>
<tr>
<td>Health centers with a clean drinking water source installed</td>
<td>33</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>0%</td>
<td></td>
</tr>
<tr>
<td>Improved, sex-separated sanitation facilities built at health centers</td>
<td>68,077</td>
<td>238</td>
<td>256</td>
<td>114</td>
<td>-</td>
<td>651</td>
<td>1,259</td>
<td>18%</td>
</tr>
<tr>
<td>Taps installed from successful water supply systems in communities, schools, and health centers</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>0%</td>
<td></td>
</tr>
<tr>
<td>Nonfunctioning water points rehabilitated in communities, schools, and health centers</td>
<td>762</td>
<td>197</td>
<td>-</td>
<td>50</td>
<td>2</td>
<td>-</td>
<td>249</td>
<td>33%</td>
</tr>
<tr>
<td>Households equipped with water-treatment techniques to disinfect drinking water</td>
<td>7,067</td>
<td>6,066</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>6,066</td>
<td>86%</td>
<td></td>
</tr>
<tr>
<td>OUTCOME: Access to Sanitation</td>
<td></td>
<td>144,350</td>
<td>5,234</td>
<td>-</td>
<td>-</td>
<td>4,579</td>
<td>9,813</td>
<td>7%</td>
</tr>
<tr>
<td>People who gained access to household sanitation</td>
<td>49,853</td>
<td>13,677</td>
<td>16,177</td>
<td>7,764</td>
<td>-</td>
<td>2,058</td>
<td>5,833</td>
<td>45,509</td>
</tr>
<tr>
<td>Children who gained access to sanitation facilities at schools</td>
<td>36,960</td>
<td>1,000</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>541</td>
<td>1,541</td>
<td>4%</td>
</tr>
<tr>
<td>Household sanitation facilities constructed</td>
<td>1,010</td>
<td>20</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>20</td>
<td>3%</td>
</tr>
<tr>
<td>Communities certified as free from open defecation</td>
<td>8,007</td>
<td>89</td>
<td>126</td>
<td>52</td>
<td>-</td>
<td>96</td>
<td>363</td>
<td>5%</td>
</tr>
<tr>
<td>Improved, sex-separated sanitation facilities built at schools</td>
<td>36</td>
<td>14</td>
<td>14</td>
<td>11</td>
<td>-</td>
<td>-</td>
<td>29</td>
<td>80%</td>
</tr>
<tr>
<td>Schools that gained access to improved sanitation for girls, with facilities to manage menstrual hygiene</td>
<td>26</td>
<td>4</td>
<td>11</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>15</td>
<td>58%</td>
</tr>
<tr>
<td>Improved, sex-separated sanitation facilities built at health centers</td>
<td>65</td>
<td>56</td>
<td>10</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>66</td>
<td>102%</td>
</tr>
<tr>
<td>Health centers that gained access to sex-separated sanitation facilities designed for people with limited mobility and appropriate for managing menstrual hygiene</td>
<td>7</td>
<td>10</td>
<td>2</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>12</td>
<td>171%</td>
</tr>
<tr>
<td>OUTCOME: Improved Hygiene Practices</td>
<td></td>
<td>249,558</td>
<td>50,672</td>
<td>-</td>
<td>-</td>
<td>1,300</td>
<td>7,370</td>
<td>64,358</td>
</tr>
<tr>
<td>People who benefited from hygiene behavior-change promotion in communities</td>
<td>91,967</td>
<td>12,677</td>
<td>16,177</td>
<td>8,006</td>
<td>-</td>
<td>2,252</td>
<td>8,000</td>
<td>47,112</td>
</tr>
<tr>
<td>Children who gained access to hand-washing facilities at schools</td>
<td>23,330</td>
<td>365</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>365</td>
<td>2%</td>
</tr>
<tr>
<td>Households that gained access to hand-washing facilities</td>
<td>90</td>
<td>13</td>
<td>19</td>
<td>14</td>
<td>8</td>
<td>28</td>
<td>82</td>
<td>91%</td>
</tr>
<tr>
<td>Schools that gained access to hand-washing facilities</td>
<td>10</td>
<td>4</td>
<td>2</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>6</td>
<td>57%</td>
</tr>
<tr>
<td>Health centers that gained access to hand-washing facilities</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>OUTCOME: Improved Social and Environmental Hygiene</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WASH committees formed or reactivated with a financing system for maintenance and repair</td>
<td>59</td>
<td>26</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>26</td>
<td>52</td>
</tr>
<tr>
<td>People trained in repair, maintenance, and construction of WASH facilities</td>
<td>335</td>
<td>38</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>38</td>
<td>11%</td>
</tr>
<tr>
<td>Functional Citizen Voice and Action (CVA) groups focused on WASH</td>
<td>64</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>0%</td>
</tr>
<tr>
<td>Faith leaders who participated in hygiene, sanitation, or behavior-change programming</td>
<td>41</td>
<td>135</td>
<td>1</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>136</td>
<td>332%</td>
</tr>
<tr>
<td>School WASH clubs or programs established</td>
<td>73</td>
<td>58</td>
<td>49</td>
<td>17</td>
<td>11</td>
<td>-</td>
<td>135</td>
<td>185%</td>
</tr>
<tr>
<td>OUTCOME: Access to WASH in Urban Settings</td>
<td></td>
<td>581,540</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>412,000</td>
<td>-</td>
<td>5,491</td>
</tr>
<tr>
<td>People with access to municipal water supply systems</td>
<td>151,670</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>157,298</td>
<td>157,638</td>
</tr>
<tr>
<td>People with access to municipal sewage systems</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>133,218</td>
<td>133,218</td>
</tr>
<tr>
<td>People with access to municipal solid waste disposal</td>
<td></td>
<td>267,955</td>
<td>55,573</td>
<td>5,698</td>
<td>1,708</td>
<td>120</td>
<td>4,948</td>
<td>25,365</td>
</tr>
<tr>
<td>People with access to emergency sanitation systems</td>
<td>266,955</td>
<td>120</td>
<td>4,948</td>
<td>53,128</td>
<td>-</td>
<td>7,339</td>
<td>25,365</td>
<td>39,480</td>
</tr>
<tr>
<td>People with access to emergency sanitation systems</td>
<td>672,360</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>131,727</td>
<td>189,803</td>
</tr>
<tr>
<td>People with access to emergency sanitation systems</td>
<td>237,821</td>
<td>16,3%</td>
<td>4,948</td>
<td>5,148</td>
<td>-</td>
<td>-</td>
<td>201,086</td>
<td>105%</td>
</tr>
</tbody>
</table>
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.

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 water-scarce 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! participant

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.
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.

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!

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.

worldvisionphilanthropy.org