



World Vision



WATER

# AFRICA WATER FUND

» SEMI-ANNUAL REPORT: October 2019 through March 2020

*Prepared July 2020*



# WATER, SANITATION, AND HYGIENE

## TABLE OF CONTENTS

<b>Africa WASH Update</b>	<b>1</b>
Overview	1
Program Map	3
Semiannual Achievements	4
WASH Partnerships	5
<b>East Africa WASH</b>	<b>7</b>
Building Staff Capacity	13
<b>Southern Africa WASH</b>	<b>14</b>
Leading the Way:	
WASH Leadership Profiles	20
<b>West Africa WASH</b>	<b>21</b>
Providing WASH Solutions That Last	27
<b>Africa WASH Financials</b>	<b>28</b>

*“For the Lord your God is bringing you into a good land—a land with brooks, streams, and deep springs gushing out into the valleys and hills...”*

—Deuteronomy 8:7,  
NIV



*Because of your generosity, families across Africa now have access to clean water—families like grandmother Doussou’s.*

*“Before the well, I woke up at 4 a.m. and walked 3 km [1.86 miles] to fetch water from a hand-dug open well,” said Doussou Coulibaly, 65, from N’Tiguina Bassala, Mali. “I carried five to six jerrycans [on a cart pulled] by oxen and used to do three to four round-trips a day to satisfy the needs of my family. During the rainy season, we just relied on ponds for all our needs, and had stomachaches. That was my life for about 45 years. Now I can afford clean and safe water at any time, and I do not need to wake up early in the morning. Our children are clean. Our village is clean. No open defecation anymore. ... We are now healthy and happy.”*

# WATER, SANITATION, AND HYGIENE

## AFRICA WASH PROGRAM UPDATE

**11.5 MILLION PEOPLE** provided with access to clean drinking water since October 2015, including 710,966\* during the first half of FY20.

**9 MILLION PEOPLE** gained access to improved household sanitation since October 2015, including 881,719 during the first half of FY20.

**14.4 MILLION PEOPLE** reached with hygiene behavior-change programming since October 2015, including 1.6 million during the first half of FY20.

\*Of these, 224,956 were reached with World Vision U.S. private funding.

3,866 new and rehabilitated wells and water points built

FY20 semiannual target: 3,137

123%

151,018 sanitation facilities built

FY20 semiannual target: 118,744

127%

178,411 household hand-washing facilities built

FY20 semiannual target: 119,140

150%

## PROGRAM OVERVIEW

Thank you for partnering in ministry with World Vision to provide water, sanitation, and hygiene (WASH) to vulnerable children living in Africa. With your support, as of March 31, 2020, World Vision's Africa WASH Program has reached nearly 12 million people with clean water against a target of 12.9 million by the end of 2020.

- We continued providing more **solar-powered mechanized water systems** with multiple water collection points in a community rather than hand pumps to increase sustainability, reduce collection time, and reduce contamination of clean water during transport. A case study in Zambia by Stanford University examined the potential gains from mechanized systems versus hand pumps and found water collection time decreased by 3.8 hours per week, consumption of water increased by 32%, fee collections increased from 11% to 80%, people were four times more likely to have a

garden, and gardens were 140% larger.

- Our work to provide comprehensive **WASH in healthcare facilities**, including training frontline healthcare workers on infection prevention and control, is critical to protecting vulnerable populations. During the first 18 months of our 2019-2021 commitment to reach 800 rural healthcare facilities with clean water on premises, gender-segregated sanitation facilities, and hand-washing facilities, we reached 431 with water, 332 with sanitation, and 773 with hand-washing facilities—a 54% achievement.

The ongoing **global COVID-19 health pandemic** started to create programming and funding challenges toward the end of this reporting period, but it also provided opportunities. Most African governments responded rapidly to the pandemic, shutting down activities in their countries in February or March. Fortunately, our



water provision work mostly continued as an essential service, and we were able to pivot behavior-change efforts by working with local partners, such as faith leaders and community health workers, by using radio, and by incorporating education on preventing the spread of COVID-19, among other WASH messages.

While the pandemic has not greatly disrupted our WASH work thus far, we will continue to monitor its impact and respond appropriately.

# GOAL AND EXPECTED OUTCOMES

Five-year program goal through fiscal year 2020: Provide access to clean drinking water for

## 12.9 MILLION PEOPLE

Note: The five-year program goal was revised to more accurately reflect higher standards of programming and funding realities.

Increased access to sustainable and safe water supply

Increased access to improved sanitation facilities

Improved hygiene knowledge and practices

Community empowerment to facilitate sustainable WASH interventions



### COVID-19 and WASH

The COVID-19 crisis is impacting every country where World Vision operates, and especially the rural and poorly resourced communities where we work, which are highly vulnerable to economic and social shocks.

Since the very beginning of the outbreak, World Vision has leveraged our 70-year history of emergency response to help children and families by scaling up prevention and relief efforts across the globe. Equally important, World Vision is combating secondary impacts of the crisis that are putting millions of children at risk—from heightened food insecurity, to shuttered schools, to increased violence or neglect.

In Africa, our 24-country WASH program provides activities such as constructing public hand-washing stations, distributing disinfection kits, and training health workers on disease prevention and control, all crucial to helping children and their families not only survive this pandemic, but emerge resilient, with hope for the future.

While we expect disruptions and necessary restrictions related to the spread of COVID-19 to delay aspects of our WASH work in Africa, we remain committed to reaching everyone, everywhere we operate, with water, sanitation, and hygiene by 2030. We are adapting our activities and making plans to pick up where we left off as soon as it is safe, so this goal remains attainable. Thank you for partnering with World Vision and standing with us as we face this unprecedented challenge.



# AFRICA WASH PROGRAM MAP



## EAST AFRICA

BURUNDI  
 ETHIOPIA  
 KENYA  
 RWANDA  
 SOMALIA  
 SOUTH SUDAN  
 SUDAN  
 TANZANIA  
 UGANDA

## SOUTHERN AFRICA

ANGOLA  
 DEMOCRATIC REPUBLIC OF  
 CONGO (DRC)  
 ESWATINI (Swaziland)  
 LESOTHO  
 MALAWI  
 MOZAMBIQUE  
 ZAMBIA  
 ZIMBABWE

## WEST AFRICA

CHAD  
 GHANA  
 MALI  
 MAURITANIA  
 NIGER  
 SENEGAL  
 SIERRA LEONE

# FY20 SEMIANNUAL ACHIEVEMENTS

World Vision uses indicator tracking tables (ITTs) to monitor the success and progress of our programs. Below is the ITT for the Africa WASH Program for FY20. As seen in the center column, nearly all semiannual targets were met or exceeded.

OUTCOMES AND OUTPUTS	FY20 Semiannual Achieved	FY20 Semiannual Target	FY20 Achieved vs. Target	Program-to-Date Achieved	Life-of-Program (LOP) Target
<b>OUTCOME: Access to Clean Water</b>					
People who gained access to a clean drinking water source in communities	710,966	678,878	105%	11,472,666	12,930,941
Children who gained access to a clean drinking water source at school	111,492	153,826	72%	1,506,569	1,782,464
Schools with a clean drinking water source installed	215	245	88%	3,332	3,704
Health centers with a clean drinking water source installed	135	97	140%	1,080	1,273
Successful boreholes completed and commissioned in communities, schools, and health centers	509	508	100%	8,197	9,354
Taps installed from successful water supply systems in communities, schools, and health centers	2,750	2,122	130%	34,720	37,257
Nonfunctioning water points rehabilitated in communities, schools, and health centers	611	508	120%	8,857	9,805
Households equipped with water-treatment techniques to disinfect drinking water	171,701	107,034	160%	1,313,981	1,464,506
<b>OUTCOME: Access to Sanitation</b>					
People who gained access to household sanitation	881,719	698,369	126%	9,033,733	9,772,653
Children who gained access to sanitation facilities at schools	70,239	80,861	87%	1,340,635	1,538,674
Household sanitation facilities constructed	149,878	117,292	128%	1,572,150	1,689,199
Communities certified as free from open defecation	924	588	157%	15,545	17,570
Improved, sex-separated sanitation facilities built at schools	861	1,172	73%	17,287	20,713
Schools that gained access to improved sanitation for children/youth with limited mobility	170	163	104%	2,163	2,466
Schools that gained access to improved sanitation for girls, with facilities to manage menstrual hygiene	166	174	95%	1,616	2,057
Improved, sex-separated sanitation facilities built at health centers	363	280	130%	2,223	2,968
Health centers that gained access to sex-separated sanitation facilities designed for people with limited mobility and appropriate for managing menstrual hygiene	123	84	147%	683	847
<b>OUTCOME: Improved Hygiene Practices</b>					
People who benefited from hygiene behavior-change promotion in communities	1,568,759	1,129,461	139%	14,358,270	15,460,186
Children who gained access to hand-washing facilities at schools	203,207	161,803	126%	2,245,906	2,308,637
Households that gained access to hand-washing facilities	178,411	119,140	150%	1,581,833	1,688,376
Schools that gained access to hand-washing facilities	662	1,483	45%	6,692	7,320
Health centers that gained access to hand-washing facilities	316	160	198%	1,665	1,806
<b>OUTCOME: Improved Community Capacity for Sustainability</b>					
WASH committees formed or reactivated with a financing system for maintenance and repair	1,637	1,385	118%	21,581	23,681
People trained in repair, maintenance, and construction of WASH facilities	1,816	1,894	96%	21,437	23,407
Functional Citizen Voice and Action (CVA) groups focused on WASH	286	210	136%	2,882	2,961
Faith leaders who participated in hygiene, sanitation, or behavior-change programming	3,229	2,317	139%	25,486	27,598
School WASH clubs or programs established	1,084	832	130%	7,476	7,454
<b>OUTCOME: Access to WASH in Emergency Settings</b>					
People with access to emergency drinking water supplies	54,776	23,607	232%	1,179,925	850,014
People with access to emergency sanitation systems	13,310	12,104	110%	360,533	198,708
People with access to appropriate solid-waste disposal facilities	18,397	16,254	113%	239,428	222,011
People with access to emergency hygiene supplies	122,997	52,912	232%	1,051,199	536,716

**Note:** LOP numbers include South Africa WASH Program achievements from FY16-18. The program was discontinued by the close of FY18.

# BETTER TOGETHER: AFRICA WASH PARTNERSHIPS



## charity: water

### charity: water

- Partner since 2012
- Areas of focus: WASH infrastructure, sanitation, and hygiene promotion
- Locations: Malawi, Mali, Mozambique, and Niger

All four countries are currently implementing WASH grants, totaling \$5.5 million in funding. All countries have the goal of reaching universal WASH coverage within their selected district or commune in the next three to five years. The Mali, Mozambique, and Niger WASH teams completed charity: water grants this reporting period, providing water to more than 128,000 children and adults through 228 water points. The Malawi team will close out their current grant in August 2020. Unfortunately, due to the COVID-19 pandemic, charity: water is anticipating a significant decrease in annual revenue, resulting in a 50% decrease in World Vision's portfolio for FY21. World Vision submitted four grant proposals and anticipates receiving \$2.85 million in FY21.



### Conrad N. Hilton Foundation

- Partner since 1990
- Areas of focus: universal WASH coverage, WASH in healthcare facilities, sanitation and hygiene promotion
- Locations: Ethiopia, Ghana, Mali, Niger

In FY20, we supported participants from woreda/district health offices and healthcare centers to implement the

government of Ethiopia's Clean and Safe Health Facility program standards in 82 healthcare facilities. Two sessions were held to advocate partners at woreda, regional, and national levels to focus more on resource prioritization to WASH in healthcare facilities.

In Ghana, 40 participants of the Global WASH Forum visited the Hilton-funded Asutifi North Universal WASH Coverage project, hosted by the Asutifi-North District Assembly. The visit revealed the importance of a district-led and -owned process in achieving long-term full and sustainable WASH coverage. The visitors were also able to see increased learning and new ideas, including the one hub cost-saving initiative that promotes collaboration and synergy among partners.

The Centers for Disease Control and Prevention (CDC) completed its final evaluation of the WASH in healthcare facilities program in Mali, and a national virtual learning event will be held in July 2020 with all partners to discuss findings and recommendations and make improvements where needed.

We met with the Niger Ministry of Health and World Health Organization in January 2020 to identify partners and plan for the project launch in Niamey (CDC is one of World Vision's subgrantees). Currently, the partners meet monthly on progress and strategic response to COVID-19 in Niger.



### Golf Fore Africa

- Partner since 2012
- Areas of focus: WASH infrastructure, sanitation, and hygiene promotion
- Locations: Zambia and Zimbabwe

Golf Fore Africa (GFA) has committed to supporting 14 healthcare facilities in Zambia with full WASH packages this year, and is providing water to communities through 60 hand pumps—providing water essential for drinking and practicing healthy hygiene behaviors. In addition, GFA is funding WASH infrastructure in 24 schools in Zimbabwe, which were part of the Sesame Girl Talk program. Each school will receive a block of toilets suitable for children with limited mobility and a room for female students to safely manage menstrual hygiene. Hand-washing stations are also provided. In addition, the 12 schools that lack water will gain clean water access through six solar mechanized systems and six hand pumps.



### Grundfos

- Partner since 2015
- Area of focus: water infrastructure technology (such as solar-powered submersible water pumps)
- Locations: DRC, Ethiopia, Ghana, India, Kenya, Mali, Mozambique, Niger, Rwanda, Somalia, South Sudan, Tanzania, Uganda, Zambia, Zimbabwe

All 15 country WASH Programs (see locations above) purchased almost 200 Grundfos pumps for mechanized piped-water systems built in either FY19 or FY20. This has led to fulfilling the goal of reaching 2 million program participants through World Vision's partnership with Grundfos.

Grundfos provides World Vision with an exclusive, exceptionally deep discount on all of their products, which enables World Vision WASH countries to do substantially more work with the same amount of funding. Grundfos also provides technical support and training.

## AFRICA WASH PARTNERSHIPS, CONT'D



### Procter & Gamble

- Partner since 2007
- Areas of focus: water treatment/purification, hygiene promotion, emergency response
- Locations: Africa (Ghana, Kenya, Niger, Somalia, Zimbabwe), Asia (Cambodia, India, Indonesia, Myanmar, Philippines), Middle East (Afghanistan, Iraq)

World Vision continues to provide P&G household water purification (Purifier of Water) packets and filtration materials to ensure families have clean drinking water in humanitarian emergencies and as a bridge solution while communities wait for a permanent source of clean water. During the first half of FY20, P&G provided 6 million water treatment packets along with materials for water storage and handling, as well as training on safe drinking water treatment, household hygiene, and water safety.

World Vision completed P&G-funded bridge solution projects in Indonesia, Somalia, and the Philippines, and submitted proposals for new projects in Afghanistan, India, Senegal, Zambia, and Zimbabwe. During the semiannual period, we secured \$738,000 in funding for new projects, further deepening our impact and community engagement.

In response to the COVID-19 crisis, we also obtained emergency funding for projects in Indonesia and Kenya and will see an increased focus during the rest of FY20 on how to better integrate household water treatment and hygiene education with national office COVID-19 response and recovery programs.



### Sesame Workshop

- Partner since 2015
- Area of focus: child-focused sanitation and hygiene promotion
- Locations: Africa (Ghana, Malawi, Mali, Niger, Rwanda, Zambia, Zimbabwe), India, Honduras, Middle East (Afghanistan, Iraq, Jordan, Lebanon, Syria)

With Stanford University, World Vision India engaged in initial research of how WASH UP! messages shared in school are transferred to home through the use of a specifically designed WASH UP! take-home object to help influence adoption of key WASH behaviors. Once schools reopen after COVID-19, this research will continue. Stanford is also conducting research to develop a strong operations and maintenance strategy to strengthen the sustainability of WASH in Schools programs. Learnings from this research will be translated to projects outside India.

Sesame Workshop and the World Vision teams in Ghana and Niger are developing an adaptation to WASH UP! to include content to address neglected tropical diseases (NTDs). Addressing NTDs helps to broaden the impact of WASH interventions to have a larger positive result on child health and disease prevention.

World Vision Rwanda completed the majority of its WASH UP! pilot implementation prior to the closure of schools during COVID-19, and groundwork was laid in Kenya and Mozambique for start-up of WASH UP!, which will enable these pilots to begin quickly once schools reopen.



### Stanford University

- Partner since 2017

- Area of focus: monitoring, evaluation, and learning
- Locations: India, Kenya, Zambia

Stanford University is World Vision's learning partner for the Sesame WASH UP! program. Based on learnings from the Zambia pilot (see Providing WASH Solutions That Lasts on page 27), Stanford is preparing to evaluate the impact of WASH UP! on behavior change and health of children and their families, and will co-design an operations and maintenance intervention to ensure that adequate WASH facilities are maintained in schools. This activity has slowed substantially since COVID-19 caused most schools to shut down, but we are developing modified plans to move forward with activities when schools reopen.



### University of North Carolina Water Institute

- Partner since 2015
- Area of focus: monitoring, evaluation, and learning
- Location: all 24 Africa WASH Program countries

In the first six months of FY20, the UNC Water Institute collaborated with World Vision on water quality dissemination and influencing global policy, completed additional analysis of the 14-country evaluation data with a specific focus on healthcare facilities, and prepared papers on household water quality and household sanitation and hygiene. In the next six months, we will work to establish a long-term partnership to increase the technical quality of World Vision's WASH programs, to position us as sector leaders in both water quality and healthcare facilities work, and to raise additional revenue from U.S. government and private foundations donors.



# EAST AFRICA WASH

**6.5 MILLION PEOPLE** in East Africa provided with access to clean drinking water since October 2015, including 374,703 during the first half of fiscal year 2020.

## REGIONAL SUMMARY

The East Africa WASH Program has continued to prioritize WASH interventions in FY20 for different populations, settings, and environments. This year has been difficult, with challenges ranging from locust swarms to inflation to COVID-19, yet our nine country teams continue to improve the quality of our WASH work.

Funds were proactively used and leveraged for WASH and to position for grants, resulting in over \$50 million mobilized for WASH in East Africa. In addition, we maintained collaboration with governments for joint financing and enhanced sustainability of projects: Burundi signed a Memorandum of Understanding with the Directorate of Rural Hydraulic and Sanitation Agency to

strengthen operation and maintenance of infrastructure and to perform water quality analysis; Rwanda works with each district with area programs (APs) to jointly design and fund water systems to reach universal coverage; and Sudan is pushing the government to include community members more in the planning and operation of water systems.

We continued to share our expertise in the region to position World Vision as a thought leader and key WASH stakeholder. Dr. Fungai Makoni, East Africa WASH Regional Lead, currently sits on the AfricaSan International Task Force (an initiative of the African Ministers Council on Water) to continue to push the region toward a larger focus on sanitation.

Efforts to improve sanitation, hygiene, and water quality were prioritized to move people up the sanitation ladder and respond to the results of the 14-country WASH evaluation conducted by the UNC Water Institute: Ethiopia continues to expand WASH business centers where people make a living selling locally made WASH products; Uganda expanded the Household Engagement and Accountability Approach, successful in empowering communities to be declared open defecation free (ODF); Tanzania secured a WagTech mobile testing kit to expand water quality testing; and South Sudan is working with and sharing water quality results with the government to improve monitoring schemes.



### *Access to clean water at school enables better learning*

Just six months ago, Cynthia and the other 240 students at her school had to walk 20 minutes to Musasa river for water during the school day.

“School children fell sick recurrently and rates of poor school attendance and dropouts were high,” said Sylvere, deputy headmaster of the school in Burundi. “They did not get [clean] drinking water and could not wash their hands after using latrines.”

In February 2020, World Vision built the Nyaciha water supply network, benefiting 2,500 community members, including Cynthia and her schoolmates. In addition, World Vision trained young people on hygiene best practices through hygiene clubs that will replicate what they learned in their schools and communities.

“Today, we learn in a conducive environment thanks to the availability of water and best hygiene practices,” said Cynthia.

## REGIONAL SUMMARY, CONT'D

East Africa innovated to respond to climate change and ensure groundwater recharge: Kenya has installed additional automatic payment systems to reduce water waste from the system; and Somalia set up hydrometric stations in four districts to facilitate monitoring of weather, surface water, and groundwater.

The COVID-19 pandemic caused some challenges for our programs and the community members we serve, but also provided an opportunity for increased WASH uptake, as hygiene plays a key role in preventing the spread of the virus. In Rwanda, we are providing handwashing supplies to schools and healthcare centers;

in Somalia, we are raising awareness through radio and mass text messages; and in Uganda a group of soap producers donated product to their local healthcare facility.

## CHALLENGES & LESSONS LEARNED

Five countries in East Africa are facing the triple challenge of flooding, locust infestation, and the COVID-19 pandemic this year (Ethiopia, Kenya, Somalia, South Sudan, and Uganda). While the full impact is not yet known, World Vision is poised to respond with integrated programming, including WASH, to mitigate negative effects on vulnerable communities. This reporting period, missed targets in East Africa were largely related to logistics and weather, but we expect that to be compounded by COVID-19 and locusts as the year goes on. As all nine WASH teams met unique challenges over the past six months, they responded with agility and creativity, which will continue as they adjust programming to meet FY20 targets by year-end.

In **Rwanda**, the government limited movement in the country in mid-March, postponing completion of seven water supply systems (that will serve 66,696 people) and five blocks of institutional latrines, and leading to underachievement of targets. The ban on water construction is now lifted, and we anticipate meeting annual targets.

In **Uganda**, community members exposed to the coronavirus in Hoima district were stigmatized and denied basic services, including access to public water collection points. The Ministry of Water and Environment, with support from World Vision, developed standard

operating procedures for the public and WASH committees to follow at water collection points to access water.

The WASH Program in **Sudan** partnered with faith leaders to combat community resistance to COVID-19 prevention messages due to distrust of the government. This resulted in high levels of adherence to the hygiene messages and very few confirmed cases in East Darfur. Overall, the country is facing a high inflation rate, which is hindering the team's ability to meet targets.

In **Burundi**, unmet targets were mostly due to a World Vision Burundi strategic decision to outsource infrastructure contracting for time and cost efficiency. This change in process caused a delay that impacted all water construction works and institutional latrines. Most contracts will be awarded in June 2020, and work completed within FY20. Water system and institutional latrine construction were also delayed in Burundi due to a temporarily suspended implementation partner, but we plan to meet FY20 annual targets by September.

In western Oromia, **Ethiopia**, insecurity led to a government shutdown to deal with militants, which delayed implementation of all activities. The Ethiopia WASH Program was able to redirect their efforts to increase

hygiene promotion, installation of hand-washing facilities, and provision of soap to 52 healthcare facilities, benefiting more than 250,000 people. Likewise, in **Somalia**, the team was able to set up hand-washing stations in communities and enable WASH committees to implement physical distancing at water collection points.

The rainy season in **Kenya** lasted longer than expected, into the normally dry January-March, which hampered transportation of construction materials and latrine digging. COVID-19 travel restrictions in mid-March compounded this challenge, further delaying activities. Construction of water systems is now allowed, but we do not anticipate meeting all targets on construction goals in FY20 due to limited time.

**Tanzania** also experienced heavy rainfall this year, which destroyed some latrines and led ODF communities to regress to open defecation. The heavy rain also caused contamination of some water sources. The WASH team is exploring design improvements to prevent this in the future. We also encouraged communities to invest in improved sanitation and trained local artisans to assist community members to construct latrines that can withstand heavy rain.

# COUNTRY SNAPSHOTS



## Ethiopia

- In Ethiopia, the WASH Program partners with the government to pilot a new utility model of governance to ensure better sustainability and accountability of WASH systems in six districts in Oromia and Amhara regions.
- We are working with healthcare facilities to implement the government's Clean and Safe Health Facilities standards. We equipped 558 healthcare workers with knowledge to keep the healthcare facilities clean and safe.
- Women were increasingly engaged in WASH activities since the primary burden of water collection and treatment lie with women and girls. Of the 116 WASH committees established in the second quarter of FY20, 48% of the members are women.

Also, World Vision provided schools with sanitation facilities equipped for menstrual hygiene management,

benefiting more than 3,000 girls. Now girls can manage their menstruation in privacy and with dignity, and no longer have to miss school or opportunities because of ill-equipped facilities.

- World Vision trained 673 faith leaders in promoting healthy hygiene practices, including social distancing during the COVID-19 crisis. As faith leaders have established relationships within their communities and are trusted leaders, their influence is critical to helping reduce the spread of COVID-19. We set a target to train 176 faith leaders this reporting period but exceeded our target at 382%.
- Overall, World Vision exceeded our target of providing 59,400 people with access to clean drinking water sources in communities, reaching nearly 73,235 people with clean water. We helped 34,036 children gain access to hand-washing facilities at schools, an achievement of 250% of our target.



## Kenya

- The Kenya WASH Program was a co-sponsor and planning committee member for the Third Kenya Sanitation Conference, organized by the Ministry of Water, Sanitation, and Irrigation. Key directives from the conference that World Vision will be engaged in include a larger focus on water for irrigation, improved onsite treatment for households not connected to the sewage network, and a directive for the Ministry of Education to develop required WASH curriculum for students.
- The WASH Program also has partnered with Britnam to offer insurance to cover capital expenses for large borehole water projects where communities are unable to raise enough funding for system repairs when needed. Insurance policies will make sure water system breakdowns are repaired in a timely manner, ensuring a steady supply of clean water. Communities are raising the policy premiums by affordably selling water to residents.
- Geographic information system (GIS) mapping was done in three villages to determine exact distances from

households to water points to ensure a high service level and that water networks are reaching the most people possible. This will be scaled up in Kenya to validate Universal Coverage in specific wards.

- Water committees are taking increased ownership in working with county governments to ensure proper water governance and services. In Mutomo AP, the water committee successfully advocated for the repair of a non-functional section of a water pipeline; and in Mwatate AP, a water committee took the lead role in drafting the county's water governance policy.
- In Turkana West, WASH has been integrated with livelihood activities to improve the quantity and quality of food available to many families in the area. Systems have been designed to support not just drinking water, but also irrigation for crops.



## COUNTRY SNAPSHOTS, CONT'D



### Rwanda

- The Rwanda WASH Program successfully negotiated with more than two-thirds of the district governments where we work to not only establish agreements for 2l water supply systems, but for them to also contribute to costs.
- Rwanda WASH has continued to pilot the Sesame WASH UP! program, which resulted in the establishment of 12 school WASH clubs so far this year. While schools are out of session due to COVID-19 restrictions, we are revising the WASH UP! materials and will scale-up to 100 schools as soon as they resume.
- The Rwanda WASH team has built a reputation in country as skilled practitioners for hygiene behavior change. During the reporting period, the team used radio broadcasts in eight districts to promote good sanitation and hygiene practices, some with a focus on using loans to build household latrines. Educational

materials on accessing loans also were printed and distributed in the areas reached by these broadcasts.

These efforts were successful because they were carried out in collaboration with local authorities, who were keen on seeing an increase in latrine construction, as well as a consortium of other agencies funded through the U.S. Agency for International Development.

The districts targeted by these interventions already had a strong presence of savings and credit cooperatives. These co-ops also tailored their requirements to help new members qualify for loans.

- Working with the economic empowerment team, people in the lowest wealth rankings were trained and supported by the WASH Program with sanitation construction supplies.



### Burundi

- The Burundi WASH Program strengthened the capacity of both government and local leaders and entrepreneurs through trainings on water management structures and roles, water quality testing, costing of water services, hygiene at the water point, and the development of action plans for improvement.
- As part of the WASH response to COVID-19, we will deliver handwashing devices and soap to 800 schools and 145 health facilities.



### Somalia

- In Somalia's patriarchal society, women have less control of the resources that impact their lives. In a deliberate effort to change that, the Somalia WASH Program trained 179 women community hygiene volunteer promoters in Participatory Hygiene and Sanitation Transformation (PHAST) in order to increase women's participation in water management.
- We worked with the Ministry of Health to develop radio messages and with local mobile operators to send mass text messages to raise awareness on COVID-19.



### South Sudan

- Working in a fragile context with a mobile population, the South Sudan WASH Program combined methodologies such as Community-Led Total Sanitation (CLTS)-Plus, PHAST, and hygiene dialogues to reinforce traditional CLTS.
- Forty-seven Christian and Muslim faith leaders (17 women) were trained on WASH behavior change communication to promote community well-being.
- Women were encouraged to lead menstrual hygiene management (MHM) related training in community and school settings.

## COUNTRY SNAPSHOTS, CONT'D



### Sudan

- The Sudan WASH Program is piloting automated water metering with partners and the government. If successful, we will expand the technology to improve water services across the country in partnership with the government.
- We worked with a local female champion for MHM to design a reusable sanitary pad. This new pad was included in a UNICEF project to be piloted with 500 girls. Once feedback is collected, the design will be adjusted and scaled up to more programs.



### Tanzania

- The COVID-19 pandemic response has reinforced the success of the community-based social and behavior change model, which has contributed to an overachievement of the number of household hand-washing stations (13,591 against target of 11,521).
- At the government's request, World Vision trained 173 faith leaders on hygiene and sanitation promotion in response to the COVID-19 pandemic. This has increased sanitation and hygiene coverage and will be replicated.



### Uganda

- The Uganda WASH Program jointly invests with the National Water and Sewage Corporation to construct piped-water systems in support of the government's universal access to safe water goal. Thus far, two piped-water systems were funded and are 75% complete.
- We trained 30 people (25 women) to produce liquid soap for the local market. The increased demand for soap due to COVID-19 has grown their income and led the group to donate 20 liters of liquid soap to Omoro healthcare facility.



*“Mothers miscarried due to the hard labor of carrying water from afar,” shared Rosebela Balliat (pictured above right and on cover), mother of eight and resident of Baringo County, Kenya. “Crocodiles attacked our goats in the river, and we could not bathe for over a week. But God saw our plight and brought us this water project.” In partnership with the local government, World Vision helped to construct a water system that now provides access to clean water for a local healthcare facility, schools, and several water kiosks where Rosebela and other villagers collect water. The system is accessible to 1,200 people in the community. “... life is now much better,” concluded Rosebela. “I didn’t want to stay idle after the water came, I opened a tea shop in the afternoons, and it helps me get income now.”*

## REGIONAL SUMMARY: EAR INDICATOR TRACKING TABLE

OUTCOMES AND OUTPUTS	FY20 Semiannual Target	Burundi	Ethiopia	Kenya	Rwanda	Somalia	South Sudan	Sudan	Tanzania	Uganda	FY20 Semiannual Achieved	Achieved vs. Target
<b>OUTCOME: Access to Clean Water</b>												
People who gained access to a clean drinking water source in communities	441,966	4,138	73,235	45,028	29,757	51,013	44,063	52,000	25,504	49,965	374,703	85%
Children who gained access to a clean drinking water source at school	112,687	583	11,211	16,847	4,138	1,900	8,111	2,580	5,066	12,013	62,449	55%
Schools with a clean drinking water source installed	142	2	7	40	5	10	18	6	9	20	117	83%
Health centers with a clean drinking water source installed	51	-	4	7	1	2	21	7	16	6	64	127%
Successful boreholes completed and commissioned in communities, schools, and health centers	119	-	35	-	-	11	46	17	-	25	134	113%
Taps installed from successful water supply systems in communities, schools, and health centers	1,411	17	148	295	217	63	230	24	117	208	1,319	93%
Nonfunctioning water points rehabilitated in communities, schools, and health centers	264	7	38	6	12	45	87	87	46	-	328	124%
Households equipped with water-treatment techniques to disinfect drinking water	31,283	-	14,160	17,504	3,761	871	2,659	334	4,845	679	44,813	143%
<b>OUTCOME: Access to Sanitation</b>												
People who gained access to household sanitation	352,648	3,051	150,682	56,890	66,822	720	17,900	17,550	11,586	35,767	360,968	102%
Children who gained access to sanitation facilities at schools	42,093	-	500	2,477	738	300	5,268	480	6,183	10,376	26,322	63%
Household sanitation facilities constructed	68,395	821	25,814	9,181	21,200	120	3,480	3,486	3,050	7,289	74,441	109%
Communities certified as free from open defecation	227	4	283	69	-	-	6	13	-	12	387	171%
Improved, sex-separated sanitation facilities built at schools	593	-	16	29	26	8	49	12	80	124	344	58%
Schools that gained access to improved sanitation for children/youth with limited mobility	75	-	2	9	2	8	27	-	8	18	74	99%
Schools that gained access to improved sanitation for girls, with facilities to manage menstrual hygiene	74	-	10	1	2	-	27	-	10	40	90	122%
Improved, sex-separated sanitation facilities built at health centers	142	-	-	2	10	60	98	8	5	18	201	142%
Health centers that gained access to sex-separated sanitation facilities designed for people with limited mobility and appropriate for managing menstrual hygiene	44	-	-	3	1	17	40	4	5	3	73	167%
<b>OUTCOME: Improved Hygiene Practices</b>												
People who benefited from hygiene behavior-change promotion in communities	595,620	11,622	227,315	140,660	150,476	52,779	78,913	49,260	54,606	36,161	801,792	135%
Children who gained access to hand-washing facilities at schools	52,575	1,814	34,036	20,059	738	700	7,040	4,360	14,547	6,923	90,217	172%
Households that gained access to hand-washing facilities	57,247	278	13,351	16,649	15,427	120	3,702	1,345	13,591	6,380	70,843	124%
Schools that gained access to hand-washing facilities	133	8	40	114	2	5	27	13	26	18	253	191%
Health centers that gained access to hand-washing facilities	57	-	52	12	1	15	40	14	15	6	155	272%
<b>OUTCOME: Improved Community Capacity for Sustainability</b>												
WASH committees formed or reactivated with a financing system for maintenance and repair	477	18	143	51	-	39	55	60	71	63	500	105%
People trained in repair, maintenance, and construction of WASH facilities	927	-	30	115	7	-	38	124	6	153	473	51%
Functional Citizen Voice and Action (CVA) groups focused on WASH	54	-	4	4	6	-	3	-	3	16	36	67%
Faith leaders who participated in hygiene, sanitation, or behavior-change programming	874	24	673	170	133	13	47	12	173	77	1,322	151%
School WASH clubs or programs established	434	8	342	72	12	12	32	6	36	47	567	131%
<b>OUTCOME: Access to WASH in Emergency Settings</b>												
People with access to emergency drinking water supplies	22,607	-	12,500	25,194	3,492	-	2,650	1,500	-	9,440	54,776	NA
People with access to emergency sanitation systems	7,104	-	2,400	-	3,492	400	1,950	2,000	-	804	11,046	NA
People with access to appropriate solid-waste disposal facilities	15,254	-	1,505	-	3,492	9,000	1,900	-	-	-	15,897	NA
People with access to emergency hygiene supplies	52,912	-	21,973	45,041	3,492	14,100	2,350	800	23,990	5,387	117,133	NA



## BUILDING STAFF CAPACITY



Desert Research Institute (DRI), Drexel University, and World Vision continue to grow the joint Global WASH Capacity Building Program for World Vision staff to support the major expansion of the organization's WASH programming. The program consists of a hybrid model of online courses, face-to-face instruction, and field and laboratory work in Africa to allow for collaboration and inter-office learning. All courses are offered for credit, with two certificate tracks through DRI/ University of Nevada, Reno (UNR) and the Dornsife School of Public Health at Drexel University. The program engages faculty of both institutions as well as WASH professionals as instructors for the online lectures, face-to-face sessions, and fieldwork.

Since the program began in 2014, a total of 312 staff members earned

(178 students) or are earning (134 students) certificates to be equipped to implement high-quality WASH programming. In FY20, for the first time, the program enrolled staff members from outside of Africa with students from India and Afghanistan. The ongoing fourth cohort from DRI and sixth cohort from Drexel include 58 students who began their studies in early 2019 and will graduate in 2020. The seventh Drexel cohort has 40 students enrolled, and the fifth DRI cohort has 36 students enrolled (half of them women). As COVID-19 related restrictions limit the face-to-face aspect of the program, DRI and Drexel will launch online virtual exchanges and experiential learning sessions. We are also exploring the possibility of meeting in smaller face-to-face groups (no more than 15 people) so this key aspect of the program is not delayed or lost for ongoing cohorts.

A priority for World Vision is to nurture and empower women leaders to play strategic roles within its regional and country WASH Programs. As such, more than 85 women have enrolled in this capacity building program since it began, and many who have completed their certification have moved into leadership positions in World Vision's WASH programming.

To further learning opportunities for staff enrolled in the program, the regional leads in Africa are working on an inter-Africa exchange program for staff to learn WASH best practices from within their own region and from other regions. World Vision's staff members continue to have interest in the program, and those who have completed it have expressed ongoing application in their day-to-day work.



*World Vision staff members enrolled in the Global WASH Capacity Building Program learn about various aspects of WASH programming through hands-on instruction in face-to-face sessions and field visits. This student in the sixth cohort with Drexel University learns about tippy taps, a hand-washing device, during his field visit in Ghana.*



*Empowering women to be leaders in World Vision's WASH programs is a priority for the organization. Pictured above are several women from the sixth cohort in the Drexel University certificate track during their face-to-face training and field visit in Senegal. Since the inception of the program, enrollment of women in the Drexel track has reached 40% of total enrollment. And the fifth DRI cohort has 18 women enrolled. As these women earn their certificates, they are moving into leadership positions in World Vision's WASH programming, bringing much needed gender balance to the sector.*

# SOUTHERN AFRICA WASH

**3.1 MILLION PEOPLE** in southern Africa provided with access to clean drinking water since October 2015, including 166,659 during the first half of fiscal year 2020.

## REGIONAL SUMMARY

The southern Africa WASH Program is focused in FY20 on ensuring water quality, continuing sanitation gains, and promoting good hygiene practices. Although environmental, security, and pandemic-related challenges presented themselves, the WASH teams from all eight countries adapted and largely met or exceeded targets for this period.

Base funding and regional support enabled national offices to leverage additional funding through UNICEF and USAID and to deploy staff in response to COVID-19. Over \$2 million was generated to support COVID-19 and emergency WASH.

The 14-country WASH evaluation findings on water quality and hygiene promotion were fully integrated into ongoing WASH programs. Quarterly water quality testing at households and community water points has been instituted by all eight southern Africa region (SAR) countries. In Eswatini the WASH Program works with Eswatini Water Services Corporation to conduct monthly, and in some cases weekly, water quality monitoring. In Zimbabwe, we partnered with P&G for household water treatment, and will expand in the second half of FY20.

As the effects of climate change are felt across the region, we are taking

steps to mitigate negative impacts on the communities we serve:

- In Malawi, WASH committees are trained on Farmer Managed Natural Regeneration, a land restoration technique.
- The Mozambique WASH Program is testing desalination plants as an alternative solution.
- In Zambia, the WASH team is focused on watershed management and soil and water conservation.



### *Community members change behavior to reach ODF status*

In Nyatsini, Eswatini, poor households like Alpheus Matsinya's assumed they could not afford a latrine, so they practiced open defecation.

After learning not only of the health implications of this practice to both his family and his neighbors, but also that affordable local materials could be used, Mr. Matsinya vowed to construct a latrine. He used stones and mud to build the superstructure and corrugated iron for the roofing. The facility also has a hand-washing station right outside the door, which he and his wife share responsibility for stocking with water and soap.

"I am very happy that I have protected myself, my wife, and the children in the community from diseases and infections caused by open defecation," Mr. Matsinya said. "I am also excited that my community will be certified open defecation-free!"

## CHALLENGES & LESSONS LEARNED

The southern Africa region dealt with a variety of challenges this reporting season—security issues, unusually heavy rainfall, market supply issues, teacher strikes—but each office found a way to learn and adapt in response. WASH teams pivoted as possible to ensure the vulnerable communities we serve continued to receive high quality, sustainable WASH services.

In **Angola**, the main challenge faced was unusually heavy rainfall. Although communities were triggered in CLTS in the first half of FY20, households were unable to build latrines. It is expected that households will begin construction in May and the FY20 annual target will be met. Similarly, construction of school latrines was delayed due to heavy rains initially, and then to school closures related to COVID-19. Schools are reopening in June/July and we will resume WASH activities then.

In the **Democratic Republic of Congo (DRC)**, there was a lack of plumbing materials on the local market from FY19 into FY20 to lay large diameter pipes for gravity-fed and solar-powered systems, which require miles of pipeline. The WASH team and construction contractors decided to procure these materials from Bangui, Central African Republic due to its proximity to the intervention area in DRC. Procurement was successful, and pipe laying activities quickly regained momentum.

Sustainable water supply is a long-term challenge in **Eswatini**, which saw drought conditions caused by climate change this year. The underground water that used to provide abundant access to clean drinking water has been depleted. Some drilling yielded dry boreholes, which meant delays as alternative sites had to be identified.

In the short-term this was managed by the use of rain water harvesting technology to support households.

In **Lesotho**, the WASH Program faced an eight-month teachers' strike that prevented WASH activities in schools. We remain focused on provision of hand-washing facilities and soap in our communities to ensure proper hygiene. Because World Vision Lesotho has a strong relationship with the government and other WASH stakeholders, we anticipate achieving annual targets despite these delays.

In **Malawi**, turnover of the members of Area Development Committees, key stakeholder groups in the rollout of CLTS, led to a knowledge gap, as the WASH team had spent time training the former members. Rather than repeat the training, which would have delayed CLTS, the WASH team turned to established and functional Citizen Voice and Action (CVA) committees that were trained in sanitation to roll out CLTS in target areas. This is a good practice to be explored further.

Another good practice in Malawi to consider more is adoption of multiple-use water service for communities, schools, and healthcare facilities. The WASH team was struggling with how to provide a primary school with potable water due to fluoride discovered in the water assessment. As such, the Program adopted a multiple-use water service approach and constructed a mechanized water system at the community healthcare facility (serving 13,213 patients), that reticulated to the primary school (with 1,386 students) and to Kachiwenga village (serving 576 people). This approach has proven to be effective and time and cost efficient.

In **Mozambique**, all WASH community sensitization activities planned for March, April, and May were modified or are paused until COVID-19 restrictions are lifted, as is the case for WASH in school activities. The Mozambique WASH Program is working with community radio programs to sensitize community members on key hygiene practices to prevent COVID-19 and also to promote good hygiene and sanitation behaviors in local languages. We are also maximizing the messages through megaphone announcements and leaflets.

Travel to and work in the field has been difficult in **Zambia** since January. This was initially due to the unstable security situation in the country—unknown gangs were spraying chemicals on people and robbing them in various parts of the country. This resulted in halting all gatherings and travel to the field, making it difficult to implement programs across the country. That situation was immediately followed by the country-wide lockdown and school closures in response to COVID-19 in March. The combination of these events resulted in the WASH Program being unable to meet the school water and sanitation targets for the this period, as well as the health center latrine targets. However, we anticipate achieving the targets by the end of FY20.

The **Zimbabwe** WASH Program's work with WASH UP! Girl Talk was significantly affected by the late delivery of reusable pad-making materials. The materials were supposed to be delivered in the last quarter of FY19, but delivery was delayed. The Zimbabwe and U.S. teams are working to secure the delivery of materials as quickly as possible.



# COUNTRY SNAPSHOTS



## Democratic Republic of Congo

- The Democratic Republic of Congo (DRC) WASH Program worked with a group of mothers to train and supervise girls for menstrual hygiene management (MHM) by making washable hygienic pads. On their own initiative, they led advocacy with other partners and hosted radio and television broadcasts to socialize the strips.
- We reached 43,500 people with COVID-19 awareness and protection messaging and distributed 300 hand-washing kits to health centers.
- In partnership with the Covenant Church of Congo and the local Karawa health zone in Gemena, we provided the Karawa hospital two blocks of six-door ventilated improved pit latrines, benefiting both patients and staff. The new sanitation facilities also feature latrines designed for persons with limited mobility and stalls equipped for MHM for women and girls.
- World Vision continued to provide WASH in schools, helping to bring clean water to seven schools with 4,050 schoolchildren, and hand-washing facilities to 28 schools with 8,355 students. We provided hand-washing facilities to eight more schools than we had originally targeted as to support healthy hygiene practices of children and teachers and avoid the spread of diseases.

Additionally, in partnership with province education divisions, we supported 20 schools in behavior-change activities, providing training for 257 teachers and school directors (119 of them women) to implement the step-by-step process of the national Clean School program. A school is designated clean when it fully meets government WASH standards.

We also helped form and train 20 school brigades of 360 students (134 girls) to promote positive, healthy WASH behaviors.



## Malawi

- The Malawi WASH Program prioritized water treatment and water quality testing at both water source (water point) and point of use (household) levels.  
  
In FY20, the WASH team partnered with the Ministry of Water to conduct water quality testing (chemical, microbiological, and physical properties) at 76 water points and 40 households. The test results showed 100% of households and 65% of water points met the Malawi and WHO standards for drinking water.  
  
The remaining 35% of water points that did not meet the standards due to microbial findings, are being retested and chlorinated to ensure the water is safe for human consumption. The WASH team will continue to monitor water quality water points constructed by World Vision.
- Five entire Traditional Authorities (257 communities) were declared ODF by the National ODF Taskforce.
- The Malawi National Sanitation and Hygiene Strategy calls for scaling up implementation of CLTS in a cost-effective way to increase demand for basic sanitation. It also encourages greater involvement of traditional and religious leaders to accelerate progress within communities. World Vision, in partnership with the local District Environmental and Health Office, and traditional and faith leaders, implemented CLTS throughout the reporting period. The results: 222,135 people (119,591 women) gained access to household sanitation facilities following the construction of 28,812 household sanitation facilities.  
  
Also, through the use of sanitation marketing, the program assisted 22 households in constructing improved latrines (Corbelled latrines) in areas with challenges with loose soil.
- The program helped 32,059 household gain (or regain) access to hand-washing facilities benefiting approximately 131,442 people (68,350 women).

## COUNTRY SNAPSHOTS



### Mozambique

- The Mozambique WASH Program, with charity: water funding, conducted Design for Behavior Change training for staff and implemented barrier analysis targeting sanitation in 44 communities. The main barrier was identified as access to improved materials to construct safe latrines as local materials are not durable or resistant to extreme weather. The project worked with local government and communities to identify durable alternatives, such as locally made bricks, for latrine construction.
- A total of 229 faith leaders trained by the WASH team are involved in messaging the importance of treating drinking water and distributing Certeza, a water treatment product, to their community members. They also strengthen the relationships among community members through prayer and spend up to an hour of their services to promote WASH practices to their congregations.
- Women participated in and held leadership positions in WASH committees established during the reporting period. Of the 996 WASH committee members trained to ensure maintenance and technical functionality, financial support, and environmental sustainability of the water sources in their communities, 558 were women (56%). Also, 80% of the women in the 71 WASH committees hold the leadership position as treasurer, and one in three serve as mechanics constructing or servicing WASH infrastructure.
- The program is implementing a holistic WASH approach where communities engage in sanitation and hygiene behavior change programming prior to receiving new water points. During the reporting period, 30,278 people participated in sanitation and hygiene programming, 5,723 households then built hand-washing facilities, and 7,154 built latrines. World Vision constructed 15 new boreholes and installed 96 taps from 12 water supply systems, providing clean water access to 20,736 people.



### Zambia

- The Zambia WASH Program formed an innovative partnership with a commercial water utility company (Chambeshi Water and Sanitation Company) to ensure water access for peri-urban settlements. World Vision will provide resources for the pipe network, which will supply water to 550 households, and Chambeshi will provide treated water and ensure operation and maintenance of the system, including fee collection. The households will pay to be connected to the main pipeline, an approach that supports sustainability of the water system.
- The WASH team also trained faith leaders and community health assistants (CHAs) through the Channels of Hope for Maternal Newborn and Child Health and Nutrition model. These community influencers were empowered to support sanitation and hygiene activities, particularly toilet use and handwashing. As a result, 348 faith leaders shared sanitation and hygiene messages with their congregants, and 41 churches installed hand-washing facilities. In addition, the CHAs increased messaging at markets, and more than 300 hand-washing facilities were placed in strategic locations.
- A total of 105,217 people (53,661 women) have been provided information on ways to prevent and protect themselves from the spread of COVID-19. The program made possible COVID-19 awareness training for 40 environmental health technicians and community volunteers (such as CHAs) serving 18 health centers. In turn, they are sharing the information throughout their communities. Some of the key messages include properly handwashing with soap, social distancing, coughing into the elbow.

## COUNTRY SNAPSHOTS, CONT'D



### Angola

- The Angola WASH Program continued to promote women's participation and leadership in their communities. In the 32 WASH committees, 71% of members are women, and 53% of the committees are led by women.
- We worked with faith leaders in WASH committees to establish Religious Clergy Focal Councils to discourage harmful traditional practices. This has led to increased participation by women, youth, and children in hygiene promotion activities.



### Zimbabwe

- Climate change has led to an increasing water crisis in Zimbabwe. As water levels decrease, the effort needed to operate a hand pump increases, which is particularly cumbersome for women. The Zimbabwe WASH Program is addressing this by focusing on piped-water schemes and high-yielding water points, which have greater coverage and are easier to use.
- Six villages in Gokwe AP were declared ODF, and the Ministry of Health reports no incidence of diarrhea there in the three-month period since ODF certification.



### Eswatini

- The Eswatini WASH Program is using an innovative new toilet technology to support communities on their journey to becoming sustainably open defecation-free. They are promoting the use of and training artisans to assemble Amalooloo toilets, which are prefabricated facilities with a reusable superstructure and a hand-washing facility attached to it, to improve ownership and sustainability of sanitation.
- World Vision Eswatini's WASH volunteers initiative is a promising practice that has proven particularly effective with hygiene promotion. The WASH volunteers are at the forefront of promoting handwashing with clean water and soap as a main preventive step for COVID-19 and other diseases. Communities have constructed hand-washing facilities not only by latrines, but many households also placed them next to their kitchens, at the center of their yards for easy access by children, and at the entrances to their homes. This contributed to exceeding the 100% achievement of households with access to hand-washing facilities.



### Lesotho

- The Lesotho WASH Program focused on capacity building of communities for hygiene promotion and behavior change practices, building the resilience of village health and water committees, and advocating for WASH service delivery through Citizen Voice and Action. We empowered communities to promote handwashing and proper household water treatment and storage.
- At schools, teachers and WASH Clubs trained students on operation and maintenance of WASH infrastructure at their schools and communities, as well as good hygiene practices. These included handwashing, food hygiene, personal hygiene, and environmental hygiene.
- Lesotho suffered a drought in late 2019, which caused water scarcity. A grant from UNICEF provided access to clean water for healthcare facilities and promoted hygiene practices in Maseru Mafeteng, Mohale's Hoek, and Quthing districts. Five healthcare facilities received clean water through water trucking, enabling a return to normal health services benefiting 49,167 people.



## REGIONAL SUMMARY: SAR INDICATOR TRACKING TABLE

OUTCOMES AND OUTPUTS	FY20 Semiannual Target	Angola	Congo, DR	Eswatini	Lesotho	Malawi	Mozambique	Zambia	Zimbabwe	FY20 Semiannual Achieved	Achieved vs. Target
<b>OUTCOME: Access to Clean Water</b>											
People who gained access to a clean drinking water source in communities	126,262	2,142	14,650	2,746	-	36,000	29,336	61,469	20,316	166,659	132%
Children who gained access to a clean drinking water source at school	27,579	7,622	4,050	-	-	7,410	1,608	1,721	2,680	25,091	91%
Schools with a clean drinking water source installed	56	8	7	-	-	8	2	3	7	35	63%
Health centers with a clean drinking water source installed	16	3	5	-	-	1	-	6	1	16	100%
Successful boreholes completed and commissioned in communities, schools, and health centers	219	10	22	1	-	82	26	87	4	232	106%
Taps installed from successful water supply systems in communities, schools, and health centers	496	12	55	246	-	62	96	122	102	695	140%
Nonfunctioning water points rehabilitated in communities, schools, and health centers	172	8	6	2	-	45	-	64	69	194	113%
Households equipped with water-treatment techniques to disinfect drinking water	41,682	532	4,081	10,555	4,498	44,038	864	10,285	11,117	85,970	206%
<b>OUTCOME: Access to Sanitation</b>											
People who gained access to household sanitation	175,304	-	26,946	1,668	-	222,135	35,884	82,644	3,030	372,307	212%
Children who gained access to sanitation facilities at schools	25,440	-	8,013	4,839	-	4,529	-	2,449	3,896	23,726	93%
Household sanitation facilities constructed	28,077	-	4,369	278	-	28,812	7,154	14,245	630	55,488	198%
Communities certified as free from open defecation	265	-	1	-	-	257	36	153	8	455	172%
Improved, sex-separated sanitation facilities built at schools	326	-	40	85	-	25	-	30	65	164	50%
Schools that gained access to improved sanitation for children/youth with limited mobility	45	-	18	9	-	2	-	2	11	42	93%
Schools that gained access to improved sanitation for girls, with facilities to manage menstrual hygiene	57	-	18	-	-	4	-	2	11	35	61%
Improved, sex-separated sanitation facilities built at health centers	73	3	14	-	-	-	-	6	2	25	34%
Health centers that gained access to sex-separated sanitation facilities designed for people with limited mobility and appropriate for managing menstrual hygiene	23	1	4	-	-	-	-	2	1	8	35%
<b>OUTCOME: Improved Hygiene Practices</b>											
People who benefited from hygiene behavior-change promotion in communities	222,253	12,215	31,387	16,807	6,886	98,760	30,278	110,351	52,612	359,296	162%
Children who gained access to hand-washing facilities at schools	46,455	7,151	8,355	4,153	363	13,949	-	10,666	10,283	54,920	118%
Households that gained access to hand-washing facilities	34,900	-	10,697	1,967	1,113	32,059	5,723	12,915	5,719	70,193	201%
Schools that gained access to hand-washing facilities	115	8	28	8	1	20	-	2	24	91	79%
Health centers that gained access to hand-washing facilities	47	2	13	-	-	-	-	6	10	31	66%
<b>OUTCOME: Improved Community Capacity for Sustainability</b>											
WASH committees formed or reactivated with a financing system for maintenance and repair	575	32	14	2	17	137	71	95	63	431	75%
People trained in repair, maintenance, and construction of WASH facilities	358	32	70	21	64	58	13	70	95	423	118%
Functional Citizen Voice and Action (CVA) groups focused on WASH	50	3	5	14	1	10	10	8	21	72	144%
Faith leaders who participated in hygiene, sanitation, or behavior-change programming	638	44	84	62	-	267	229	348	8	1,042	163%
School WASH clubs or programs established	120	9	6	3	-	32	8	118	53	229	191%

## LEADING THE WAY: WASH LEADERSHIP PROFILES



***Nicaise Ugabinema***  
***Technical Program Manager***  
***Rwanda WASH and Health Programs***

Nicaise has been with World Vision for 13 years, initially working on design, monitoring, and evaluation for health and nutrition projects. Under her leadership, the Rwanda WASH Program has achieved high results toward achieving universal WASH coverage. They continue to strengthen our engagement with the government, civil society, and other NGOs—of particular importance for sustainability of WASH gains.

While Nicaise's background is in behavior change and health, she has shown excellent leadership in the hardware aspects of the WASH sector as well. In her current role, she is responsible for providing technical guidance for both emergency and development WASH projects. Nicaise is passionate about the transformation that WASH can bring to the lives of women and children, striving to lift their time and waterborne illness burdens, and empowering them to be key participants and decision-makers in society.

She holds a Bachelor of Science in public health from Mount Kenya University; a degree in general nursing from University of Rwanda; a post-graduate certificate in Global Health & WASH from Drexel University; and is currently completing her master's in public health from Mount Kenya University.



***Maybin Ng'ambi***  
***Technical Program Manager***  
***Zambia WASH Program***

Maybin has been with World Vision for over 10 years, and currently provides technical leadership in the development, design, planning, management, and monitoring of the Zambia WASH Program, including all large-scale WASH projects like multi-year grant-funded projects.

He has over 15 years of progressive experience in WASH programming for both development and emergency settings. Previously, Maybin worked as WASH technical advisor for World Vision Rwanda, providing technical support for implementation of WASH programs in refugee camps. He has also worked as WASH Specialist, Water Resources Manager and Regional WASH Manager for World Vision Zambia.

Maybin is passionate about inclusive WASH for people with disabilities, menstrual hygiene management for girls, and WASH in schools and healthcare facilities. This year he was inspired by the impact of the Zambia WASH Program in World Vision operation areas that initially resulted in zero cases of COVID-19 for both the communities and healthcare workers.

Maybin holds a master's degree in Water Management and Governance from UNESCO-IHE Institute for Water Education in Delft, Netherlands; a postgraduate certificate in International WASH from the University of Nevada (supported by the Dornsife Family through World Vision); and a Bachelor of Science in Irrigation Engineering from University of Malawi, Lilongwe.

# WEST AFRICA WASH

**1.8 MILLION PEOPLE** in West Africa provided with access to clean drinking water since October 2015, including 169,604 during the first half of fiscal year 2020.

## REGIONAL SUMMARY

The West Africa WASH Program put lessons learned on procurement and logistics into action in FY20 by proactively planning for anticipated needs, resulting in the successful achievement of all targets in most of its seven countries. Like southern Africa and East Africa, the region faced various challenges, but was able to adapt programming and continue to serve communities with water, sanitation, and hygiene services.

The Ghana team was pleased to host the Global WASH Forum in January 2020, where WASH leaders, partners, and donors reaffirmed

their commitment to World Vision's global efforts to reach every child, everywhere with clean water, sanitation, and hygiene. This was followed by donor field visits in Ghana, Sierra Leone, and Senegal.

West Africa WASH has earmarked a growth of 30% of our funding portfolio over the next three years. We are positioning for success through pre-positioning/teaming agreements and MOUs with key partner agencies and by strengthening relationships with UN agencies, USAID Missions, and EU reps. There is also increased coordination efforts with UNICEF

and WHO on emergency WASH programming as well as with national WASH cluster and sub-national WASH clusters.

The Continuous Quality Improvement approach is continuing in Niger, Mali, and Ghana to address household water quality issues. Efforts are underway to institutionalize the approach for other countries by end of FY20 through the dissemination of lessons learned and findings from implementing the approach over the past three years.



### *Being a girl 'felt like a punishment'*

Isata is a secondary school student in Sierra Leone who used to stay home from school during menstruation because she didn't have the knowledge or resources to manage it well. This resulted in her falling behind and having to repeat a grade—she said being a girl felt like a punishment.

But a few months ago, a friend invited her to a menstrual hygiene club meeting at school where she learned to have a positive mindset about menstruation, gained knowledge on menstrual hygiene management, and now has access to sanitary pads.

"I am an active member of the clubs and my focus is to help more girls appreciate themselves, their bodies, and to know how to take care of themselves," Isata said. "We are just different in a wonderful and special way."



## CHALLENGES & LESSONS LEARNED

The challenges the West Africa WASH Program encountered this period were minor, and the country WASH Programs were able to adapt and approach issues differently to come to workable solutions. As a result, the entire region exceeded targets this period, with the exception of Ghana and Mali, both of which anticipate meeting annual targets.

In **Chad**, World Vision has suspended face-to-face interactions, which has had the largest impact on community training on sanitation and hygiene, as well as training of water committees, faith leaders, CVA groups, etc. These activities have been put on hold indefinitely and are largely underachieved this reporting period. Construction and water provision are ongoing and have not yet been disrupted; however, the procurement committee was not able to meet to review contractor bids for construction activities planned for Q3. We are encouraging the group to meet virtually so we can continue to move construction activities forward, and we are hopeful this will not cause issues in achieving FY20 accomplishments.

The COVID-19 directives and regulations in **Ghana** led to the suspension of all interventions that required public gatherings. The Ghana WASH Program is considering how to redesign those interventions to be context-appropriate for implementation of WASH services in restricted circumstances. We want to leverage the heightened awareness of the essentials of WASH that the pandemic has triggered in government, civil society, and the general public to ensure prioritization of access to clean water and hand-washing facilities for vulnerable communities.

One interesting adaptation the Ghana WASH Program has made is to the WASH UP! approach, which was halted due to the current closure of

schools. In order to continue reaching children with both typical WASH messaging as well as time-sensitive COVID-19 preventive measures, the WASH UP! approach was organized for remote platforms such as radio and TV. A few children were engaged to roleplay handwashing, proper food hygiene, latrine use, etc. This was first piloted in Savelugu and has now expanded to Sekyere East.

The **Mali** WASH Program has faced issues in CLTS triggering and ODF certification for communities due to lack of commitment from the government technical services team. We are working with other INGOs in Mali to advocate for better collaboration from the government on activities that contribute to systems strengthening and ultimately overall national development.

The **Niger** WASH Program's challenges centered around equipment. The frequent breakdown of drilling equipment and subsequent repair delays led to the decision to order main spare parts from the international market, which will be higher quality. It is anticipated that during the next reporting period, the drilling pace will improve. In addition, the high cost

of Vergnet hand pumps compared with Indian Mark II pumps used in previous years is significantly affecting the program's ability to meet donor expectations of Wells Bring Hope. We are discussing how to address this.

Overall, the team in Niger has seen an increase in the cost of goods and services beyond what is budgeted. To ensure this does not negatively impact our interventions, World Vision is exploring better ways of contracting and eventually we will revise infrastructure designs. We are taking COVID-19 restrictions into consideration, as they are causing complications in importation and movement of goods.

The **Senegal** WASH Program has faced a lack of available masons for latrine construction. We are working directly with masons to focus on priority households first to gain momentum.

The **Sierra Leone** WASH Program learned from challenges faced last year with contract delays and awarded all contracts for boreholes and latrines by the first month of Q2. This means we are on track to complete all FY20 planned construction activities.



*Students from a WASH UP! elementary school are interviewed on TV as part of the Ghana WASH Program's ongoing work to ensure students receive the WASH knowledge they need, even during school closures due to COVID-19.*

## COUNTRY SNAPSHOTS



### *Ghana*

- The Ghana WASH Program empowered 50 communities through the Savings for Transformation model to upgrade their latrines beyond ODF certification.
- We worked with both faith leaders and CVA groups to advocate for WASH services from government and support behavior change in sanitation and hygiene that is needed to achieve WASH outcomes. Savelugu AP received an expanded water supply system as a result, and communities constructed hand-washing stations and latrines.
- In response to COVID-19, the Ghana WASH team intensified its efforts in healthcare facilities, far surpassing targets for this reporting period. Overall during the reporting period, the team installed hand-washing stations in 73 health centers (365% of target), water sources in 20 health centers (286% of target), and latrines in five health centers. Additionally, health centers received personal protection equipment and COVID-19 prevention safety information across all APs in Ghana. World Vision and the Ghana Health Service are in discussions to determine even greater ways to provide service to combat the spread of COVID-19.
- The Sesame WASH UP! Program is now being featured on local radio and television stations to encourage and teach children and their families to prevent contracting COVID-19 through healthy hygiene practices. WASH UP! is commonly offered in schools but because of school closures due to COVID-19, the program is now offered on radio and TV, reaching potentially more children and families than before. The program teaches children to practice regular handwashing, food hygiene, and about proper latrine use.



### *Mali*

- The Mali WASH Program has developed relationships among faith leaders to empower and sensitize them on good hygiene and sanitation practices. During their religious services, these leaders integrate messages on handwashing, elimination of open defecation, consumption of potable water, and safe water transportation and storage. These messages have bolstered the prevention of the spread of COVID-19 in communities.
- Also, in response to COVID-19, the Mali WASH team ramped up installations of hand-washing stations in health centers, providing 19 additional health centers with stations during the month of March, bringing the total to 22 health facilities receiving hand-washing stations this reporting period. The team also provided 16 health centers with 18 gender-separated sanitation facilities, and two health centers with 10 water taps from mechanized water supply systems.
- To ensure sustainability of WASH infrastructure in vulnerable communities, the program trained 383 WASH committees and water users associations to mobilize resources, and maintain, repair (minor), and manage local water points. Also, 350 local mechanics were trained on construction, major repairs and maintenance of WASH facilities as well as WASH products (such as SanPlat latrine pit, soap, storage containers) commercialization.
- Pre- and post-implementation activities have helped the WASH team to properly engage and plan with communities to mobilize their financial contributions and express their commitment through a signed agreement. This approach enables a systematic follow-up on the functionality of WASH committees from previously funded water systems after one or two years. In most cases, refresher trainings on effective ownership, management, and sustainability of facilities are offered to equip the committees to ensure continuous and improved quality of services to beneficiaries.

# COUNTRY SNAPSHOTS



## Niger

- The Niger WASH Program is working to improve water governance through systematic involvement of private contractors, regulated by the government. This involves communities hiring the contractor with a five-year contract to manage and monitor mechanized water supply systems, contributing to their long-term sustainability.
- A total of 76 faith leaders used their influence in their communities to encourage proper water, sanitation, and hygiene behaviors, linking them with appropriate scriptures. The WASH team trained these faith leaders on basic WASH concepts and encouraged them to join CVA groups and water-users associations.
- Post-ODF implementation protocols provided an opportunity for the WASH team to adopt collaborative approaches with departments serving on CLTS and ODF committees to help communities maintain ODF status.
- World Vision in partnership with Pathfinder International implemented the USAID-funded Evidence to Action USAID project in Niger; training two CVA working groups to conduct local advocacy for WASH improvement in healthcare facilities. Using the Water and Sanitation Facility Improvement Tool (WASH FIT) by WHO/UNICEF as a guide, the CVA working groups conducted assessments of nine health facilities. WASH FIT requires health facilities to have functional WASH infrastructure and biomedical waste management, among other critical standards.
- The Niger WASH team also continued efforts to provide WASH in schools, providing 16 schools with access to clean water; doubling the target of reaching eight schools during this reporting period. Now, 7,804 schoolchildren have clean drinking water at school.



## Chad

- The Chad WASH Program surpassed annual targets for sanitation and hygiene in schools due to prioritization by APs. Unfortunately, the water access target for schools was not achieved due to budget constraints. We continue to advocate for more funds.
- In order to bring water points closer to people's homes, the WASH team has moved from installing hand pumps to using small water supply schemes. We plan to install eight taps by the end of FY20, and will prioritize this work going forward.



## Mauritania

- The Mauritania WASH Program supports solid waste management in one of its urban APs, including provision of eight tricycles equipped with garbage bins for local garbage collection, which benefits over 7,000 people.
- The WASH team is working with Muslim imams to support hygiene behavior change. Together, they broadcast messages on the importance of proper latrine use on local radio stations. They are also promoting handwashing as part of our COVID-19 response.
- We suspended social mobilization activities during pandemic restrictions in February in favor of radio programs and caravans with megaphones to raise awareness on barrier measures against COVID-19. Household visits were adapted and continued by community relays equipped with personal protective equipment in order to promote handwashing with soap.
- The WASH team adapted tools from Participatory Hygiene and Sanitation Transformation, a hygiene behavior change approach, to local language and context, in order to strengthen behavior-change activities.



## COUNTRY SNAPSHOTS, CONT'D



### Sierra Leone

- The Sierra Leone WASH Program provided each of 19 healthcare facilities with a solar-powered borehole connected to four tap stands (with two taps each) around the premises and one tap directly in the delivery room, as well as enough latrines for patients and staff. They also worked with the Ministry of Hygiene and Sanitation to ensure that each healthcare facility was supplied with proper handwashing and cleaning materials to help ensure a clean and sanitary environment for patients.
- To enhance the sustainability of infrastructure management efforts, we collaborated directly with the Ministry of Water Resources to select key stakeholders to be members of water committees, and formed 29 groups this reporting period to train them on fee collection and system maintenance.
- In FY19, the Sierra Leone WASH Program was underachieved due to issues with procurement that pushed completion of almost all construction into Q1 of FY20. Because of this, we are significantly above target on construction indicators, as the results reflect the FY19 postponed work.



### Senegal

- The Senegal WASH Program is partnering with a USAID-funded project, ACCES, to use an innovative technology called SaTo Pan, to reduce flies and odor in latrines.
- Through women's Savings for Transformation groups, we are promoting positive WASH behaviors, such as water filtration, and creating kits to help girls practice healthy menstrual hygiene.
- The WASH team mobilized mayors to encourage families to own household latrines. Five mayors even paid for 200 latrines in their municipalities.



*The Mognegu Health Center in Ghana serves more than 2,300 patients annually from seven communities. The majority of their patients (more than 60%) are children. Before World Vision constructed latrines, staff and patients faced many dangers, including snake bites, because they could only relieve themselves outdoors in the nearby brush. However, after the construction of the new facilities, staff and patients can now safely and properly use the latrine on site. "Thank you, World Vision, for responding to our need," said Mensah Ntido, a healthcare staff (pictured above) at Mognegu Health Center.*

## REGIONAL SUMMARY: WAR INDICATOR TRACKING TABLE

OUTCOMES AND OUTPUTS	FY20 Semiannual Target	Chad	Ghana	Mali	Mauritania	Niger	Senegal	Sierra Leone	FY20 Semiannual Achieved	Achieved vs. Target
<b>OUTCOME: Access to Clean Water</b>										
People who gained access to a clean drinking water source in communities	110,650	9,200	28,500	27,050	13,572	41,100	15,902	34,280	169,604	153%
Children who gained access to a clean drinking water source at school	13,560	2,392	4,711	3,653	-	7,804	486	4,906	23,952	177%
Schools with a clean drinking water source installed	47	7	18	8	-	16	2	12	63	134%
Health centers with a clean drinking water source installed	30	-	20	2	-	14	-	19	55	183%
Successful boreholes completed and commissioned in communities, schools, and health centers	170	22	62	37	-	22	-	-	143	84%
Taps installed from successful water supply systems in communities, schools, and health centers	215	-	62	70	2	159	26	415	734	341%
Nonfunctioning water points rehabilitated in communities, schools, and health centers	72	8	26	2	7	26	3	17	87	121%
Households equipped with water-treatment techniques to disinfect drinking water	34,069	1,455	7,207	9,722	2,262	11,630	2,202	6,440	40,918	120%
<b>OUTCOME: Access to Sanitation</b>										
People who gained access to household sanitation	170,417	24,346	17,196	42,786	914	45,176	15,586	2,440	148,444	87%
Children who gained access to sanitation facilities at schools	13,328	3,356	1,859	950	-	2,632	486	10,908	20,191	151%
Household sanitation facilities constructed	20,820	3,478	3,666	5,223	153	5,647	1,359	423	19,946	96%
Communities certified as free from open defecation	96	-	50	-	2	18	12	-	82	85%
Improved, sex-separated sanitation facilities built at schools	253	36	36	4	-	12	4	180	272	108%
Schools that gained access to improved sanitation for children/youth with limited mobility	43	12	6	3	-	3	-	30	54	126%
Schools that gained access to improved sanitation for girls, with facilities to manage menstrual hygiene	43	-	6	2	-	3	-	30	41	95%
Improved, sex-separated sanitation facilities built at health centers	65	-	20	18	-	4	-	95	137	211%
Health centers that gained access to sex-separated sanitation facilities designed for people with limited mobility and appropriate for managing menstrual hygiene	17	-	5	16	-	2	-	19	42	247%
<b>OUTCOME: Improved Hygiene Practices</b>										
People who benefited from hygiene behavior-change promotion in communities	311,588	103,237	55,582	68,396	5,464	126,784	26,941	21,267	407,671	131%
Children who gained access to hand-washing facilities at schools	62,773	3,356	25,910	4,665	-	6,937	810	16,392	58,070	93%
Households that gained access to hand-washing facilities	26,993	783	4,040	10,302	872	15,848	2,053	3,477	37,375	138%
Schools that gained access to hand-washing facilities	1,235	12	181	30	-	21	13	61	318	26%
Health centers that gained access to hand-washing facilities	56	-	73	22	-	2	-	33	130	232%
<b>OUTCOME: Improved Community Capacity for Sustainability</b>										
WASH committees formed or reactivated with a financing system for maintenance and repair	333	-	127	383	1	141	25	29	706	212%
People trained in repair, maintenance, and construction of WASH facilities	609	50	327	350	-	148	40	5	920	151%
Functional Citizen Voice and Action (CVA) groups focused on WASH	106	1	60	70	-	30	6	11	178	168%
Faith leaders who participated in hygiene, sanitation, or behavior-change programming	805	20	178	162	6	76	363	60	865	107%
School WASH clubs or programs established	278	41	73	50	2	92	16	14	288	104%
<b>OUTCOME: Access to WASH in Emergency Settings</b>										
People with access to emergency drinking water supplies	1,000	-	-	-	-	-	-	-	-	0%
People with access to emergency sanitation systems	5,000	-	-	-	-	2,264	-	-	2,264	45%
People with access to appropriate solid-waste disposal facilities	1,000	2,500	-	-	-	-	-	-	2,500	250%
People with access to emergency hygiene supplies	-	3,600	-	-	-	2,264	-	-	5,864	0%

# PROVIDING WASH SOLUTIONS THAT LAST

## *The role of piped-water systems in rural development, gender equity, and household well-being*

A Stanford University student, James Winter, spent a year looking at a small sample of piped-water systems in World Vision Zambia APs. He developed a case study around the impact that piped systems could have on individual households, especially for women and girls. As World Vision, the WASH sector, and national governments look more seriously at implementing piped-water networks, this study serves as a great example of what larger impacts might exist.

In this study, two treatment villages received a mechanized piped-water system with a submersible pump that lifts water to an elevated 10 m<sup>3</sup> storage tank. In each treatment village, 20 to 25 taps were installed in a mix of private yards or communal areas shared by two to five households. Communities were expected to contribute approximately 1% of the system capital cost (around \$450). A water committee formed of community members was established in each village to manage all aspects of operation and maintenance, including fee collection.

A combination of household surveys, Global Positioning System transponders, and water meters were used to measure time spent collecting water, water consumption, and how water was being used for domestic and productive activities. Data collection occurred in three periods: May 2018 (baseline), September 2018 (midline), and June

2019 (endline). During each round, the same households in each village were visited for an interview on their water collection and use behaviors. A total of 434 household surveys were conducted in the four villages over three periods of data collection.

The study found that providing reliable piped water service via a shared or private yard tap reduced the time that households in rural Zambia spent collecting water by 80%. These time-cost savings amounted to an average of over 16 hours per household each month, with the benefits accruing almost entirely to women and girls. The water metering data suggests that per-person water volume use increased by 32%. And providing piped water to households was associated with four times higher odds of a household having a garden, with garden sizes increasing by an average of 57.1 m<sup>2</sup>.

Households receiving piped water reported being happier, healthier, and having more time to participate in work inside or outside the home. This study indicates that piped water systems can result in improvements in gender equality and in the well-being of rural households and communities.

## ***Improving our global WASH programming***

A renewed focus on programmatic performance monitoring across the World Vision WASH portfolio is a key initiative in line with upholding the SDG6 focus on service quality. World Vision's WASH monitoring

agenda provides a framework to assess, adapt, and strengthen monitoring policies and practices, in order to more effectively identify the unserved, design and implement solutions, and empower government agencies and local communities to maintain critical WASH assets.

Five overarching objectives will guide implementation of the monitoring agenda:

1. Obtain an in-depth understanding of current monitoring approaches and constraints in the sector; accompanied by capacity-building needs.
2. Improve the standardization and transparency of monitoring approaches, by establishing a uniform understanding of WASH monitoring approaches and agreed starting point for continuity across different teams and national offices.
3. Harness the latest technology to monitor the reach of WASH services, helping to quantify coverage levels and identify service gaps.
4. Build capacity of World Vision staff to collect, analyze, visualize, and share WASH monitoring data to inform programming decisions.
5. Strengthen country-led, post-implementation monitoring to assess sustainability of WASH assets and behaviors.

Metric	FY20 semiannual achieved	FY20 semiannual target	Achieved vs. target
Nonfunctioning water points rehabilitated in communities, schools, and health centers	609	508	120%
WASH committees formed or reactivated with a financing system for maintenance and repair	1,637	1,385	118%
People trained in repair, maintenance, and construction of WASH facilities	1,816	1,894	96%
Functional CVA groups focused on WASH	286	210	136%

# WATER AND SANITATION ARE LIFE-CHANGING

*Families, schools, and healthcare facilities are gaining clean water and improved sanitation and hygiene facilities in Rwanda.*

Claudine, 15, used to walk more than 4 miles each way to haul dirty water from an open body of water that was unprotected and unsafe. Sadly, it was the only option for her family. The water she hauled each day was used for drinking, cooking, bathing, laundry, and other household chores.



Her water-hauling responsibilities took their toll on Claudine. The work was exhausting, and made her late to school every day. "My grades were affected, and I hardly found time to even do my revision (studying). It wasn't easy at all," said Claudine. She also shared she and the rest of her family were routinely sick with waterborne illnesses caused by drinking the dirty water, which also caused her to miss school.

Thankfully, Claudine and the other 3,000 members of her village in Kivuruga area program (AP) now have access to clean water. World Vision, with your support, constructed a water system with a pipeline that brings safe water to the community. In total, in Kivuruga AP, 85% of the 35,851 area residents now have access to clean water through 77 water points provided by World Vision. In addition, 10 secondary and primary schools now have water points, as do seven healthcare facilities.

One of those healthcare facilities, Kinyihira Health Center, has a new water point, and gained new latrines for patients and staff. This will improve health conditions and reduce the spread of illness caused by poor sanitation and hygiene. The latrines and hand-washing facilities also are designed for ease of use by people with physical disabilities. Kinyihira Health Center is just one of three facilities in Kinyihira AP to have improved water and sanitation through this project.

Claudine is one of 73,000 children in Gakenke district that have recently gained access to clean water because you and others have supported our work.

*I have not stopped giving thanks for you, remembering you in my prayers. Ephesians 1:16, NIV*

## AFRICA WASH FINANCIALS

Program Spending October 2019 through March 2020

**\$44,699,299** spent from all funding sources

35% from U.S. private funds\*

65% from leveraged funds from other sources

\*\$15,776,492 spent from U.S. private funds only

29%

\$53,841,372 funded



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](http://worldvisionphilanthropy.org)

