



World Vision



Impact

World Vision UK Impact Report
for the year ended 30 September 2017



**Our vision for every child,
life in all its fullness;**

**Our prayer for every heart,
the will to make it so.**

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Executive summary

Last year World Vision UK supported a total of 256 projects across 40 countries. 4.6 million people benefitted, over 3 million of which were children. Within this, we supported emergency responses in 30 countries, reaching 2.9 million people, of which 1.8 million were children.

We met 92% of targets in our projects – we did what we set out to do.

In 2017 we reached fewer people than in 2016. This was due, in part, to the end of our large-scale Ebola response in Sierra Leone. The large number of people helped by nutrition and food security programming (71%) reflects the scale of our work in emergencies as well as the high prioritisation of nutrition in longer-term programmes to ensure that the youngest children do not suffer the irreversible impact of poor nutrition on their long-term health.

It has not been possible to measure change across specific child well-being indicators this year (depth data) due to fewer comparable outcomes and indicators in the available project evaluations. However, we have, as usual, looked across all our evidence and noted common themes and patterns in the evidence.

Across the evidence, this year we see examples of **integration of sectors** (health, education etc.) which ensures that projects are comprehensive enough to make a real difference. The DFID funded girls' education project in Zimbabwe (IGATE) is a large-scale example of this. The project specifically addressed barriers, faced by girls, to completing their education using a child protection approach. The evaluation reported that 24,387 girls had improved learning outcomes in literacy and numeracy (89% of the target). And

we saw significant increases in the number of girls who told us they like maths (6.2% increase) and reading (2.7% increase). We're particularly encouraged that more girls now believe they can make decisions about their own future (7.7% increase). Evidence from health programming encourages us to continue our commitment to **community-based approaches** showing the importance of local ownership in sustaining change. For example, the final report of the Urban WASH project in Ethiopia stated that, by the time it closed this year, 90% of residents were able to construct and maintain their own latrines – achieved through the Community Led Total Sanitation and Hygiene (CLTS) approach.

We have looked at the extent to which we prioritise the **most vulnerable children** in our programming. We aim to include the most vulnerable children but, according to a study we conducted using evidence from Sierra Leone, it should not be assumed that project interventions are always reaching or exclusively reaching the most vulnerable. This helps us understand where we are as we look forward to an increasing focus on the most vulnerable children in the new strategic period 2018-2022.

In **emergency programmes** we funded 66 emergency projects responding to earthquake, typhoon, flooding, drought, emergencies caused by conflict and displacement. From a review of 28 reports, emergency projects met 89% of their objectives. An encouraging study on cash transfers in 12 emergencies was carried out this year which has been presented along with learnings. We are also supporting the wider World Vision Partnership in increasing our accountability to communities and meeting all aspects of the Core Humanitarian Standard when responding to the biggest global emergencies.

Introduction

World Vision UK works hard to help bring about God's vision for life in all its fullness for every child. We remain committed therefore to evidencing what is working – and what isn't – to support better understanding and to develop better programmes for the world's poor. The annual *Impact Report* helps us demonstrate not only the impact we're having but also pushes us to improve our evidence. Producing this eighth *Impact Report* has allowed us to read, analyse, reflect, discuss and share the impact being made through World Vision UK-funded programmes. Our aim is to be honest about the scale of our successes and failures, encourage, learn and continue to improve our evidence of child well-being.

Over the course of this last year, our last strategy came to an end. Back in 2010 we set out to positively affect the lives of 8 million children, with an emphasis on child health, child protection, humanitarian response

and resilience. As we look back, we can be proud that not only did we reach an average of 4 million children per year but evidence provided through these reports over the course of the past seven years has shown how these children have benefitted from clear improvements in the sectors we were tracking. Our 2017 *Impact Report* provides further evidence of progress in those areas and takes us into the new strategy.¹ We also take into account the many changes going on around us (be those political, social, environmental or technological), as well as the Sustainable Development Goals which seek to build on the excellent achievements made towards the Millennium Development Goals.² The analysis in this report is valuable in helping us play our part to make sure that no one is left behind, as we push to focus more on inclusion of the most vulnerable children and increase our overall investment in the most fragile states.

BELOW: "I really like games because they make us think," says Leticia, 7, playing with her friend in Bolivia. © 2016 World Vision



¹www.worldvision.org.uk/who-we-are/strategy – The 2018-22 strategy will be accessible at this location.

²<https://sustainabledevelopment.un.org/topics/sustainabledevelopmentgoals>

Methodology: How have we used data to report impact?

World Vision UK's working definition of impact is “**significant or sustainable change in people's lives brought about by a given action or series of actions.**” Wherever possible this report seeks to highlight evidence of progress (or lack of progress) and key learning.

Beneficiary numbers

The best available data for our programming coverage remains the total number of direct beneficiaries of World Vision UK supported programmes. This section analyses the numbers by sector and geography. We make every effort to include only those directly supported through service delivery, community empowerment, training and awareness raising work, either funded by World Vision UK in 2017 or which we'd funded in previous years that sustained activities into 2017. We have seen that presenting beneficiaries per sector does not fully represent the breadth of our programming, which is increasingly becoming more integrated to achieve child well-being. Beneficiaries per sector figures therefore need to be seen in the light of this.

Assessing progress towards child well-being

The evidence used is primarily from programme evaluations (every three to five years) and project completion reports once the project has ended. A project can be as short as three months. The first step is to assess the quality of the evidence in the evaluation reports which we funded this year using the ‘BOND evidence principles’ tool (page 48). A random sample is then peer reviewed (this year, by World Vision Germany) to check we are using the tool fairly and consistently.

In the absence of a large enough number of programmes measuring the same child well-being indicators, it has not been possible to aggregate

quantitative data for the same indicators across programmes this year. However, we have presented findings according to A Theory of Change approach as usual. This explains how we believe change happens, from needs, to activities, to outcomes, to impact. It describes the change we want to make and the steps involved in making that change happen. Programme findings, including stories, have been presented against this. In some places we have referred to ongoing projects to illustrate progress. Where possible we have identified patterns in the findings; drawing out the learning and actions we will take in future years.

We have also assessed the extent to which all projects with available reports (evaluations and project completion) met their objectives (targets) and expressed this as a percentage. Whilst not impact measurement, we believe that achievement of objectives as a measure describes the level to which we faithfully use resources in our programming towards improved child well-being.

Limitations

Not all project completion reports were received in time to be included in the sample. The number of reports included was over 50%, (37 out of 67) which is reasonably representative but less than ideal.

The variable capacity across our partner national offices to achieve high quality evaluation reports can be seen in the section on quality of evidence page 48-49. We have developed an evaluation policy which is shared with national offices, making the expectations clear. However, availability of specialist staff with both technical ability and level of understanding of the importance of all five BOND criteria remains challenging. Unfortunately, three

evaluation reports from Bolivia were reviewed for evidence quality but included in the sample too late to be part of the body of findings.

Impact video

A video highlighting overall findings from this report can be seen here: worldvision.org.uk/our-work/impact

Reporting impact: 2018 onwards

Who are the most vulnerable children?

Defining the most vulnerable is a challenge in and of itself. Our definition is any child that suffers two or more of the factors (“vulnerabilities”) on figure 1.

Vulnerability, however, varies from context to context and may in fact look quite different from one place to another. For example:

- **Tanzania** – children out of school, street children, girls at risk of early

marriage, children being physically or sexually abused, boys involved in cattle herding and girls exposed to female genital mutilation.

- **Cambodia** – girls being sexually abused, children working in brick factories, children suffering from domestic violence, trafficking.
- **Eastern DRC** – boy soldiers, girls sexually exploited in brothels, street children, children living in the outskirts of Beni who are prone to abduction, children who migrate to Beni for school or work.

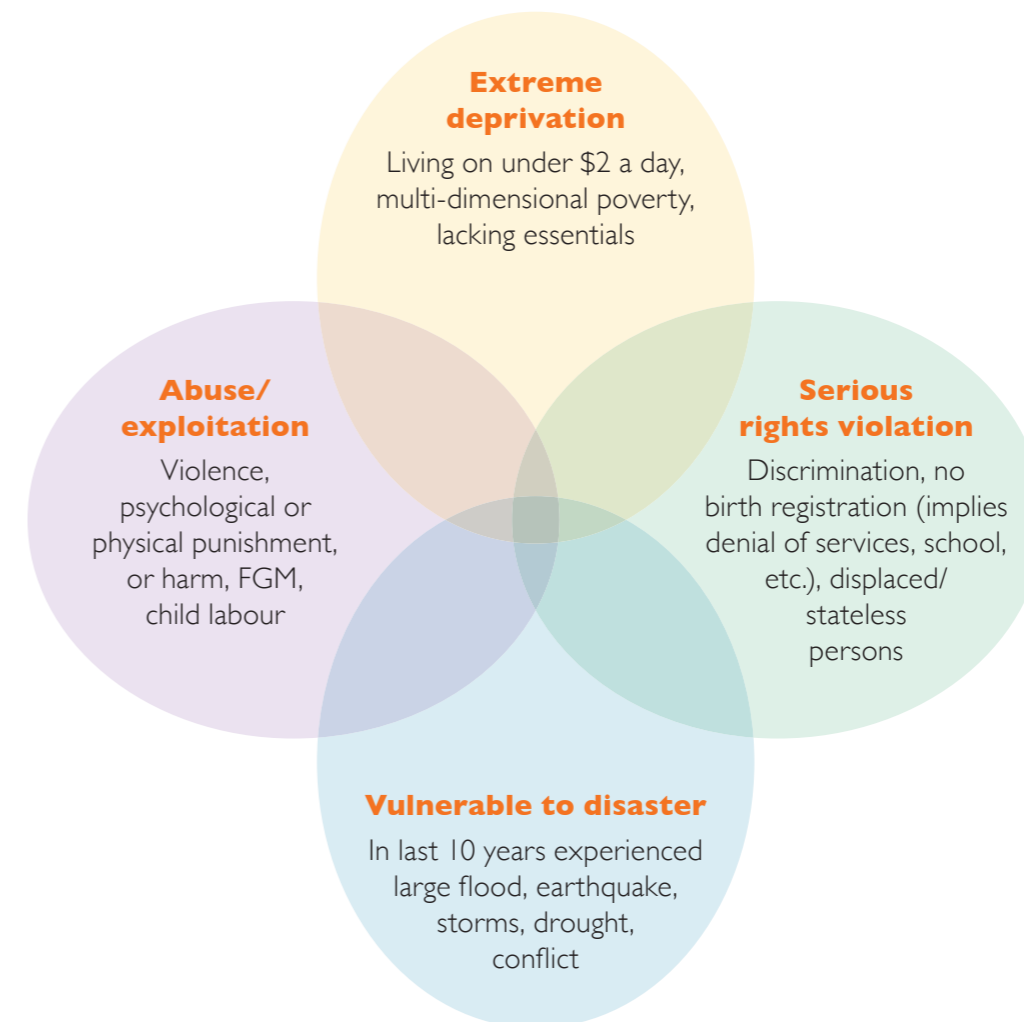


FIGURE 1: Vulnerability factors from World Vision's Ministry Framework 2010



Child beneficiaries

Targeting the most vulnerable

A basic way of targeting the most vulnerable is moving our programming to the contexts with the highest concentration of “vulnerabilities”. World Vision International has ranked countries according to criteria based upon context fragility and child vulnerability. This helps us to invest our resources increasingly in the countries where children are most vulnerable.

A commitment to learning from most vulnerable children

We will focus on including the most vulnerable children in programming – including a greater emphasis on listening to their voices. Alongside this, we’re including indicators to measure the impact for the most vulnerable; ensuring we’re learning and applying that learning to further enhance impact for the most vulnerable children. This learning will form the basis of our reports over the life of the new strategy, so we can more accurately reflect the impact we’re having in the lives of the most vulnerable. This has already begun, for example the desk research on including the most vulnerable in Sierra Leone (see page 15-16).

Our impact reporting moving forward will continue to highlight an overview of success and failure across all funded projects. Alongside this, a number of projects will be closely tracked to see what is changing for specific communities. We’ll listen to vulnerable children, help to share their stories as to how life is changing for them and will honestly report the improvements – or lack of – in their lives.

Faith and development

While religious and faith affiliation may be declining in some advanced economies, including the UK, in the contexts in which we work, a significant (and growing) majority of people identify religion as an important aspect of their lives. More than 85% of the world is religious and this figure is even higher in the most fragile and low developing contexts. In many – even most – of these communities and societies, religious beliefs and practices continue to play a fundamental role in shaping social norms, attitudes and practices, and faith leaders are amongst the most trusted and respected figures. We will be looking at how being a faith-based organisation helps us work with faith groups in programming and include this story in our impact evidence.

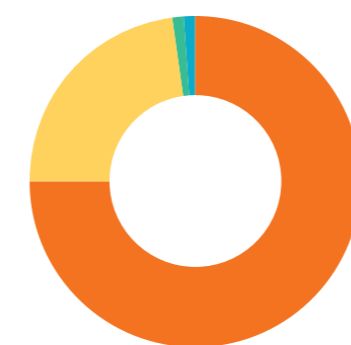
ABOVE: Enivens, 10, sitting on the remains of his house in Haiti. “Hurricane Matthew blew away my home. It also destroyed my grandfather’s house. It has destroyed books and my toys. I want a new home,” says Enivens. © 2016 Santiago Mosquera / World Vision

Children helped: by context

Our strategy prioritises the most vulnerable children, many of whom live in what are referred to as ‘fragile states’. These are countries failing to provide basic services to poor people because they are unwilling or unable to do so.

We have used new categories from World Vision International which include child vulnerability analysis in the measure of fragility.³

Using these categories⁴ 23% of the children we helped this year were in fragile states and 75% were in low developing states. This reflects our ongoing commitment to the most vulnerable.

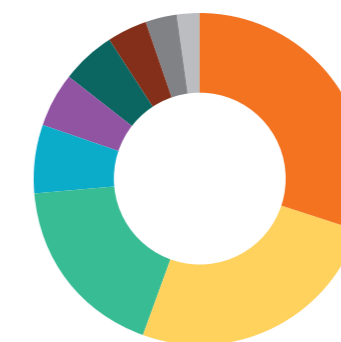


- Low developing, 75%
- Fragile, 23%
- Medium developing, 1%
- High developing, 1%
- Transitioning, 0.01%

Children helped: by sector

Projects are described as a single sector project, (such as health or education) but, as seen across this report, a project often works in several sectors to achieve child well-being comprehensively. For example, few projects are called child protection projects but many projects include aspects of child protection. Aspects of household resilience such as agriculture can be part of health projects.

The largest number of children were helped by projects related to health and water, sanitation and hygiene (WASH), nutrition (including food distribution) and food security. This is unsurprising given the need to respond to disasters and work in fragile and low developing states where these are often assessed as the most urgent priorities.



- Nutrition and food (including distribution), 30%
- Food security, 25%
- Health and WASH, 18%
- Education, 6%
- Environment, 5%
- Community engagement, 5%
- Livelihoods and economic development, 4%
- Disaster mitigation and preparedness, 3%
- Other, 2%

FIGURE 2: Child beneficiaries by context in 2017

FIGURE 3: Child beneficiaries by sector in 2017

³World Vision: “Defining fragility”. Definitions document, version August 2017, expected to be published in March 2018.

⁴Fragile: Syria, Central African Republic, Congo – Democratic Republic of, Iraq, Somalia, Sudan and Southern Sudan. Low developing: Angola, Bangladesh, Cambodia, Chad, Ethiopia, Haiti, India, Kenya, Malawi, Mozambique, Myanmar, Nepal, Niger, Philippines, Senegal, Sierra Leone, Tanzania, Uganda, Zimbabwe. Medium Developing: Bolivia, Honduras, Zambia, East Timor, Mongolia, Zambia and Thailand. High developing: Albania, Armenia, Ecuador, Jordan and Dominican Republic. Transitioning: Mexico.



Child protection

We've prioritised child protection for seven years. All 47 of our current long-term UK sponsorship-funded programmes include child protection activities (such as child protection clubs and committees) alongside advocacy and campaigns on subjects including child labour and birth certificates. They each measure at least one child protection indicator. Shorter-term projects funded by grants may also include similar child protection activities. This section includes evidence from both types of project.

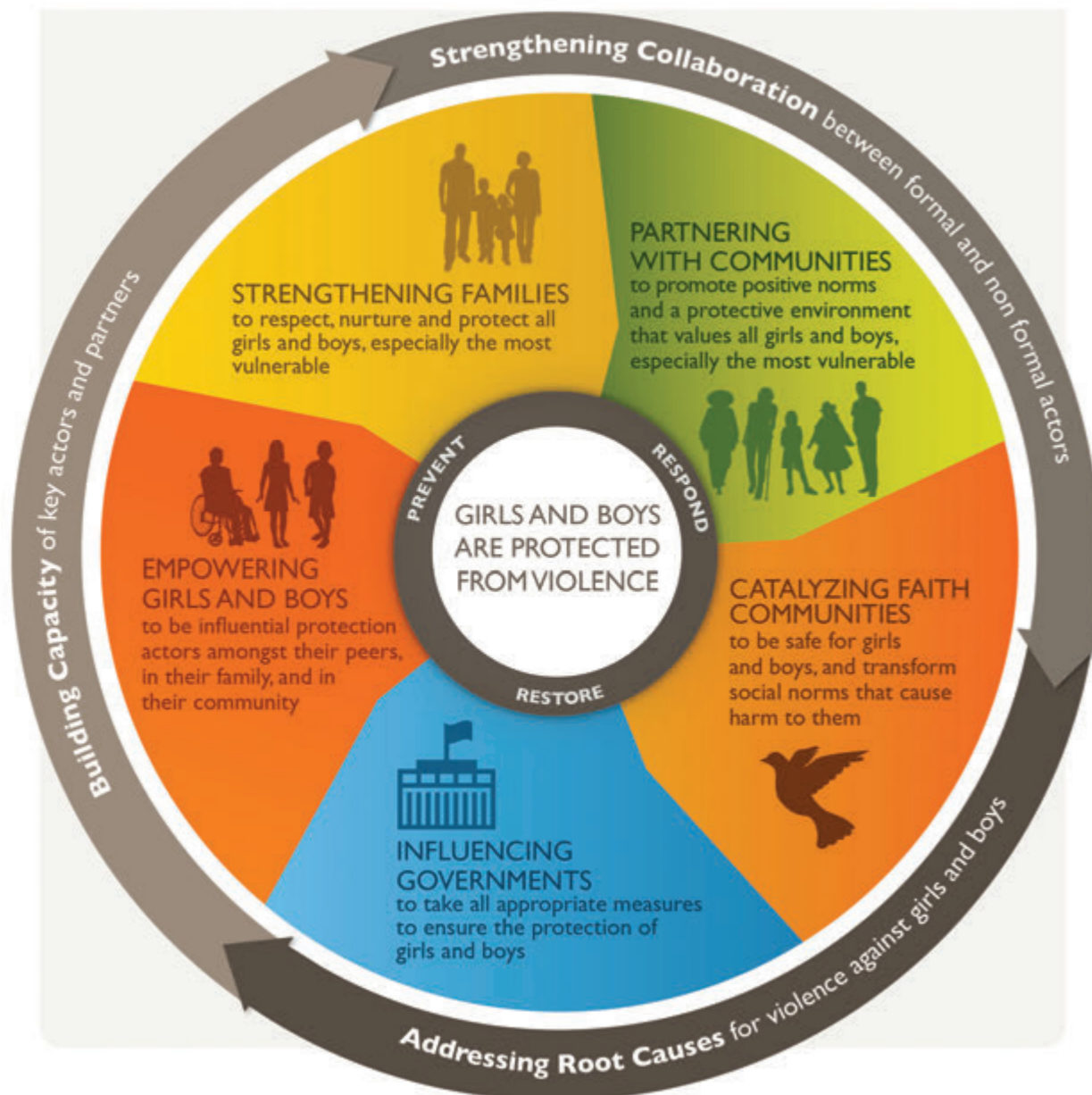
We have again looked to see the extent to which this year's evaluation reports included evidence of the

systems approach to child protection, shown in the diagram below. We have summarised impact from programmes where one or more child protection indicators were measured.

In this section we have also included the findings of desk research, (looking at evidence from World Vision Sierra Leone) of the extent to which we prioritise the most vulnerable children in long-term programmes. Our programming aims to include the most vulnerable children and follow the systems approach in order to prevent, respond and restore children most at risk. Please see page 5 for the definition of the most vulnerable.

PREVIOUS PAGE: Ten-year-old Ghalib lives with his relatives in a rented house in eastern Mosul, Iraq. After a bomb killed his father, Ghalib's mother could no longer care for him. We're providing Ghalib with psychosocial support and clothes, and working to reunite him with his mother. © 2017 Sacha Myers / World Vision

FIGURE 4: World Vision's systems approach to child protection



Child protection: girls' education project

The Improving Girls' Access through Transforming Education (IGATE) project, funded by DFID, was implemented in 467 primary and secondary schools in 10 districts in Zimbabwe over four years (2013-2017). The project aim was to respond to multiple significant barriers that hindered, or prevented marginalised rural girls from going to, or staying in school and attending school regularly. Baseline findings revealed that families had difficulty sending both boys and girls to school due to inability to pay school fees; few girls felt supported in their schoolwork; and few caregivers and parents were active in the management of local schools. Gender based violence at home, school and within the community negatively affected their attendance and learning. Other barriers included increased levels of household responsibilities and long distances to secondary school. Early marriage was also identified as an issue. Beneficiaries were selected from schools in the poorest areas of the districts with the highest levels of school dropout and lowest exam pass rates. The project reached an estimated 101,000 of these marginalised girls, with activities in all categories of the systems approach (see Figure 4). For example:

'Power Within' school clubs⁵ aimed to support girls as learners by empowering them and growing their understanding of the importance of their education and own potential.

School Development Committees (SDC)⁶ ensure school environments became more girl – and child – friendly; providing support to Mother's Groups⁷ and 'Male Champions'⁸ also increased parental understanding of, and support for, girls' education.

Change attitudes and behaviours related to girls' education, by building the capacity of families, teachers, faith leaders and government.

Village Savings and Loan groups⁹ increase families' ability to financially support girls' education.

Channels of Hope (CoH)¹⁰ reaches and influences religious leaders, catalysing action around tough issues such as GBV and child protection.

BELOW: Tawanda Shumba and family: Tawanda has benefitted from the village saving and loans scheme and is very involved in reducing barriers to education in his family and community. "...I now assist the children with homework. We also bought them lights to study at night. We also ensure that both boys and girls take turns to do household chores." © 2016 World Vision



⁵Power Within Club, a CARE model. A school-based girls' club having a maximum of 50 members, with the purpose of building girls' leadership skills and their knowledge and understanding of girls' rights and hidden or taboo issues such as pregnancy, menstruation, early marriage, household chores, and time burdens.

⁶A formal structure linking schools and communities in Zimbabwe.

⁷Mothers Groups, a CARE model. Women in the school community were trained on mentoring girls and other parents on education, the importance of regular attendance, gender-based violence (GBV), and hygiene and menstruation.

⁸Male Champions engage with men to increase their support for girls' education by attempting to change their attitudes and behaviours.

⁹A CARE model that involved training men and women on group savings, generating capital for small businesses and creating a safety net for participants. Groups received training on developing small businesses, budgeting, and managing finances.

¹⁰Channels of Hope – www.wvi.org/health/publication/channels-hope



To measure impact, the evaluation in 2017 used a randomised control trial study design, tracking a panel of girls. Around 2,000 randomly selected girls were tracked for the IGATE Intervention and around 1,000 girls for the Control (Non-IGATE Schools). Findings included the following:

- 24,387 girls had improved learning outcomes in literacy and numeracy. (89% of the target). The project significantly increased the probability that a girl reports that she likes mathematics (6.2% increase), likes reading (2.7% increase), believes she can make decisions about her future (7.7% increase).
- 67% of households were using village savings and loans schemes to invest in their daughter's education despite the El Niño drought and economic hardship during the project period.
- 92% of community groups and local leaders increased their knowledge,

awareness and skills on gender specific issues. 67% of communities in the programme were advocating for girls education and 34.2% of head teachers stated someone had notified the Child Protection Committee of an abuse case in the past six months.

The evaluation concluded that IGATE “strengthened partnerships across government, NGOs, communities, and children. Positive change was seen in families and communities, increased valuing of girls and girls valuing of themselves. Community members also noted that more work was needed to ensure results were sustainable, due in part, to the contextual factors that are part of daily life, such as the extreme drought. (Food insecurity increased from 6% at baseline to 30% at evaluation).”

ABOVE: 12 year old Cleopatra (left) and her friends, “the journey I started has shown me the importance of being valued, attending school, taking care of my health and standing up for what I see is right. I began participating in the Power Within Girls' Clubs, and I started to see things change: more boys understood that I was just as important, I was no longer ashamed of myself and I began to realise that I had power to change others.”
© 2017 Saramine Mukute / World Vision

Child protection: emergencies

A 2016 assessment by Plan International, UNICEF and World Vision,¹¹ revealed that southern Africa was worst hit by the El Niño drought crisis with an estimated 49 million people at risk. The United Nations Children's Fund (UNICEF) estimated that 26 million children across eastern and southern Africa were at risk from malnutrition, water shortages and disease. Just over half of respondents in the assessment believed that child labour had increased since the start of El Niño and that it was more likely to impact boys than girls. Results showed increased numbers of separated and unaccompanied children as a result of El Niño. Over half of the respondents said that children leave their families to seek work. Just under half of the respondents said that parents commonly send their children away due to the lack of food. These children are likely to be between 5-14 years old. Nearly 80% of respondents agreed that school drop-out rates had increased since the start of El Niño. In one province in Zimbabwe alone, 6,000 children have dropped out of school due to hunger or the need to help their families with house or farm work.

Mozambique El Niño

A two-year DFID-funded multi-sector (food, agriculture, nutrition, water and sanitation, child protection) emergency project responded to the crisis. The project brought all ages and genders into child protection activities through child parliaments, child protection committees (trained on the reporting and follow up of incidents) and the specific involvement of young people sharing child protection messages through plays. Advocacy by youth led to 115 out-of-school children being identified and readmitted back into school. 3,545 families also received a certificate enabling them to qualify for assistance such as free health and legal services. The evaluation report



in 2017 found a 36% decline in sexual exploitation of children over the two years and suggests this may have been due to increased involvement by local authorities and to adults being better equipped to comfort the survivor of a sexual assault.

The regional evaluation of the Southern Africa Response to drought¹² noted that this project was unique in budgeting for child protection, describing the lack of any other examples as a missed opportunity. This is not surprising as the 2016 assessment noted very little funding had been pledged for Child Protection in the El Niño emergency. “Only \$11.7m is needed for Child Protection, but only 6% has been pledged by donors.”

ABOVE: Nine-year-old Fatema has to leave her shelter with her family due to the flooding in the camp. Fatema is one of 200,000 children (aged 4-14), who have crossed the border into Bangladesh after violence erupted in the Rakhine State, Myanmar. According to the UN Inter Sector Coordination Group's report (22 Oct), “Unaccompanied and separated children run many risks, including the risk of being exposed to early marriage and child labour.”
© 2017 World Vision

¹¹www.wvi.org/sites/default/files/CPRA%20Summary.pdf

¹²Evaluation of the Southern African El Niño Emergency Response (SAENER) Malawi, Mozambique and Zimbabwe 2017.



Child protection: long-term programmes

Ghoraghat Area Development Programme, Bangladesh

In Ghoraghat Area Development Programme (ADP) in Bangladesh, large numbers of the population are landless. The area is prone to natural disasters such as drought and flooding. The 2017 evaluation showed a 10.2% decrease in girls dropping out of school since 2013 and a large increase in children finishing secondary school (up by 59.5%). To achieve this, we worked in partnership with government and parents by supporting school management committees and infrastructure. The report also mentions the contribution of the Early Child Care and Development (ECCD) approach for children aged four to five years resulting in increased confidence as children start school.

We've also seen that 58.7% more children now have birth certificates, (from 27% in 2013 to 85.7% in 2017) indicating greater recognition and celebration of children in families and communities. Child protection activities included supporting

children's clubs, child protection committees and raising awareness on child well-being. Most parents reported that participation in children's clubs has resulted in positive behaviour change, such as increased respect for others and better ability to choose real friends. However only 10% of parents report that the opportunity to join a children's club exists in their community.

The level of parents or caregivers who feel that their community is a safe place for children has remained at around 62% since 2013. The reasons parents may not feel their communities are safe for children include fears related to child trafficking and sexual harassment. Recommendations on child protection included strengthening the teaching of child rights in school, and child participation in groups looking at rights issues. These need to be linked to the adult child protection committees and community groups who will follow up on incidents and issues. A new programme design for the next three years addresses these areas.

ABOVE LEFT: Marzana, age 14, leads a session on child rights and protection in Ghoraghat ADP. © 2017 World Vision

ABOVE RIGHT: Marking the start of our Ending Violence Against Children campaign. All sub-district level high officials in the Ghoraghat area of Bangladesh, attended to show their agreement and asked for cooperation to make this campaign successful. © 2017 World Vision

Lufwanyama Area Development Programme, Zambia

In the final evaluation of Lufwanyama Area Development Programme (ADP) in Zambia, output evidence (the results of activities) reveals that we've contributed to more children having birth certificates, more children's clubs and more adults trained in child protection issues. Outcome-

level evidence shows that only 47% of adolescents believe that they are "thriving" (though changes weren't measured over time). So whilst it is positive to see another example of World Vision working in child protection, it was felt that those interventions were not intensive enough in this programme to see changes, such as whether youth consider themselves to be thriving.

Prioritising the most vulnerable children

This year, we reviewed all pre-existing qualitative data from long-term programme evaluations in Sierra Leone between 2016 and 2017. 191 sources of evidence from nine evaluations included; focus group discussions, key informant interviews and assessments of Community-Based Organisations (CBOs) in long-term World Vision programmes. Findings included the following:

- Some of the most vulnerable children are found in our programme areas but also outside of them.
- Evidence was mixed as to whether the most vulnerable children consistently benefitted any more than other children in the community.
- Many instances were found in which we had actively sought to target the most vulnerable children and had indeed been successful.

In such instances it was generally explained that this was because CBOs or key community members had been involved in identifying them. In other discussions, however, community members commented that we had not reached the most vulnerable children, and made recommendations on how to do this better. Whilst the most vulnerable children did appear to benefit from almost all of the programming that reached them, there were a small number of instances where they did not benefit as anticipated. For example, where children are assisted with school uniform but are still unable to attend school due to other barriers.

The research report includes more examples, where it can be seen that the most vulnerable in a community are being targeted for assistance by CBOs.



LEFT: This mothers group in Sierra Leone were interviewed as part of an evaluation in 2017. The group have pooled funds, primarily through a savings group committee, to pay for emergency medical care or operations for community members, including vulnerable children who the mothers group are responsible for. © 2017 World Vision

Examples include the following...

Gandema Savings Group in Tikonko ADP makes loans available and accessible both to members and those in need, giving priority to the sick in their community.

Tonyagbekpeyei Savings Group in Jong ADP have used the profit from their group to construct a community school.

Sembehun 17 Mothers Club in Tikonko ADP give community loans to the poorest farmers. They also support vulnerable community members by providing them with jobs on their – now sizable – cassava and groundnut farm.

Gambia School Management Committee in Jong ADP grows cassava, and gives loans with interest. With their funds, they pay stipends for the school teachers to keep them motivated, and purchase school equipment such as chalk and text books.

Sinava Savings Group in Lugbu ADP sells its farm produce (including cassava and groundnut) within the community at a more affordable cost than could be obtained elsewhere, so that community members can buy such products.

Yabama School Management Committee in Lugbu ADP has led extensive awareness campaigns for parents on the importance of regular school attendance. Absenteeism has reduced and parent-teacher relationships have improved.

Walihun Farmers Group in Serabu ADP loaned four bushels of rice and some tools to an equivalent farmers group from a different community. They also loan rice to the other people in Walihun community every rainy season.

Karfele COMMS (Community Health Committee) in Tegloma ADP uses some of their income to look after twelve vulnerable children in their community.

World Vision works with communities to create a movement for change which must be owned and managed by communities in order to be sustainable. The report's recommendations are mindful of this and include the following: **communities with high concentrations of the most vulnerable children should be prioritised** to the greatest extent possible; **a range of community groups** and leaders should be involved in identifying the most vulnerable children; and conduct a **regular review** to check that no further children have fallen into this category; **make sure activities are accessible** to vulnerable children and

their families. For example, consider timings and methods of conducting meetings, training and of gathering information from the community; **make activities for the most vulnerable children more sustainable.** This study found that community-based organisations (CBOs) are fundamental to the sustainability of programming for the most vulnerable children. It is recommended that income generation and financial management by CBOs be prioritised alongside capacity for local level advocacy. This way they can hold the government to account on behalf of the most vulnerable children.



Learning and actions

Evaluations this year show how child protection can be successfully integrated into other sectors including education, emergency response to drought and child sponsorship.

it is possible for the most vulnerable children and families to participate and to strengthen community-based organisations to promote sustainability.

The Zimbabwe girls' education project (IGATE) evaluation questioned how sustainable positive changes in child protection (reducing barriers to education) were in an emergency context. It highlighted the need to ensure greater resilience of families and communities for changes to be sustained. (Please see Resilience and Livelihoods section for examples of this).

In 2018, we will... further develop our monitoring and evaluation systems to be able to more accurately identify, reach and listen to the most vulnerable children in our programmes. This will help us to better understand how well we're including them and how our work can be adapted to positively impact their lives in emergency, fragile and developing contexts.

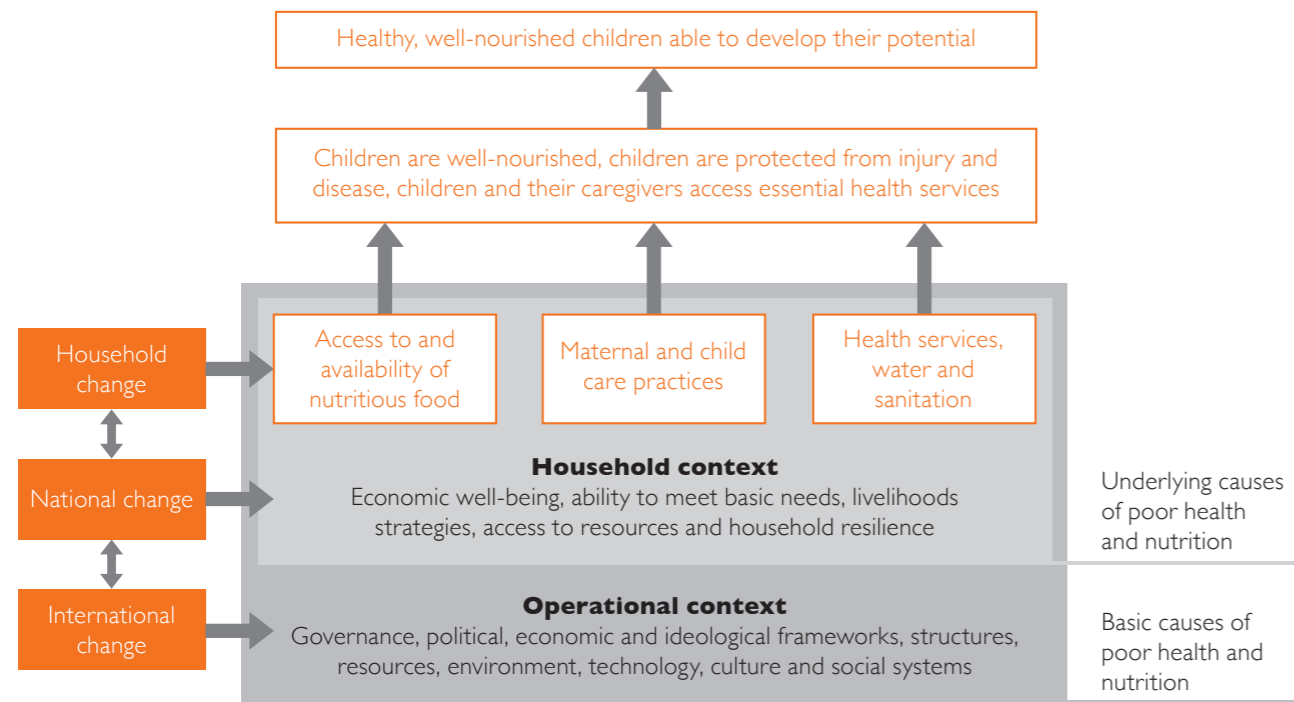
Our research showed that while we do seek to work with the most vulnerable, we shouldn't assume we're always reaching them without testing this assumption. Specific recommendations were: to prioritise areas with the highest concentration of the most vulnerable children; to involve a wide group of community members in identifying them and review this regularly; to ensure that

In 2018, we will... continue to look for opportunities to mainstream child protection in emergency responses. This year we're funding projects in fragile states (DRC and Syria) which support education in emergencies—ensuring that the most vulnerable children continue to be empowered and protected in places of conflict. We will also advocate with donors to increase funding for child protection in emergencies.

ABOVE: "We work in pairs to present what we've learned about children's rights and preventing violence," says Alicia, 12, from Bolivia. Alicia and her peers feel more supported by their families thanks to this work.
© 2016 World Vision



Child health



Health and nutrition programmes include all three aspects of the health theory of change above and including food security, this covered over two thirds of all World Vision UK’s programming in 2017.

Nutritious food

In the 2016 *Impact Report* we saw examples of drought disrupting healthcare and nutrition. We recognised that there should be a focus on resilience programming to prevent disaster and protect food supplies.

Lufwanyama ADP

There is further evidence of this in Lufwanyama ADP’s evaluation report. We noted that only 37% of households were growing at least two crops, only 19% of households had more than one income source and that 50% of households had a poor dietary diversity score of three or less.¹³ The report recommends that “intervention

During 2017, project evaluations included three water and sanitation projects, two food security projects and two long-term area development programmes (ADPs) including health interventions.

which links agricultural production with household nutrition is critical for meaningful outcomes to be realised” (page 15). The four-year Zimbabwe Enterprise project below is an example of this approach in action.

The Zimbabwe Enterprise project

Now in its third year, the project was set up to assist 25,500 families suffering food insecurity due to the El Niño drought and a poor economic environment. Activities have included strengthening the Government’s existing agricultural support services and training farmers in climate sensitive agriculture and marketing.

FIGURE 5: World Vision’s health and nutrition Theory of Change.

PREVIOUS PAGE: Julia and her youngest daughter, Chepkiach, 3, in their fruit orchard in Kenya. A new gravity-fed water system supplies about 800 homes, including Julia’s orange, guava, mango, and lemon trees so that her family can enjoy healthy food. © 2016 Jon Warren / World Vision

We’ve also been working with community nutrition promoters and families to build food and preservation skills and knowledge. Alongside this, we’re improving community health services and practices particularly for pregnant and breastfeeding mothers.

By the end of the second year the project had trained nearly 16,000 farmers and reached over 15,000 households with nutrition information. A learning report written this year¹⁴ concluded that the project has made considerable effort in integrating multi-sector interventions in agriculture, savings and loans, and

improving the nutritional and income values of produce. A particular strength is work with households to empower women by increasing their income, promoting their participation in family decision-making and encouraging labour-saving farming and food processing technologies. Working alongside government health and agriculture structures, and effectively spreading technical nutrition and agriculture information to the community, are key factors for success and sustainability of the project. We’re closing the learning loop in this project as well as sharing learning with other, similar projects.



LEFT: The Lead Mother in this Care Group facilitates a session for mothers with children under two years. © 2016 Munyaradzi T. Nkomo / World Vision

Nutritious food in emergencies

In 2017, almost two million people needed assistance in Mozambique as a result of the El Niño drought. And the poorest communities took the brunt of the crisis.

Emergency multi-sector response to El Niño-affected communities in Mozambique

This two-year DFID project in Mozambique (referred to on page 13) responded to the crisis with two

overall aims. Firstly, to prepare the community to respond in an effective, integrated and timely way to the drought caused by El Niño. This included food and seed distribution. Secondly to support them to rebuild their livelihood activities. There was a 2% improvement in children’s minimum dietary diversity and a 30% improvement in minimum meal frequency (when the baseline 2015 and end line 2017 rates are compared). The evaluation report also suggests that

¹³Household Dietary Diversity Score (HDDS) consists of a simple count of food groups that a household has consumed over the preceding 24 hours. www.fao.org/nutrition/assessment/tools/household-dietary-diversity/en/

¹⁴Operational factors for Integrating Nutrition with Agriculture/Livelihood programmes. www.worldvision.org.uk/files/2315/1024/1152/IntegratingNutritionwithAgricultureCaseStudy.pdf

there were problems with timeliness, for example in distribution of food and seeds once the rains had started, as roads were impassable, and lack of coordination between the different partners involved. The regional evaluation of the Southern Africa Response to drought, of which this project was a part,¹⁵ notes a greater delay in Mozambique than elsewhere in part because, by late 2015 and early 2016, the Mozambican government officials were not yet convinced of the impending drought disaster and had not triggered the start of the emergency response by NGOs, including World Vision. The report concluded that the overall response

had successfully provided life-saving food assistance to the affected target communities. However, as per learning from both our 2016 *Impact Report* and the 2017 Lufwanyama evaluation, the major recommendation for future programming was that, due to the increased frequency of climate related disasters, we should deepen our commitment to household resilience by increasing income generation and food production.

“Given that climate-induced disasters are becoming frequent, almost on a yearly basis, the focus of emergency programming should shift from humanitarian assistance to resilience building.”¹⁶

Maternal and child care practices

Ghoraghat ADP, Bangladesh

Ghoraghat ADP used two models to help the community deal with health issues comprehensively. Our PD-Hearth model¹⁷ builds capacity, to sustainably reduce and prevent malnutrition by understanding why some children in the community are well-nourished, despite being from low income backgrounds. This knowledge is then applied. In addition, Citizen Voice and Action (CVA)¹⁸ is an approach which brings service providers (such as district health workers) together with community members to assess standards and solve problems in healthcare. In addition to this, there were campaigns to share important messages, WASH committees were formed and nutrition centres were built and run by community members. The evaluation argues that these have contributed significantly to

improving the maternal and child health status as demonstrated in Figure 6. The under-5 mortality rate has dramatically improved globally and in Bangladesh the rate is now 38 (from 144 in 1990).¹⁹ The huge change seen in Ghoraghat reflects the national context and positive findings across other indicators. The report found that since 2013, 62.7% of children aged 6-23 months were fed at least four meals in the previous day and asserts that incidence of diarrhoea has decreased significantly. Alongside this 93% of diarrhoea cases were treated correctly, 94% of households are practicing proper handwashing and open defecation has decreased from 19% to 15%. Mothers’ awareness and health is reported to have improved, and evidenced by the increased numbers of women completing their antenatal visits.

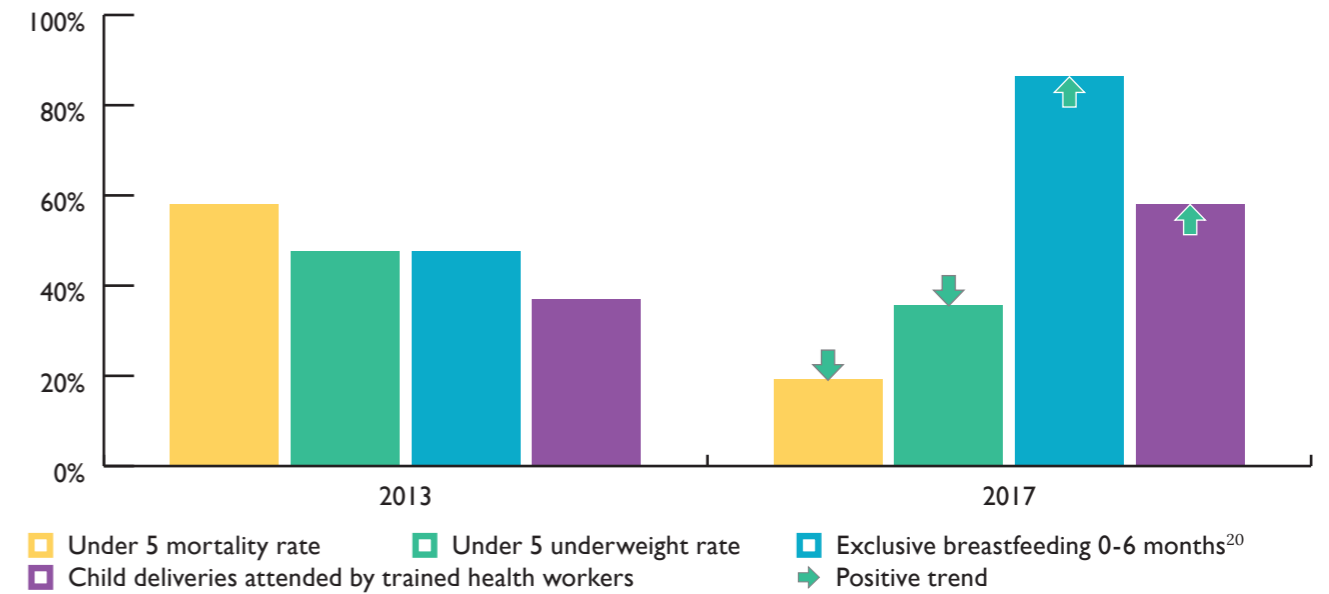


FIGURE 6: Health improvements in Ghoraghat ADP

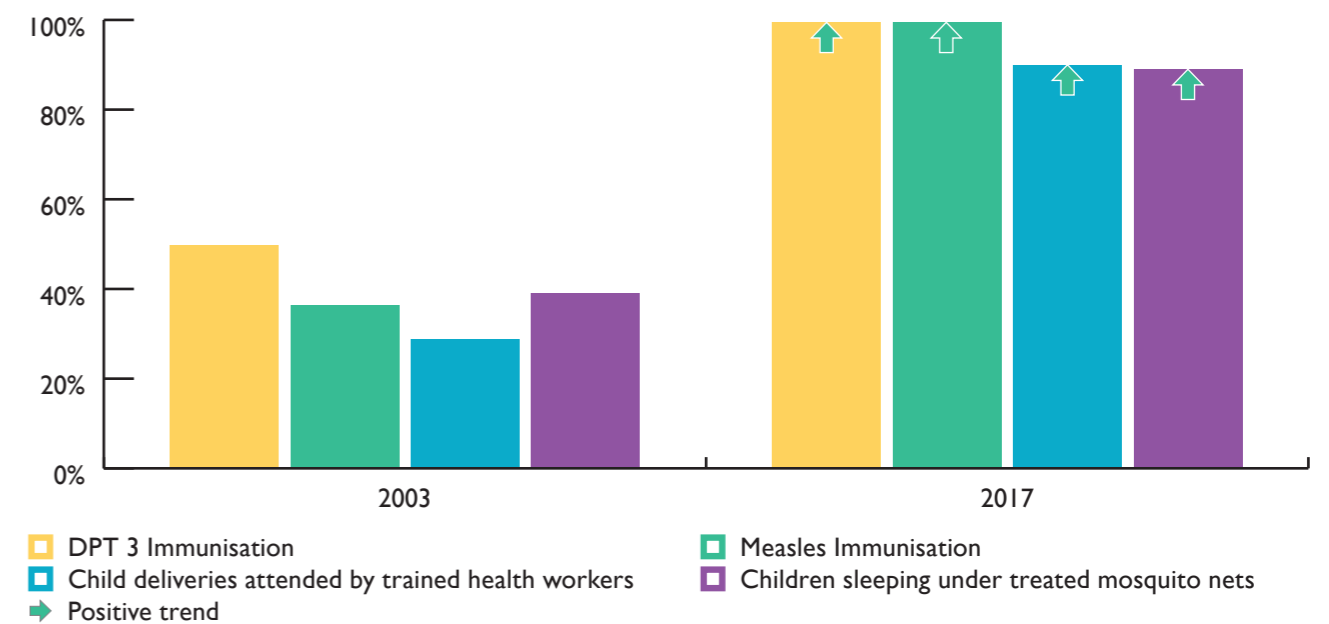
Lufwanyama ADP, Zambia

Lufwanyama’s evaluation found an increase in immunisations and pointed to the project’s mass awareness campaigns, and support for health facilities’ logistics in the communities as contributing factors.

The number of women getting trained help during childbirth also increased. This was attributed to the project’s work on equipping community-

based volunteers to mobilise, register and track pregnant women, and encouraging them to register for antenatal care services and deliver in a health facility. The increase in the use of mosquito nets is positive, however the fever prevalence (43%) could indicate that malaria was high. The evaluation recommended further investigation into household hygiene and sanitation practices and consistent use of mosquito nets.

FIGURE 7: Health improvements in Lufwanyama ADP



¹⁵Evaluation of the Southern African El Niño Emergency Response (SAENER) Malawi, Mozambique and Zimbabwe 2017

¹⁶p74. Evaluation of the Southern African El Niño Emergency Response, 2017

¹⁷www.wvi.org/nutrition/project-models/positive-deviancehearth

¹⁸www.wvi.org/local-advocacy/publication/citizen-voice-and-action-project-model

¹⁹Under-5 mortality rate – the number of children who die before reaching 5 years old. <https://data.worldbank.org/indicator/SH.DYN.MORT?end=2016&locations=BD&start=1960&view=chart>

²⁰Positive change in line with other positive trends in health indicators is expected. However, the sample size of 51 breastfeeding mothers in this study is considered small, which should be taken into consideration. UNICEF estimates of exclusive breastfeeding range from 36-64% for Bangladesh. <https://data.unicef.org/topic/nutrition/infant-and-young-child-feeding/>



Water, sanitation and hygiene

Our 2016 *Impact Report* concluded the need for better sustainability in sanitation, and the two-year UNICEF-funded urban Water, Sanitation and Hygiene (WASH) Project in Ethiopia which ended this year is a good example of this. The final report stated that, by the time it closed this year, 90% of residents were able to construct and maintain their own latrines. This was achieved through the Community-Led Total Sanitation and Hygiene (CLTS) approach,²¹ which ‘triggers’ communities towards improved practices related to sanitation and handwashing at key times. More than 193,000 people were targeted through this project. The report notes the presence of the water and sanitation committees but highlights the importance of dialogue between stakeholders. 1,417 representatives of community groups, service providers and government officials participated in 153 discussions.

WASH activities were also promoted in 81 schools, through School WASH clubs. The clubs used drama, role plays, songs and poetry to spread the hygiene message, leading to students

from all 81 schools now using latrines rather than open defecation, as used to be common practice. In addition, 21 health centres, 10 marketplaces and seven bus stops were declared Open Defecation Free (ODF) areas.

Particular emphasis was given to Menstrual Hygiene Management (MHM) in schools. This included developing educational materials, counselling girls, making reusable sanitary pads, organising MHM clubs, writing poems and performing dramas. These campaigns have reached 27,133 children in 49 schools and girls’ average absence has reduced from five days a month to one day a month. This area of hygiene is often neglected in WASH programming, and World Vision Ethiopia is working purposefully to address this issue in all of its WASH projects.

“Open defecation refers to the practice whereby people go out in fields, bushes, forests, open bodies of water, or other open spaces rather than using the toilet to defecate.” – UNICEF

ABOVE: Children are enjoying the new solar-powered drinking water sources in their village in Afghanistan. © 2017 World Vision

Sanitation supports livelihoods

A baseline survey done by UNICEF in November 2014 showed that only 3% of households in the project area Adishou made use of latrines or toilets. Further, only 50% of urban households in Adishou used improved private latrines and a significant number (17%) still relied on open defecation.

To help improve this situation World Vision and UNICEF formed a 10-member small enterprise, with the purpose of improving the health of children and the community. At the same time, it created jobs for unemployed youth and women in waste management and sanitation marketing. The enterprise combined public and private operators who mainly worked on collecting solid waste from households and business establishments, and artisans who produced slabs for latrines. The local government provided the enterprise with two carts for rubbish collection and carries out supportive supervision. Workshop space was also given to the group with start-up seed money of 40,000 Birr (approximately \$1,800 USD).

World Vision and UNICEF built the capacity of the enterprise through safety protocol and slab production training, and by providing self-protection materials like gloves and face masks.

Members of the enterprise collect solid waste early in the morning and produce latrines slabs in the afternoon which are sold to the public. They reach approximately 40 households every day. Each household pays 5 Birr (\$0.35 USD) while hotels and business centres pay 15 Birr (\$0.67 USD) monthly. The fee rates were approved by the town cabinet.



“We now have a cleaner town and I have a steady monthly income,” notes Birri Hagos, a mother of two daughters, who is a member of the small enterprise.

Birri and the other members are paid a monthly salary of 500 Birr (\$23) from their business and they save the rest of the money for further expansion of the business.

“It supplements my income to send my children to school, provide them with better food and buy school items.”

– Birri, Adishou

ABOVE: Birri Hagos, leader of the artisan group, cutting bars for latrines slab production. © 2017 World Vision

²¹Communities are helped to conduct their own appraisal and analysis of open defecation (OD) and take their own action to become open defecation free. www.communityledtotalsanitation.org/page/clts-approach

Other evidence from WASH projects included...

Sangailu Area Rehabilitation Programme, Kenya

This included building boreholes, installing water tanks in schools and promoting better hygiene. The amount of people able to access an improved water source increased from 8.6% in 2013 to 56% in 2017. Unfortunately, there was less progress in hygiene behaviour. For example, the proportion of caregivers who regularly wash their hands with soap at critical times was 10.9% at baseline and not significantly different after the programme. Recommendations included: investigating how to overcome the financial barriers to latrine construction; training and using community health workers and volunteers in promoting hygiene and sanitation; and adopting Community-Led Total Sanitation – aiming towards ODF communities. Whilst the impact in hygiene and sanitation was limited: best practices from the project include the linkage between the water user groups (made up of community members) and the health care system; and the maintenance of water points, managed by water user committees and paid for by farmers who use the water for livestock.

Lufwanyama ADP, Zambia

This project provided access to clean water by installing safe water points. 177,445 people gained access to clean water in the last three years of the programme (2015-17) through large scale borehole provision and 82,605 people have improved sanitation. Unfortunately, the report noted that only 27% of respondents report washing their hands after using the toilet and relatively high levels of diarrhoea (29%) remain, despite community level campaigns to promote good hygiene practices. Only 39% of water sources have a functional water source committee, which could explain the partial success in WASH.

Better Health for Families and School Children project, Cambodia

This three-year project aimed to: improve access to safe, year-round, drinking water sources in 19 villages; improve health and hygiene; and improve access to sanitation facilities at schools. We helped to provide school ponds, a shallow well, hand washing stations and latrines in schools; two pipe water treatment systems; rain water tanks, jars and filters in schools; and hygiene awareness. It is not possible to directly compare the baseline figures but 93% of the students we spoke with, said they now have enough drinking water all year round at their primary schools. This indicates an improvement from the result of an evaluation report (of the wider area programme) conducted in 2014 which showed that six out of 17 primary schools did not have water in the dry season. 85% of students said they use soap to wash their hands and all the students can now use latrines at school.

The evaluation concluded that the provision of WASH hardware has been a success but there has been less progress on promoting ownership and improving WASH skills. Some wells were not functioning. Only 149 out of the target 584 households were connected to the main water pipeline (by the end of January 2017) due to a reluctance to pay. The evaluation noted that most of the water management committees did not have strong leadership and therefore were not able to fully carry out their role of promoting good WASH practices.

BELOW: “While I was carrying 60 litres of water on my shoulders, I sometimes slipped on the way home,” says Theary, 10, in Cambodia. Her family now has two water jars, a water filter and connection to a tank in their village. © 2017 World Vision



Learning and actions

Evidence this year (as in previous years) points positively to the effectiveness of community-based approaches such as PD Hearth, CVA and CLTS. Successful examples this year include the Ethiopia UNICEF urban WASH project and Sangailu Area Rehabilitation programme in Kenya, both of which promoted dialogue between community members and authorities, and cited this as a factor in their success.

In 2018 we will... continue to fund proven project models of health programming and learn from evidence on new approaches. At a wider organisational level, World Vision is investing in strengthening WASH programming to address the challenges noted in evaluations. We intend to complement the CLTS approach with the Designing for Behaviour Change framework, applying successful practices from the field of social and behavioural change. This approach means we can design projects to purposefully address the specific barriers and motivators identified in baseline research. World Vision Ethiopia is leading in this area, as well as recently strengthening its business model for sanitation marketing. We're also strengthening efforts to address the often-neglected area of menstrual hygiene, through developing a multi-sectoral framework

for Menstrual Hygiene Management. This brings together experts from WASH, health, education, gender and economic empowerment sectors from across the organisation.

Evidence from evaluations this year shows the importance of working comprehensively, in all parts of the health Theory of Change to achieve lasting change in child health. This may require integrating health and agriculture as recommended by the Lufwanyama ADP evaluation and demonstrated in the Zimbabwe Enterprise Project.

In 2018 we will... continue our support for integration across sectors to achieve comprehensive change in health and nutrition.

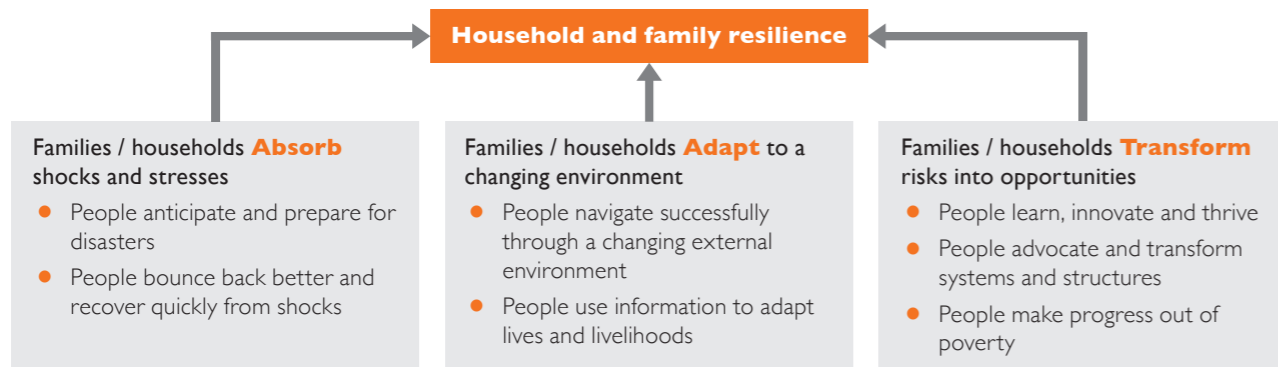
During our southern Africa El Niño response, communities received life-saving food assistance. However, the regional evaluation recommends a greater emphasis on household resilience in future climate-related disasters, to prevent devastating impacts on the most vulnerable children and families. (Please see Resilience and Livelihoods section for examples of this).

In 2018 we will... take opportunities to promote resilience as part of food-related emergency responses.

ABOVE: “Now I have enough food, my family won't be hungry anymore,” says Sreyov, 10, in Cambodia. © 2016 World Vision



Resilience and livelihoods



The evidence in the previous two chapters has again demonstrated the importance of households being able to withstand disaster and sustain improvements in child well-being. This may include maintaining agriculture and family income but also incorporating the need to prevent disasters and to adapt to cope with risks such as a changing climate. Global events this last year have continued to show the devastating impact of disasters, especially on the poorest and most vulnerable. Drought and the ongoing impact of El Niño continues to cause devastation in East Africa and a series of hurricanes have recently torn through the Caribbean. The examples in this section demonstrate how we seek to help families **Absorb** shocks and stresses caused by drought, flooding or any other hazard, **Adapt** to a changing climate and **Transform** the risks into opportunities as shown in the resilience Theory of Change above. During 2017 we supported 29 resilience projects across 23 countries. Many of these began in 2016 and 2017 and we'll follow their progress in future *Impact Reports*.

The Enhancing Agricultural Production Project, South Darfur

In Kubum, South Darfur, 75% of the population farm. Erratic rainfall, deteriorating soil fertility, traditional farming practices, recurring tribal conflicts and limited access to agricultural resources have resulted in low productivity and an average of four to five months of food deficit each year. The need to Absorb, Adapt and Transform is great.

The project was implemented over three years by World Vision Sudan and aimed to improve the food security situation of vulnerable communities by: improving seed varieties for 540 farmers and forming a farmers' research group; increased water harvesting, soil and water conservation techniques, conservation agriculture and new irrigation techniques; training agricultural support workers and constructing 10 hand-dug wells for irrigation farming.

The 2017 evaluation found that the project had made a significant contribution to improving food

FIGURE 8: World Vision's resilience Theory of Change

PREVIOUS PAGE: Swosthani, 14, (centre) and her children's club in Nepal, have learnt what to do in case of an earthquake. We've trained students in disaster preparedness, so they're well-equipped and not scared anymore. © 2017 Stefanie Glinski / World Vision

TOP LEFT: Arafa group in South Darfur leave their vegetable farm after a day's work. "The group vegetable farm has been a reliable source of income. The benefits are tangible," Munira says. © 2017 Lucy Murunga / World Vision

TOP RIGHT: Okra from the Arafa vegetable group farm. © 2017 Lucy Murunga / World Vision

security for the vulnerable communities of Kubum. The majority of farmers (84.5%) reported that their productivity had improved as a result of participating in the project. All this despite inadequate rainfall, inadequate supervision of some interventions by the Ministry of Agriculture staff, and a delayed start to the project.

Families could cultivate more land in this year (58.6% more on average), due in part to better rainfall. This had a large effect on the amount of groundnuts produced with average groundnut production increasing from 23.6kg to 301.7kg. One community farmer told us:

"I planted the same quantity of the improved groundnut seed variety provided by World Vision, as I used to plant in the same size of land. I harvested 15 bags of groundnut instead of the usual, 7-10 bags that I used to get with ordinary seeds".

Most participants reported that they now had enough food for their households for the whole year – a dramatic improvement from the previously reported four or five months of food deficit each year. The evaluation also found that dietary diversity was above average.



LEFT: A farmer in Malawi practices conservation agriculture. By preserving moisture in the soil his crops will fair better in drought periods. © 2017 Jason Garrett / World Vision

Ghoraghat ADP, Bangladesh

Community-Based Organisations (CBOs) have taken a lead in development activities in Ghoraghat. They operate as micro-finance institutions through continuous savings, providing low cost credit to thousands of members and undertaking economic projects like a tailoring business, pig rearing or decoration. Members of a CBO have average savings of \$54. More importantly, CBOs have funds for their children's education and health. These groups have proved themselves essential in the inclusion of the most vulnerable children in our programme areas. Refer to page 16 to see examples of the work of CBOs.

The average monthly household income stands at \$123. Households with a secondary source of income have increased from 18% to 66%. A greater diversity of income sources can protect households from shocks, such as drought or flooding, as

they'll still have some income even if one source is affected by a disaster. However, the proportion of households in extreme poverty has decreased only slightly from 18% in 2013. The presence of households in extreme poverty at evaluation underlines the need to focus interventions on the most vulnerable in the community.

Lufwanyama ADP, Zambia

Farmers had training and assistance on various income generation activities. This helps families adapt their livelihoods and move away from forms of employment which earn little income or food security compared to inputs. The 2017 household survey indicates that although qualitative evidence suggests activities such as cooperatives had benefitted their members, several indicators remain low. For example, only a fifth of households (20%) said they had an alternative source of income, with most households still solely dependent on crop production.

of water and pasture, livestock deaths and less food for the poorest households. To adapt to this change in context, the project focused on Cash for Work activities. These rehabilitate community infrastructure, such as water catchments, canals and feeder roads, and support families with cash payments. Other longer-term activities to build community resilience, including training and capacity building, agricultural materials and establishing Village Savings and Loans associations continued too, but more time and attention was given to the Cash for Work activities for this period due to the worsening drought.

to transform systems, enhance ability to adapt and become more gender sensitive and people-centred. From 2011 onwards, ACCRA in Uganda worked at the national level and then mainly in three local districts. The group engaged district government officials and civil society actors in a variety of activities. These included developing climate change indicators to be used by government at national and local level, to measure the impact of climate change adaptation activities; using a role playing exercise with local government officials to improve forward thinking; flexible governance at the local level; and working with the National Meteorological Office and district governments to produce simplified weather and climate information in local languages. The project also provided small-scale funding for community projects to build resilience and adapt to climate change, including agro-forestry and fuel efficient stoves, built in the community with local materials.

Africa Climate Change Resilience Alliance

World Vision is a member of the Africa Climate Change Resilience Alliance (ACCRA) consortium, and the ACCRA lead agency in Uganda. ACCRA started in 2009, initially as a research and capacity building project, focused on working with district level government

Partners in resilience



Somalia Resilience Programme

World Vision Somalia is the lead agency of the Somalia Resilience Programme (SomReP). The programme was set up by seven international NGOs in 2012 to develop longer-term programming, bridging emergency programming and development, and developing innovative livelihood approaches relevant to the Somali context. SomReP is currently implementing a three-year project funded by the European Union in south-western Somalia, and shows examples of all parts of the resilience Theory of Change.

The SomReP project faced significant challenges just as the project was getting underway in late 2016. An extreme drought gripped most of Somalia causing a worsening food crisis in rural areas. This followed consecutive seasons of poor rainfall and low river water levels, leading to near total crop failure, reduced rural employment opportunities, shortages

LEFT: This grandmother says the current drought that's hitting Somaliland is the worst she's seen. Many families have lost all their livestock, crops and their water sources. 700,000 people have been forced to leave their homes to search for help. © 2017 Mark Nonkes / World Vision



LEFT: Darius, a farmer in Uganda, practices Farmer Managed Natural Regeneration. This method promotes trees' new growth, quickly and naturally. © 2016 Jason Garrett / World Vision

Transforming society

Establishing Vulnerable People's Rights and Access to Social Safety Nets, Bangladesh

Establishing Vulnerable People's Rights and Access to Social Safety Nets (EVPRA) in Bangladesh is an ongoing three-year project funded by the European Union and an example of transforming for resilience (see theory of change). The project aims to build the capacity of the civil society groups including community-based organisations (CBOs) to support the most vulnerable to access their rights and entitlements under the law. The project has just finished a training phase and will be measuring the capacity of organisations and their effectiveness.

Santona Hasda, a CBO member said:

“I am living hand-to-mouth, my husband is a day labourer and we have also two daughters. This year, I first got the VGF [Vulnerable Group Feeding] card from the government and received eight kilogrammes of rice to support my family. As a result, I saved the money for 8kgs of rice and I bought a duck. I produced ten ducklings. Last week, I sold three ducks and bought warm clothes for my two daughters.”

Children learn resilience

In Jong ADP, Sierra Leone, 15 new adult savings groups formed in 2017 to help families meet their children's needs. Savings Groups (SG) have become the most affordable source of borrowing funds for those community members who may wish to undertake small-scale enterprise development schemes and to meet their domestic and other household needs. Petty trading, payment of school fees, medical bills and home constructions have been achieved by members of SGs and such positive impacts have been felt by everyone, including children. Three

groups of children have also set up their own savings groups through their children's clubs. Memunatu, 12, (pictured below) in class six is a kids' club member and the chairperson of Amuwana SG which means 'let's become members'. They are proud of contributions they have made to their own school materials including books, uniforms, shoes and fees.

“My membership of Amuwana SG has improved my social skills. As Chairperson, I am always dressed neatly to lead meetings and settle minor disputes among members. The group respects my leadership style and this is encouraging me to become bold and outspoken.”

– Memunatu, 12

BELOW: Memunatu, 12, and other members of the Amuwana child savings club in Sierra Leone.
© 2017 World Vision

BOTTOM: Citizens celebrating international Right to Information Day in Bangladesh. This recognises the right of all to access information about their entitlements under the law.
© 2016 World Vision



Learning and actions

We focus most of our resilience activities around livelihoods programmes, as shocks and stresses – such as floods and droughts and the impact of climate change – can have a significant impact on livelihoods and income, keeping people in poverty. However, as has been shown in this report, shocks and stresses can affect any sector of our programming and so all projects need to understand and recognise the risks they face in the context around them. Programmes must build in measures to mitigate or reduce those risks.

This work is especially challenging because of the multitude of factors facing the poorest families.

In 2018 we will... continue to support project models across sectors which enable families and communities to: absorb shocks and stresses caused by drought, flooding or any other hazard;

adapt to a changing climate; and transform the risks into opportunities, in the poorest countries.

As can be seen, families most at risk from crises need improved agriculture production and need to be empowered to both produce diverse nutritious foods and increase their income. At an organisational level, we're initiating an Ultra-Poor Graduation Approach. This is where the poorest and most risk averse households are offered assistance in a way which works for them rather than expecting them to keep up with households that have more time and resources. We'll implement this alongside the PD Hearth nutrition approach.

In 2018 we will... continue to support project models across sectors which ensure the most vulnerable benefit from resilience and livelihood programming.

ABOVE: At 16, Sabnam (pictured with her 6-year-old niece) is the sole earner for her family. She took over her elderly mother's trade – Karchupi embroidery – but couldn't earn enough to meet the family's needs. Our Empower Working Children Project in Bangladesh has given Sabnam training in tailoring and a sewing machine. Now she's providing well for the family and paying off their loans. When their finances are stable she's determined to go back to school.
© 2017 World Vision

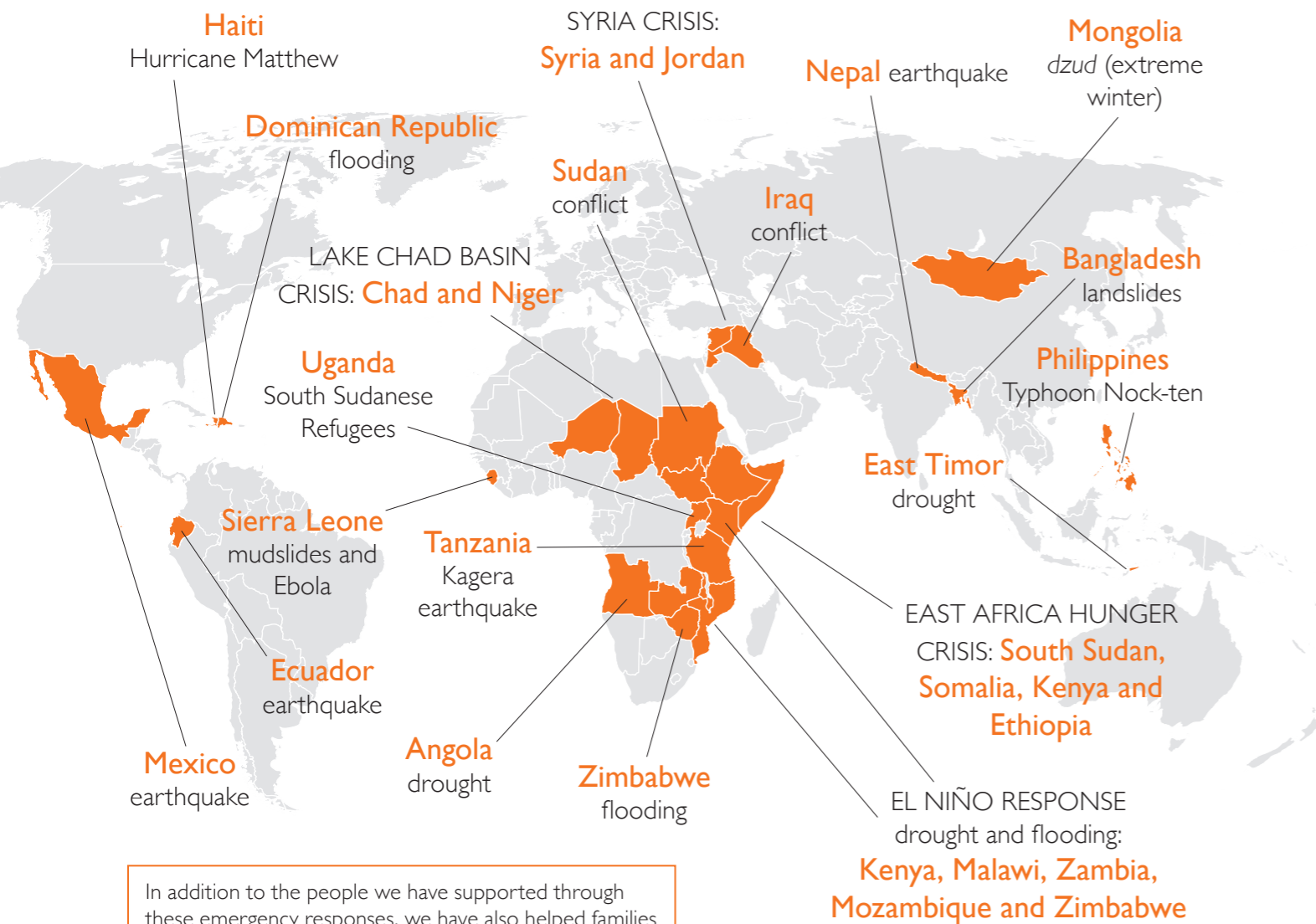


Emergencies

In 2017 our emergency responses helped

2,900,000
people in **30 countries**

1,800,000
of them were children



In addition to the people we have supported through these emergency responses, we have also helped families in **Chad, Iraq, Kenya, Malawi, Niger, Somalia, Sudan, Central African Republic and Democratic Republic of Congo** with food assistance with funding from the World Food Programme.

FIGURE 9: Emergency responses funded by World Vision UK in 2017

PREVIOUS PAGE: Nimo and her two children Abdi, 6, and Selma, 5, watering the fields. Their green vegetable patch is a rare sight in Somalia's dry and dusty landscape.
© 2017 World Vision

In June 2017 the United Nations estimated that a record 141 million people across 37 countries in the world needed humanitarian assistance, while coordinated plans were only one quarter funded.²² NGOs with expertise in disaster response are needed now more than ever.

There were 66 World Vision UK-funded emergency projects in 2017, responding to 21 disasters across 30 countries, including earthquake, typhoon, flooding, drought, emergencies caused by conflict and displacement. Activities in these responses included emergency shelters and house repair, cash transfers, distributing food and non-food items, water and sanitation, emergency nutrition, longer-term farming and livelihoods support and child friendly spaces. From a review of 28 emergency project completion reports, our projects met their objectives by 89%. The main reasons for not meeting all project objectives include breakages in the food supply pipeline from WFP, and unavoidable delays such as renewed insecurity making movement difficult or the challenge of recruiting the right staff at the right time. In one instance, a report stated that the time allocated for the completion of activities was unrealistic. In the Health section we



discuss the delay in an emergency situation being declared by the government in Mozambique (page 22). We know from the Core Humanitarian Standard (CHS) assessment conducted by World Vision Zimbabwe that problems with timeliness are keenly felt by beneficiaries.

ABOVE: World Vision Haiti staff assess the damage from Hurricane Matthew.
© 2016 Guy Vital-Herne / World Vision

This year we have focussed on reviewing the use of cash in emergency responses given the growth of its use in humanitarian emergencies across the world.

Using cash in emergencies

In just under 20% of humanitarian emergency projects this year, we provided financial assistance. This is increasingly recognised as adding value to more traditional interventions, such as providing food and items such as blankets cooking utensils or fuel.²³ Financial assistance includes giving cash, either cash-in-hand or through mobile phone banking, but can also be the provision of grants and vouchers. The theory is that providing cash enables people to gain control over

their situation and spend it where and when is most appropriate for their specific circumstance. Other benefits of cash transfer programmes are a trickle-down effect. Local markets are boosted and it is potentially more cost efficient as it cuts costs of storing and transporting goods.²⁴ Cash transfers can be provided unconditionally or conditionally, the latter could require people to attend trainings, or work on community projects such as classroom construction.

²²<https://reliefweb.int/report/world/humanitarian-appeal-2017-climbs-235-billion-record-number-people-need-humanitarian>

²³OCHA (n.d.) www.unocha.org/legacy/philippines/about-ocha-philippines/cash-transfer-programming

²⁴Professionals in Humanitarian Assistance and Protection (2014) <https://phap.org/thematic-notes/2014/march/cash-transfer-programming-benefits-and-risks>



Our cash transfer activities in 2017 took the form of hard-cash, mobile money transfers, loans and vouchers and were generally part of other assistance programmes, meaning that people who received financial assistance also received in-kind goods (including food), training on business skills or agricultural skills, or in topics such as hygiene and nutrition.

Cash, vouchers and mobile money transfers

Receiving cash, vouchers or mobile money transfers has given people greater control over their own recovery and preparing themselves for the future. For example, in Bangladesh after a landslide, and during the extreme winter emergency in Mongolia, people received money by opening a bank account which was itself a benefit beyond the emergency support. In South Sudan, people displaced by the conflict received food vouchers, which they could exchange with traders for items such as meat, vegetables and fruit.

In other parts of South Sudan, we provided both Cash for Assets (CFA) and Food for Assets (FFA) programmes (with support from WFP). People received food or cash when they took part in agriculture and fish farming. The evaluation report²⁵ showed 95.2% of households in the CFA projects consumed at least two meals per day compared to 89.6% of the families that received food through the general

food distribution. The CFA programme on agricultural techniques and fish farming helped people to produce surplus food. Selling the surplus brought in income that people used to cover other basic household needs, and contributed to greater self-sufficiency and building their resilience to future disasters.

In Zimbabwe, a cash transfer programme funded by DFID (2016-17) and implemented alongside Care International, used mobile phones to help vulnerable households in the wake of El Niño. The mobile money transfer allowed people to draw cash out, pay in participating shops, receive money from other parties as well as save money into their account. The evaluation of this project found that 29.2% of children and 18.6% of adults were eating more often. 21.7% reported a decrease in negative coping mechanisms to survive, for example selling a productive asset such as a cow, while 87.5% reported their food needs were met. One-off cash transfers of \$40-60 (depending on household size) were used to pay school fees, uniforms and school payment debts. So, children could continue in education during the emergency response. It was also used to buy agricultural inputs. The regional evaluation report of our El Niño crisis response in southern Africa concluded that the focus on increased food production was critical in strengthening food security.

TOP LEFT: Santino receives her monthly allowance from our Cash For Training project (supported by WFP). The project helps vulnerable families in South Sudan to afford basic goods and services, particularly food. © 2017 Rose Ogola / World Vision

TOP RIGHT: Syrian mum, Souad, has received monthly payments to help her family survive in Lebanon. "I was so happy, as if I was higher and being lifted out of my trouble," she says. © 2016 World Vision

Loans and micro-finance

During the recovery phases, following disasters such as El Niño (in Kenya, Malawi and Zambia) and the Ebola outbreak in Sierra Leone, World Vision and other agencies²⁶ together with Vision Fund²⁷ and funded by DFID, have provided cash, through micro-finance institutions (MFIs). Following disasters, MFIs often stop providing credit due to fear of loan-defaulting. However, this is also the time that people affected by the disaster need access to credit to restore their livelihoods without having to sell off their assets. Providing MFIs with capital enabled them to lend (at flexible terms) to petty traders²⁸ in Sierra Leone and farmers in Kenya, Malawi and Zambia. The evaluation report for the El Niño project²⁹ shows that these loans were invested in service provision businesses, production of agricultural goods, fishing, animal husbandry and trade. The period following the El Niño phenomenon had six associated aftershocks (including floods, pests and diseases). Yet, 89% of the farmers who took loans at least partially recovered their business and 24% had completely recovered. Of note was the fact that loan repayment following the disaster outperformed loan repayment in 'normal' times with 97% of the loans repaid fully and on-time. The

evaluation report also found that MFIs had increased their portfolio and, in this case, were able to reach out to the poorest families.

Access to flexible loan terms allowed petty traders in Sierra Leone to pay off debts accrued during the Ebola outbreak, restock their businesses and in some cases, expand their businesses. An evaluation report of the project³⁰ found 84% of petty traders who took these loans increased the income from their businesses. In addition petty traders were also provided with small grants which were used for clearing household debts, such as school fees and private lending, (although some petty traders used part of the loan to repay these debts). While we provided training on business and financial management, this training was provided only to leaders in the communities and not directly to the petty traders. Neither did it cover the full spectrum of business and financial management. The evaluation report recommended including petty traders in future programming. This project supporting MFIs did not have an impact on people in rural areas as this group is hard to reach for MFIs. The evaluation report suggests that, in rural contexts, savings groups could take on a similar role to MFIs in future emergencies.



LEFT: In Zimbabwe, this community started a chicken project – using the cash from DFID's cash transfer programme – to help families cope with poor harvests. © 2017 Tawanda Makawa / World Vision

²⁶Catholic Relief Services, BRAC

²⁷www.visionfund.org/2070/about/how-we-are-different/

²⁸Petty traders are small scale traders such as shops or kiosks.

²⁹Summary report on the VisionFund "Recovery Lending in Fragile African States affected by El Niño" Project: November 2015 to June 2017 www.visionfund.org/library/client/documents/Recovery%20Lending%20in%20Africa_FINALREPORT.pdf

³⁰Rebuilding Livelihoods for Ebola Affected petty traders. 2017 Evaluation report.

²⁵End of Project Evaluation of Food and Nutrition Assistance for Vulnerable Populations in South Sudan Phase XV (April 2017)

Recipient selection

The projects used different approaches to select beneficiaries. In some cases, it's simple to identify who has been affected by an emergency. For example, people affected by a landslide in Bangladesh were eligible for a cash transfer if their house had collapsed or was damaged. But deciding which herders in Mongolia would receive help was more challenging. In these cases, eligibility criteria for cash transfers were decided which could then be used with local authorities and partners.

Unfortunately, local authority participation is not always appreciated. In Sierra Leone, people feared political bias in the choice of who received grants and accessed loans, though the evaluation did not report this. Similarly, projects supported by the WFP were felt by locals to not always include some of the most vulnerable populations in the refugee camps. There isn't specific evidence available in this case beyond people's perceptions, though the issue was discussed with the relevant WFP country office. These instances underline the need for complaints mechanisms to deal with issues and enable good communication throughout the projects.

The DFID cash transfer programme in Zimbabwe involved community members when determining the criteria for vulnerable households—which constitutes best practice. Further discussions with leaders and community members resulted in women receiving the cash transfer, as men themselves suggested women would be better stewards of the cash. The evaluation found that, as a result, women and men reported improved equity in the household and joint decision-making in how to spend the money. Project staff had identified the risk of gender-based violence (GBV) as a result of shifting power dynamics in households, so Gender

and Accountability Focal (GAF) Persons were selected by communities. These people were trained in understanding GBV, passing on this understanding and in ensuring people knew how to complain. Reports from South Sudan confirm that cash programmes can contribute to GBV. And our Cash for Assets project in Sudan reported increased cases of GBV, as a result of this project.

Whilst emergency projects have a good rate of success in terms of objectives achieved, assessing the extent to which the most vulnerable were beneficiaries, and how they were affected, is of the utmost importance. This is covered in the Core Humanitarian Standard (page 44).

Other challenges in cash transfers

Various issues arose when monitoring the cash projects: The Zimbabwe cash transfer project experienced some issues when recipients didn't understand how mobile phones worked. In Mongolia, some of the beneficiaries could not access assistance due to distances they had to travel to collect money or access credit. In Mongolia, cash was transferred into bank accounts during the birthing season. As livestock was weaker than in other years, herders had to attend to their livestock and could not travel to trading centres (up to 43 miles away) to access their money. Most of the cash assistance included some form of market monitoring to assess whether commodities continued to be available and to check inflation, so that the cash transfer amount could be adjusted. In Zimbabwe for example, where prices rose, the cash transfer amount was increased. The acute cash shortage in Zimbabwe meant that people weren't able to access the amount they needed. People quickly adopted a different method which unfortunately incurred a transfer fee for each payment.



Learning and actions

Cash provides people with an opportunity to address their particular household needs and increases control over how they do it. Where cash transfers are done through banks or mobile phone technology, people continue to have access to further opportunities, including accessing loans, which may increase their resilience. Each approach to financial assistance has advantages and disadvantages for individuals. The design of these programmes needs robust analysis to determine which approach is most relevant to the context. Specific learnings include the following:

- Selecting recipients in any financial assistance programme needs support from an array of groups including community members and leaders, local authorities and CBOs to ensure assistance is offered to those who need it the most.

- MFIs should be involved where loans are identified as the best approach. This ensures credit remains available to the wider public, so the cost of borrowing stays low.
- Financial assistance should not be implemented as a stand-alone activity, but should be supported by training, for example budgeting and business skills. Cash assistance can serve as a springboard to further development.
- Monitoring systems, such as beneficiary feedback and complaints need to be robust and should include frequent market monitoring on goods available as well as pricing and monitoring of Gender Based Violence issues.

In 2018 we will... apply this learning in future responses.

ABOVE: These recent arrivals in Uganda have fled conflict in South Sudan. 125,000 people now live in Imvepi refugee camp. Children and families are arriving with just the clothes on their backs. Malnutrition rates among refugees are alarming. We've set up Child Friendly Spaces in five of Uganda's 14 refugee settlements. Children here are assessed for their psychosocial needs and referred to specialists if they need advanced intervention.
© 2017 Paul Wu / World Vision

Accountability

Core Humanitarian STANDARD



World Vision has a continued commitment to accountability. Last year we reported setting up and piloting Community Feedback and Response Mechanisms. Work continues to ensure increasing numbers of programmes are listening to feedback from beneficiaries to improve our work.

Listening to beneficiaries is also part of the Core Humanitarian Standard (CHS) which sets out what “good enough” quality in humanitarian assistance means. The World Vision Partnership is committed to the CHS, prioritising our national offices responding to the

biggest emergencies. We contributed to this global effort in 2017 by leading field work for the CHS process in the World Vision Zimbabwe national office. During 2015-17, World Vision Zimbabwe implemented part of a regional programme to address the needs of drought-affected communities across Southern Africa.

The assessment of this programme revealed that the emergency responses are particularly strong in the areas of coordinating with others and in using good information to design projects appropriate and relevant to community needs. The main area for improvement,

FIGURE 10: The Core Humanitarian Standard on Quality and Accountability (CHS) sets out nine commitments that aim to improve the quality and effectiveness of humanitarian response assistance.

according to community members was to increase the timeliness of response. Delays are mostly due to organisational and donor processes. They include the official declaration of an emergency, proposal submissions and awarding of donor grants. The delay can seriously damage the resilience of communities. The assessment also indicated that, whilst setting up beneficiary feedback and complaints mechanisms is the norm for World Vision Zimbabwe, there is a need to continually foster an environment where communities feel able to provide feedback on sensitive issues such as staff behaviour.

Communicating with communities in Bangladesh

Providing information is part of the Core Humanitarian Standard. As a member of the Communicating with Disaster-Affected Communities (CDAC) network, we host the network’s Disaster and Emergencies Preparedness Programme (DEPP) funded by DFID.³¹ The project aims to improve the delivery of humanitarian assistance through improved two-way communication with disaster-affected populations. For example, a succession of emergencies in Bangladesh has seen communication incorporated into national response interventions. The Bangladesh Working Group – ‘Shongjog’ – delivered early warning



messaging to over 300,000 people through social media in the lead up to Cyclone Mora. Early evidence shows that we’re already improving the way the humanitarian sector communicates with people affected by disasters.

ABOVE: At a distribution centre for refugees from Myanmar, a system of three boxes with different expressions, is a fast, simple and easy way of getting feedback. Men and women are given different coloured chits and after receiving aid, they drop it in one of the three boxes. Both these votes and helpdesks are being used to learn what people think about the distribution process and the materials they’re receiving.
© 2017 Annila Harris / World Vision

Learning and actions

Evaluations of our work and the learning from beneficiary feedback shows the value of assessing the extent to which we meet the Core Humanitarian Standard in all respects.

In 2018 we will... continue to support the implementation of the Core Humanitarian Standard in national offices dealing with the biggest emergencies. We will also continue

to build the capacity of staff both in the UK and overseas to ensure that accountability is practiced and included in all projects. We will also be including more Beneficiary Feedback Mechanisms in our long-term programming and we’re working on child friendly feedback mechanisms and taking steps to ensure we hear feedback from the most vulnerable.

³¹An independent evaluation of the project will be published in early 2018. To find out more about this project please visit www.cdacnetwork.org

Faith and development

As mentioned in the introduction, our partnership with the church and other faith groups is especially important in relation to the role that faith communities can – and do – play in development and humanitarian response. An example from this year's evidence is in the Channels of Hope Initiative within Zimbabwe's IGATE project page 11. The IGATE evaluation

report stated that churches in the project under Channels of Hope were regarded as: **“progressive in promoting girls’ education through such things as prayers for children’s education, looking for scholarships to support girl’s education, and construction of schools, some of which are for girls only.”**

Educating the church to educate girls – Alfred Mawoneke

“I am a village head in this community and also a member of the Johanne Marange Apostolic church. When IGATE came and introduced the project to local authorities, the councillor in my area selected me for training to become a facilitator. In this role I educate other church members on the importance of education and the need to respect and observe children’s rights. This started after attending a workshop in which we were taught about early marriages; this was really an eye opener for me. I began to realise how as a church we have perpetuated poverty through this practice. A lot of children were married off at a very young age, 10- and 11-year-olds... girls were largely not valued at all. As an individual, I never married off any of my children, however, collectively as a church, I came to realise that by condoning such acts we had no respect for girls at all. Through the training it dawned on me that when a girl child is married off, it is the end of her education and any hope for a better future. With this new knowledge I came back to my fellow



congregants. Although I wholly embraced the teachings, it remains a difficult task to undo decades of traditions and practices. But, we take it one step at a time and subtle changes are noticeable.”

ABOVE: Alfred Mawoneke a church leader, helps others understand the importance of educating girls. He’s actively promoting equality within his congregation and the wider community.
© 2016 World Vision

This financial year we have also been part of several exciting initiatives that demonstrate new ways of working in partnership. In the Central African Republic we collaborate with Islamic Relief Worldwide, Aegis Trust and Catholic Relief Service. Together we’re supporting a cross-faith effort for peace at national and local levels. It is led by three religious leaders; a Catholic Cardinal, a Muslim Imam and a Protestant Pastor. In June 2017 we jointly led an inter-faith research project to document this work. This research project will enable our CAR office to better understand their

engagement with faith leaders and inform future programming.

Working with our national office colleagues, we conducted a faith mapping assessment in South Sudan. We interviewed 75 senior church and ecumenical leaders, inter-faith leaders, faith-based NGOs, donors, government, UN and World Vision South Sudan staff. The focus was on developing a detailed picture of the current state of the faith community, their contribution to building peace, and the potential to partner with them.

BELOW: In the shade of a tree outside their house, Kamama, 5, and her mother, Julia sing a song together. “Lead me, Jesus. I cannot make it alone...” Julia says her faith and her church have given her the strength to go on since her husband died in 2015. Their community is working with one of our water projects in Kenya, bringing a water supply to about 800 households as well as schools, churches and a health centre.
© 2016 Jon Warren / World Vision

Learning and actions

As we move into our new strategy, one of our strategic imperatives is to “Build on our leadership in faith and development in an inter-faith world”.

In 2018 we will... Gather an evidence base of the impact of faith and

development approaches for reaching the most vulnerable; continue as part of networks and alliances with other faith and inter-faith partners (such as the above examples); and integrate faith and development into our own programmes and policy.



Quality of evidence

This year, the majority of programmes achieved minimum standard. Our counterpart colleagues in the World Vision Germany office peer reviewed two evaluations at random. Their scores for Lufwanyama (36) and IGATE (65) were similar to ours, indicating that we're using the tool in a fair and consistent way.

The scores across the five BOND review categories in 2017 (see Figure 11) show that the strongest areas were again appropriateness and, to a lesser extent, transparency. The methods we use in our evaluations are appropriate and we include positive and negative evidence. The weakest areas were

voice and inclusion, triangulation and contribution. The reasons for low scores in these areas include, not consistently presenting the voices of the respondents in the evidence, not having a baseline or counterfactual to compare results to and failing to investigate and present the reasons for any change as far as possible. Reports with lower scores are less valuable in helping us to learn from programme findings.

We have found that, in many instances, evaluations are carried out by consultants who do not prioritise all BOND criteria equally.

	Country	Project	Total
1	Bangladesh	Ghoraghat ADP	48
2	Zambia	Lufwanyama ADP	39 (WVG 36)
3	Sierra Leone	Tegloma ADP	37
4	Kenya	Sangailu Area Rehabilitation Programme	39
5	Cambodia	Better health for families and school children	48
6	Sudan	Enhancing agricultural production in Kubum South Darfur	54
7	Mozambique	Emergency multi-sector response to El Niño-affected communities	38
8	Zimbabwe	IGATE (Improving Girls' Access to Education through Transforming Education)	65 (WVG 65)
9	Malawi	Mankhambira Sambizga Mwana Project (Tilitonse)	35
10	Bolivia	Khantati ADP ³²	38
11	Bolivia	Mosoj Punchay ADP ³²	39
12	Bolivia	Sacacca ADP ³²	37

0-34	Weak
35-54	Minimum
55-74	Good
75-80	Gold

³²Unfortunately it was not possible to include these reports in the sample for analysis in this report.

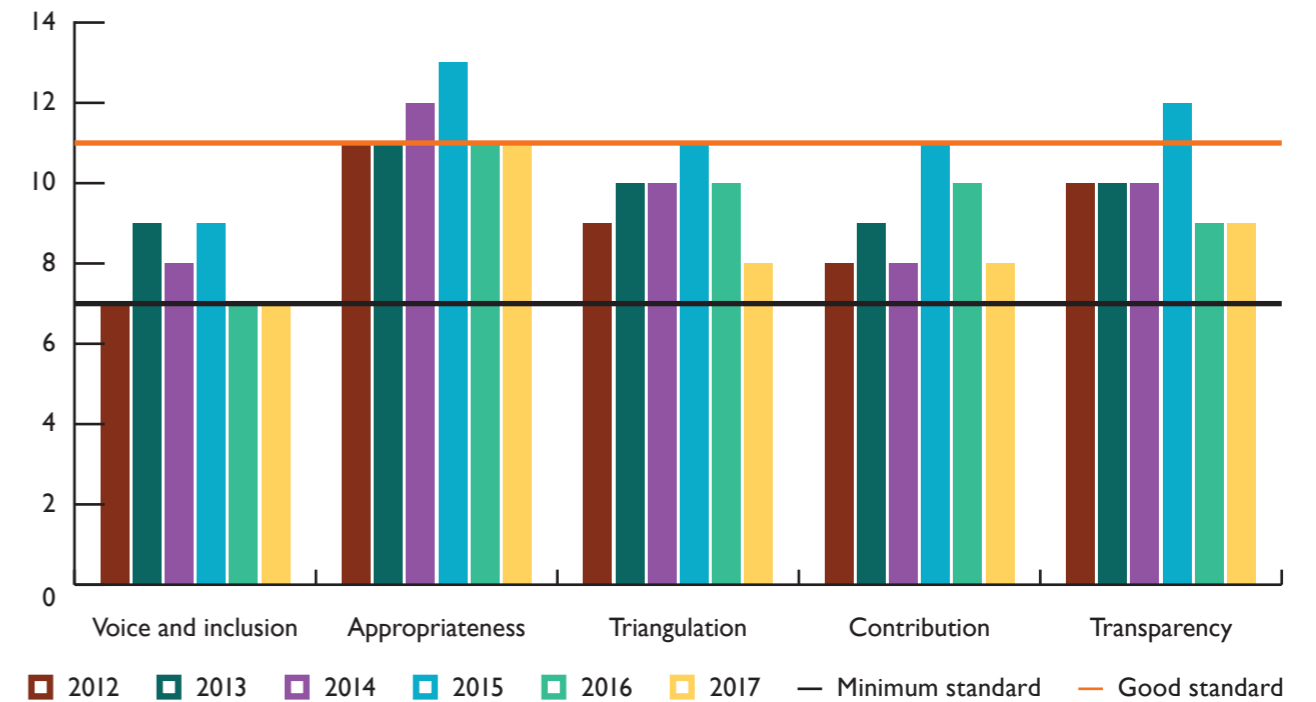


FIGURE 11: Evaluation report ratings across the five BOND principles

LEFT: Children in Bundi Area Programme, India, describe changes seen in their village and their hopes for the future. © 2017 Celia Donald / World Vision

Learning and actions

In 2018 we will... continue to influence the quality of evaluations using our evaluation policy which sets out expectations of consultants and evaluation teams.

Across the World Vision Partnership, national offices have shifted from individual ADP project design, to a standard approach across programmes. The design of national technical programmes using standardised project models and

indicators is then implemented in a way appropriate to the local context. It is expected that this should standardise good practices over time and enable better learning from evaluations as the best resources and support are given to evaluations supervised at a national level.

In 2018 we will... support the standardisation of evidence quality at national level.

Conclusions

We followed a process of assessing the evidence quality, and looking into what the messages were for us in 2017. It was harder this year due to a lack of project evaluations measuring the same indicators, but we believe we have extracted some key learnings from the evidence.

World Vision UK-funded projects achieved their targets by 92%. When this is set alongside the fact that we funded 256 projects in 40 countries, this is considerable contribution

towards child well-being in many of the poorest countries in the world.

Our breadth numbers, looking at the scale of our interventions, showed that in 2017 we reached fewer people than in 2016, but we are continuing to deepen our work in the most fragile states. Our health programming – which includes food assistance in emergencies – continues to be the largest area of work and it’s likely that this will continue.

BELOW: “While I live, I will try hard to educate both my sons. I studied till Grade 10 and then became a businessman in Myanmar. I want my children to study more than me,” says Asif. Asif’s family have received a food relief kit as part of our Myanmar-Bangladesh Relief Response. © 2017 World Vision



Our strengths

Integrating sectors to achieve comprehensive change in child well-being. Given the lack of specific funding sources for child protection, integrating sectors is increasingly important. We’re proud of our efforts to integrate sectors to work more comprehensively and sustainably, to achieve child well-being outcomes. Examples in this year’s evidence have included integrating health and agriculture, child protection and education, WASH and livelihoods, which traditionally stood alone. Integration has taken place because of learning from the evidence of programmes funded by World Vision UK and the wider Partnership.

Community-based approaches where there is a high degree of ownership and engagement with government service providers and other stakeholders. As in previous years, the evidence shows this is essential to achieving and sustaining child well-being outcomes. Examples given this year include the Ethiopia UNICEF urban WASH project, and Sangailu Area Rehabilitation programme in Kenya. Both promoted dialogue between community members and all relevant authorities and cited this as a factor in the success of their WASH

projects. The IGATE girls’ education project in Zimbabwe strengthened partnerships across government, NGOs and communities, and the Area Development Programmes in Ghoraghat (Bangladesh) and Lufwanyama (Zambia), both saw an improvement in health and education services and child well-being engagement with government stakeholders. Building a movement for change, including government and all other relevant stakeholders, will always be part of our programming.

Responding to emergencies we funded 66 emergency projects in 2017, responding to earthquakes, typhoons, flooding, drought, emergencies caused by conflict and displacement. From a review of 28 reports, emergency projects met 89% of their objectives. The review of evidence from cash programming shows that providing cash in emergencies rather than traditional aid such as food items provides affected people with control over how they address their needs. Where cash transfers are done through banks or mobile phone technology, affected people continue to have access to further opportunities, including accessing loans, which may increase their future resilience.

ABOVE: Nakuma, 7, and Kuma, 4, at the Protection of Civilians in Juba, South Sudan. Kuma’s mother, Nanjema is taking care of him plus several of her nieces and nephews, whose parents either died or sent them away to find safety. Although they live here, only three of them are registered, so they only receive food rations for three people. © 2017 Stefanie Glinski / World Vision

What we're working on

Evidence across this report and previous years' *Impact Reports* have shown that, for change to be sustainable, families and communities need to be **resilient** – with sufficient resources to care for children beyond the life of the programme. Whilst there were good examples of resilience programming, project evaluations often communicated a lack of confidence in sustaining change in the longer-term.

The evidence from our Most Vulnerable Child research showed that, while we do seek to work with the **most vulnerable children**, untested assumptions should not be made that we're always reaching these children.

Evaluation quality although all our evaluations met at least the minimum standard for quality, improvement continues to be a challenge as our national offices have inconsistent levels of capacity and access to consultants who value the same quality criteria as us.

RIGHT: 10-year-old Rosemary's family in Zambia, were among the most vulnerable in their area. Through our gift catalogue, they received five goats, and now they have 22. They've donated some goats to other vulnerable local families, as part of our Pass On project, and selling others has given them an income. The family invested the profit in improved corn seed and just harvested a bumper crop of corn. © 2017 Jon Warren / World Vision

In 2018, we will...

- Further develop our monitoring and evaluation systems to be able to more accurately identify, reach and listen to the most vulnerable children in our programmes.
- Look for opportunities to continue integration across sectors to ensure our projects and programmes are comprehensive – working in all areas to achieve change in children's well-being.
- Support technical approaches which make a difference to the long-term resilience of children, families and communities.
- Consider recommendations from our cash study when designing future projects.
- Continue to support compliance with the Core Humanitarian Standard in humanitarian emergencies and increase the use of beneficiary feedback mechanisms in all projects and programmes, to help us improve the quality of our work.
- Continue gathering evidence of the impact of faith and development approaches for reaching the most vulnerable.
- Continue to be part of networks and alliances with other faith and inter-faith partners. And continue integration of faith and development approaches into our own programmes and policy.
- We will also continue to influence the quality of evaluations using our evaluation policy which sets out expectations of consultants and evaluation teams, and support the standardisation of evidence quality at national level.



**“I have come that
they may have life
and have it to the full”**

John 10:10

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FRONT COVER: “I like school a lot because I get to learn a lot of different things and we are taught really well.” Shaima, 12, fled Syria when her village was bombed. The family came to a refugee camp in Jordan but, tragically, her sister died on the way.

© 2016 Alexander Whittle / World Vision **CONTENTS PAGE:** Nowsrin and her mother, Hamida, wait for floodwaters to recede in Balukhali Refugee Camp. More than 400,000 people have come to Bangladesh escaping violence in the Rakhine State, Myanmar – at least half are children. © 2017 Himaloy Joseph Mree / World Vision