

**WORLD VISION UK
IMPACT REPORT**

FOR YEAR ENDED 30 SEPTEMBER 2018



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World Vision UK is a member of the World Vision Partnership of almost **100 offices worldwide.**

World Vision is an international Christian, children's charity. By working together with people of all faiths and none – children, their communities, and supporters and partners, we believe that the lives of the world's most vulnerable children can be transformed.



Together we've impacted the lives of **over 200 million** vulnerable children by tackling the root causes of poverty.



Because of our community focussed solutions, **for every child you help, 4 more children benefit too.**



Over the last five years, **89%** of the severely malnourished children we treated made a full recovery.

Every 60 seconds...



a family gets water...



a hungry child is fed...



a family receives the tools to overcome poverty.



We reach **one new person with clean water every 10 seconds** and **three more schools every day with clean water.**

FIGURE 1: The global impact of the World Vision Partnership. Achievements based on data from 2017. Further information can be found on World Vision International's website: wvi.org/ourimpact

Executive summary

Last year World Vision UK supported 2 million children in 225 projects across 38 countries – benefitting a total of 3.5 million people.

We responded to humanitarian emergencies in 25 countries reaching nearly 800,000 children and over 1.3 million people in total.

In 2018 we met 89% of output targets across our projects.

We continue to deepen our commitment to the most vulnerable children. We are pleased that 26% of child beneficiaries this year were in fragile contexts representing a 10% increase since 2016. This is in line with our commitment to reaching the world's most vulnerable children, a large number of whom are in countries regarded as fragile.

Last year we began looking at specific evidence on whether our programmes meet the needs of the most vulnerable children. Research this year across four countries shows that whilst we are successfully targeting and including the most vulnerable children, we have further work to do to ensure that our programmes are systematically and consistently designed to be responsive and inclusive of their specific needs.

We are delighted to be able to report the progress from education projects. In particular in Sanzukwe, Zimbabwe where the proportion of secondary children walking more than 7km to secondary school has reduced from 95% to 25% over the last five years and average O Level pass rates have improved from 0.2% to 18% over seven years. We are also proud of our work in Syria where children have been assisted to access education despite the fragile context in which they live.

We continue our work in child protection and this year celebrate the positive changes seen, especially in Albania where in 2014 only 20% of children (aged 12-18) in the programme areas were willing to report a case of child abuse, but by 2018

this had increased by 26.2 percentage points to 46.2%. The value and impact of taking a systems approach and of involving children in solving problems which affect them is clearly demonstrated.

Health and nutrition programming continue the trend to address problems comprehensively by integrating sectors. The SHARP programme – funded by the Department for International Development (DFID) – in Sudan is an example of this, bringing together household resilience (including food supply) with health. We worked with 43,456 women to promote improved nutrition and hygiene practices, delivered via the Care Group method, a peer-to-peer approach to disseminate information. The project also successfully supported households to establish homestead gardens to increase micronutrient-rich foods and dietary diversity.

Last year, we responded to 22 different humanitarian emergencies on four continents including earthquakes, volcanic eruption, flooding, protracted droughts and conflicts leading to refugee crises. Responses included food and cash vouchers, dignity kits, blankets, emergency nutrition, water and sanitation, medical supplies, emergency education, and child and women friendly spaces. Project reports were reviewed for the first time using the Core Humanitarian Standard. Clear evidence was found in 50% of reports that affected people had influenced the design of the project; a solid foundation to build upon. It was also encouraging to see evidence that lessons learned from earlier projects have been incorporated in a significant number of the project designs and we will be developing our ability to ensure this is easier to achieve.

And finally, we were interested in exploring how our faith identity and work through faith partners impacts our work. In particular, we are able to show the impact of the Magna Carta project which worked with faith leaders to reduce stigma and address gender-based violence.

Introduction

World Vision's *Our Promise* strategy contains a strong commitment to increasing our focus and our impact on the world's most vulnerable children to help make sure that no one gets left behind. In concrete terms, this means two things: (1) a shift in our global footprint towards working more in the world's poorest and most fragile contexts, and (2) being more effective in both targeting and including of the most vulnerable wherever we work.

Over the past year we have maintained our focus and commitment to this strategic direction. The most exciting development for us is that we are investigating our impact on the most vulnerable children in our most vulnerable children research. Results so far affirm our approach to identifying and including the most vulnerable, but challenge us to more systematically adjust our programmes to cater for their specific needs. This means that core project models we use, because of the evidence of their effectiveness, include those children

and families identified as most vulnerable, and are adapted to ensure that they are relevant to their needs. We are well and truly embarked on the journey.

In terms of continuity, the learning we highlighted last year around (1) ensuring the integration of sectors to deliver successful outcomes, and (2) the importance of community-based approaches, are further re-enforced by what we discovered this year. We deepened our understanding of the value added by input from the children themselves, as well as the positive difference our faith can make in tackling the difficult issues of behaviour change and culture.

Our aim, as always with our *Impact Report*, is to be transparent about our successes and our failures, to encourage ourselves and others, and to contribute to the learning and understanding around how we can be more effective in our work for and with the most vulnerable children.

BELOW: Mickael, 5, plays in the snow at his home. World Vision invited fathers to participate in the Go Baby Go! programme and it gave Mickael's father tools to connect more meaningfully with his 5-year-old son. (Armenia)
© 2017 Eugene Lee / World Vision



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." This report seeks to highlight evidence of progress (or lack of progress) and key learning.

Overview of beneficiary numbers

The best available data for capturing the coverage of our programming 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 2018 or which we'd funded in previous years that sustained activities into 2018.

A note on 'per sector' figures: presenting beneficiaries per sector does not fully represent the programming reality because increasingly sectors are integrated to achieve holistic child wellbeing. Beneficiaries per sector therefore needs to be seen in the light of this as they are only counted once.

Assessing progress towards child wellbeing in our programmes

The evidence used is primarily from programme evaluations (every 3-5 years) and project completion reports once the project has ended, (a project can be as short as three months). Firstly, we assess the quality of the evidence in this year's evaluation reports using the 'BOND evidence principles' tool (page 46). Two reports selected at random were then peer reviewed by World Vision Germany to check we are using the tool fairly and consistently.

Where project or programme evaluations have reported on similar **child wellbeing indicators** we have tried to analyse these together and under the same part of the sector theory of change or approach. It is impossible to include every finding from each evaluation report. However, this report does contain both positive and negative findings from each evaluation report.

We have also assessed the extent to which projects met their **output level targets**.¹ While this is not evidence of impact

as such it has helped us to see again whether overall, we are able to complete the planned activities our supporters have trusted us to undertake. Almost all reports from projects which ended in the year were received in time to be included in the sample of reports assessed. Out of 59 reports received, 37 project reports had both target and achieved figures, enabling a quantitative assessment of success. The remaining 22 project reports did not contain both the target and achieved numerical data (see Limitations) to enable an assessment but were analysed alongside them, by our sector expert.

A **Theory of Change** or approach is included where possible to explain 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 from across the findings and drawn learning and actions we will take in future years.

Limitations

Sometimes project completion reports have "target" and "achieved" outputs data in different documents, making an assessment of the extent to which targets were reached impossible using the final report alone. Some projects only present and analyse higher level (outcome) data. A few reports were of insufficient quality to make a useful assessment of output achievements.

Project or programme evaluations generally measure change in child wellbeing outcomes.² Over several years, the capacity across our partner national offices to achieve high quality evaluation reports can be seen in the section on quality of evidence page 46-47. World Vision UK does have an evaluation policy which is shared with national offices, making the expectations clear. One report was assessed as having weak quality of evidence and the use of its findings are limited as a result.



FIGURE 2: The five vulnerability factors defined by World Vision. Disability has been added in the last year.
ABOVE: Since war broke out in the Democratic Republic of Congo, Grace, 10, and his family have struggled with lack of food and clean water. To recover from malnutrition, Grace attends a feeding programme at a Child Friendly Space.
© 2018 Jon Warren / World Vision

Targeting the most vulnerable children – 2018 update

World Vision defines the most vulnerable children as any child who suffers two or more of the following factors; serious discrimination, abusive or exploitative relationships, extreme deprivation, vulnerability to disaster or disability (Figure 2). We aim to invest more of our resources in the countries with the highest prevalence of the most vulnerable due to their fragility and can already see evidence of this investment in the increasing proportion of child beneficiaries in fragile contexts. However, we choose to work with communities where the 'most vulnerable' children are, in all countries where we work. The term most vulnerable is used throughout this report because we increasingly look at project impact through this lens.

In 2018 we began a specific research project to improve our understanding and evidence of who the most vulnerable children are in the context of the communities where we work and whether we are reaching them in our programming with appropriate interventions (see page 40).

Faith and development

While religious and faith affiliation may be declining in some advanced economies including the UK, in the contexts in which World Vision works, 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 in the community.

This year we look across our evidence specifically at how being a faith-based organisation helped us work with faith groups in programming and include this story in our impact evidence (page 44).

Impact video

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

¹Outputs are the result of achieving project activities. E.g. a specific number of something completed, such as food distributed, or something having been created such as a Child Protection Unit or savings group.

²An outcome is the expected change as a result of having achieved project activities and outputs. E.g. increased literacy rate or a decrease in malnutrition.

Where we worked in 2018

In 2018 we responded to the needs on the ground in humanitarian emergencies (see page 34), which tend to be shorter-term projects, as well as longer-term development programmes in a total of 38 countries.³

The World Vision UK strategy prioritises the most vulnerable children, many of whom live in what are referred to as 'fragile contexts'. These are countries failing to provide basic services to poor people because they are unwilling or unable to do so. World Vision International country categories include child vulnerability analysis in addition to the measure of fragility. Using these categories, 26% of our child beneficiaries were in fragile contexts last year – an increase of 10% compared to 2016 – showing our ongoing commitment to the most vulnerable particularly in these areas.

Sectors we worked in

Projects are categorised under a single sector, such as health or education but often work across sectors to achieve child wellbeing more comprehensively. For example, aspects of household resilience such as agriculture can be part of health projects. And community engagement usually includes work to

improve child protection. This integration or overlap of sectors, is therefore not represented by Figure 4. However, beneficiaries by sector remains the best data for broadly showing which areas of work we fund and identifying each beneficiary with only one primary sector, avoids the double counting of beneficiaries.

Half of the children we work with are benefitting from projects related to health (including water sanitation and hygiene (WASH), nutrition including food distribution, and food security). This is unsurprising given the need to respond to humanitarian emergencies where assessment data frequently shows this to be the most urgent priority.

This year's data also shows an increased proportion of child beneficiaries in education. In part, this could be because of fewer large-scale emergencies, but also due to World Vision being ideally placed to provide education in humanitarian emergencies as a result of our child focus. There is also a marked increase in the proportion of beneficiaries in projects who prepare for and mitigate disasters. This is in line with recommendations in the last few *Impact Reports* to include more resilience programming.

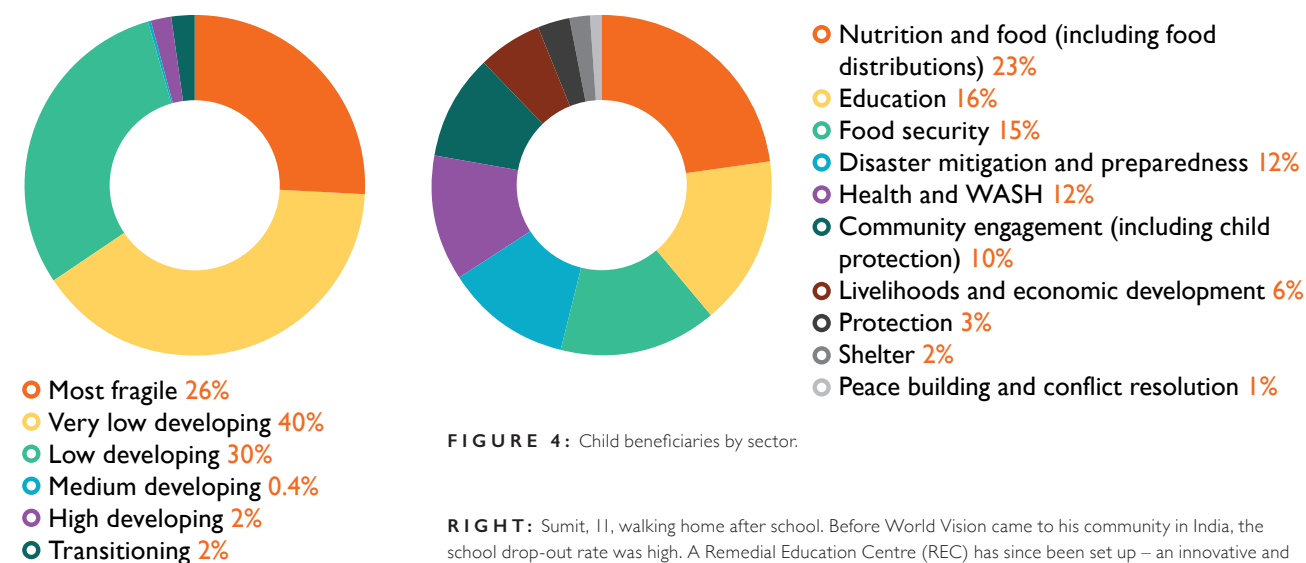


FIGURE 4: Child beneficiaries by sector.

RIGHT: Sumit, 11, walking home after school. Before World Vision came to his community in India, the school drop-out rate was high. A Remedial Education Centre (REC) has since been set up – an innovative and community-led process to teach basic knowledge about reading, writing, math and life skills.
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³**Most Fragile:** Afghanistan, CAR, Chad, DRC, Pakistan, Somalia, Sudan, South Sudan, Syria. **Very low developing:** Angola, Bangladesh, Ethiopia, Haiti, Kenya, Malawi, Mozambique, Niger, Sierra Leone, Uganda, Zimbabwe, Burundi. **Low developing:** Cambodia, India, Myanmar, Nepal, Senegal, Tanzania, Zambia, Philippines. **Medium developing:** El Salvador, Guatemala, Honduras. **High developing:** Albania, Bolivia. **Transitioning:** Armenia, Jordan, Mexico, Thailand.



No child without...
Education

“We know that a child born to a literate mother is 50% more likely to survive past the age of five. We know educated mothers are more than twice as likely to send their children to school. And we know that girls with eight years of education are four times less likely to be married young.” – World Vision International⁴

Education and Child Protection have many overlaps as there is often a correlation between children in education and those children who are better protected from harm such as child marriage or the worst forms of child labour. Whenever feasible, we seek to integrate child protection initiatives within our education programmes. We're seeing this in most of our recently revised education programming where we now take a

lifecycle approach, which commonly integrates both sectors in projects called “childhood” or “youth”. However, they can also be in separate projects. We will look specifically at the evidence of change in Child Protection in the next section.

World Vision addresses barriers to education, and works with communities and local governments to improve the quality of education. Our global objectives for education are: an increase in the number of children who can read, and an improvement in adolescents' education and life skills. This reflects a focus on whether children leave school able to read rather than simply how many children attend school.

In looking at evidence in education, we looked at evaluations of five World Vision UK-funded programmes and one emergency project report.

Helping families to support children

Evaluation results from Armenia show that nearly 96% of children aged 6-59 months are supported by adult household members in four or more types of learning activities – a 4% increase since 2015. The share of such children whose fathers support with learning (at least in one type of activity) increased from 73% to 82% over three years. In the three World Vision UK-funded programmes alone an estimated 6,068 parents were trained on positive parenting.⁵

In the India national mid-term review, the implementation of the Men Care model (within the resilience project) is believed to be reducing domestic violence in 32 programmes included in the study. Reports from all three UK-funded programmes suggest increased involvement of men in their children's education,

also as a result of the Men Care model. In the first two years of the programme, 22,871 men in World Vision UK-funded programmes attended this training, which includes modules on gender roles, power and early marriage.

Over the lifetime of the Sanzukwe Area Development Programme (ADP) in Zimbabwe, which ended in 2018, 12 pre-schools were constructed in partnership with Unicef and the Zimbabwe Government to improve Early Childhood Development. Teachers were trained by World Vision and Unicef and are now employed by the School Development Committees. District records show that 4,412 children were enrolled in the preschools in 2017, a 20.8% increase since 2013 representing 761 children.



⁴wvi.org/sites/default/files/EdLS%20ProgOverviewBrochure_web.pdf

⁵Estimated by arriving at the number of trainees in the country and estimating the number of which were in World Vision UK-funded programmes.



Building reading, writing and maths skills

Comunidades Solidarias Area Programme (AP), Honduras

The evaluation of the Comunidades Solidarias programme in Honduras reported a modest increase in enrolment in the correct school year of 3% over four years, which represents a reduction in children falling behind, though at 67% there are still significant barriers to be addressed in the remaining years of the programme. The programme team explained the strengthened role of the Child Protection Units (see page 14) in following up children who are not in school. There has been a big increase in functional literacy from 41% to 95% over 4 years. A contributing factor was child-to-child tutoring in 10 out of 13 schools, using the La Mochila Viajera methodology (the traveller backpack), which consists of a set of books for reading and reading activities.

Sanzukwe ADP, Zimbabwe

In Sanzukwe, Zimbabwe, the primary leaving examination pass rate across the district improved from 30.3% in 2010 to 53.6% in 2017. A contributing factor was that the proportion of children walking more than 7km to primary school reduced from 90% in 2012 to 18% over the same period due to both building and advocating for improved school infrastructure. Average O Level pass rates have improved in the six secondary schools in the programme area from 0.2% in 2009 to 18% in 2016.⁶ The proportion of children walking more than 7km to secondary school also reduced from 95% in 2010 to 25% in 2017. Over the programme's lifetime of 20 years, two primary schools and a secondary school were constructed and 29 schools had improvements in other areas such as classrooms, teachers' houses and libraries. The profile of teachers has been raised through World Vision-supported teacher training and improved government supervision and monitoring of teachers. The community-led School Development Committees will be essential in sustaining these improvements in the communities of Sanzukwe.

LEFT: Dwarika is a daily wage earner living with his wife Manti and daughter Mamta. He earns Rs. 200 to 250 per day and though he has a small family, has struggled to save money or even meet the daily needs of his family. Since the Men Care training, Dwarika is able to save money for Mamta's education. This year she has passed 10th standard with 2nd class which makes it much easier for her to apply for jobs and further education. © 2018 World Vision **ABOVE:** These girls, in a World Vision programme in Honduras, can enjoy their education. © 2017 Jon Warren / World Vision

⁶A pass constitutes a grade of between A and C.

Across all evaluation reports there was evidence of community involvement in education through community-based organisations. Often, these are called **School Development Committees** (SDC) and they are set up to run independently of World Vision.

“... the SDC in Sanzukwe secondary school has a keen interest in spear-heading development activities in the school. They facilitated the mobilisation of resources within the community to construct a classroom block, two teachers’ cottages and small office without external support. The SDC is also responsible for all the maintenance works at the school.” – Staff member, Sanzukwe Secondary School, Zimbabwe.

World Vision has supported the **School as a Community Centre** (SCC) model in Albania which was developed by

the Ministry of Education in collaboration with Unicef. This includes representatives from the Student Government (pupils), teachers, parents, village elders and the Commune administrator, working together to set standards and follow school improvement plans. The evaluation found SCC to be “a foundational and holistic model for having meaningful impacts in schools and communities and increased the engagement of parents and community in education issues.” In Lezha and Shkodra APs funded by World Vision UK, improvements included training teachers from 22 schools in inclusive education including best practice for teaching children with autism. Six schools now have development spaces for children with disabilities to enjoy extracurricular activities. This year’s report for the Lezha AP describes how the SCC now operates without the involvement of World Vision.



TOP: Nwele, 12, from Zimbabwe, hopes to be an agricultural officer so that she can fight poverty in her community through better farming practices. © 2018 World Vision **ABOVE:** Schools in Sanzukwe now have better equipment to teach with. © 2018 World Vision **RIGHT:** A World Vision SKYE club member plays an icebreaker game before discussing their upcoming community service projects in Armenia. © 2017 Eugene Lee / World Vision

Developing technical and life skills for adolescents

In World Vision Armenia’s Youth Project, young people have increased knowledge and skills through vocational education and participation in SKYE clubs,⁷ which help develop entrepreneurship, activism and participation in community life and projects. Qualitative data in the evaluation found young people are more able to raise issues and seek solutions, engaging stakeholders and influencing their decisions. The evaluation findings showed the percentage of youth (18-29 years old) viewing their community environment as favourable for youth development and growth has positively changed from 14.9% to 30% over three years. There is also improvement among 12 to 17-year-olds (from 26.5% to 34.1% over three years) with evidence also showing that improved development results in fewer people leaving the area to find opportunities.

It is also encouraging that the percentage of young people with no income decreased compared to baseline from 69.6% to 52.3%. The percentage of girls with no income is still much higher than that of boys (62.8% and 35.9% correspondingly). The labour market is not equally accessible for young men and women. In promoting youth employment, World Vision Armenia will continue to focus on girls and women, and the recommendations also suggest building the capacity of local NGOs as it is expected they will take over programmes for youth when World Vision leaves the area.



⁷The Skills and Knowledge for Youth Economic Empowerment (SKYE) Club emerging project model is an integrated approach to helping disadvantaged youth develop the skills, behaviours and attitudes necessary to obtain sustainable livelihoods and participate constructively in their communities. Clubs implement projects which intend to bring social change to the community; and apply skills learnt in meetings to consolidate new behaviours and life-skills.



Education in a fragile context

The DFID education project worked through a local partner, in Syria, where due to protracted insecurity, children are missing out on their education.

The project trained 380 teachers and over 10,000 children were reached with a back to learning campaign. 2,531 children were registered in either pre-primary or catch-up education. Evidence from progress improvement tests showed that children hugely benefitted from the programmes and this contributed to the increased attendance rates and buy-in from both parents and children. Evidence also showed an improvement in learning across all sites, at all levels; 32% average progress in grades in informal learning centres and 52% in camp settings; significant improvement in teachers' knowledge and understanding across the domains of the

training; with teachers in centres scoring 91% in classroom observations and teachers in formal schools 86%.

"I want to go back to my old school but the current circumstances do not allow us to return to it. In the Centre I learned to read, write, clean, and respect elders, and to be diligent in my class and treat my classmates with respect. I liked group-work and the classroom activity for the competition between my classmates. At first I knew no one and it was a new phase for me and I was always worried and scared because the tutorial is new and I don't know about it. But I got better and I became aware of everything and I follow with my teacher all the lessons that you give us... When I grow up I'd like to become a teacher because I love my teacher." Pupil A (aged 10) in remedial classes in Syria.

Learning and actions

Community involvement: We see evidence of the effective involvement of community members in strengthening and promoting education through examples from Zimbabwe (School Development Committees) and School as a Community Centre in Albania.

Integrated approach: We also see the value added to education projects by other sectors, for example the contribution of the Men Care model in India (part of the resilience project) in support of their children's education, and follow up of children not in school by Child Protection Units in Honduras and Albania.

Fragile contexts: It is encouraging to see from our work in Syria that despite the challenging context it is both possible and beneficial to undertake education projects in a fragile context.

Lifecycle approach: We see positive evidence from the lifecycle approach to education now being taken, for example in Armenia where we see support for early years learning and also young people now being able to imagine better life prospects as a result of greater participation in community life and projects which build technical and life skills.

We will... continue to support projects which address barriers to education and respond to needs in fragile states where children have no access to schooling.

ABOVE: Children playing in one of the camps in the Syria education project. © 2018 World Vision

RIGHT: Christine, from Uganda, participates in a play about child abduction. These students are from their school's Child Protection and Spiritual Nurture clubs, which are a key component of World Vision's child protection work. Students learn about the dangers facing them and to value themselves as important members of society who have a voice. © 2018 Laura Reinhardt / World Vision



No child without...

Protection

According to Unicef, in the world’s poorest countries, around 1 in 4 children are engaged in child labour and the births of around the same number of children under five globally have never been registered. Children from all walks of life endure violence and millions more are at risk.⁸

World Vision’s definition of child protection is: all measures

taken to prevent and respond to abuse, exploitation, neglect and all other forms of violence against children.

In our Child Protection and Advocacy (CPA) project model we follow a systems approach which seeks to work with everyone who is part of the protection system; girls and boys, families and communities including faith-based organisations, and governments.⁹ The elements which make up the system include laws, policies, services and collaboration.

Partnering with communities

World Vision encourages and supports the highest possible levels of community involvement in the protection of children, which commonly includes the work of the **Child Protection Units**. These sometimes have different names but are usually at village level, made up of local leaders, teachers and parents and work alongside the police and local government health and social services. They become involved with specific child rights violations such as ensuring that a child is not being prevented from accessing education or referring specific cases of abuse. Such structures exist in all 34 of World Vision UK’s current long-term development programmes.

BELOW: This Child Protection Unit (CPU) in Aheri, Bijapur, has stopped many child marriages. The CPU has dramatically intervened in several cases. “After the CPU members began taking extreme steps like cancelling weddings, people realised that child marriage is a violation of child rights and that it is punishable,” says Babu Yambathnal, secretary of the CPU. © 2018 World Vision
RIGHT: Anisa, 15, from Albania. © 2018 World Vision

Child Protection Units in India vs child marriage

In its mid-term review World Vision India gave examples of child marriages that were prevented by the Child Protection Units in five different programmes. World Vision India is tracking the quality of Child Protection Units and found that, despite major successes, the quality of CPUs is variable and that only 21% were fully functional in the programmes studied. In World Vision UK-funded Patna AP, India, all 19 Child Protection Units are fully functional, but in Vaishali it’s only 2 out of 21 due to a reluctance of community members to give evidence against neighbours.¹⁰

In addition to ensuring that structures are in place to respond to child rights abuses, programmes typically include awareness raising in the community. In the World Vision UK-funded Patna programme last year 2,394 members of slum communities were engaged in campaigns about child marriage, birth registration and other child rights issues.



Reporting by adults in Zimbabwe

One of the indicators of successful child protection is the extent to which **adults and children would report a child protection incident**. In the Sanzukwe programme Zimbabwe, which has nine active Child Protection Units, the proportion of parents or caregivers who would report a case of abuse is quite high at 70% but has reduced by 15% over four years from 85%. It is not clear why there has been a reported decline in this indicator. A discussion with the programme manager reveals it could be due to unwillingness to report family members. The report suggests, from discussions with stakeholders, that child abuse cases have reduced, which may be the case when seen alongside evidence of the commitment to awareness raising on child protection with all parts of the community and support for most vulnerable children, however the evidence for this is not conclusive.

Reporting by children in Albania

In the World Vision Albania national-level evaluation, 79% of adults say they would report a case of child abuse (a decrease

of 10% in three years) but only about half of these adults would know how to report a case. However, the figures for children are more impressive. In a national baseline study in 2014 only 20% of children aged 12-18 in the programme areas were willing to report a case of child abuse. By 2018 this had increased by 26.2 percentage points to 46.2%.¹¹ The proportion of adolescents who know of all services and mechanisms to receive and respond to reports of abuse increased from 35.9% to 42.8% over three years. Qualitative data suggests these changes are due to the work with children’s groups on how child abuse should be reported and responded to. In World Vision UK’s Shkodra programme last year, six trained children’s groups reached 653 of their peers and were part of an action plan to promote the reporting mechanism led by the Child Protection Unit.

After a successful campaign, a government funded child protection worker has been appointed, which will enable critical protection issues to continue to be addressed in the communities.



Due to migration, Anisa was born without an Albanian birth certificate.

“The elementary school accepted me without a certificate of birth, but they told me it will be impossible to start high school. During that period, World Vision invited me to be part of a child protection group and there I learned many things. I learned to express myself better. I’m confident and I dream for a better future. World Vision trained groups of children and their school teachers from six different areas about child protection. As a result of this knowledge, my teacher took my case – with support from World Vision – to the Child Protection Unit. The unit coordinated the process and in the end the court ordered registration and to give me my birth certificate. Now I’m so happy because I can go to school. I started my first year of high school, I’m a good student and I have created positive relationships with my new friends.”

“It was an enormous joy for me and I believe I can realise my dreams, to go to school and learn a lot.” – Anisa, 15 years old

⁸The Unicef statistics are dated 2017 and can be found using the child labour and birth registration options on this page: data.unicef.org/topic/child-protection/overview
⁹World Vision’s definition and approach to Child Protection. wvi.org/child-protection
¹⁰2018 Annual reports from Patna and Vaishali programmes, World Vision India.

The story of Anisa (on the previous page) demonstrates the work of Child Protection Units in helping people to access legal entitlements such as birth certificates, and the connection between adults and children in achieving success in child protection changes.

In Armenia similar work takes place, strengthening the child protection system through the training of key actors,¹¹ parents and children. There was an increase of 6.3% over three years in the proportion of child protection actors willing to report an abuse of the rights of the child, now 64.6%; an increase of 3.9% over three years to 24.4% in the number of children who

would report an abuse of the rights of a child and an increase of over 10% in the proportion of caregivers who would report an abuse over three years, although the proportion remains low at 22.8%. As a result of this, the programme team plan to increase the depth of training in reporting and referral.

Despite improvements in willingness to reporting child abuse incidents, we see across the evidence from Zimbabwe, Albania and Armenia that remaining mistrust in the system and the unwillingness to report a family member or neighbour are challenges to further progress.



ABOVE AND LEFT: Petros a lone parent and war veteran (centre). He and his children lived in unsafe housing with insufficient income and food. They were identified by World Vision as one of the most vulnerable families in the area. The children were included in activities and the family helped using the graduation approach to livelihoods which aims to lift families out of extreme poverty.¹² The family was provided with garlic, potato and bean seeds and agricultural equipment to cultivate the land and earn income. World Vision worked with a partner organisation and the local church to provide the family with a furnished and comfortable home and emotional support. The children presented a picture to World Vision UK staff member Duncan Proctor. The left hand side represents when the family were divided, and their house was not habitable. The right side shows the happier picture today. © 2018 World Vision **RIGHT:** Children attending Summer camps in Armenia, (run in partnership with local churches), learn Christian values, and about the environment, healthy lifestyles, child rights and protection. The activities help children to become more independent, make new friends and be more understanding towards children with different abilities. Parents tell us that they notice positive changes in their children after the camp. © 2018 World Vision

¹¹Child protection actors refer to people in professions which have a duty of care for child wellbeing such as social workers, local level administrators and leaders, teachers, priests and health workers.
¹²Handbook to the Ultra Poor Graduation model. (BRAC and World Vision) wvi.org/sites/default/files/WV%20Ultra-Poor%20Graduation%20Handbook.pdf

Strengthening families

The World Vision Armenia evaluation finds that violence is lower among wealthiest households (50%) as compared to the poorest households (61%). Children whose parents have higher education are less subjected to violence than those whose parents have basic education. World Vision Armenia targeted and tracked most vulnerable families during the three-year project period and more than half of households who received support from World Vision Armenia for at least six months saw their vulnerability decrease (see example of Petros and family on opposite page). The evaluation reported that the proportion of children (aged 6-59 months) who were subjected to psychological or physical punishment by an adult household

member during the previous month, declined from the baseline of 68% in 2015 to 59% over three years. A contributing factor was the implementation of the Celebrating Families model, which has included 4,546 households nationally in positive parenting workshops over the last three years.¹³

World Vision Albania also promoted positive parenting practices through the Celebrating Families model. Over three years, they've seen the proportion of parents or caregivers who believe in using physical punishment reduce by 12.6% (now 76.6%). At the same time, 21.2% of children have suffered recent physical violence (a drop of 9.5%).

Empowering boys and girls

All of our long-term development programming contains activities such as children's clubs, which build confidence and pass on essential messages about safety. All long-term evaluations described children's clubs where children learn life skills. In 2018, 4,501 children took part – including 654 identified as most vulnerable children – in the three UK-funded programmes in Armenia.

World Vision India conducted a review of 60 children's groups in the sampled programmes, alongside the review of Child Protection Units; 48% were found to be fully functional. They participate in Life Skills for Transformational Development (LSTD)¹⁴ and have training on child rights and protection such as using the childline emergency telephone service. Children in children's groups also engage in saving and looking after others. See example below from a World Vision UK-supported programme report last year.

A further indicator is the extent to which children say they are "thriving" on the ladder of life. The mid-term evaluation reported an increase of 21% in the number of children who say they are thriving, since baseline in 2016, though this

improved score was only 38%. The biggest reason given by children is that they feel happy, safe and loved. Contributing factors came from different parts of the programme including the Celebrating Families model, savings groups (a key group for adults) and children's participation in child rights and protection activities. The biggest reasons for why the majority of children said they were less than thriving were due to not being able to complete their education, financial problems in the family and a lack of basic amenities. This shows again the clear need for programming which addresses children's needs comprehensively.



¹³Celebrating Families (CF) seeks to ensure that families, especially the most vulnerable ones, enjoy positive and loving relationships and are able to have hope and a vision for the future. CF also aims to support families as being places that allow children to experience the love of God by addressing the beliefs, convictions and cultures that contribute to harmful attitudes, norms, values and practices of raising children. The CF project model equips parents/caregivers and faith leaders with knowledge and skills to understand the importance of having a safe environment where children are loved.
¹⁴LSTD is a five-day programme conducted across our ADPs, generally, during children's summer break. Through child-friendly, interactive songs, dances, skits and other activities, the children are taught the importance of education, health and hygiene, proper nutrition and child rights. For further information about World Vision India's programmes go to: worldvision.in/AboutUs/how-we-work.aspx



Tridev Children Club

There are 20 members in this group where children are taught the value of working together. Group members decided to visit children sponsored by UK supporters and check on their wellbeing. They developed a plan to visit all 65 children in their ward. Group members also discussed social issues like child marriage, child labour, child protection and cleanliness in their community. In 2018, with the help of other children's groups they conducted a campaign based

on the theme 'safe and clean environment'. They collect 40 rupees (approx 40 pence) through membership per month and to date they've collected 1800 rupees. This money was used to help pay educational expenses for children from poorer homes.

“World Vision showed the right direction to us, to do some things for our community. We are very thankful for their guidance and support.” – President of the group

Learning and actions

Positive changes: The evidence is encouraging, particularly where there has been a positive change in willingness to report a case of child abuse and where we see moves to positive parenting. It is also encouraging to see examples of the involvement of both children and adults in these changes.

Barriers to change: Evidence does show a prevailing mistrust in the child protection system and unwillingness to address social norms hindering the reporting of child abuses across Armenia, Albania and Zimbabwe.

It is encouraging to see that the functionality of child protection structures is being tracked in India and from this, greater

support where it is needed will be given. This is vital given that it is partly a lack of trust in this system which hinders the reporting of child protection abuses.

Household resilience: The evidence again shows the importance of household resilience and poverty reduction to reducing violence against children.

We will... continue to support our evidence-based child protection models including Child Protection and Advocacy and Celebrating Families which follow the systems approach to Child Protection and address social norms.

ABOVE: Members of a children's club in India. © 2017 World Vision **RIGHT:** A child in Cambodia enjoying water at a new community pump-well, supported by World Vision. © 2018 Vande Prom / World Vision



No child without...
**Health
and nutrition**

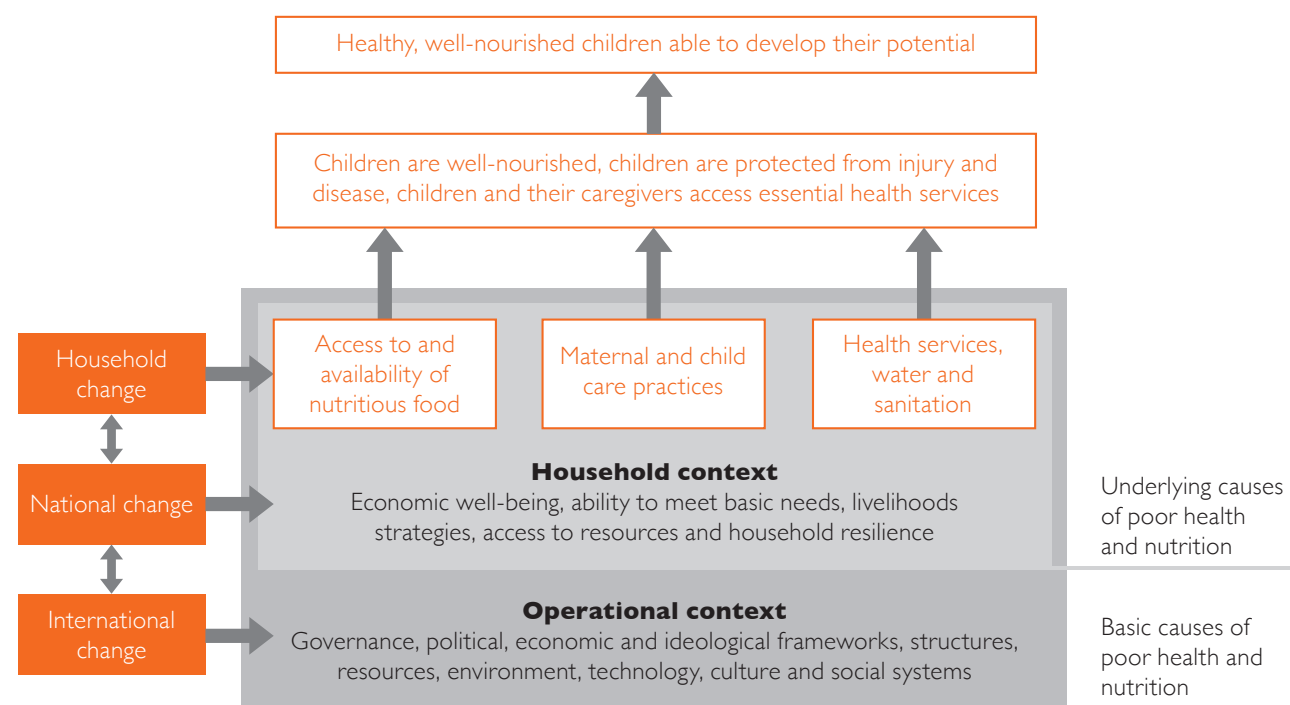


FIGURE 5: World Vision's health and nutrition Theory of Change.

Access and availability of nutritious food

Malnutrition continues to be the world's most serious health problem and the single-biggest contributor to child mortality and to the global burden of disease. Approximately 45 per cent of all child deaths – 3.1 million deaths per year – are linked to malnutrition. However, most child malnutrition is chronic and can be prevented through targeted interventions in the first 1,000 days of life.¹⁵

Sanzukwe ADP in Zimbabwe¹⁶

Sanzukwe's design linked agricultural production, household nutrition and health. The evaluation notes the significant achievements of the programme since 1997. By training 400 farmers in conservation agriculture, we assisted communities to improve productivity in a drought prone region. The proportion of households whose harvested crops last at least four months increased, as did the proportion of households who are able to provide well for their children (see Figure 6). Families attributed this to initiatives which we have been implementing such as livestock projects and nutritional gardens. These initiatives also assisted households in improving their under-fives nutrition due

to availability of a wider variety of food items. Combined with information on infant and child feeding provided by volunteer health workers, under-twos were able to eat more and better meals (as shown in Figure 6).

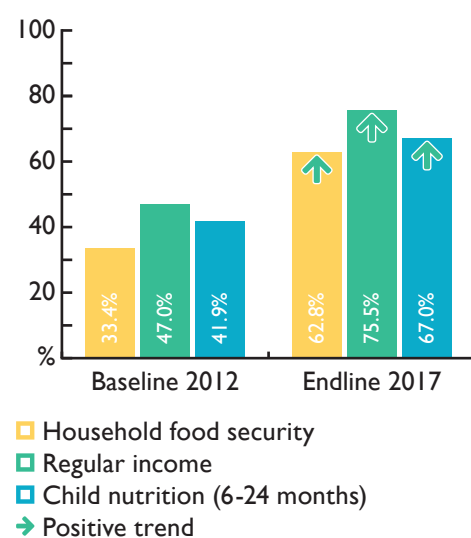


FIGURE 6: Food and nutrition security improvements in Zimbabwe.

¹⁵wvi.org/nutrition/nutrition-basics

¹⁶Funding was jointly provided by World Vision UK and World Vision Netherlands; programme management was done jointly.



ABOVE: Household representatives in Sanzukwe ADP, who received chickens through the chicken pass on project. © 2017 World Vision **BELOW:** Agnes is one of the young female farmers who is taking part in the ENTERPRIZE project. Life for Agnes has changed a lot since she learned modern methods of farming. Agnes is growing maize, soya bean, groundnut and cowpeas in her field. "I used to retain and plant groundnut seed that I got from my mother when I got married, but after going through the importance and advantages of using certified seeds I have seen the difference," says Agnes. © 2017 World Vision

The learning in the evaluation report highlighted our support to community leaders to resuscitate the old community concept 'Isiphala se Nkosi' (the Lord's pasture), a collective community safety net to support households in dire need of food during lean periods.

The ENTERPRIZE project in Zimbabwe¹⁷

The aim of ENTERPRIZE is to reduce poverty, increase the food security and increase incomes of smallholder farmers. We supported farming households to adopt approaches and technologies that can help them improve crop yields in challenging climatic areas, and to diversify their livelihoods to cushion against shocks such as drought. Since 2014, we trained 27,520 farmers on climate resilient and nutrition sensitive agriculture. Alongside this, we helped establish a total of 1,188 saving groups between 2014 and 2018 with 12,202 members. The groups have learnt that having entrepreneurship skills and investing money are important factors in fighting poverty and improving their lives. The end-of-phase report notes that significant progress has been made in raising knowledge on good agriculture practices resulting in improved yields for some farmers. In 2018 we expanded the programme to reach 60,000 households. We also continued training on healthy harvest and post-harvest handling and continued health and nutrition behaviour change promotion targeting the first 1,000 days of life. By the end of the first phase (in 2018), the project had reached 12,225 mothers and fathers, including parents of children aged under five years, with nutrition information.



¹⁷The Ensuring Nutrition, Transforming and Empowering Rural Farmers and Promoting Resilience in Zimbabwe (ENTERPRIZE) project is funded by DFID through the Food and Agriculture Organization of the United Nations (FAO). The project is being led by World Vision Zimbabwe and consists of the Farmers' Association of Community Self-Help Investment Groups (FACHIG), Mercy Corps, and the International Crop Research Institute for Semi-Arid Tropics (ICRISAT).



The SHARP project in Sudan

We worked with other organisations and the community¹⁸ to improve food security and nutritional status in this DFID-funded programme. Locally it's called Taadoud meaning 'working together'. Since 2014, interventions focused on training households to adopt better agricultural practices, improved nutrition and hygiene practices, and support for communities to mitigate climate-related risks. Over 200 local communities and more than 60,000 households were able to effectively cope with the increased drought caused by the 2015-16 El Niño event. The evaluation reported increased crop production and diversification, and that communities are better able to cope with 'shocks' (see Figure 7). Consequently, fewer families are

hungry (see graph). Community Action Groups have supported collective action and advocated with governments and NGOs for support to villages. Additionally, savings and loan committees (building on existing practice), have increased access to credit for community members. In its second phase (2018-2022) SHARP will further strengthen its focus on resilience by continuing to improve household income and to build on these community-based activities.

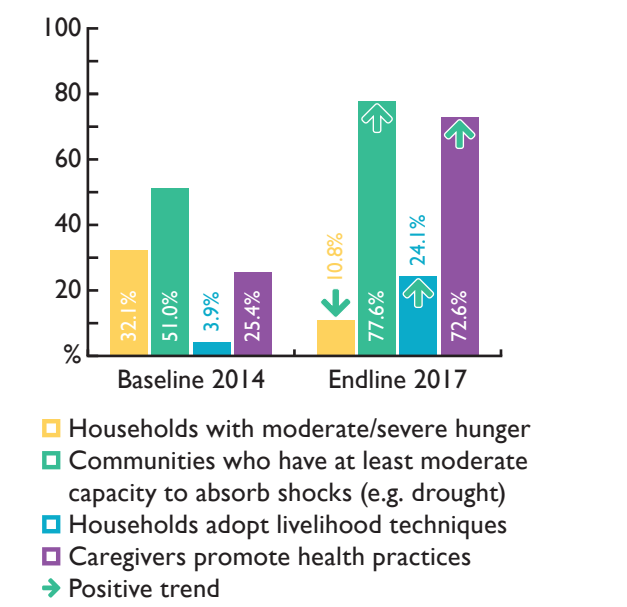


FIGURE 7: Evaluation results showing improvements in access to food in Sudan. **UPPER:** A local women's savings group meets in Sudan. © 2017 World Vision **LOWER:** Six-year-old Amasi smiles shyly as she receives fresh goats' milk. As a member of their local savings group, Amasi's mother took a loan in 2015 to buy two goats. By June 2017, they'd multiplied to 13, providing nutritious milk and an income. © 2017 World Vision

Maternal and child health

World Vision focuses on three essential areas to improve the health and nutrition of women and children contributing to; fewer mother and child deaths; Mothers and children are well-nourished; Mothers and children are protected from infection and disease and can access essential health services. This includes seven essential interventions for the mother and 11 for the child.¹⁹

Every year our *Impact Report* demonstrates progress from the combination of training members of the community and strengthening local health services. Evidence in three

evaluations this year demonstrates this.²⁰ In particular, it shows that trained community members help families understand proper nutrition and seek treatment for illness. In addition, by establishing and equipping local health centres, we improve maternal and child mortality and health. Evidence in three programmes also shows the need to continue our understanding of barriers to adoption of more difficult to change behaviours, which are crucial for children's and women's (particularly pregnant and breastfeeding mothers') health.²¹

¹⁸The consortium is led by Catholic Relief Services (CRS) and includes as partners the Catholic Agency for Overseas Development (CAFOD), Norwegian Church Aid (NCA), Oxfam America (Oxfam), United Methodist Committee on Relief (UMCOR), and World Vision.
¹⁹The 7-11 Strategy for Maternal and Child Health. World Vision International www.wvi.org/health/7-11-health-strategy
²⁰Armenia, Global Fund TB, Sanzukwe
²¹Armenia, SHARP, Honduras

Early Childhood Development and Growth, Armenia

Before our project started, malnourished children were often untreated. Local healthcare services didn't have capacity, while parents lacked knowledge. A national office level evaluation conducted in 2018, in 14 programmes, (three of which are supported by World Vision UK), concluded that this knowledge gap was filled and most of the positive changes could be attributed to World Vision's interventions.²² According to the report, fewer children are chronically malnourished (which can result in stunted growth)²³ (see Figure 8). The evaluation argues this can be attributed to numerous education sessions on nutrition and the increased quality of government healthcare services.

Nevertheless, key nutrition indicators remain below the desired level. The percentages of children under six months of age who are exclusively breastfed and the percentages of children 6-23 months of age who receive a minimum acceptable diet (see Figure 8) remains largely unchanged. Positive nutrition practices were higher among people who took part in our training (69%) than other community members (60%). However, the evaluation encourages further training and awareness raising activities among parents to promote diverse, quality and appropriate diet for infants with a special focus on households with most vulnerable children and less educated mothers.

Sanzukwe, Zimbabwe

We focused on increasing access to health care services and changing behaviours. By building two clinics the average walking distance to a clinic reduced from 15km (to and from) to less than 7km. Other activities focused on assisting the Ministry of Health in improving immunisation coverage for children under-five. In addition, volunteer health workers supported and advised mothers on a wide variety of topics including pregnancy, the prevention of mother-to-child transmissions, and child nutrition. The health workers also advised mothers on when to visit a clinic. As a result, the number of women accessing antenatal and post-natal care services has improved and the number of women giving birth in a health facility has

also increased (see Figure 9). Improved food production and nutrition education mean more children are having three meals per day (see Figure 9). In addition, the proportion of under five-year-olds who have been fully immunised has increased (see Figure 9) as a result of our efforts to improve immunisation coverage together with the government.

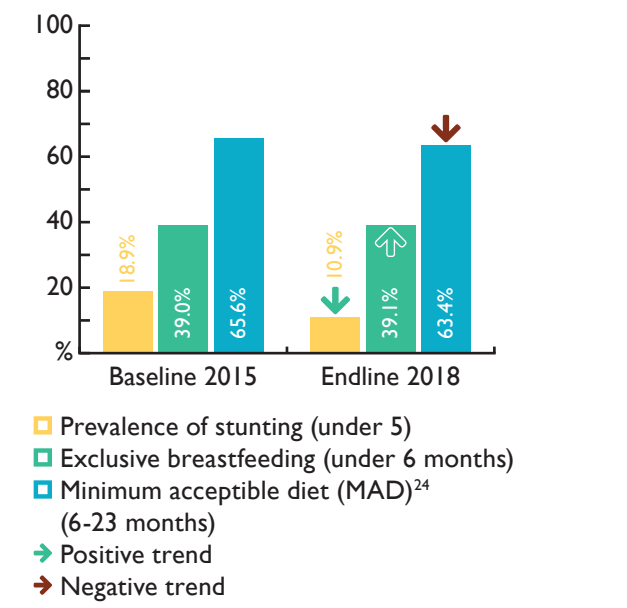


FIGURE 8: Health improvements in Armenia.

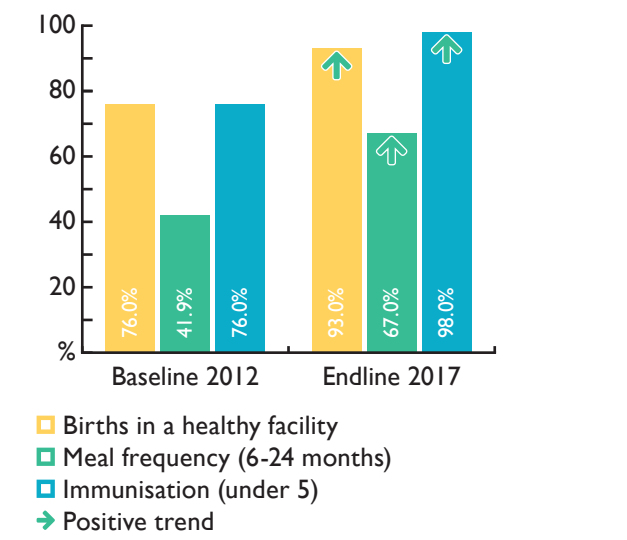


FIGURE 9: Health improvements in Sanzukwe.

²²World Vision UK supports the programme in three of the 14 programmes. Since the evaluation assessed impact at national level, we can only draw conclusions at national level, not at ADP level. Changes seen can be attributed to World Vision, including World Vision UK.
²³The observed changes in stunting cannot be attributed solely to World Vision's interventions as national average also reduced to similar percentages.
²⁴This indicator is calculated based on two indicators – minimum dietary diversity (MDD) and minimum meal frequency (MMF).

SHARP project, Sudan

To increase maternal and child health, the programme worked with 43,456 women of reproductive age and caregivers of children under the age of five years. Over three years, the project promoted Essential Nutrition Actions and improved nutrition and hygiene practices. The information was delivered via the Care Group (CG) method, a peer-to-peer approach. The project also supported households to establish home gardens to grow micronutrient rich foods and encourage a diverse diet. According to the final evaluation there was significant improvement in several areas. The proportion of caregivers with under-fives who wash their hands at all five critical times more than doubled (see Figure 10). Exclusive breastfeeding for infants of 0-5 months also increased (see Figure 10). The dietary diversification for women of reproductive age increased from three out of nine food groups during baseline to more than four in 2017. The minimum acceptable diet of 6-23 months old increased slightly, however, the evaluation concludes that the project needs to make more progress on women's (particularly pregnant and breastfeeding) and children's diets. A final narrative report notes learnings from the way we carried out barrier analysis to better understand why some recommendations aren't taken on.

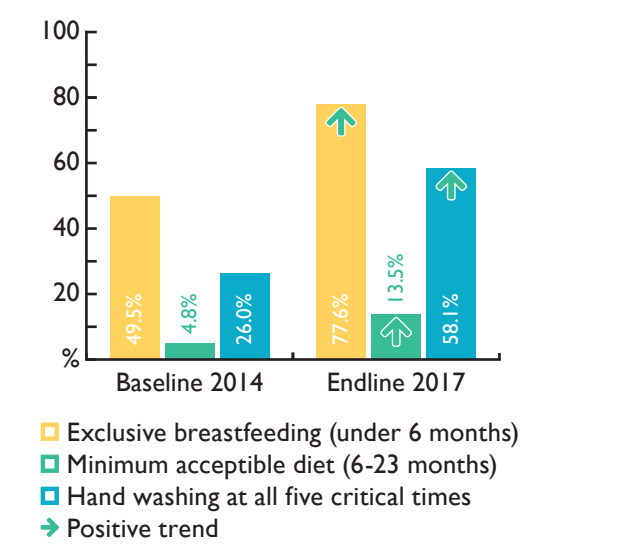


FIGURE 10: Health improvements in Sudan.

Comunidades Solidarias ADP, Honduras

This long-term programme began in 2007 with the aim to generate good health and nutrition conditions for children under five years of age. The project focused on improving agricultural productivity and diversity as well as food preparation, consumption, and hygiene practices at home. The project provided technical training on new and better

cultivation techniques, nutrition education, and organised gardens at community level. At the same time it supported coordination with the local government and other relevant stakeholders working on malnutrition. According to the final evaluation, although overall food security in the ADP has increased, challenges remain. The percentage of producer families who diversified production and grow other crops (additional to corn, coffee and beans) has remained similar to the 2014 results of around 10%. And the percentages of producer families who put better cultivation techniques into practice has decreased by 10% (to around 47%). Deliberate efforts are needed in the final phase of the project towards improving eating habits and agricultural practices.

Global Fund Tuberculosis Programme, Somalia

World Vision has managed the Global Fund-supported tuberculosis (TB) programme in Somalia since 2008. Access to TB services has improved over the years as we increased the number of treatment centres from 12 in 1995 to 97 by December 2017. We have improved proper counselling services, trained health care workers and, at community level, we collaborated with Community Health Workers conducting health promotion and education activities. These activities have reduced the prevalence of TB from 581/100,000 in 2013 to 274/100,000 in 2016 and we have achieved a cure rate of over 80%. The findings of the evaluation suggest that the programme has reached vulnerable groups, including women and children, internally displaced people (IDPs), prisoners, mobile populations, and those who are malnourished or have TB / HIV coinfections. However, challenges include a lack of ownership by local government, as well as a low case detection rate, especially in the hard to reach areas.



ABOVE: Abdi was the World Vision Global Fund TB programme's youngest patient at two years old. He has been cured of Multi Drug Resistant TB after a two-year treatment programme and is now full of life. Abdi's dad (pictured holding him) also had MDRTB and was bed-ridden for months. He's also been cured, has a job and can now take care of his family. © 2017 World Vision

Water, Sanitation and Hygiene (WASH)

Nearly 800 million people worldwide lack access to an improved water source, and an estimated 2.5 billion people lack access to improved sanitation.²⁵ Root causes can include poverty, geography (for example, desert terrain), geology, policy and cultural norms. WASH programming addresses these needs and the behaviours (such as handwashing, latrine use, and safe disposal of faeces and waste materials) that contribute to contamination in the environment and the spread of diarrhoeal disease. The goal of World Vision's WASH programming is to improve child-wellbeing outcomes through universal access to safely managed drinking water, sanitation and hygiene.

Water and Sanitation in Sanzukwe, Zimbabwe

At the beginning of the programme in 1997, some of the key problems facing communities in the area were long distances to safe water points, poor sanitation coverage and high incidences of diseases. By the time of closing last year, the project had drilled 74 boreholes and repaired a further 20 at community level. The construction of 347 standard household latrines was also important in promoting health and hygiene practices. The End of Programme Evaluation noted that the proportion of households having year-round access to sufficient and safe water and the proportion of households accessing latrines increased significantly over 5 years (see Figure 11). Also, incidences of diarrhoea among children aged under five reduced significantly

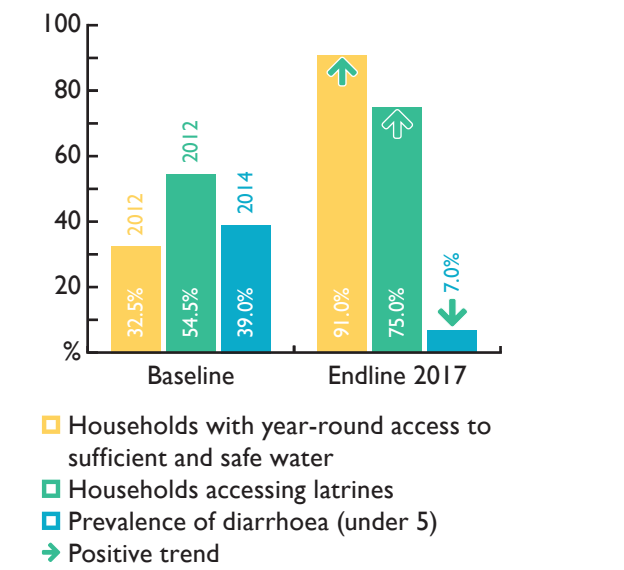


FIGURE 11: WASH improvements in Sanzukwe.

(see Figure 11).²⁶ Health and hygiene education by nurses and our 77 volunteer Village Health Workers have contributed to this change. We have also enhanced community capacities in conducting borehole repairs and maintenance through training water point committees and village pump mechanics. This ensures good hygiene practices at water points and that they'll stay working. The report emphasised the importance of continued training by local government to achieve sustainability.

Child health in humanitarian emergencies

Last year World Vision UK provided food and non-food items in humanitarian emergency responses. We supported the World Food Programme (WFP) to distribute 89,273 metric tonnes of food items and 26,420 metric tonnes of fortified food for children under 5 years, pregnant women and breastfeeding mothers diagnosed with acute malnutrition. Cash and vouchers worth £1,184,144.²⁷ were also distributed. In addition, 16,760 hygiene kits were provided and 218 new or restored water sources including boreholes, wells and handpumps – the majority of which were in emergency responses.

The protracted conflict in South Sudan has severely limited food access and availability, resulting in malnutrition being a serious challenge. Between March 2017 and June 2018, World Vision (through the support of the Disasters Emergency Committee), has provided critical lifesaving support and services in nutrition, WASH, and protection activities. In total, 60,869 children under-five as well as 29,579 pregnant and breastfeeding mothers were screened for malnutrition. The cure rate for malnourished children enrolled in treatment programmes was 87%, which is above the minimum standard of 75%. The

²⁵Wording taken from Water Sanitation and Hygiene project model World Vision International 2017
²⁶n = 610 households with children below 5 years; indicator: percentage of children aged 0-59 months who have suffered from a diarrhoea episode anytime in the past two weeks
²⁷Exchange rate USD /GBP 1.34 used

evaluation²⁸ attributes this to, amongst other factors, the good inter-linkage between community and health facility as well as increased use of mobile clinics. Nevertheless, negative factors included the sharing of therapeutic food amongst other household members and drop out of trained Community Nutrition Volunteers who were looking for better livelihood opportunities. The report concludes that **“Responses that save lives are indispensable, but in a protracted crisis there is a need to move towards improving support for livelihoods, (...) while retaining the capacity and flexibility of responding to acute crises.”**

Emergency response to prevent the loss of long term gains

In response to the 2015/2016 El Niño event, Sudan's SHARP programme (see page 22-24) took steps to prevent the loss of long-term progress through the sale of productive assets, which typically happens in an emergency. The programme shifted its implementation strategy by adding livelihood recovery and

protection, which provided income for 16,533 households. To address increased levels of malnutrition, the programme also supported the screening and referral of malnourished children to therapeutic feeding centres for treatment. According to the final narrative report, the previous investments in community structures and training enabled the programme to quickly respond to the drought. And the emergency response prevented migration of the communities, thereby enhancing the stability of households and communities.



Learning and actions

Access to nutritious food: We have strengthened our efforts to build resilience. Technical support, promotion of better agricultural practices (such as conservation agriculture and climate-smart practices) combined with strengthening community structures stood out in 2018. Evidence this year also shows the effectiveness of community-based approaches such as saving groups. Successful examples include Sanzukwe and ENTERPRIZE in Zimbabwe, and SHARP in Sudan where we increased both income and food production, supported households in coping with weather-related shocks and saw an increase in food secure households.

We will... continue support to programmes integrating food security and nutrition.

Maternal and child health: Positive evidence from Armenia, Sanzukwe in Zimbabwe and the Global Fund TB project in Somalia encourages us to continue our approach of training members of the community combined with increasing ownership and involvement of communities in the task of

improving local health services. In Honduras our approaches saw increased food security, but not the change in practices which would lead to improvement in dietary diversity.

We will... continue to address more difficult to adopt behaviours such as breastfeeding and adoption of nutritious diets by households with evidence-based programme models.

Health and nutrition in the most fragile contexts: We remain committed to supporting children with lifesaving health and nutrition interventions. In the Sudan SHARP project we saw the benefit of both long-term resilience activity and flexibility in the project design allowing for an additional emergency response so that gains in food supply and child health wouldn't be lost.

We will... continue to increase support for resilience activities in fragile contexts and seek flexibility to reduce vulnerability to food supply emergencies.

ABOVE: A child attends nutrition screening in Somalia. © 2017 World Vision **RIGHT:** Mariama cares for her niece, Janatu (13). “I can eat now – as much as I want. And I’m happy for World Vision because it’s contributing to that,” says Janatu, who is a sponsored child in Sierra Leone. © 2018 Alexander Whittle / World Vision

²⁸The DEC Evaluation South Sudan was rated weak evidence due to the sampling methodology and inability of the findings to be generalisable to the wider population in the programme area, but the comments about the intervention in this paragraph, are valid.



No child without a...

Chance
to thrive

Resilience and livelihoods



FIGURE 12: World Vision's strategy for resilience and livelihoods.

Today, over 783 million people live in extreme poverty, and more than half of them are children.²⁹ Extreme poverty is a fundamental barrier to realising the rights of children, including targets of the Sustainable Development Goals (SDGs) to end preventable child deaths, ensure quality basic education and protect children from all forms of violence.

World Vision's strategy for resilience and livelihoods is focused around two main themes: financial inclusion; and food and nutrition security and resilience. We work towards these aims, using three main project models (on the right of Figure 12).

The Ultra Poor Graduation model is targeted at the very poorest families, providing cash transfers, facilitating savings groups and developing small businesses, to lift people out of extreme poverty (see example on page 16). The Building Secure Livelihoods model is designed to help vulnerable small holder farmers, through savings groups, promoting climate smart agriculture, natural resource management and disaster risk management, developing value chains and access to markets, and facilitating financial inclusion. We are increasingly adopting these models as they include working with communities to build resilience to shocks, stresses and disasters, and to improve livelihoods, lifting families and communities out of poverty.

Last year we completed some significant projects that have added to our experience of resilience and livelihoods programming. We've already discussed achievements in Zimbabwe (ENTERPRIZE and Sanzuke) and Sudan SHARP in the Health section. These projects could appear in either section due to their integrated nature. In the same way,

humanitarian emergency projects increasingly include resilience activities to prevent disaster or promote a longer-term recovery.

Building resilience to disaster in Myanmar

Myanmar has an increasing vulnerability to climate extremes including flooding, landslides, cyclones and storm surges, which can be devastating to entire communities. The DFID-funded BRACED³⁰ Resilience programme has been building and strengthening resilience over three years, working with communities and local authorities to improve infrastructure (including repairing access roads, strengthening and rebuilding bridges, building flood prevention embankments and protecting water ponds from flooding), supporting savings groups or micro-finance groups, and supporting income generation activities, (including pig rearing). World Vision UK worked with other organisations to support 18,466 people with a high intensity of programme interventions and 529,907 people at a medium level. 64% of target communities interviewed during the final evaluation stated that they were 'better' or 'much better' able to cope with crises compared to the previous year. In communities that weren't part of the project, only 29% of people felt the same.

One of the main challenges faced by the project was the difficulty of identifying and targeting the most vulnerable. The evaluation found that the interventions had less impact on the poorest members of the target communities than those with more assets. In addition, the chosen project locations weren't necessarily those most at risk of climate disasters due to the intention to work across a wide range of hazards.



ABOVE: This family live next to the river. Land is cheap here because it floods quite regularly. They used to have to wade, through the flood waters to get to the evacuation centre and wait there until the floods went down. This was quite dangerous, especially with small children. Through the BRACED project, the local community now has a boat that can be used for evacuating families like them, when there is flooding. © 2017 World Vision

Boosting employment through forestry in Malawi

World Vision worked together with ICRAF (the World Agroforestry Centre), (with funding provided by the European Commission and DFID) on Empowering Forest Dependent Communities through Commercialisation of Small-Scale Forestry in Malawi.

The project aimed to reduce poverty amongst communities who are dependent on forests for their livelihoods. Through promoting more sustainable forestry management and conservation, and the commercialisation of forestry-based livelihood activities, people's livelihoods and incomes can improve, while preserving and sustainably managing the forests and other natural resources.

The project supported 23,609 households and assisted in the formation and support of 227 producer groups (from an initial target of 140 groups).

The end-of-project evaluation showed that the food supply and household income of those participating in the project had increased. **The number of households participating in forest-based enterprises increased from 1,865 at baseline to 21,815 by the end of the project. The share of household income from forest related activities had increased from just under £6 per month in 2015 to nearly £8 in 2018.** Very few households were making use of the forests previously, now almost everyone involved with the project has some sort of forest-based enterprise. Whilst not all will succeed, it is likely that the increase in the number of households participating in forest-based enterprises is sustainable.

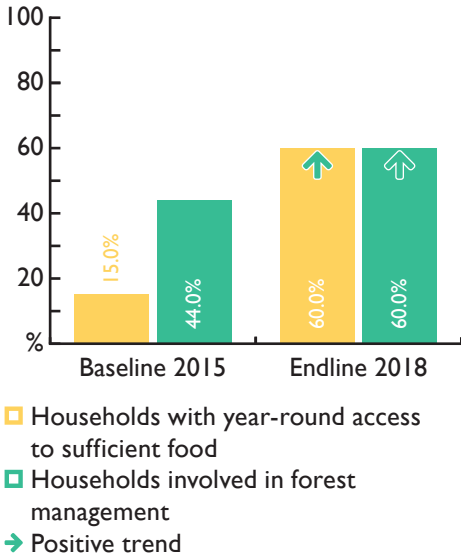


FIGURE 13: Improvements in resilience through forestry in Malawi.



ABOVE: Forestry produce in Malawi. © 2017 Jason Garrett / World Vision

²⁹World Bank and Unicef. (2016). Ending Extreme Poverty: A Focus on Children. Quoted in the Ultra Poor Graduation Handbook (World Vision and BRAC) wvi.org/sites/default/files/WV%20Ultra-Poor%20Graduation%20Handbook.pdf
³⁰DFID funded a programme of 15 resilience projects across west Africa, east Africa and Asia, under the title "Building Resilience and Adaptation to Climate Extremes and Disasters" (BRACED – braced.org). The 15 projects started in 2015, and the first phase finished in 2018. World Vision was part of a Plan International-led consortium in Myanmar, implementing the BRACED project in 3 different locations in Myanmar, out of a total of 8 locations across the country.

Improved agricultural practice in Sudan

Blue Nile state in Sudan is dominated by rain-fed agriculture. However, productivity is in decline due to fluctuations in rainfall and deteriorating soil quality. This has affected small holder farmers who struggle to be able to meet basic needs.

The Small-Scale Agricultural Productivity project is funded by the European Community and works with 3,000 farmers in 39 villages in Blue Nile State. At the end of the project we hope to see: improved practices and techniques for rain-fed farming are applied; appropriate inputs and technologies to support agriculture are available and used; and increased access to and use of services including microcredit and marketing.

The project's mid-term evaluation found that the project has achieved an average increase of 2.4 bags of sorghum per harvest among those farmers who received the agricultural package, surpassing the target set by the project. Crucially, where before, farming families harvested enough to live on for about half the year, they're now experiencing shortages for an average of only one month in the past year. One of the conclusions was that the project's activities were less appropriate for female smallholders. Whilst the project is planning to encourage greater participation, most female farmers focus on cultivation of other crops not targeted by the project.



ABOVE: Abdullah from Sudan. © 2018 World Vision

Linking resilience and conflict prevention in Pakistan

World Vision worked (within a consortium) on an initiative called the Linking Preparedness, Resilience and Response project (LPRR) funded by DFID's Disasters and Emergencies Preparedness Programme (DEPP), under the management of Christian Aid. The project developed an 'Integrated Conflict Prevention and Resilience' (ICPR) methodology which was piloted in ten communities in Northern Kenya and North-West Pakistan. World Vision led on the Pakistan pilot. Unfortunately, the evaluation found little evidence of the type of change initially anticipated. The project supported worthwhile initiatives that contributed to improved community resilience to natural hazards, but it was not possible to discern any significant 'peace positive' impact resulting from the subsequent activities.³¹ The main learning to come from this is the need to better tailor the methodology and approach to the context, provide better support for project staff, ensure a longer timeframe to allow the team to learn-by-doing and adapt accordingly, and to have stronger local staff involvement at the design phase to improve institutional buy-in from country programmes.

Abdullah was awarded as one of three outstanding farmers in the Blue Nile Programme in Sudan.

“I talk to my fellow farmers to stop doing traditional farming. I was able to achieve the best results after I joined the project and followed what I learned from it. Learning and practicing new things changed my life as a farmer.” – Abdullah

Ali Ibrahim, the programme coordinator says: “Traditional farming produced poor yield. Many of them have to resort to loans to survive and provide for their families. This project gave them new hope.”



ABOVE: Nirala with her husband Nata and their daughter. Thanks to training supported by World Vision, they've seen their lives transformed by accessing the government allowances they are entitled to. © 2017 World Vision

Rights and access to social welfare in Bangladesh

The Constitution of the People's Republic of Bangladesh provides for the social security of vulnerable people in Bangladesh. This includes a range of laws to address inequalities and specific vulnerabilities and threats to women, children, the aged, disabled and ethnic minorities. The laws are implemented by setting up schemes, referred to as social safety nets. The EVPRA project's aim is to empower local organisations³² in Bangladesh to promote access to the Government's Social Safety Net programmes.

The two districts of Dinajpur and Joypurhat together are home to about 4 million people. As per 2010 estimates by World Bank-WFP, 21.3% of the population in Dinajpur were living in extreme poverty and about 13% of those in Joypurhat. The project has targeted 278,668 extremely poor people in these working areas and among them 39,953 are of ethnic minorities.

The mid-term evaluation showed that 50% of organisations in the project had demonstrated improved organisational and management capacity, against a target of at least 20% by the end of the project. At the time of the baseline study, only 5% of the targeted households had access to at least one of the Social Safety Net Programmes. This had increased to 50%

by the mid-term evaluation. The evaluation also showed that these outcomes are the same for ethnic minority households and female beneficiaries as they are for male and non-minority households. The project will continue until the end of 2019.

Nirala and Nata Hasda are ultra-poor farmers who work on other people's land because they are landless. Nata Hasda was injured in a farming accident and is now unable to work. Nirala has been supporting the family on a meagre wage but is also a member of a social welfare club (CSO) which became active following support from the EVPRA project. She explains:

“My family was insolvent. With my disabled husband and a daughter, I was living with so many difficulties over the last eight years. But when my husband got disabled allowance from the government, after that, day by day those difficult days started going from my family,” said Nirala.

“Lots of women like me came to know that different types of services and allowances by the government are available for ultra-poor and disabled people like us. After that I started communication for my husband's disabled allowance and submitted the application. In 2016 my husband was selected as a beneficiary of disability allowance. Now, we will be able to support our daughter's education.” – Nirala Hasda

³¹It is important to note that there is no evidence of a significant 'peace negative' impact either.

³²Establishing Vulnerable Peoples' Rights and Access to social safety net programmes (EVPRA), funded by the European Commission. The project uses the term CSOs, or civil society organisations. These are community-based organisations such as savings groups or social groups or small non-government organisations with NGO status.

Accessing markets in Armenia

This project model aims to help smallholder farmers and producers to generate a sustainable income. It uses the value chain approach³³ in a hands-on way, helping participants to analyse markets, build relationships, and act collectively to overcome market barriers and increase profits.

The evaluation shows that 66% of group members were able to provide well for their children. This was higher than the baseline of 61% but below the 70% target. 60% of group members saw an increase in profits. However, this varied between products.

This was partly due to individual producers' differing abilities to track yields, expenses and income accurately. Without that data it's difficult to measure actual profits. Additionally, different value chains can be more or less successful than others, due to a variety of factors. It's important to analyse markets extensively in these projects, but also to recognise that value chains and markets are complex and dynamic. Analysis needs to be on-going, to understand changing market dynamics, and producers should learn to analyse and understand markets themselves.

Learning and actions

Timeframes: Building resilience and improving livelihoods takes time and projects can provide significant resources to help achieve those aims. We can see evidence of positive improvements in the livelihoods and resilience of households, however the timeframes are often too short to achieve meaningful and lasting impact. It was very encouraging to see the extension of the Sudan SHARP and Zimbabwe ENTERPRIZE programmes, analysed in the health section.

We will... explore opportunities to extend projects to ensure that change is made and sustained.

Access to markets: The evidence from Armenia shows that developing value chains and supporting access to markets can make a significant impact on people's resilience to shocks, by creating more secure livelihoods and incomes. But if there is no on-going and extensive analysis of markets to understand what is demanded and the barriers to accessing markets, then the impact can be limited.

Building resilience in India

Across India, 32 programmes are implementing resilience and livelihoods projects in vulnerable communities. These include the graduation model, savings groups, Men Care and community-based disaster risk management (CBDRM) models.

Last year, the three World Vision UK-funded programmes alone supported 450 of the most vulnerable families through the graduation model. In these projects, 70% of households³⁴ are members of savings groups, and 92% of households know about government welfare schemes. Progress in using the Men Care model is described under education (page 8). The mid-term evaluation reported that the graduation model has had a positive impact on child wellbeing, and the assistance provided to vulnerable households has been appropriate for their existing livelihood skills. The evaluation also stated that APs are not sufficiently linked to the government's disaster management structures, and investment and partnership with agencies for youth training will be reviewed. The programme's final progress will be reported in 2020.

We will... build the capacity of small holder farmers to work together to understand markets, as part of our work to increase livelihoods and build resilience.

Inclusion of the most vulnerable: Savings groups are an excellent tool for bringing communities together and providing financial resilience. Successful examples this year (Sanzukwe and ENTERPRIZE in Zimbabwe, and SHARP in Sudan) were included in the health section and evidence in this section was seen in the BRACED project. However, despite the Savings for Transformation (saving groups) model being based on very small amounts of money, the poorest and most vulnerable families still find it difficult to take part in savings groups. Some sort of cash transfer or cash for work mechanism may be needed first to encourage their inclusion.

We will... ensure all resilience and livelihood programmes include the most vulnerable in the way they are designed.

RIGHT: Shivatheertha, 6, Shivaganga, 8, and their family currently live with neighbours, as their home was damaged by flooding in India. © 2018 Theodore Sam / World Vision

³³Local Value Chain Development: an effective approach for improving access to profitable markets for farmers and producers. wvi.org/development/publication/local-value-chain-development

³⁴Percentages in sentence are averages taken from the three annual monitoring reports of Bhojpur, Vaishali and Patna programmes in India.



No child without a...
Home

In **2018** our humanitarian responses helped

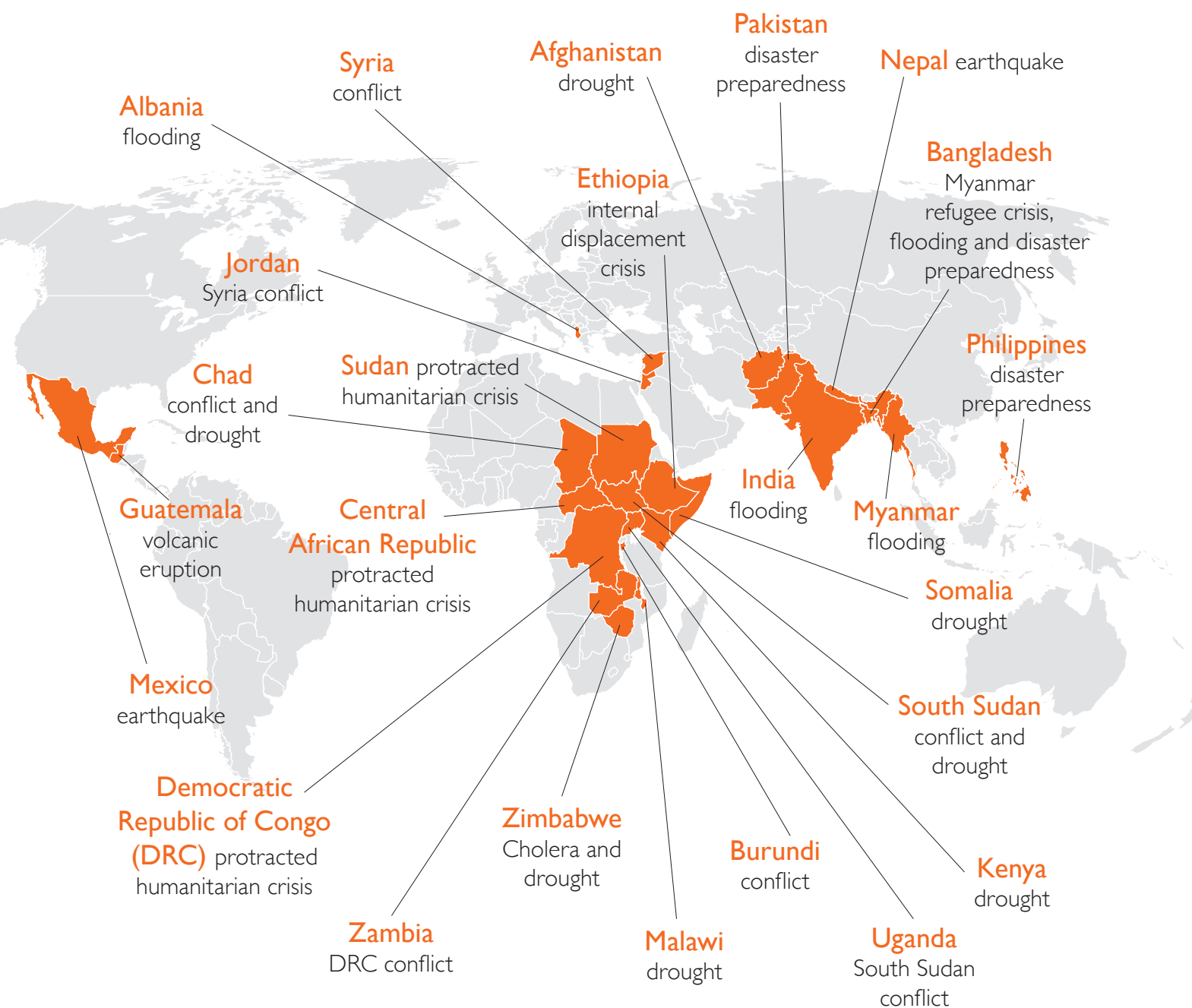


FIGURE 14: Humanitarian responses funded by World Vision UK in 2018.

Last year we responded to **22 different humanitarian emergencies on four continents including earthquakes, volcanic eruption, flooding, protracted droughts and conflicts leading to refugee crises. The majority of this work involved emergency food supplies, followed by WASH activities.**

In this section we include evidence on how projects were implemented, using reports from projects which ended last year. Contributions made by the projects can be seen in other sections of this report (e.g. page 25).

Humanitarian emergency projects can be protracted (for example, when conflict leads to displacement), but the greatest number are short-term responses (such as rapid onset disasters).

The responses included a wide range of activities, including general food distributions, resilience building, and serving refugees, IDPs and host communities. Most projects addressed more than one sector, reflecting the multiple needs people face when affected by an emergency.

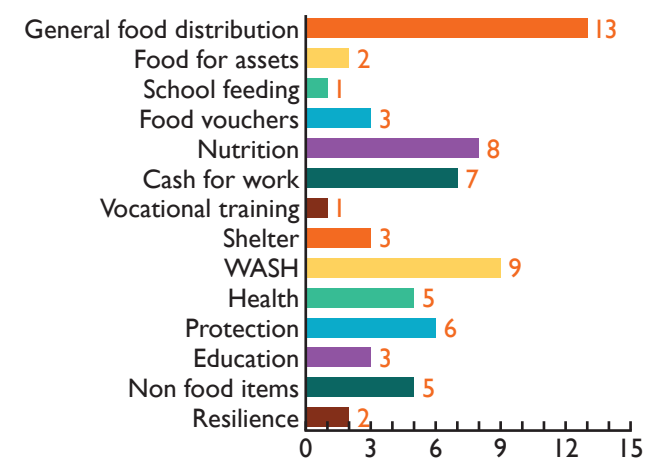


FIGURE 15: Number of humanitarian projects which included the above sectors in 2018.

From a review of all available emergency project reports, targets were met by an average of 88%. This is quite an achievement given the challenges of insecurity, poor roads and trying to achieve activities before rains begin. The most common reason for not achieving targets is WFP pipeline breakages, meaning that less food is delivered than the agreed amount.



ABOVE: Families wait in line at a WFP distribution in Central African Republic.
© 2018 Chelsea MacLachlan / World Vision



How well did we respond?

For this section all available emergency project reports were reviewed against the Core Humanitarian Standard (CHS).³⁵ This is the industry standard for humanitarian emergencies. However, all World Vision national offices are undertaking the CHS self-assessment where there has been a large-scale response. This is detailed and looks at how the organisation is run and whether policies are followed. Below, we present evidence of good practice, found in the project reports, under the Standard's headings.

1. Communities and people affected by crisis receive assistance appropriate and relevant to their needs.

It is important for responses to be appropriate to people's needs. All 24 reviewed reports show that World Vision UK-funded emergency projects (implemented in 2018) have been designed based on needs assessments, with some undertaking a deep dive into the needs of the community. In some cases (in insecure contexts or where the nature of the emergency required immediate action) only rapid assessments were possible. Projects funded by the START Network³⁶ have all generally been based on rapid needs assessments, given the short timeframe between raising the alert and submission of the

proposal, which could be a few days. These projects respond to emergencies such as disease outbreaks, natural disasters and other disasters for which no immediate other funding is available. In each of the START-funded projects, the affected communities were involved in the needs assessment and in the design of projects.

For example, in Zambia, refugees from the Democratic Republic of Congo participated in the design of the water distribution system. Where the initial proposal was to construct a distribution system with a tap every 50 metres, the refugees favoured clustered taps, but with longer intervals.

In a WFP project distributing food to internally displaced people (IDPs) in Juba, IDPs successfully negotiated to remove pulses from the food package and receive food vouchers instead, so they could buy vegetables they preferred.

2. Communities and people affected by crisis have access to the humanitarian assistance they need at the right time.

The use of START funds to address people's acute needs in a disaster has allowed us respond in a matter of days as the release of these funds is simplified.

We've found that general food distribution projects tend to report access challenges, generally due to the security situations. Conflict can result in food convoys being denied permission to travel. This is generally overcome by close monitoring of the security situation and accessing communities when it's possible through rapid response mechanisms. In the Central African Republic where people were moved out of a camp for displaced people due to insecurity, we've been able, in consultation with WFP, to move the food distribution point to where the people had fled.

3. Communities and people affected by crisis are not negatively affected and are more prepared, resilient and less at-risk as a result of humanitarian action.

The importance of household resilience for disaster prevention has been demonstrated already (page 28). The CHS promotes resilience in order to ensure that emergency responses themselves don't harm affected peoples' ability to recover well.

Five of our emergency projects had specific resilience objectives, building in aspects of the resilience and livelihoods framework (page 28). In Bangladesh, we implemented a resilience project that addressed people's vulnerability to floods. The community was involved in constructing dams and kitchen gardens.

Following the earthquake in 2015, World Vision Nepal supported communities with the construction of earthquake resistant water distribution systems and an earthquake resistant school. Four projects specifically reported on training elements for community members and government staff, increasing their knowledge and skills to address the needs of the population in the future.

4. Communities and people affected by crisis know their rights and entitlements, have access to information and participate in decisions that affect them.

As alluded to in the section above, projects and programmes have been designed together with affected people and they've participated in decisions that affect them. Information about the assistance that is available is given at the start of projects. All food distribution projects have helpdesks as a standard element of the project. At the helpdesk, people can get more information on the food distribution and understand who is eligible to receive food aid and how much each ration contains. In the health and nutrition programme in Somalia, project management committees, made up of local people, played a vital role in giving feedback to World Vision from the community and taking responses back to the community.

³⁵The CHS sets out nine commitments that aim to improve the quality and effectiveness of humanitarian response assistance. corehumanitarianstandard.org/the-standard

³⁶The Start Fund provides rapid financing to underfunded small to medium scale crises, spikes in chronic humanitarian crises, and to act in anticipation of impending crises, filling a critical gap in humanitarian financing. startnetwork.org/what-we-do

**Core Humanitarian
STANDARD**

FROM LEFT TO RIGHT: Refugees access water at a transit centre in Zambia. © Bernard Zgambo / Start Fund. Children play outside one of our Child Friendly Spaces in Zambia. © Bernard Zgambo / Start Fund. Our teams visit a village in Bangladesh, where houses were damaged by floods. © 2017 World Vision. Nepal's earthquake in 2015 destroyed this community's water supply. The nearest clean water was several hours away by foot. Now, they have a new supply. © 2018 Barun Bajracharya / World Vision.



5. Communities and people affected by crisis have access to safe and responsive mechanisms to handle complaints.

All 24 projects had a complaints mechanism where people could share their grievances. A variety of methods have been used, including suggestion boxes, dedicated phone lines, helpdesks, community meetings and direct face-to-face meetings with staff. In Nepal during the reconstruction of water pipelines and the school, our Monitoring, Evaluation, Accountability and Learning (MEAL) team went out regularly to the field to seek specific input and feedback from women in the area to ensure that women's voices were heard.

6. Communities and people affected by crisis receive coordinated, complementary assistance.

To ensure all affected communities are reached with what they most need, it is vital for agencies to communicate their plans to each other. This includes at UN level³⁷ and with local government authorities where all agencies meet. World Vision participated in relevant coordination mechanisms in all responses, adapting our programmes as needed. For example, in Guatemala, following a volcanic eruption, we adapted our WASH and shelter project several times, as coordination meetings revealed that other organisations were already operating in certain localities. In Kenya, responding to the refugees arriving in Moyale, World Vision has been able to deliver those services that were identified as gaps by other organisations, which they didn't have the capacity to address. In the Rohingya refugee response we operated a referral system for affected people. When children accessing the Child Friendly Spaces were suspected to be malnourished, they would be referred to other organisations who were delivering nutrition services in the area.

7. Communities and people affected by crisis can expect delivery of improved assistance as organisations learn from experience and reflection.

In nine out of 24 projects there is evidence that lessons learned from earlier projects have been incorporated into designs, or lessons have been identified in current projects that will be addressed when extending the project into a new phase. However, learning and reflection on past

experiences as standard is not embedded in all projects. Food distribution projects tend to miss opportunities to learn from implementation experiences. This may be due to the fact that general food distributions are highly standardised, short-term and driven by the food made available by WFP. Nevertheless, there are lessons to be learned as each of the projects reported issues with the WFP pipeline, resulting in affected people receiving less food than intended.³⁸ Longer term programmes tend to incorporate more learning, holding regular review meetings with staff and stakeholders as evidenced in the health and nutrition programme in Somalia. In Bangladesh, the Rohingya response lessons learned workshops were held with both local and national authorities. In the first phase of the Nepal WASH and education programme, a review found that women's voices had not come through strongly enough. The second phase showed an intentional search for women's views on the design and implementation of the project.

8. Communities and people affected by crisis receive the assistance they require from competent and well-managed staff and volunteers

and 9. Communities and people affected by crisis can expect that the organisations assisting them are managing resources effectively, efficiently and ethically.

The World Vision Partnership has standards, policies and procedures which guide staff in the way they work. These are not generally reported because reports record the work done rather than the performance of staff. In emergencies the World Vision Partnership Disaster Management Standards enable these procedures to be implemented in an emergency context. They are assessed regularly by senior staff during responses.



Learning and actions

Accountability: World Vision UK-funded humanitarian emergency projects adhere to standards of accountability at least at a basic level by having helpdesks and feedback and complaints mechanisms in place. Longer-term programmes tend to invest more in accountability and affected populations have more influence over the design and implementation of the projects. The extent to which the population is involved in each of the processes differs between countries and between projects within a country.

We will... continue to ensure that all parts of the Programme Accountability Framework,³⁹ are included in emergency responses and that high standards are achieved.

Learning: Most reports identify where projects faced and overcame problems. Some of these projects provide an intentional overview of lessons learned during the implementation period. A small minority of reports only discuss how previous lessons learned have been incorporated in the current project.

We will... implement a World Vision UK programme Learning Portal to store lessons from our programming which can be used to ensure all new projects can more easily access previous experience.

FROM TOP TO BOTTOM: Mother-of-four Petuela collects rations for a month at a food distribution in Central African Republic. © 2018 World Vision. As part of our Nepal earthquake response, people receiving cash transfers, like Narmada, were asked for feedback on the process. © 2018 Nissi Thapa / World Vision. 1-year-old Sharera fled Myanmar for Bangladesh with her mum. She lost weight and then got diarrhoea. At our Women and Young Child Space, she was weighed, measured, and given nutrition supplements, to help her grow well again. © 2018 Annila Harris / World Vision.

³⁷United Nations Office for the Coordination of Humanitarian Affairs (UN OCHA) unocha.org

³⁸World Vision has sought to advocate on behalf of affected communities. wvi.org/emergencies/publication/when-there-no-food-assistance

³⁹This is the framework for Programme Accountability in World Vision. This document seeks to define the minimum accountability standards for World Vision programmes and how we engage with communities. wvi.org/accountability/publication/programme-accountability-framework

Listening to the most vulnerable

This year World Vision UK launched a five-year research project to improve our evidence base and our understanding of who the most vulnerable children are in the communities in which we work. This looks at the extent to which they are reached, included and impacted, and how their circumstances are addressed by World Vision programmes. The research spans a range of emergency, fragile and development contexts in four countries: Bangladesh, Myanmar, Sierra Leone and the Democratic Republic of Congo. Stage one of the research asked men, women, girls and boys separately to define what makes children most vulnerable in their context. Stage two then met with children defined as most vulnerable to hear about their lives. In Sierra Leone, children themselves conducted their own piece of research on a key vulnerability in their community: teenage pregnancy.

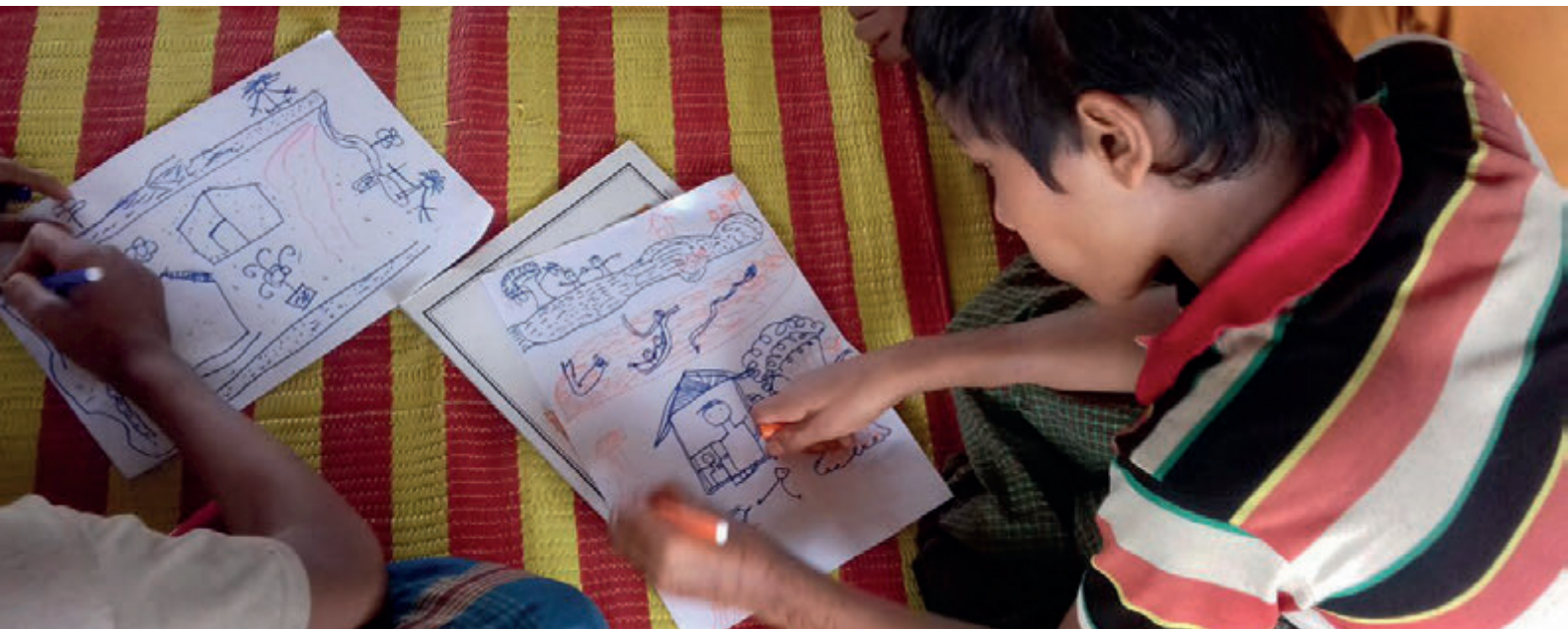
Bangladesh

The research in Bangladesh was conducted with Rohingya refugees in Cox's Bazar – in part of the world's largest refugee encampment.

The underlying issues that children identified with the most vulnerable, include lack of proper family care, discrimination (particularly the effect on adolescent girls), disability stigma and discrimination, and mental health problems. Children also emphasised material and environmental problems including hillside safety, due to broken roads, bridges and a lack of lighting along with a lack of school facilities and insufficient places for them to play.

Some of the most vulnerable children reported that the support they had received from World Vision had improved their education, nutrition, access to clean water and a safe place to play. Overall the research found that World Vision's programmes could be further improved by a greater focus on responding to the needs of children with disabilities and adolescents, and children living in the most remote and hilly areas of the camp.

“After I came to Bangladesh from Myanmar, I am alive because of the help I got from World Vision. CFS [Child Friendly Space] of World Vision helps me to continue my study here.” – Rahina* aged 15



ABOVE: Some of the most vulnerable children in Bangladesh tell our research team about their lives. © 2018 World Vision
*Name changed to protect her identity



Myanmar

The research in Myanmar was conducted in a village in the west of Myanmar, supported by World Vision's Tiddim ADP.

Children revealed factors that lead to vulnerability in their lives including food shortages, dropping out of school to work, violence by teachers, bullying, stigma and discrimination: children also have a fear of disaster, such as landslide. A further cause, is the divorce of parents leading lone parents to find alternative livelihoods, often requiring children's involvement.

The research suggests that World Vision's programme reaches many of the most vulnerable, such as poor children and orphans, particularly at times of emergency. Children see support in material terms, addressing the material dimensions of vulnerability. This leaves the other dimensions, such as parental care, discrimination and violence experienced at home and the resulting mental health problems to be more robustly addressed. A key recommendation from both boys and girls, (benefitting and not benefitting) was support for electricity to reduce child labour and to support study.

“When our house was destroyed by landslide, World Vision supported us with rice, chick peas, bed rolls and roofing sheets.”

– Samira*, Myanmar

Sierra Leone

The research in Sierra Leone was conducted in the Jaiama Bongor chiefdom in Bo District. World Vision's long-term development programme in Jaiama Bongor has been ongoing since 2011.

Children here reported that the circumstances of the most vulnerable children concerned school (children not going to school, or not wearing uniform in school), children working (on the family farm), poverty (parents unable to provide basic needs for children), children living with older grandparents, being disabled, being an orphan, violence at home, (particularly when not living with their biological parents). They also noted how issues were interlinked, for example that sometimes parents will not give their children food if they do not follow them to work on the farm.



TOP: In Myanmar, young people worked together to highlight issues in their area. © 2018 World Vision
ABOVE RIGHT: A young girl – identified as one of the most vulnerable in her community – tells us about her life.
© 2018 World Vision
*Name changed to protect her identity

Child-led research from Sierra Leone on teenage pregnancy

Fourteen children in the Jaiama Bongor area conducted their own research on teenage pregnancy. Their research revealed how this is a manifestation of the vulnerability of girls through lack of parental care, poverty, a lack of knowledge and poor access to appropriate preventative health care.

Many of the pregnant girls interviewed had lost one or both parents and lived with step-parents or other relatives. They explained how caregivers (aunts, uncles, other relatives) could not – or did not – provide basic needs such as sufficient food, school fees and materials, decent clothes and

sleeping places. One girl said her aunt used starvation as a method of punishment:

“With no other relative around to feed me, I was forced to find a boyfriend to provide food for me so that I do not starve to death.”

The girls said they fell in love with men who could afford and provide, but as a consequence got pregnant.

A further complication is the lack of knowledge about contraception and services, but also limited availability at the community health centre. Further vulnerability outcomes from teenage pregnancy are considerable. Most boyfriends abandoned the girls when they became pregnant.



Learning from our research

Across all contexts, our research found that the local perceptions and definitions of vulnerable children generally fall within World Vision’s overall definition and approach to vulnerability. Disability is very clearly identified as a major vulnerability factor in all places. Other key factors include orphans, children in large families, children not in school, gender discrimination, poverty and health problems. In addition, there are factors that appear in most places, such as mental health issues, violence, abuse, neglect and exploitation, divorce and family breakdown. A consideration is whether the mental health of children is adequately highlighted in World Vision’s definition.

The research highlights local subtleties of how children become vulnerable, particularly explanations of cause and effect. The

analysis of this is critical for developing any programmatic or policy response.

The research indicates many of the most vulnerable children are positively affected by World Vision’s programmes, but in terms of their vulnerability factors, we also need to consider if the programme responses are appropriate to meet the root causes of vulnerability.

This research will take place every year until 2022, tracking the same communities and understanding how the most vulnerable children’s lives are being impacted by World Vision’s work as programmes adapt to take their needs into consideration as the highest priority.

ABOVE: Vulnerable girls in the DRC, share their opinions of World Vision’s Girls’ Education Project.
© 2018 Mbuso Jama / World Vision

A group of some of the most vulnerable children who benefitted from our work, highlighted the impact of cash savings groups and emergency medical support for mothers and children on their lives. Children did not report any programme provision for teenage pregnancy and abuse, although adults were aware of some preventative and system strengthening work which children were not aware of. A key question for consideration could be how children might become more aware of these initiatives, especially as older children can be parents themselves when they are teenagers and so child protection mechanisms for caregivers should involve them.

Democratic Republic of Congo

The research in DRC was conducted in a community in the heart of the mining area of the province Haut-Katanga.

Children and adults identified disabled children, orphans, displaced children, and children in divorced families as being amongst the most vulnerable. Children also highlighted other factors where children lack family care such as abandoned children, street children, caregiver neglect and deprivation; also abuse and the specific vulnerability of girls.

World Vision’s programme here focuses solely on improving girls’ education and was in the very early stages of start-up at the time of the research. Data collected in subsequent years will reveal the impact of the project on the most vulnerable. However while children could already see that World Vision was not reaching the groups they identified as most vulnerable, they also clearly associate World Vision with education provision and support.



ABOVE: One of the research venues and some mapping work done in DRC – part of the work to describe the lives of most vulnerable children.
© 2018 World Vision

Faith and development

Research has shown that: “The Christian identity enables World Vision to engage in ways that explicitly recognise and acknowledge faith and spirituality, with groups including faith leaders, and that this contributes to trust in its programmes and intentions with increased engagement as a result.”⁴⁰

Our strategic intention is to “Live out our faith with boldness and humility.” This is translated programmatically into a holistic approach to development interventions that seek to integrate faith, alongside a commitment to work with churches and faith-based actors, to promote inter-faith and inter-denominational relations to drive child wellbeing.⁴¹ While working with faith leaders and communities is part of how World Vision lives out our Christian identity, reporting on the impact of this partnering in our programmes is limited. This year we decided to look across project reports to see what it’s achieving and how this partnering is being reported.

Out of 50 end of project reports, one fifth (20%) included reference to working with local faith leaders. However, in a sample of 17 annual reports of current long-term programmes, 70% describe a working relationship with faith-based organisations in the previous year’s activity.

There was more evidence of partnering with faith leaders and organisations in majority Christian contexts than in inter-faith contexts.

More effective partnering with faith actors occurs through the implementation of models such as Channels of Hope and Celebrating Families.

At the basic level, working with faith leaders amounted to a focus on inclusion, where faith leaders and influencers were actively targeted to participate in projects, most commonly through training and capacity building activities.

In one Area Programme in Honduras, we partnered with 42 Catholic and Evangelical churches in leadership development and peace-building. In Zimbabwe, leadership training supported better networking and collaborative efforts at community level, including churches coming together to support vulnerable children. Armenia reported increased involvement of churches in child protection, with 846 households (identified as caring for some of the most vulnerable children) reached by church-led support. In Albania, it was reported that initiatives targeting parents (through the Celebrating Families project model), had significant impact in a short space of time. It was observed that working through churches and faith communities engaged parents more effectively than working through state structures. In Kenya, a Maternal and Child Health project included the Channels of Hope model. As a result, 30 faith leaders were able to speak with more than 2,000 congregants about critical messages such as immunisation, birth registration and exclusive breastfeeding.

Overall, the evidence does point to the huge value of reaching faith leaders and actors in sharing information for behaviour change. It is likely that other evaluations and project completion reports do not reference faith leaders specifically as this is very much part of how World Vision works, and report formats do not necessarily ask for detailed analysis of faith partners.



Working with faith leaders to prevent and respond to gender-based violence

In 2013, hundreds of thousands of women’s and children’s lives were affected when conflict broke out in South Sudan. Six years after the world’s newest country was born, close to 4 million people have been forced to flee their homes.

- One in two women and girls will experience a form of gender-based violence before the age of 21.
- From 2016 to 2017 there was an 24% increase in cases being officially reported.
- 79% of respondents said that children born of rape faced stigma.

Within fragile and conflict-affected contexts, faith is often seen as an asset for resilience and a foundation for hope. World Vision’s Channels of Hope⁴² approach utilised this in a two year project in Yambio District, South Sudan, part of the Magna Carta programme funded by the UK Foreign and Commonwealth Office. The project aimed to change attitudes, promote community acceptance of survivors and children born of rape, and improve locally managed systems to prevent and respond to sexual violence. 11 different denominations participated, forming 17 Channels of Hope Action Teams with a total of 510 members. The teams promoted positive attitudes towards sexual violence survivors and children born of rape and an end to victim-blaming at both community and police level.

The impact of this project was assessed in 2018 through a qualitative case study, analysing responses from 147 interviews with faith leaders, women’s groups, survivors of sexual violence, community leaders, youth groups, children, World Vision staff, UN organisations and community members.

The findings matched evidence cited in other research (such as the World Bank’s Voices of the poor study), that identifies faith leaders as a respected moral authority who are often trusted more than other societal or government leaders by the population. In almost all the interviews, faith leaders and their churches were mentioned as places of acceptance, rest, healing, hope, wisdom, safety (especially for survivors and children born of rape), and at times, material help, or less frequently, rescue. Significantly, multiple interviewees referred to the changed attitudes of faith leaders, as demonstrated by them speaking publicly and more frequently about issues of gender-based violence (GBV) and specifically sexual violence, as well as care of children, relating these issues to Biblical teachings. Some respondents noted that the increase in reported cases of GBV was also pushing this onto faith leaders’ agendas and therefore increased awareness may not be entirely attributable to World Vision’s project. Prior to this project, 51% of faith leaders thought that a female victim of rape may have been at fault and should marry her perpetrator as a form of settlement. Significantly, at project closure 97% reported that they understand the harm of GBV and seek to respect the wishes of survivors.

While recognising the limited scale of this case study, the evidence does support the value of working with faith leaders, and particularly assuring representation of both women and men from different denominations, in beginning to tackle some of the root causes of GBV and in reducing barriers and stigma faced by survivors.

LEFT: Grace, Susan, Lona and Jennifer* all survived sexual assault during South Sudan’s conflict. They were left with a sense of shame and isolated themselves from their community. The Magna Carta programme gave them a safe space to share their stories as a means of healing and emotional recovery. © 2018 Mark Nonkes / World Vision © 2018 Mark Nonkes / World Vision *Names changed to protect identity.

⁴²Channels of Hope trains and equips faith leaders and other community members to break down barriers between faiths and within communities, to respond to serious issues and promote the wellbeing of all – especially the most vulnerable. wvi.org/health/publication/channels-hope

⁴⁰A finding from a four year research study completed in 2018, conducted by academics from RMIT University, Deakin University, University of London and Stellenbosch University, exploring the impact of World Vision’s Child Sponsorship programmes across 13 countries. External papers are expected to be published.
⁴¹Also includes ‘Christian formation and spiritual nurture of staff’ and ‘spiritual nurture of children’ World Vision International, Faith and Development in Programmes

Quality of evidence

The overall scores of the review process are encouraging and have improved compared to 2017. The scores across the five BOND review categories (voice and inclusion, appropriateness, triangulation, contribution and transparency) show that 3 out of 12 reports (25%) rated good, while 8 of the 12 evaluation reports (66%) met the minimum standard, meaning that they can be trusted as sources of evidence and conclusions drawn from the results. This is a positive trend as in 2017, only 1 out of 12 reports (8%) rated good, versus 11 (92%) with the minimum standards. This improvement reflects the continued emphasis on quality and efforts of World Vision UK to generate quality evidence through robust evaluation policy and deliverables produced by consultants. As usual we requested colleagues in World Vision Germany to select and review two evaluations to compare with our scores. Their scores are shown in brackets.

Our scores are slightly wider apart this year, reminding us that rating evidence is to some extent a subjective process.

The DEC evaluation report of the East Africa Hunger Crisis response recorded a weak score of 33. This reflects the fact that rigorous impact evaluations of humanitarian assistance pose major methodological, practical and ethical challenges (Puri et al., 2017).⁴³ The DEC evaluation for South Sudan used a methodology which meant the findings could not be generalised to the wider population of the project area. However, this report provides important lessons for the World Vision Partnership when it comes to preparing, planning, overseeing and delivering humanitarian impact evaluations. It also sheds some light on the level and types of evaluation that it is possible to achieve in humanitarian evaluations where timeframes are shorter.

TABLE 1: 2018 Evaluation BOND Scores

	Country	Project	Total
1	Albania	World Vision National Office Technical Programme evaluation	52
2	Zimbabwe	Sanzukwe ADP evaluation	41
3	India	World Vision National Office Technical Programme mid-term evaluation	39
4	Honduras	Comunidades Solidarias AP evaluation	46
5	Sudan	DFID SHARP Transition to Development project evaluation	53
6	Somalia	Global Fund TB programme evaluation	40
7	South Sudan	DEC East Africa Hunger Crisis evaluation	33
8	Myanmar	BRACED Alliance	57
9	Pakistan	Linking Preparedness, Response and Resilience in Emergency Contexts (LPRR)	51 (50)
10	Bangladesh	EC EVPRA mid-term evaluation	55
11	Armenia	Early Childhood Technical Programme evaluation	67 (60)
12	Sudan	Small-Scale Agricultural Productivity Project – Blue Nile	51

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

⁴³Jyotsna Puri, Anastasia Aladysheva, Vegard Iversen, Yashodhan Ghorpade and Tilman Brück (2017) 'Can rigorous impact evaluations improve humanitarian assistance?,' Journal of Development Effectiveness, 9:4, 519-542, DOI: 10.1080/19439342.2017.138826

Evaluation report ratings

Compared to 2017, the quality of evidence across the five BOND principles⁴⁴ has significantly improved (as shown on Figure 16). All five categories of evidence principles have widely exceeded the minimum standard threshold as a result of World Vision's increased oversight and quality assurance role in evaluations. As in 2017, the strongest ratings observed in 2018

are within the 'appropriateness', and 'transparency' categories; this confirms the trends or patterns observed in some previous years (2012, 2014, 2015 and 2017). The 'voice and inclusion' category has improved slightly, which is encouraging but it is still not prioritised to the extent required.

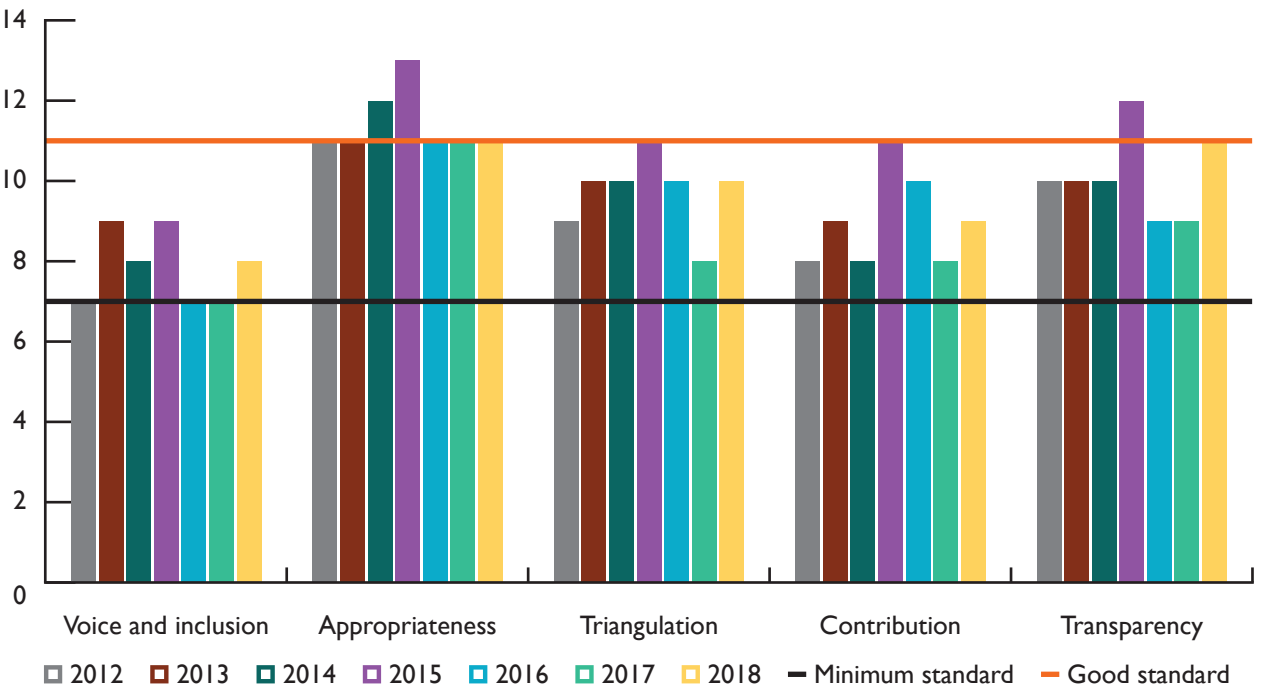


FIGURE 16: Evaluation report ratings across the five BOND principles.

Learning and actions

It is really good to see the higher quality national level baseline and evaluation reports from Armenia and Albania. This is a good indication that we are on track to improve evidence quality in the partnership as a whole.

External evaluations conducted by consultants (mandatory for most grant-funded projects) still vary in quality. This shows

the need for World Vision to make expectations clear to consultants to a greater degree and be involved in the design of evaluations as far as possible.

We will... continue to make our policy clear and make every effort to hold those who conduct evaluations on our behalf accountable for the quality of their work.

⁴⁴bond.org.uk/resources/evidence-principles

Conclusion

We're pleased that, looking at our output achievements, we continue to achieve the vast majority of the work we set out to do. And we are genuinely grateful to have reached 2 million children last year, while continuing to deepen our commitment to fragile contexts. According to project evaluations and completion reports, we have seen evidence of positive impact on children and families last year in all sectors.

For the children and families we've reached, our work will have been lifechanging and in some cases lifesaving.

Achieving child wellbeing outcomes

As in previous years we see that genuine community engagement continues to contribute to successful projects. Whether it is through feedback in humanitarian emergency responses, faith leaders' engagement in addressing the stigma faced by survivors of sexual violence or community members' action to prevent child marriage, when a community is fully involved, the change will be deeper and long-lasting.

We also note that though we strive to achieve change in systems and will continue to do so, we do not always achieve it to the extent we would like to see. Willingness to report abuses in child rights is slow to change, access to markets is hard to achieve and breakages in the food pipeline in emergencies appear to be a recurring theme.

We will... continue to use evidence-based models in our projects, continue to integrate sectors to achieve comprehensive change and strive for projects to be of sufficient duration to change behaviour and policy.

Most vulnerable children in our programmes

We are aware of the tendency to assume that the needs of the most vulnerable have been met when we see a positive change in child wellbeing indicators. There are many places in this report which show positive change, but which do not specifically point out the extent to which the most vulnerable children were included. They may well have been, occasionally they haven't, but unless the evaluation is investigating this specifically, we simply do not know. However, the most vulnerable child research does show that our programmes

target the poorest children and families and we do see examples where project interventions have been effective in reaching the most vulnerable. For example, where a Child Protection Unit prevents a child marriage or a family in crisis is transformed by the ability to access a government entitlement such as a disability benefit, as seen in this report.

We will... increase our efforts to ensure that projects and programmes work to identify the most vulnerable, design programmes according to their needs and track our progress in reaching these children and families. We will report on our progress in next year's research report, when we will have completed year two of the five-year research.

Faith in our programming

Research completed by the World Vision Partnership in 2018 confirmed what we knew to be true, that being open about our Christian identity builds trust and leads to opportunities to work in partnership with communities and their faith leaders. We've seen examples of this through both Celebrating Families and Channels of Hope, our main faith-based project models.

We will... continue to be confident in our identity and look for opportunities to work with faith leaders and communities.

Accountability in humanitarian emergencies

The use of the Core Humanitarian Standard to review the quality of our humanitarian work helped us to see how well we responded to emergencies last year. In humanitarian work some factors (e.g. insecurity and adverse weather) are beyond our control, however we can better influence the level to which our programmes learn. This is twofold, both in the field learning through programme accountability, hearing from affected communities and incorporating their feedback to improve the project; and secondly through intentionally reflecting on the project and taking this experience into future programming.

We will... increase our efforts to achieve consistent and intentional learning in all our programming. In the next year we will be setting up a programme learning portal to help our teams achieve this.

Oh early marriages
Oh wicked act, enemy of humanity
Away, go far away from here,
Leave the minds of our fathers and our mothers,
Away, source of diseases and traditional ways
We men of the earth
Stretch out your hands until the end of days
So as to chase this plague from the lives of our
children and keep our sisters and mothers safe
OH! NGO help us
Combat forced marriages and rid us of infant
mortality,
Enrich the minds of our parents
And so be gone from here

– Poem composed by Gotheye children's club, Niger

ABOVE: After eloping at 15, Bupe* from Zambia is now back at school and feels hope for the future. © 2018 World Vision *Name changed to protect identity.

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FRONT COVER: "I really like singing the Gong-Gong Song at the centre [Child Friendly Space]," says Sabekun, 6-year-old refugee from Myanmar living in Bangladesh. © 2018 Annila Harris / World Vision **CONTENTS PAGE:** Children head home after a meal of nutritional porridge at a Child Friendly Space in the Democratic Republic of Congo. © 2018 Jon Warren / World Vision