2015
ANNUAL REPORT
SOMALIA
Our Vision
for every child, life in all its fullness;
our prayer for every heart, the will to make it so.

Strategic Goal
World Vision Somalia’s main strategic goal is to enhance the resilient well-being of 2 million children and their communities by 2019 through peace, protection and opportunity.

Strategic Objectives
1. Strengthen peace and protection of children from abuse and all forms of violence;
2. Improve and have resilient livelihoods and food security for child well-being;
3. Improve health, nutrition and WASH for children, women and families;
4. Improve quality of education and life skills for children and youth;
5. Organizational effectiveness.

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This annual report provides an overview of the work of World Vision Somalia from October 2014 to September 2015

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YEAR AT A GLANCE
This year has brought hope to many children in Somalia despite living in an extremely challenging environment. Through the support of our donors, government, community leaders and partners for dedicating their time and resources, we ensured that the most vulnerable people in Somalia were reached.

STRATEGIC GOAL 2015
To contribute to the measurable improvement in the well-being of 700,000 Children their families and communities by 2015

- 67 Million USD total funding
- 253,076 children reached
- 59,193 Households reached
- 53,880 beneficiaries with access to water and sanitation
- 7,034 children benefiting from the education program
- 50,983 benefiting from health and nutrition
- 50,983 children treated for common childhood diseases
- 219,393 child health care nutritional screening and treatment.
I am pleased to present to you the World Vision Somalia (WV Somalia) 2015 impact report. This year has been an exciting year for the Somali people as the country has begun to realize the effects of peace and state building through the roll-out of federalism and coordinated delivery of programming under the New Deal. While we still have a long way to go, WV Somalia team in collaboration with governments, our donors and stakeholders have reached over 253,076 children in 2015.

The Somalia Resilience Program (SomReP) has grown over the past three years to USD 28 million program and continues to bring coordinated resilience programming across Somalia through seven implementing agencies. SomReP launched an innovative Early Warning/Early Action system which was put to the test as both drought and flooding began to seize Somalia with the onset of El Niño. In the coming years, the work of all the resilience actors will remain critical in building the capacity of communities to respond to the climatic shocks that affect Somalia.

The Global Fund grant for the fight against TB celebrated ten years of success treating over 113,000 people with an 88.5% treatment success rate with WV Somalia being the principle recipient of the TB grant since 2004.

WV Somalia continued to bring the voice of Somali children to the forefront of strategic discussions. In being elected by peer agencies to key coordination fora such as the Somalia Humanitarian Country Team (HCT); Interagency Working Group for East and Central Africa for Disaster Preparedness (IAWG) and the Somalia NGO Consortium Steering Committee, WV Somalia was able to shape agendas and be a thought leader in the region.

The total annual budget for 2015 was USD 67 million primarily from government bilateral grants, multilateral funding, gifts-in-kind and some private non-sponsorship funding (PNS). We are grateful to our funders for their commitments to enable us to achieve our work. The office was also blessed to be recognized by the WV Partnership for our work by being awarded several awards this year; the Certificate of Excellence Award for National Office Maximizing Grants and Certificate of Excellence Award for Advocacy Impact for work done on the New Deal. Without the commitment, dedication and hard work of the entire WV Somalia team, these successes would not be possible.

The WV Somalia team developed its 2016-2020 strategy this year with the goal ‘to enhance the resilient wellbeing of 2 million children and their communities by 2019 through peace, opportunity and protection.’ The team will continue the work you will see throughout the pages of the report to achieve this ambitious, yet achievable goal in the coming five years.

Thank you and God bless you.
Simon Nyabwengi
Country Director
Since 2008, WV Somalia, with support from WV Korea has been working with community networks, local partners, and the Borama Fistula Hospital to support fistula victims in the Togdheer Region of Somaliland. Factors such as early marriage, female genital mutilation, lack of adequate health care services and poverty which contributes to malnutrition and stunting in children, leading to girl’s skeleton and pelvis not to mature fully are key contributors to development of obstetric fistula.

It is estimated that more than 50% of girls in rural areas are subjected to early or child marriage. This dramatically increases their chances of getting pregnant when their bodies are generally still unfit for pregnancy. The physical consequences of obstetric fistula lead to severe socio cultural stigmatization and marginalization. Women and girls suffering from fistula are often abandoned by their husbands and relatives as well as stigmatized and marginalized by their communities, causing them extreme economic hardship and psychological trauma. Obstetric fistula typically affects the poorest of the poor.

WV Somalia’s fistula project has been very successful in the community because it has changed the lives of beneficiaries by reducing their pain, reducing the cause of their stigmatization and ostracization, allowing them to pursue economic activities again and reintegrate with their communities.

“I have realized that without knowledge I can do nothing.”

50% of girls in rural areas are subjected to early/child marriage.
The Ambassador

An ambassador and spokesperson for women suffering with fistula, 19 year old Hodan Mohamed Ahmed fiercely talks about the need for women to come out and be treated. “I want girls and women not to hide, but to come out because fistula is as treatable as any other condition.”

Married at 13, and giving birth to a son a year later, Hodan had a difficult labour due to her young age that left her with fistula after delivery. Her husband divorced her as soon as he realized she developed the condition and her community shunned her.

“People used to call me ‘isku furan’ The phrase is used both as a medical term and an insult. It was very bad. Now I am normal and I have a hope that I will be like other girls and reach a higher position in life. I have enrolled in school for the first time. I have realized that without knowledge I can do nothing.” Fortunately for Hodan, her mother and sister cared for her. Hodan remembers a terrible time in her life, “It was awful when people made me believe that my condition was incurable, this made me keep to myself as I felt humiliated, depressed and stigmatized.”

Through the support of WV Somalia she was able to have a successful fistula surgery. After the surgery, she was also given five goats as a means for future income. She has bred the goats and increased her herd to 14. She diligently spreads the word among women who are often much older than her. Women frequently find the hospital after 20 to 25 years of living with fistula.

Impact

- 64 women and girls successfully underwent fistula surgery and recovered
- 35 training conducted in child protection
- 6,580 beneficiaries reached through the child protection training
- Women who have received surgery have begun to raise awareness among their female friends and relatives and refer fistula cases to WV Somalia project staff
- Some husbands have begun to approach project staff when they think that their wives might suffer from obstetric fistula hence increasing awareness and the women receiving treatment
WV Somalia promotes enrollment and retention of school-aged children and improves access to quality education by building the capacity of teachers, constructing new classrooms and renovating existing classrooms as well as the provision of learning materials. 7,034 children have been taught valuable skills.

### A Wind of Change

Scorching sun, strong winds, blowing sand and sitting on sand or stones in makeshift classrooms: this is the environment that the children of Kalolwe Primary School in Lugaya district in Somaliland have had as their school. Despite a zeal for education, this setting motivated the majority of the students to stay out of school. “During the rainy season, we would miss classes because the floor would get wet and muddy, this made us lose many hours of learning,” commented one of the students in the school.

A wind of change blew their way through the education programme implemented by WV Somalia, who built four classrooms for the school. “Learning in an open class with no cover from the sun and rain and sitting on the floor had caused us not to enjoy learning, yet we persevered,” said one of the students. Kalolwe Primary School not only benefited from the construction of classrooms, but also desks which were part of World Vision Somalia’s Gifts-in-Kind (GIK) program. The desks were donated by IRN-The Recycling Network in USA.

### Impact

- **7,034** Total children reached
- **3,037** girls reached
- **3,997** boys reached
- **317** desks given as GIK
WATER, SANITATION AND HYGIENE (WASH)

WV Somalia has constructed piped water systems, shallow wells with hand pumps, latrines, garbage pits, as well as facilitated the capacity building of WASH in communities through community-based management committees. As a result of our efforts, 53,880 people accessed clean water sources in 2015.

Without Fear

My name is Farhiyo Malaas, I am 35 years old and a mother of four children. Living in an IDP camp, we have had problems accessing sanitation facilities. During the day, we would defecate outside the village and at night we would use tins for fear of being raped or harassed by gangs. After WV Somalia’s construction of latrines inside the camp things have changed a great deal.

My children and I are now accessing the latrines anytime of the day and night. There are no longer cases of violence against women as it was before. We can now go to the latrine anytime without fear. I am now secure and happy because I have a latrine within close walking distance of our shelter.

Impact

- **53,880** Total beneficiaries reached
- **86** latrines constructed
- **169** dams built
- **60** handwashing stations erected

306 semi-circular bund (embankments) constructed
WV Somalia seeks to increase access to quality and affordable primary health care with an emphasis on children, women and other vulnerable community members, as well as reduce malnutrition among children under the age of in full-five and women of childbearing age. 50,983 children were reached through the health interventions in 2015.

Community Based Management of Acute Malnutrition

The Community Based Management of Acute Malnutrition (CMAM) is a project model which provides services for children with severe malnutrition, and addresses the root causes of malnutrition through referral to other projects including, livelihoods, education and health.

The CMAM model is essential to communities as it allows them to access essential nutritional care without travelling long distances to a health centre or a hospital. Through the CMAM methodology, children are provided with weekly rations of Plumpy’Nut®, which they receive at home with regular meals and is specifically formulated for the nutritional rehabilitation of children who suffer from severe acute malnutrition. Children are then monitored by a mobile health team weekly until they are discharged from the project as cured.

There has been intentional integration between health and nutrition in the project locations. The Outpatient Therapeutic Program (OTP) services are supported by WV Hong Kong, Therapeutic Supplementary Feeding Program (TSFP) are supported by World Food Program (WFP) and health services are integrated with funding from Irish Aid in Puntland.

119,073 children screened for malnutrition
“There is nothing as difficult as walking long distances just to seek medical help. I couldn’t afford a car as it was too expensive and so I had to carry my baby, Mohamed, for 5kms to the nearest health center. He was going to die if I did not do this. Today, I am so privileged to have this mobile clinic in our camp. Access to medical care has become easier and this has saved the lives of many of our children. I am very grateful to this team,” says Hawa.

For about two weeks, Hawa had noticed that her youngest son, was suffering from upper chest pains. When the health coordinators of the mobile clinic were alerted of his condition, they came to her house. After the review, Mohamed was put on an antibiotic and anti-fever treatment.

“I did not have to go far for medical care. The miracle is that now we can get these services in our homes. I can now take care of my other children as it was very hard for me to ensure their safety while I was away seeking medical attention”.

“I look after all my children now and still receive the medical assistance I need. In addition, I save, the money that I would previously use for medical services and use it to meet the basic needs of my family.” Hawa explains, full of joy. Today Mohamed has made a full recovery.

Impact

1,096 mothers attending health education sessions

46,337 children treated from malnutrition

50,983 beneficiaries reached
FOOD FOR ASSET

Food for Asset (FFA) is a partnership between World Food Program (WFP) and WV Somalia. During implementation 11 local NGOs were engaged as a means of not only empowering these agencies but as a strategy to reach more communities especially in areas where WV Somalia has limited access due to security limitations. The broader goal of the programme has been to save lives, improve maternal child health and nutrition, restore livelihoods and improve resilience of vulnerable communities in Somalia.

Saving the Future

Nimco is a two year old girl who lives in Godobijaran district in Puntland, Somalia; she stays with her parents and a sister. Her mother is a housewife and her father is a peasant farmer and relies in keeping animals and providing casual labour. When WV Somalia team was doing active case finding for malnutrition, Nimco was identified as malnourished with a Mid Upper Arm Circumference (MUAC) of 11.9 cm and was admitted into the Therapeutic Supplementary Feeding Program (TFSP) where she was treated with food supplement for three months. During this period, her mother was given information on the best health feeding practices for infants and the team continued monitoring her and by the discharge time she had gained weight and her body structure restored; her MUAC was at 13.5, an acceptable level.

Impact

144,305 direct beneficiaries
45,861 girls reached
41,210 boys reached

80% cure rate for children admitted
Gifts-in-Kind (GIK) are non-monetary donations made to WV Somalia by private and institutional donors. These donations come in many forms such as medical supplies, educational materials, and clothing. They are critical for WV Somalia’s work and allow WV to provide ready-to-use materials to people and communities who need them the most.

Wheels of Hope

The people of Doolow, a district in Jubaland, southern Somalia, were awakened to a new mode of transport in town; the bicycle. The bicycles are a part of GIK project donated by the Boeing Company to WV Somalia. They were given to 20 community based livestock workers and community health workers (CBAHWs) to complement Office of US Foreign Disaster Assistance (OFDA) and with Department of Foreign Affairs Trade and Development (DFATD) funded livelihood projects. “This bicycle is going to help me as a livestock worker to move quickly to attend to livestock. This is a pastoralist community and livestock is life to us. The bicycles have improved the overall livelihood of families because we get to attend to sick livestock on time. We have managed to save more livestock lives and as a result families’ livelihoods are secured,” said Hassan, a community member and project participant.

The Boeing Company also donated 24 bicycles to 12 health centers and 12 community nutrition workers (CNWs) to improve their response rate towards child health. The volunteers are now able to reach centers that are far away quickly when called to attend to sick children and pregnant women. “For us, the bicycles have literally made the difference between life and death. Now, we are able to reach communities in good time. This has greatly reduced the mortality rate of children and improved their overall health,” said Ali, a community nutrition worker.

Impact

- **438 desks** distributed to schools. Children now learn comfortably
- **1,800 thermal bags** to carry lunch to school from the feeding centers given to students which encourages and increases school attendance
- **13.8 tonnes of Ready to Use Therapeutic Food (RUFT)** received from WV Canada targeting **1,922 children** for the moderately malnourished children
- **20 trained community based health workers in Dolow** received bicycles to attend to livestock quickly. This has increased the overall livelihoods of families
- **12 health centres and 12 community workers** received **24 bicycles**. This has improved their response rate towards child health and children get attended to quickly
Somalia Resilience Program

Somalia Resilience Program (SomRep) is an approach that helps in building resilience among communities who are challenged by recurrent droughts and the chronic vulnerability that results among pastoralists, agro-pastoralists, and peri-urban households across Somalia. Designed to address communities’ unique needs toward building resilient livelihoods, the program builds on collective lessons learnt by consortium members: World Vision, Oxfam, Danish Refugee Council (DRC), Cooperazione Internazionale (COOPI), CARE, Adventist Development and Relief Agency (ADRA), and Action Against Hunger (ACF).

SomRep in brief

<table>
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<tr>
<th>7</th>
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<td>16</td>
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<td>112</td>
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<td>total beneficiaries reached</td>
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<tr>
<td>30,642</td>
<td>total households reached</td>
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SomRep aims to increase the resilience of chronically vulnerable people, 183,852 vulnerable people, 30,642 households, communities and systems through improved and diversified livelihood and asset-preservation strategies, improved disaster risk management and other coping strategies to drought, improved ecosystem health as well as improved community-level governance. SomRep was formed in 2012 to scale up their respective best practices through partnership in resilient programming.

Notable Consortium-level achievements

- Memorandum of Understanding finalised with Intergovernmental Authority on Development (IGAD) SomRep officially joins Steering Committee of the IGAD’s Drought Disaster Resilience Sustainability Initiative (IDDRSI), March 2015.
- SomRep hosted Somalia Resilience Systems analysis under Resilience Learning Network: The analysis was structured around the Organisation for Economic Co-operation and Development (OECD) resilience systems analysis methodology.
- Launch of Early Warning/Early Action (EW/EA) System version 2.0 in March 2015.
The Game Changer

Abdi Farah Ali has seen how his community in Dolow has changed the way that they deal with natural disasters. Before SomReP, traditional methods of dealing with shocks like drought or flooding were used. Now, things have changed. Abdi compares traditional methods to using a blunt knife, but SomReP, through implementing partner Cooperazione Internazionale (COOPI) has helped the community to ‘sharpen the knife’.

The community has had a series of trainings that has prepared them for any shock. One such training is on the Early Warning Early/Action System developed by SomReP.

“This is what the community had been lacking,” says an excited Abdi. Early warning enables communities to read signs and indicators of an imminent drought. These signs enable the community to trigger an action to avert the disaster. For example, when livestock owners notice that the water levels at the dam have gone below a particular level, they take immediate action by reducing the number of livestock at that dam or moving them to another source.

Abdi and his community now know that when they receive early warning information, they need to take action immediately by talking to the government and hopefully avoiding an emergency situation. It has also helped them to rehabilitate a piece of land to grow hay for hard times ahead. “Our knives are now sharpened at all times,” says Abdi gracefully.

Impact

- Increase in average household income levels from USD 114.8 to USD 346.19
- Increase in number of households contributing to household income from 20% to 56.6%
- Reduction in household expenditure on food consumption from 93% to 36%
- Increase in households with improved access to a sustainable water source from 21% to 30%
WVV started TB treatment in Somalia in 2004 and to-date over 113,000 people in Somalia have been treated with a Treatment Success Rate (TSR) of 88%. Working closely with 23 local and international partners and government authorities, TB facilities have expanded from 34 to 68 since its inception. A recent evaluation indicates that the treatment ratio has been brought down to 100,000 from 500,000 people per treatment centre in 2014.

113,000 People Treated since 2004

88.5% Treatment Success Rate

Funding the Future

Established in 2010, LC’s are models for organisational platforms for learning and innovation with a focus on driving results to achieve child well-being.

The LCs are located closer to the field to facilitate stronger collaboration with the national offices in capacity building, technical support and generating learning. The overall goal of all LCs is to drive results for sustained well-being of children and ministry impact in East Africa.

**LCs have four objectives:**
- Define technical guidance and standards to enhance ministry performance and impact
- Build technical skills and expertise for quality programming
- Enhance resource development for ministry
- Champion innovation, evidence and learning for quality programming and results

Impact

- Engaged the East Africa Community (EAC) in the development of the first EAC Child Policy and influenced the inclusion of a child protection and child participation focus.
- Increased child safe programming through child protection incidents which increased from one to six incidences.
- WV Somalia recorded increase from one incident to six incidences during the period which reflected keen monitoring of child protection.
THOUGHT LEADERSHIP

Leadership
WV Somalia staff believes that by bringing the voice of Somalia children to decision makers we can make an even greater impact on the ground in our work. Having a strong voice in high level fora is important in this process and WV Somalia has been elected by peer agencies to the following strategic external coordination bodies;
• Co-Chair, Interagency Working Group for Disaster Preparedness East and Central Africa (IAWG)
• Member, Somalia Humanitarian Country Team (HCT)
• Chair, Somalia NGO Consortium Steering Committee (SNC)
• Strategic Advisory Group (SAG)
• Member, Food Security Cluster

Achievements
WV Somalia was recognized by the WV partnership for our work by being awarded the following accolades:
• Certificate of Excellence Award; Award for National Office Maximizing Grants (Grants Acquisition Management)
• Certificate of Excellence; Award for advocacy impact for work done on the New Deal
• Best Performance in People and Culture Score Card

Our Partners
WV Somalia would like to sincerely thank some of our partners who work with us to ensure the well-being of children is achieved. They include: Action Against Hunger (ACF), Adventist Development and Relief Agency (ADRA), Africa Relief and Development (ARD), African Muslims Agency-Direct Aid (AMA-DA), Comitato Collaborazione Medica (CCM Italy), Comitato di Coordinamento delle organizzazioni per il Servizio Volontario (COSV), Comitato Internazionale per lo Sviluppo dei Popoli (CISP), Community Activity for Development and Relief Organisation (CAFDARO), Community Empowerment & development Action (CEDA), Community Empowerment and Development Action (CEDA), Community Organization for Relief and Development (CORD), Cooperative Assistant for Relief Agency (CARE), Cooperazione Internazionale (COOPI), Cooperazione Internazionale (COOPI), Danish Refugee Council (DRC), Deeg-roor-Medical Organization (DMO), Development Initiative Access Link (DIAL), Galkaio TB Center (NTPs) Golweyne Relief and Rehabilitation NGO (GRRN), Hayat Group (Hayat), Integrated Development Focus (IDF), International Medical Corps (IMC), Intersos Mission in Somalia (INTERSOS), Kuwait Joint Relief Committee (KJRC), Manhal Charitable Organisation (Manhal), Mercy USA For Aid and Development (Mercy USA), Ministry of Health (NTPs), Muslim Aid UK (Muslim Aid), OXFAM, Physicians for Social Responsibility-Finland (PSR – Finland), Puntland Minority Women Development Organization (PMWDO), Qatar Crescent (NTPs), Rebuild Initiative Organization (RIO), Regional Action Organisation (RAO), SAACID, Save the Children (Merlin), SIGHT, World Health Organisation (WHO), Soma-Action International Fund (SAIF), Somali Humanitarian and Relief agency (SHRA), Somalia Relief and Development Action (SRDA), SWISSO – Kalmo (SWISSO), Taakulo Somali Community (TASCO), Technoplan Group of Volunteers (Technoplan).
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- Partner with us for change and impact

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