



Do No Harm Shapes WASH Interventions for Better Impact in Baidoa, South Central Somalia

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In October 2014, World Vision Somalia (WVSOM) declared a CATIII response after failed rains, continued conflict and limited humanitarian access pushed part of Somalia into deeper emergency. As part of the 90-day response plan, WVSOM prioritised a number of assessments to pre-position the organisation to better support children and their communities.

A Do No Harm training and assessment were conducted in December 2014 with a focus on Water, Sanitation and Hygiene (WASH) interventions implemented in Baidoa, South Central Somalia. The WASH interventions were part of a twelve months project funded by the Office of U.S. Foreign Disaster Assistance (OFDA). The purpose was to deepen understanding of the local context and conflict drivers for better thought-through interventions that respond to humanitarian needs while promoting social cohesion and protection. The assessment highlighted potential implications of the WASH project on the local context and informed project decision-making and planning.

Better understanding of the context contributed to careful planning and execution of WASH interventions. These included rehabilitation of shallow wells, construction of VIP latrines in Internally Displaced Persons (IDP) camps, installation of plastic hand washing stations, training of WASH committees, hygiene promotion as well as distribution of dignity kits, jerry cans and soap. The project became more intentional on community participation, decision-making that involved the diverse groups in the

community and interventions that would benefit the whole community.

The project which was implemented in partnership with Golweyne Relief and Rehabilitation NGO (GRRN) targeted 12,000 beneficiaries (IDPs and host communities) — the majority being those displaced from other regions either due to insecurity and/or drought. Tensions usually arising from competition over scarce water resources were mitigated. The beneficiaries, particularly women and the disabled, were pleased as their dignity was restored through construction of appropriate latrines and distribution of dignity kits. Beneficiaries were also happy that hygiene promotion was done by people from their own communities — selected from various clans. This in itself was a way of restoring trust among different clans. For women, who normally would only be engaged in household chores, their participation in the project as hygiene promoters gave them an opportunity to get out of their homesteads and contribute to community-wide activities.

A key learning is that in any emergency, there are various groups of individuals more vulnerable to harm than other members of the population. This may be because they hold less power in society, are more dependent on others for survival and less visible to relief workers. Humanitarian actors must identify vulnerable groups and plan interventions to reduce their exposure to vulnerability.

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