World Vision®

Humanitarian & Emergency Affairs

Annual Report
2013

Building Disaster Resilience:
Saving, Protecting and Restoring Lives of Children in Their Families and Communities

Children suffer most in disasters. Therefore, World Vision commits itself to mobilise effectively and efficiently when disaster threatens or strikes children and their families. The organisation seeks to transform suffering into well-being whilst protecting the rights, dignity and livelihoods of all people, with a focus on children – especially the most vulnerable. Working in partnership with other organisations, enabled by the support of its donors, World Vision uses a variety of means to reduce the impact of future disasters by building on the strengths of communities.

Annual Report
2013

October 2012 – September 2013

Humanitarian and Emergency Affairs
World Vision International

World Vision in brief

Founded in 1950, World Vision is an international partnership of Christians serving children, their families and communities in conditions of poverty in 97 nations or territories, primarily through programmes of community development, disaster management and promotion of justice.

The World Vision Partnership is a federated network of national offices that have signed a covenant of partnership and agreed to work together to pursue a common vision and mission. (The governance and operational structure of World Vision International and the World Vision Partnership is described in detail in Section 1 of the organisation's 2012 Accountability Report, available on www.wvi.org.)

Being a child-focused organisation, World Vision has four strategic goals regarding the well-being of children:
- Children enjoy good health.
- Children are educated for life.
- Children experience love of God and their neighbours, always being mindful that World Vision is a guest in cultures that hold many diverse beliefs.
- Children are cared for, protected and participating in the decisions that affect their lives.

This annual report is one of a range of public documents prepared by World Vision to share information about the organisation's work and activities. It can be read alongside the following, available on www.wvi.org:
- *World Vision International 2013 Annual Report*
- *World Vision International 2012 Annual Review*
- *World Vision International 2012 Accountability Report*
- *World Vision International and Consolidated Affiliates 2013 Financial Statements.*

Foreword

The well-being of children lies at the heart of World Vision's responses to humanitarian emergencies.

In the past year our local and global staff reacted to international food emergencies and weather-related crises. They sought to alleviate suffering caused by civil conflict and human trauma from a variety of causes, in situations as immediate as the fighting in South Sudan or as protracted as postwar reconstruction in Sri Lanka.

Whether training children and families to keep themselves safe in complicated disasters or establishing child-friendly spaces (CFS) to protect children from violence and abuse, we have paid special attention to the youngest and most vulnerable members of society.

Some of the crises have been widely covered by international media, but most barely registered on TV screens or in newspapers outside of the country of concern.

The civil conflict in Syria has spawned the largest refugee crisis in the world, with an estimated 9 million people displaced.
In 2013, I visited World Vision's work with Syrian refugees in Majdel Anjar, Lebanon.
I was struck by the scale of the intervention and the passion to rebuild children's lives among staff who were working 'flat out' in an apparently endless and growing crisis.

An 11-year-old girl called Hoda told me of her experience listening to the whistling of bombs falling on her school, fleeing in panic from snipers at the family home, and running from place to place for more than a year until, finally, finding peace in an informal settlement in Lebanon. Now, she was back at school and receiving psychosocial care through World Vision. In addition to ensured access to food, water and essential household items, she and her brother were receiving vital inner healing.

Looking forward, it is impossible to predict the precise nature and location of the biggest humanitarian emergencies, but we know the landscape is rapidly changing. World Vision has started to prepare for new types of disaster, changing structures for international response and shifting sources of funding.

We are calling our new approach Disaster Management 2020. In an effort to strengthen the broader humanitarian sector, we plan to share Disaster Management 2020 openly with our partners and get their input.

Our vision includes the health, nutrition, education, protection and participation of every child in a humanitarian emergency. We greatly value your past partnership and look forward to even greater collaboration in the years ahead.

Kevin Jenkins
President and Chief Executive Officer
World Vision International

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Introduction

In fiscal year 2013 (FY13) World Vision challenged itself around the themes of relevance and excellence in our work through the end of this decade. Two critical phenomena compel us to look for more effective ways to support the most vulnerable children and their families. First, while we celebrate an overall reduction globally in the number of people living in chronic poverty, those that remain in poverty are becoming even more vulnerable. Such people are trapped by factors that are most resistant to humanitarian and development endeavours. Second, poverty is increasingly concentrated in those contexts which manifest conflict and fragility due to states not being willing or able to ensure the well-being and future of their citizens. These two aspects are driving more of the most vulnerable to an even more vulnerable and precarious existence.[1]

This report highlights aspects of World Vision's disaster management activities that, together with partners, peer agencies and especially vulnerable communities of families and their children, are making a difference. But we must do more!

As a child-focused agency with a substantial global presence we can point to many prior disaster responses in which significant humanitarian support was provided to affected families and children. In FY13 alone World Vision responded to 90 humanitarian crises and reached over 11 million people across 51 countries.

The organisation is investing in holistic disaster-management approaches that incorporate research, evidence-based programming, advocacy and humanitarian policy supported by field capacity and enabling technologies. This is making an important contribution to innovative thinking and operations that ensure the relevance and effectiveness of World Vision's disaster management interventions, from preparedness through emergency responses and recovery activities.

Complexity and changeability are the hallmarks of our current and future operating environments. Over the past 18 months World Vision has worked to better understand the trends and pressures that are now in play and that will affect the future in order to ensure that World Vision maintains its relevance and effectiveness.

I hope you will find the FY13 annual review of World Vision's child-focused disaster-management work valuable and engaging.

Dan Kelly
Partnership Leader
Humanitarian & Emergency Affairs

[1] OCHA, *World Humanitarian Data and Trends* (2013), 1–3. <http://www.unocha.org/what-we-do/policy/resources/world-humanitarian-data-and-trends-2013>

Delivering quality and strategy

Capacity building

Alexandra Levaditis

The capacity needed for an effective disaster management approach requires attention not only to the development of people but also to systems, processes and organisational culture. World Vision's Humanitarian and Emergency Affairs (HEA) unit has traditionally viewed capacity as the people, systems and 'esprit' required to do the organisation's work effectively, in line with accepted standards. Over the last several years, leadership development has become a critical fourth component of this approach. (See Illustration 1.) These four areas are underpinned by the application of learning from HEA's experience.

In FY13, HEA focused on a few key themes:
- refined systems for global and national disaster management
- development of future disaster management leaders
- creation of an online orientation course
- compilation of a learning frame for HEA responses.
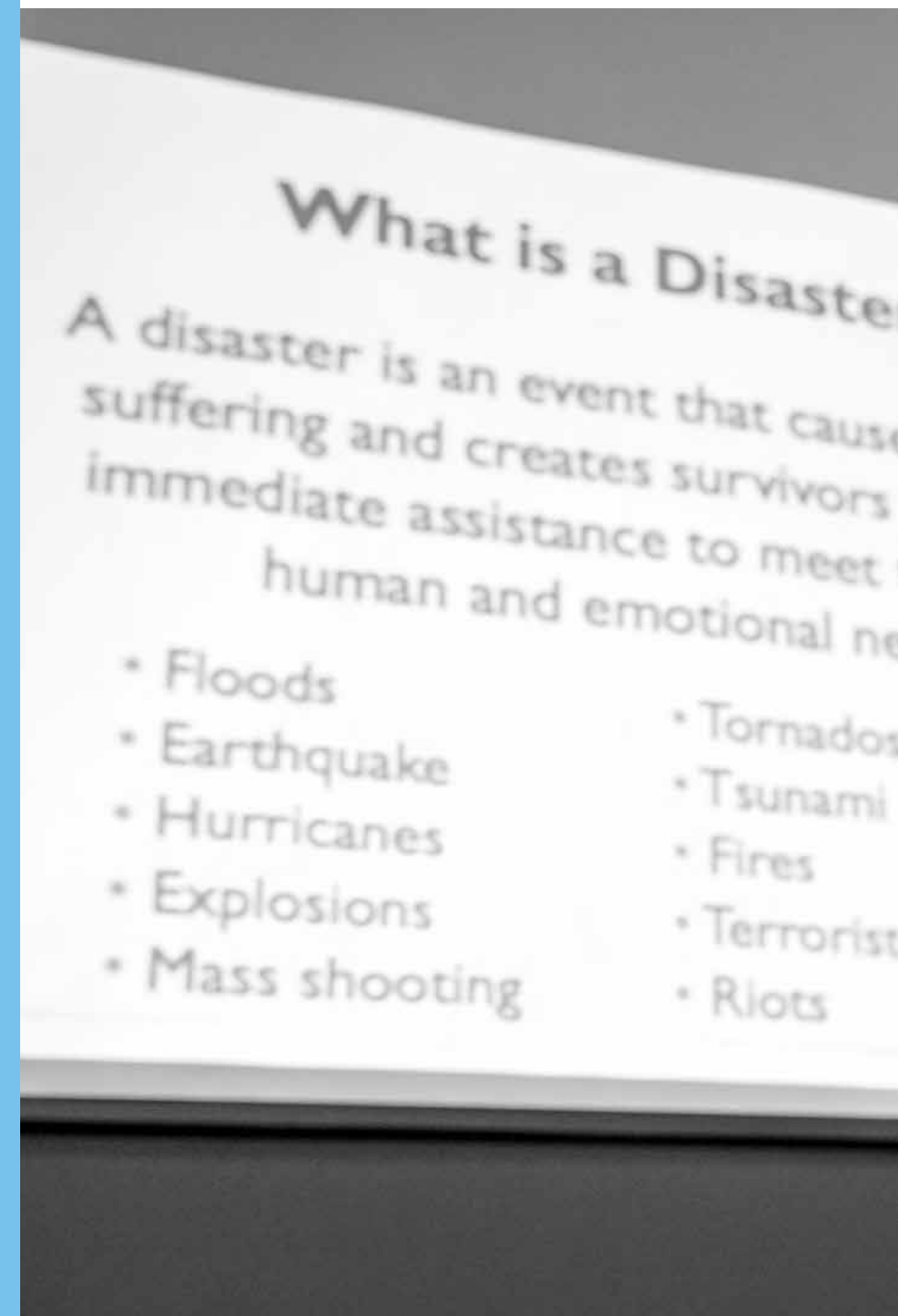
ILLUSTRATION 1.   COMPONENTS OF CAPACITY

LEADERSHIP

SYSTEMS   **PEOPLE**   **ESPRIT**

LEARNING
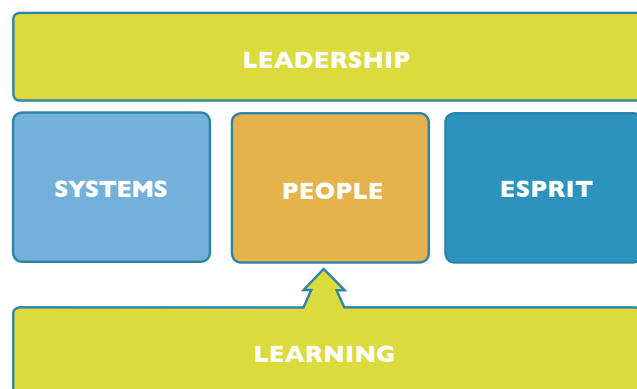
Systems development

Much of the systems work that took place in FY12 was consolidated in FY13 through the application of revised systems in three areas:

- *Application of revised processes and tools for national disaster management planning and preparedness.* This resulted in better integration of disaster management into organisational strategy and annual planning as well as adoption of more of a contingency planning approach to disaster preparedness.
- *Refinement and application of HEA's Emergency Management System (EMS).* Considerable effort was put into conducting emergency simulations and continuing to refine response team roles and responsibilities and accountability for organisational decision making in the EMS, which serves as World Vision's emergency response framework. This led to an expanded definition of EMS that added the responsibilities of World Vision's regional units.

HEA also began to convert the EMS manual to a more user-friendly and searchable online version. Plans are to build on this in FY14 to consolidate HEA tools in one online platform.
- *Development of technical competencies and a validation process for surge capacity.* In FY13, World Vision further developed crucial technical competencies in the increasingly wide and complex array of sectors and areas of expertise that are needed for emergency deployments.

Leadership development

A wide range of activities contributed to shaping World Vision's emergency leadership-development strategy. Efforts focused on building humanitarian leaders at national, regional and global levels through:

- *Completion of a curriculum on leadership in emergencies,* which consists of a leadership-competency assessment tool, a face-to-face workshop and the development of a competency library. The competency library offers videos, assignments, workshop materials and articles that can be accessed remotely and can help staff develop competencies in emergency leadership.
- *Response Manager Training for approximately 20 staff.* The programme consisted of pre-work assignments, a face-to-face workshop and simulation, a post-workshop coaching programme and the completion of a portfolio by each candidate to demonstrate his or her ability to apply learnings. Many of those who completed the training went on to play critical roles in global responses.
- *The Emerging Leaders Programme,* which was designed with the Deloitte's Leadership Academy to build the leadership skills of 12 global HEA leaders.
- *Facilitation and participation in the Humanitarian Leadership Programme and input into the Humanitarian Leadership Academy,* leadership-development initiatives of Save the Children and Deakin University.

Online orientation course

In an effort to diversify HEA's learning methodologies, adopt better adult learning practices and allow staff to learn in their own contexts, HEA has begun developing an online disaster management orientation course. The course will consist of four modules which will address key knowledge that World Vision believes all disaster management staff should have – such as internal and external humanitarian standards, internal response procedures and processes, child protection, and disaster context analysis. In addition, an online course being developed by the International Medical Corps and the Harvard Humanitarian Initiative on humanitarian architecture will be added as a core part of the course when ready. The course will be finished in 2014.

Learning framework

While World Vision has a long history of capturing and applying learning from its emergency responses, the organisation's framework for learning has become outdated and no longer referenced, making it difficult to articulate expectations clearly. HEA needed something short, simple and focused on intentional learning approaches to disaster responses that the organisation already used, such as real-time evaluations, learning events and end-of-response evaluations. In FY13, an updated learning framework was developed and communicated to staff across the organisation. Its first application was in the Syria Crisis Response.

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Accountability

Madara Hettiarachchi
and Jamo Huddle

World Vision strives to be accountable to children and communities affected by disasters by respecting their needs, concerns and preferences; providing critical, timely information; and involving them in activities and decisions that directly affect their lives. This commitment to accountability is reflected in the international and internal standards and polices that guide World Vision's humanitarian programmes. In order to ensure humanitarian accountability, World Vision HEA not only works directly with children and communities, but also works collaboratively with other humanitarian organisations. This overview shares some of the achievements in FY13 across the various levels where World Vision engaged in humanitarian accountability.

At the strategic level

In FY13, World Vision participated in a number of initiatives to ensure that its accountability work is informed by action research and intentional learning. World Vision conducted an external review of its Programme Accountability Framework (PAF) against accountability frameworks from corporations, governments, NGOs and umbrella organisations. This was the first step in identifying strengths and gaps in World Vision's PAF. The organisation also facilitated action research on accountability feedback mechanisms by the Active Learning Network for Accountability and Performance

in Humanitarian Action (ALNAP) and CDA[2] in Sudan.[3] World Vision took a leadership role in a number of external accountability initiatives such as the Communicating with Disaster Affected Communities Network and the Inter-Agency Standing Committee (IASC)[4] Accountability to Affected Populations Taskforce. World Vision's Asia Pacific Region adopted accountability to communities as one of its strategic humanitarian directions for 2013–15 (aligned with World Vision and international standards).

These activities took place within the context of, and were informed by, larger humanitarian discussions including:

- Commitments on Accountability to Affected Populations, endorsed by the IASC principals in 2011
- The Accountability to Affected Populations Operational Framework
- The Joint Standards Initiative (aimed at harmonising various technical and quality standards in the industry).[5]

Building capacity

To build organisational capacity in accountability, World Vision HEA promoted the PAF across regional and national offices with a focus on disaster prone, fragile contexts and humanitarian responses. Significant efforts in FY13 included capacity-building events for more than 240 field-based staff, promoting innovative accountability approaches and providing support to field colleagues to ensure effective integration of the PAF into on-going programming activities. To support the work of staff who operation-

alise accountability, HEA developed a number of tools and guidelines during FY13. Some of these tools included information sheets that link accountability to programme sector goals, a resource guide to strengthen accountability to communities in World Vision area development programmes (ADPs) and a community satisfaction survey.

Humanitarian accountability training addressed the commitment towards Prevention of Sexual Exploitation and Abuse (PSEA) by raising staff awareness.

Direct assistance

Accountability assistance is a priority in contexts that are highly prone to disasters. For example, HEA supported World Vision in Sri Lanka in aligning accountability commitments in its development programmes and building indicators into baselines, monitoring, semi-annual reports and evaluations. HEA also supported the Syria response, and helped World Vision Bangladesh develop a comprehensive accountability monitoring system for a project funded by the European Commission – Humanitarian Aid and Civil Protection (ECHO). HEA lent its expertise to help World Vision offices in Ethiopia and Kenya establish complaint and response mechanisms (CRMs) in refugee camps (Dollow Ado and Tongo in Ethiopia, and Kakuma in Kenya). The CRMs enabled the organisation to identify and resolve a number of issues such as lost registration cards, unaccompanied children collecting food, and fraud through double rations. HEA provided aid to six national offices to enable them to operationalise accountabil-

refugees, World Vision was able to work with the government of Tanzania to facilitate smooth voluntary repatriation.

With a growing number of disaster-affected communities using mobile technology, HEA introduced technology into accountability mechanisms where (a) communities preferred it and (b) capacity existed in World Vision's national offices to do so.

In FY13, World Vision received funds from the Humanitarian Innovation Fund to build a prototype for the use of mobile technology to improve accountability to disaster-affected populations. The project was developed to maximise two-way communication with disaster-affected communities, enhance World Vision's evidence base and improve response decision-making.

World Vision's Basic Rapid Assessment Tool (BRAT) was translated into more than 10 languages to facilitate community input into programme design from the beginning. In the Zamboanga conflict and the Bohol earthquake response in the Philippines, trained staff collected input from affected communities immediately following the disasters using smartphones. BRAT incorporates a number of

accountability questions, including preferred ways of receiving information from World Vision and community capacity to participate in response programming.

End-of-programme evaluation reports were completed for the Horn of Africa response to drought and the Sahel Food and Nutrition crisis, and a real-time evaluation report was completed for the Mali drought response. In these evaluations significant weight was given to the views of disaster-affected community members. More than 5,500 children and adults were consulted about their perceptions of the relevance and effectiveness of World Vision's work. Their feedback helps World Vision improve current and future programming and provides tangible evidence of the value that World Vision places on accountability to affected communities.

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ity assessments: the Philippines, Indonesia, Sri Lanka, Myanmar, Taiwan and Mozambique.

Means used for accountability measures

A number of low-tech tools – including community notice boards and suggestion boxes – facilitated feedback to World Vision and improved provision of information to beneficiaries. In Ethiopia, schoolchildren were able to raise issues with camp management through suggestion boxes in the refugee camps. In Nyarugusu Refugee Camp in Tanzania, because of wide consultation and feedback from

[2] Formally, Collaborative Development Action. Now referred to as CDA Collaborative Learning Projects.

[3] ALNAP, 'Learn about World Vision's experience using feedback mechanisms in Darfur' (10 October 2013). <http://www.alnap.org/story/164>

[4] The IASC is a joint forum for UN and non-UN humanitarian actors, of which World Vision is a part.

[5] The Joint Standards Initiative has transitioned to the Common Humanitarian Standard.

Humanitarian policy and advocacy

Nina Nepesova and Rein Paulsen

Policy work in FY13 continued to build on the momentum established in the previous year by using the growing network of humanitarian advocates and working in a more coordinated fashion. The year saw a number of successes, several of which are highlighted below.

The priority for humanitarian policy continued to be support to global emergency responses, especially through advocacy. This support is essential to ensure humanitarian access to affected populations, protection and well-being of children, improved humanitarian coordination, and adequate funds for emergency responses. Policy support included deployment of advocacy surge capacity.

In FY13, the Advocacy Response Group for Category 3 Global Emergencies provided network-wide advocacy support for the Democratic Republic of the Congo (DRC) during the

CATEGORY 3 GLOBAL EMERGENCIES

'Category 3 global emergencies' or crises refer to such large-scale emergency responses that they require a global, system-wide response from World Vision.

M23 insurgency in the east of the country. The group also continued to address the crisis in Mali (as an extension of the ongoing response in the Sahel) and was activated for the crisis in Syria.

The M23 rebellion in eastern DRC led to a serious humanitarian protection crisis, especially for children. While not a Category 3 global emergency, the situation became a key priority for HEA. Benefiting from existing policy capacity in the organisation's Goma office in the DRC, World Vision was able to contribute to field-level humanitarian coordination and protection advocacy. This was complemented by work at the global level, including inputs to the

revised MONUSCO[6] mandate on child protection, humanitarian access and the peace process. World Vision was the first to call for the appointment of the special envoy to the Great Lakes, who can help bring longer-term solutions to the situation as well as help ensure civil society has a voice in the peacebuilding process. The appointment of the UN special envoy, Mary Robinson, was a marker of success. HEA also helped with the recruitment and the mentoring of new advocacy staff in eastern DRC.

To strengthen humanitarian advocacy capacity in Mali, HEA provided support for the recruitment of a humanitarian policy advisor

and intensified its lobbying in global capitals before the formation of the UN peacekeeping operation named MINUSMA. This resulted in strengthened humanitarian, child protection and human rights provisions in MINUSMA's mandate, fostering better cooperation between humanitarian actors and MINUSMA at the field level. Building partnerships for child protection, World Vision hosted the Watchlist for Children and Armed Conflict network in Mali and helped to facilitate research into the effect of the conflict on children. This research report was presented to decision makers in London, Geneva, Brussels and New York. The report was used to help create the UN Monitoring and Reporting Mechanism for grave violations against children's rights in Mali.

During FY13, the conflict in Syria became the main focus, and World Vision scaled up its operational work and advocacy in response. Support was provided in such areas as the development of an advocacy and research response plan. Critical work was commissioned to complement inter-agency efforts, such as research on the legal implications of cross-border operations. Humanitarian policy capacity in the field was gradually developed through several deployments of international staff.

The Advocacy Response Group worked closely with World Vision Lebanon and World Vision United Kingdom to release one of the first policy reports highlighting the impact of the conflict on Syrian refugee and Lebanese host communities, especially the effects on children. Other country-level engagements continued in the context of the ongoing HEA work in Somalia, Sudan and South Sudan.

At a global level World Vision undertook high-profile engagements such as participation in the 2013 United Nations Economic and Social Council (ECOSOC) Humanitarian Affairs Segment. World Vision also co-chaired two formal side events related directly to priorities identified in World Vision's Disaster Management 2020 (DM2020)[7] strategy. First, together with UN Habitat and the United Kingdom's Department for International Development, World Vision chaired an event on humanitarian action in urban settings. The purpose was to examine collaborative solutions to issues faced collectively by the humanitarian community in urban responses. Second, World Vision held an event to introduce, promote and encourage the implementation of the updated IASC non-binding guidelines, 'Use of Armed Escorts for Humanitarian Convoys,' which World Vision played an active role in revising. Finally, World Vision took the opportunity of the ECOSOC general debate to highlight the impact of the Syrian crisis on children, broader protection and humanitarian access concerns, and issues of decreasing funding to all ECOSOC participants and member states.

Other external engagements, beyond response-specific work, addressed issues around the UN's Transformative Agenda, early planning for the 2016 World Humanitarian Summit, and issues related to effectiveness of humanitarian action – such as research on humanitarian financing.

Internally, capacity improvements were implemented, including the completion of the 'Toolkit for Advocacy in Emergencies,' finalised in September 2013. HEA also strengthened surge capacity through the humanitarian policy network and continued support to the Global Technical Resource Network.

Collectively, humanitarian policy and advocacy work in FY13 was successful in positioning the organisation centrally on issues of priority to DM2020. External peers and partners recognised the impact of World Vision on issues of concern to the humanitarian sector and the significant contributions made to promoting important policy issues. This work continues to play a significant role in supporting field operations to improve the situation of the world's most vulnerable children – those affected by disasters and conflict.

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[6] MONUSCO is the United Nations Organization Stabilization Mission in the Democratic Republic of the Congo.
[7] DM2020 represents the future for World Vision's HEA work. It is a shift to a more agile, responsive, integrated model of disaster management.

Humanitarian operations

Engagement with international coordination bodies

Claire Beck and Ian Ridley

World Vision International has been actively engaged in co-ordination bodies within the humanitarian industry at the strategic level as well as at the programmatic, operational level.

Coordination and collaboration took place through several key groups, such as the various bodies of the IASC – for example, the Working Group and the Emergency Directors' Group – and the United Nations cluster system at both global and local levels. Other key coordination and collaborative bodies with which World Vision worked included the Steering Committee for Humanitarian Response, the Humanitarian Directors' Forum (formerly the Inter-Agency Working Group), and the International Council for Voluntary Agencies. Through its participation in these bodies, World Vision brought the voice of the field into headquarter-level discussions and thus influenced decisions and directions taken that strategically affected field operations.

TABLE 1. WORLD VISION ENGAGEMENTS AT THE INTERNATIONAL LEVEL – FY13

HUMANITARIAN SECTOR	CLUSTER OR COORDINATING BODY	MEMBERSHIP IN ADDITIONAL WORKING GROUPS	WORLD VISION ACTIVITIES
ALL	IASC	Working Group Emergency Directors' Group	Input on the Transformative Agenda and ongoing emergencies, with a particular focus on large-scale responses
HEALTH	Global Health Cluster	Core Group	Support to National Health Clusters and the work plan
	The UN Inter-Agency Task Team on HIV in Emergencies		Input into technical guidance and evaluation of HIV programmes
	CORE Group	Newborn Health in Emergencies Working Group	Revision of guidelines for neonatal health interventions
	IASC Working Group on Mental Health and Psychosocial Support in Emergencies	Monitoring and Evaluation Working Group	Co-chair of the IASC Working Group with WHO
NUTRITION	Global Nutrition Cluster	Assessment Working Group, and Capacity Building and Development Working Group	Hosted Information Management response staff for cluster
FOOD SECURITY	Global Food Security and Livelihoods Cluster	Cash and Voucher Working Group and Food Security and Livelihood in Urban Context Working Group	Input into technical guidelines and training
SHELTER	Global Shelter Cluster	Global Shelter Cluster Strategic Advisory Group and Global Shelter Cluster Regulatory Barriers Working Group	Set agenda for the cluster and monitored progress of work plans and production of guidance documents
PROTECTION	Global Protection Cluster	Protection Mainstreaming Task Team	Co-led the task team with International Rescue Committee Member
CHILD PROTECTION	Global Child Protection Working Group	Gender-Based Violence Area of Responsibility Working Group	Drafted minimum standards for child-friendly spaces; provided trainers and assessment leads for the Syria crisis
EDUCATION	Global Education Cluster	Active member in eight additional task forces	Member
	Inter-Agency Network for Education in Emergencies (INEE)	INEE Minimum Standards Working Group and Advocacy Working Group	Member
WATER, SANITATION AND HYGIENE (WASH)	Global WASH Cluster		Drafted guidelines for hygiene promotion in drought
LOGISTICS	Logistics Cluster		Participant and facilitator of inter-agency training
EMERGENCY TELECOMMUNICATIONS	Emergency Telecommunications Cluster		Participant and facilitator in training activities; seconded a staff member to the World Food Programme and the cluster, based in Rome

'The Inter-Agency Standing Committee (IASC) is a unique inter-agency forum for coordination, policy development and decision-making involving the key UN and non-UN humanitarian partners.' Its role is to be 'the primary mechanism for inter-agency coordination of humanitarian assistance.'

—— *Inter-Agency Standing Committee website*

IASC cluster system

The scope of World Vision's involvement in the IASC cluster system was wide and varied. World Vision had representatives in all nine IASC global clusters: health; nutrition; food security; protection; education; shelter; water, sanitation and hygiene (WASH); logistics; and emergency telecommunications. In addition, many of the clusters had a number of working groups or areas of responsibility in which World Vision participated by providing input into strategy, programming tools and training. Table 1 highlights World Vision's international involvement with humanitarian coordinating bodies in FY13.

In addition to engaging actively in coordination at the global level, World Vision emergency response staff participated in national and subnational cluster meetings and numerous task forces. World Vision staff participated in all sectors of operation and, in more protracted emergencies, took a co-chair role at the national or subnational level. This included participating in the Shelter Cluster in South Sudan and, at the subnational level, being co-chair of the Child Protection Working Group in Twic, Warrap State. World Vision staff had similar national and subnational roles in the Democratic Republic of Congo, Somalia and North Syria.

IASC global 'clusters are groups of humanitarian organisations, both UN and non-UN, in each of the main sectors of humanitarian action, e.g. water, health and logistics.' These clusters have clear responsibilities for coordination of emergency responses in their sectors of expertise.

– *Humanitarian Response website*

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Child well-being outcomes

Jamo Huddle

The well-being of children lies at the core of World Vision's work. The organisation works with communities to ensure that children enjoy good health, are educated, love God and love their neighbours. World Vision also strives to make sure that children are cared for, protected and participate in the development of their community. Children at risk of or affected by disasters face numerous threats to their well-being. By describing World Vision's work in three crises, this article describes some of the significant challenges that disaster-affected children faced in FY13, and how World Vision addressed these issues to improve their well-being.

'I really benefited from remedial classes. The teachers understood us and explained things to us more than once. I really thank you for this activity, and I hope you keep doing it.'

– Jordanian child,
WV Syria Crisis Response: Child Well-being
Contribution Report

Syria multi-country crisis

In September–October 2013, UNICEF estimated that humanitarian assistance was needed for 6.8 million affected people in Syria, of whom more than 3.1 million were children. Outside Syria the total number of refugees and those awaiting official registration as refugees numbered 2.2 million, of whom approximately 50 per cent were children. [8] Many of these children had lost access to education and health services. Many felt unprotected because they had either suffered from or been exposed to armed violence, sexual violence and torture. This article focuses on World Vision disaster interventions in FY13 aimed at improving the well-being of Syrian refugee children in Jordan and Lebanon. [9]

JORDAN

During its work in Jordan as a result of the Syria crisis, World Vision conducted a rapid assessment of problems facing families and children. What struck the organisation was not the expression of the standard child needs for healthcare, food, clothing and shoes, but the importance survey respondents gave to education, which emerged as a critical issue. Challenges to obtaining adequate education in Jordan were varied, including:

- the expense of school fees
- transportation, in some cases over long distances
- overcrowding of schools
- lack of safe schools
- loss of motivation to attend school; causes included bullying and students lagging behind in their studies because they had missed so much school, sometimes due to lack of proper identity papers
- lack of school supplies and uniforms. [10]

Approximately 43 per cent of school-aged Syrian refugee children in Jordan were enrolled in public schools in camps and host communities. [11] Almost one-third of them required alternative education to help them integrate into the Jordanian school system. A back-to-school campaign was led to increase their enrolment in school. World Vision also partnered with the Women Programmes Centre to provide remedial classes to Syrian and vulnerable Jordanian children in northern Jordan. Children who participated in the programme were interviewed in order to understand the effectiveness of the programme from their perspective. They clearly articulated that they valued the opportunity to catch up in key school subjects and the chance to play and make friends.

LEBANON

World Vision Lebanon conducted focus group discussions with 87 boys and girls in the accelerated learning programme and in child-friendly spaces (CFS) to understand the impact

[8] UNICEF, 'Syria Crisis Bi-Weekly Humanitarian Situation Report' (20 September–10 October 2013), available on the static.reliefweb.int website.

[9] Although World Vision began implementation of cross-border disaster interventions in Syria in 2013, information on the effectiveness of this response was collected in 2014 and is not included in this report.

[10] World Vision, 'Syria Crisis Response in Jordan, Basic Rapid Assessment Report' (August 2013).

[11] World Vision, Syria Regional Response Plan 6. <http://www.data.unhcr.org/syria-rrp6/regional.php>

IMPROVING WELL-BEING FOR DISASTER-AFFECTED CHILDREN

CONTEXT

WORLD VISION RESPONSE AND RESULTS

SYRIA CONFLICT

JORDAN

LEBANON

Only **43%** of school-aged Syrian refugee children in Jordan were enrolled in public schools, **with almost one-third of them** requiring alternative education to help them integrate into the Jordanian school system.

WV Lebanon conducted focus group discussions with 87 children affected by the Syrian crisis, who cited **education as a primary need.**
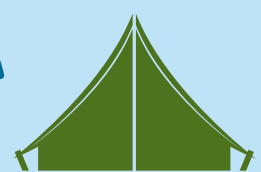
Contributed to:
- a back to school campaign to **increase enrolment in schools.**

- providing **remedial classes** to Syrian and vulnerable Jordanian children in northern Jordan.

- Recruited Syrian teachers from the **refugee population** to ease learning access for Syrian children.

- Children reported that CFS helped them feel **more at home in their new locations.**

SOUTH SOUDAN CONFLICT

Continuing insecurity is a major factor in children dropping out of school, resulting **in an extremely low literacy rate:** only **27%** of the population over **15** years of age is literate.

Assisted in the formation of school management committees and parent-teacher associations and upgraded teacher skills **through in-service teacher training.**

Provided safe places for **4,000** children to learn and play through child-friendly spaces.

VIETNAM DISASTER RISK REDUCTION

Vietnam faces **numerous natural disasters annually** and is highly affected by climate change.

WV Vietnam began a programme of child-focused disaster risk reduction (DRR) **across 23** of its ADPs.

Children trained in DRR/Climate Change Adaption are better able to prepare for and respond to natural disasters.

of World Vision's programming for children in Lebanon who were affected by the Syrian crisis. Children in both programmes cited education as a primary need. Recruitment of Syrian teachers from the refugee population increased access to learning for Syrian children and led to high satisfaction from adults and children regarding World Vision's programming. Children described themselves as more social and happier as a result of attending CFS. They also appreciated World Vision's work to teach them about issues they might face, such as theft of their belongings and conflict. Although they missed their hometowns, children reported that CFS helped them feel more at home in their new locations.[12] Children in both programmes said that World Vision gave them the chance to learn and to lead a normal life again. They also appreciated the professional nature of the teachers, tangible education support (school bags and supplies) and the opportunity to learn English.

South Sudan complex humanitarian emergency

The people of South Sudan continued to experience on-going conflict from rebel militia groups and inter-ethnic clashes in FY13, which resulted in the death and abduction of numerous women and children. The humanitarian context was further complicated by natural disasters (flooding and drought) and returnees and refugees from Sudan.

South Sudan's continuing insecurity is a major factor in children dropping out of school, resulting in an extremely low literacy rate – only

'Thanks to training courses by World Vision, we now know how to protect ourselves from lightning storms and help our parents establish disaster preparedness plans to save our lives and property.'

– Child in the World Vision Vietnam programme

27 per cent of the population over 15 years of age is literate. World Vision South Sudan worked to improve education for children by strengthening education management and accountability at the school and community levels. Means of doing this focused on formation of school management committees and parent-teacher associations. In addition, World Vision South Sudan upgraded teacher skills through in-service teacher training.

World Vision also provided psychosocial support and protection interventions to over 10,000 children; training in child rights and peacebuilding for more than 5,500 community leaders; and safe places for 4,000 children to learn and play (at child-friendly spaces).[13]

Vietnam multiple local disasters and climate change

Vietnam faces numerous natural disasters annually and is highly affected by climate change. Among the negative impacts of disasters, World Vision Vietnam described an increase in poverty and social disruption in the country. To prepare people in communities for a better future, World Vision Vietnam embarked on a programme of child-focused disaster risk reduction (DRR) across 23 of its ADPs. Children who were trained in DRR/Climate Change Adaption were better able to protect their families and educate their parents on how to prepare for and respond to natural disasters.[14]
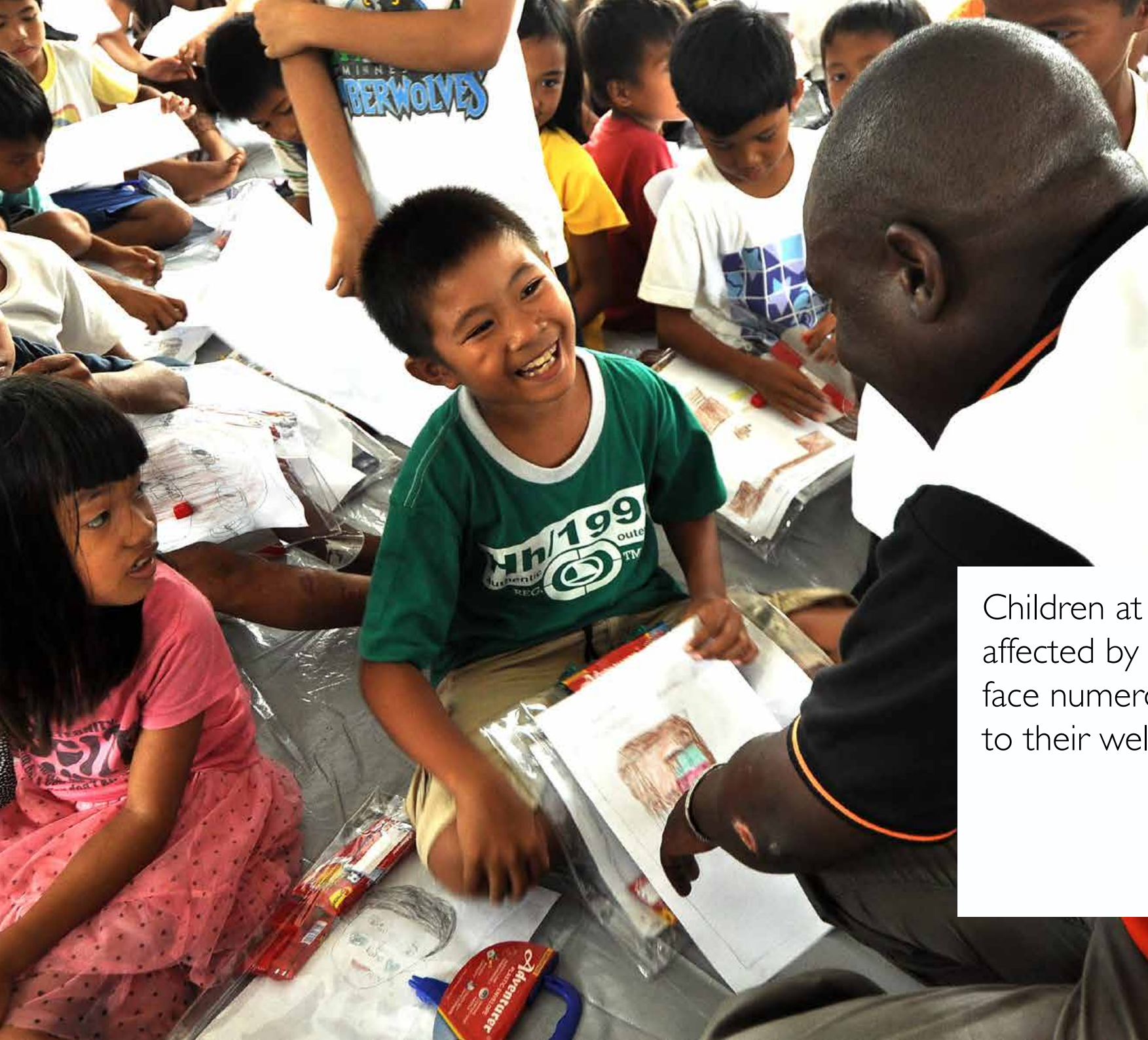
Jamo Huddle
is Director, Humanitarian Accountability and H-DME, World Vision International.

[12] World Vision, Focus Group Discussion Analysis (Children attending CFS). (September 2013.)

[13] *WV South Sudan: Child Well-Being Contribution Report.* (2014).

[14] *WV Vietnam: Child Well-Being Contribution Report.* (2014).

Children at risk of or affected by disasters face numerous threats to their well-being.

The effectiveness of child-friendly spaces
Kevin Savage

World Vision HEA is leading an inter-agency child-protection research project to evaluate the effectiveness of child-friendly spaces (CFS), one of World Vision's key tools for child protection in emergencies.

The research project
The aim of the project is to improve the effectiveness of CFS and better protect children in crises. It seeks to identify good practice in design and implementation and refine the monitoring and evaluation tools for CFwS.

The project consists of a set of impact and outcome evaluations of CFS in several humanitarian responses. Working closely with World Vision and its partners (Save the Children, Mercy Corps and UNICEF), the research team is supporting practitioners in the development of monitoring and evaluation frameworks for at least six CFS interventions in multiple countries over five years.

Evidence to date
The research project has now completed a structured literature review and three CFS evaluations, which have produced a significant amount of evidence. Several audiences are keen to draw conclusions from these studies; however, it is important not to draw broad conclusions too early. With several evaluations incomplete, the project has not yet begun to synthesise information or draw general conclusions about CFS.

The literature review revealed that CFS are under-researched. Few studies have been made, and very few of those had a robust design with baseline measures or control groups. The review highlighted poor documentation and monitoring of CFS interventions and pointed out weaknesses that have informed the design of the research project, including the need for increased monitoring, standardisation, evaluation and child engagement in the evaluation process.

Although completion of all evaluations in the research project is required before broad lessons can be drawn, preliminary findings may be emerging from the three completed evaluations. There is evidence that CFS can achieve targeted impacts, but the extent to which they do so is heavily dependent on context and the quality of programme implementation.

Evidence of impact
In all evaluation studies so far there has been evidence suggesting positive impact of CFS on the lives of children and their caregivers. The most consistent finding across settings has been that CFS provide a safe environment for children, reducing key protection concerns and stresses faced by caregivers in humanitarian settings. The first studies have also provided evidence of positive impact on children's psychosocial well-being, skills and knowledge, and knowledge of child-protection services.

INFLUENCE OF CONTEXT

Differences in the patterns of impact across settings have been striking. In part, this has reflected different emphases in CFS programming adapted to the local context and humanitarian needs. It is also likely reflecting the overall trends in the living conditions and circumstances of crisis-affected populations. For example, with non-formal education as a major focus of CFS in Ethiopia, the evaluation reported strong advances in literacy and numeracy but noted less impact on psychosocial well-being when compared to other countries. Perhaps this was due to the general improvement in the well-being of all studied children over time in the Ethiopia refugee context. In contrast, the evaluation in Uganda observed a general decrease in the well-being of children over time. The lack of change in psychosocial well-being observed in children attending CFS in Uganda was initially viewed as disappointing, but when compared with the deterioration observed in non-attending children, it was recognised as evidence of a positive impact, stabilising children while conditions worsened.

INFLUENCE OF QUALITY

The evaluation in Uganda documented explicit evidence of the impact of the quality of programming on children. CFS that scored higher on a quality measure (based upon inter-agency guidelines for CFS) showed greater positive impact on children's social and emotional well-being and their development. All future evaluations will examine the association between the adherence of CFS programming to quality standards and the impact observed.

Monitoring and evaluating CFS

In addition to seeking to document evidence of outcomes and impact of CFS, the project is also seeking to improve the agencies' capacity and tools for regular monitoring and evaluation of CFS.

As the literature review demonstrated, the project has consistently found routine monitoring and evaluation practice to be weak, or sometimes missing altogether, along with the capacity to perform monitoring and evaluation. The evaluations have found that agencies implementing CFS do not routinely invest in continuous monitoring of either basic indicators of quality or of children's psychosocial well-being and protection.

During the remainder of the first phase of the project through 2014, the project will synthesise the lessons learnt from using different instruments and monitoring tools in order to develop a set of sample tools that agencies can use in their routine monitoring and evaluation of CFS. Basic guidance on how to use the tools will be created as well. These will be shared for testing by peer agencies and be further refined during the second phase of the project throughout 2015.

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Integrating disaster risk reduction in Nepal's area development programmes

Surendra Babu Dhakal

Nepal is one of the countries most vulnerable to disasters in the world due to earthquakes, floods and landslides.[15] Therefore, integration of disaster risk reduction (DRR) into Nepal's development programming is vital.

Beginning in 2012, World Vision International Nepal used a community participatory approach to create a five-year-long ADP in Udayapur West. When the ADP started, WV International Nepal was not completely intentional about integrating DRR into its development programmes. However, as staff and community leaders learned more, it became clear that poverty and disaster risk have a strong correlation and thus that DRR needed to be a top priority in all programmes.

WV International Nepal used the new World Vision DRR Toolkit[16] to incorporate risk reduction into the Udayapur West ADP by working with communities to do risk assessments, identify community vulnerabilities and capacities, note ways to reduce risk and vulnerability, and determine how to strengthen existing capacity. Communities were involved throughout the entire process, including selection of the programme goal: 'to develop empowered, resilient communities that improve the well-being of children and families'. The programme's focus in FY12 was on assessment training, DRR training, confirmation of hazards and vulnerabilities, and programme design. Building on existing local capacities and concerns, the programme design focused on three key sectors: livelihoods, education, and maternal and child health and nutrition.

In FY13, activities for DRR in all three sectors were linked with regular development activities, thereby limiting the additional work required and reducing the cost of introducing DRR. For example, in the education project schools already developed school improvement plans. Now, DRR plans for schools are included in the regular school improvement plans. DRR activities are designed to boost and protect development gains better through the reduction of disaster risks.

Results

- WV International Nepal gives priority to DRR integration in all its programming and sectors of work and has clear indicators to ensure DRR integration is being done properly.
- All DRR/development activities are carried out together with communities, resulting in community lifestyle changes that will remain long after World Vision finishes the programme.
- Training in DRR resulted in staff eagerness to integrate DRR into their work. For example, one programme manager was so motivated that he undertook disaster risk assessment of all the schools in his programme area (73 schools). Findings were shared with the relevant communities, and corresponding risk

'The World Vision *DRR Toolkit* is a user-friendly toolkit designed to assist field staff in undertaking the integration of disaster risk reduction and climate change adaptation into field programmes more effectively.

'The toolkit provides a step-by-step series of four tools and easy to use worksheets that will build knowledge and confidence for staff in tackling the issues around disaster and climate-related risks in the field. The toolkit also serves as a step-by-step guide to help strengthen work in building community resilience.'

— Christy Davis, Regional Advisor, Humanitarian and Emergency Affairs & Community Resilience, Asia Pacific

Continuing efforts

Interventions will continue in the livelihood, maternal and child health and nutrition, and education sectors. The livelihood sector will focus on natural-hazard risk management for livestock and irrigation resources. The maternal and child health and nutrition sector will provide orientation to family members on the importance of breastfeeding infants, complementary feeding programmes, building materials to make local health centres more disaster resilient, training on good hygiene and education of communities regarding household water purification methods. Management committees of health facilities will be trained on DRR, and they will be encouraged to take part in disaster simulations. The education sector will focus on school safety (including structural and non-structural interventions) and emergency preparedness.

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World Vision International
Nepal.

reduction measures are being placed into project designs.

- The World Vision DRR Toolkit is being shared with other agencies, which are quite interested in obtaining it.

Challenges

Creating awareness among staff and partners of the need for DRR before a disaster hits, changing decision-making patterns and systems, and learning how to integrate DRR into development programmes all took considerable strategic planning, time and good management.

Such changes do not take place overnight. Integrating DRR into development programmes also requires spending significant time with people in the community to teach them how to carry out community vulnerability and capacity assessments. Igniting community interest in DRR was not easy, but once community members developed the interest, their enthusiasm created the understanding and 'demand' to give DRR high priority.

Obtaining adequate funds for DRR can be a challenge.

[15] 'World Bank Pinpoints Disaster Hot Spots,' Nature: International Weekly Journal of Science (30 March 2005), available on the nature.com website. <http://www.nature.com/news/2005/050328/full/news050328-3.html>

[16] The World Vision DRR Toolkit is available on the wvi.org website. <http://www.wvi.org/disaster-risk-reduction-and-community-resilience/publication/disaster-risk-reduction-toolkit>

Integrated disaster management in Myanmar

Chris Herink and Win Zin Oo

Background

According to UNOCHA's ranking of countries vulnerable to humanitarian emergencies, Myanmar ranks sixth in the world. This ranking gauges vulnerability to both natural and human-induced disasters, as well as the capacity to respond to them. Myanmar faces a wide range of hazards including floods, cyclones, earthquakes, droughts, tsunamis, fires, landslides and armed conflict. Cyclone Nargis in May 2008 took the lives of over 140,000 people. Cyclone Giri in October 2010 made over 100,000 people homeless. A 6.8 earthquake in Shan State in March 2011 affected over 18,000 people. Floods in August 2012 displaced 86,000 people and affected 287,000 people in the Ayeyarwaddy Delta. Flooding in Kayin State in August 2013 displaced over 40,000 people. And the effects of conflict have displaced over 140,000 people in Rahkine State and 85,000 people in Kachin State.[17] As is the case in most disasters, children were the most vulnerable.

In response

In such a volatile environment, to protect especially the most vulnerable, there is an essential need to develop strategies for DRR, while also building capacity to respond effectively to disasters when they occur.

As a result, World Vision Myanmar expanded its support to community-based DRR. Funded by USAID/OFDA, the community-based DRR work was implemented in three geographic areas, Amarapura and Pyigyitagon in Mandalay Region and Loikaw in Kayah State. In each area a local committee was established to implement critical DRR activities such as risk mapping, early warning systems, evacuation plans, pre-positioning of search and rescue equipment and pre-purchase of relief supplies. The work was community led; local government was also included. In the coming year community-based DRR will be expanded to three additional areas (also funded by USAID/OFDA). All World Vision Myanmar ADPs have a key performance indicator related to strengthening community-based DRR.

In addition to working at the community level, World Vision was also the lead agency in Myanmar for the ASEAN (Association of Southeast Asian Nations) Agreement on Disaster Management and Emergency Response (AADMER). In this capacity World Vision Myanmar worked with the central government to promote the role of civil society and strengthen the coordination with ASEAN countries for disaster management and emergency response.

Beyond risk reduction, World Vision Myanmar also took steps to improve its emergency response capacity. It identified and trained a national disaster management team. The team was tested through a comprehensive disaster

simulation exercise. The team can be instantly mobilised to respond to disasters, according to core World Vision International Emergency Management System protocols. Pre-positioned relief supplies are stockpiled in warehouses in Yangon and Mandalay. A national emergency preparedness response fund is maintained to provide funds immediately for relief responses.

Results

World Vision Myanmar:

- Is a trusted partner with peer organisations and the government. Through its leadership on the country's DRR Working Group, it was able to influence the preparation and endorsement of the Myanmar Action Plan for DRR, Myanmar's Disaster Management Law, Myanmar's Standing Order on Natural Disaster Management,[18] the strengthening of AADMER and alignment with the Hyogo Framework for Action.
- Through its leadership of AADMER, influenced the government to recognise civil society involvement in disaster management and risk-reduction activities.
- Is routinely contacted by the government to ask for advice on coordination, assessment, and response when there is a significant disaster.
- Has developed a positive working relationship with Procter & Gamble to provide water purification sachets; 1,281,360 sachets were distributed this past year.
- Effectively responded to more than 80,000 people in FY13, including internally displaced persons and people affected by floods and fires.

World Vision Myanmar believes that the investments it has made in disaster management will help to safeguard the development gains made through long-term community development. Disaster management will thus be a key component of World Vision Myanmar's national strategy (2014–16).

Given the risk profile of Myanmar, staff have come to expect multiple humanitarian disasters during the course of the year. Through its work to strengthen disaster management capacity, the organisation has the human, financial and physical resources in place to respond confidently and effectively. More important, the communities which have developed DRR plans are now able to mitigate the effects of the disasters which come their way. For example, reports show that communities in Thabaung Township in Ayeyarwaddy Region, where World Vision Myanmar has an ADP that implemented DRR, are now able to anticipate flooding and evacuate earlier than before, thereby saving essential assets such as food, livestock and firewood, as well as reducing risk to human life. World Vision Myanmar is in the process of mainstreaming DRR into all of its ADPs.

One challenge is the need to underscore the importance of DRR amidst other ADP priorities. World Vision Myanmar has a growing understanding that it must 'pay now or pay later' in terms of its investments in disaster management, but the need for improvement still remains.

The following factors made World Vision Myanmar's integrated disaster management efforts successful:
1. strong support from the senior leadership team
2. high standards of accountability from a USAID/OFDA grant
3. positive working relationships with external stakeholders – government, communities, donors, the UN and other NGOs
4. commitment of staff in implementation.

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[17] OCHA, *Humanitarian Bulletin Myanmar* (18 April–31 May 2013). <http://reliefweb.int/report/myanmar/myanmar-humanitarian-bulletin-issue-18-april-31-may-2013>

[18] In Myanmar's Disaster Management Law, disaster caused by armed conflict is included under 'natural' disaster.

Recovery in Sri Lanka

Amenthi Jasinghe-Dabare

Since FY11, World Vision Lanka has been implementing a programme to help people in the ravaged Northern Province recover from the previous 25 years of war and conflict. The problems for these people have gone far beyond loss of physical assets and local infrastructure to affect human potential and lives. People's experiences during the war, and more notably their post-conflict experiences of poverty and deprivation, adversely affected their mental health and psychosocial well-being.[19] This made it difficult for many parents and communities to help their children deal with the challenges of life in post-conflict Sri Lanka, because they themselves were struggling.

World Vision Lanka's programme REMIND (**RE**conciliation through **M**ental health **I**ntegration in the **N**orthern **D**istricts of Sri Lanka) dedicated itself to working with communities throughout all five districts of the Northern Province. Its purpose was to support mental health and psychosocial well-being and, by working in partnership with the community, the Ministry of Health and the College of Psychiatrists, to improve the access of communities to mental-health support. This improved access increased people's resilience, helping empower them to tackle the challenges of disaster recovery and reconciliation after the war. As they healed, they were able to help their children heal.

AusAID and World Vision Australia funded the first phase of the programme. Phase one was widely successful; it established solid foundations in community-based mental health in order to expand the project's reach in phase two. The success of the first phase prompted funding from ECHO for phase two, which continued until the end of FY13.

The programme began with a sustainable approach, with the government as the main partner. The REMIND programme helped the government's district-based mental-health units stretch their services to reach the community better with psychosocial support. Previously the government had covered only the clinical side of mental-health needs and had only hospital-based mental-health doctors, such as consulting psychiatrists and medical officers. This limited ability to meet a number of community needs. World Vision Lanka's approach meant that a large number of conflict-affected people suffering with moderate stress were able to obtain assistance without visiting the hospital, which was often difficult due to lack of transport.

The first phase of the programme focused on helping people find closure for issues like grieving the loss of loved ones, settling into the new postwar environment, and after decades, the prospect of needing to earn a living to feed their family. World Vision Lanka assisted the Provincial Ministry of Health and the College of Psychiatrists to recruit and train 40 community support officers (CSOs). CSOs worked at the community level providing support to meet individual psychosocial needs. Their main responsibilities included:

- Identifying people with mental-health/ psychosocial issues and providing empathy by using basic counselling skills they had learnt.
- Referring people, as appropriate, to trained counsellors, mental-health doctors or relevant government services which dealt with various key community issues such as child abuse, sexual abuse and gender-based violence.
- Following up on clients who had been diagnosed with specific mental-health challenges to ensure they were taking their medication and bringing or motivating clients to attend outreach clinics.

To establish the community-based foundation of mental health, World Vision Lanka constructed 10 community support centres across three districts. There, CSOs and mental-health professionals could conduct therapy, consultations, meetings and awareness programmes.

Apart from the CSOs' contributions, awareness-raising programmes were also conducted to reach the community more at ground level. The plan was to reduce stigma by highlighting the typical symptoms of mental stress and the fact that it is relatively common. The hope was that people dealing with moderate stress, and their loved ones, would be able to recognise and acknowledge the reality of stress and seek assistance.

Awareness programmes were conducted through:

- street drama groups; these groups were formed from within displaced communities
- documentary movies based on issues that affected individuals and communities (alcohol abuse, child abuse, early pregnancy and deliberate self-harm or suicide attempts)

- leaflets, booklets, posters and billboards that addressed community issues which were affecting the well-being of children, individuals and families.

The second phase of the programme included interpersonal therapy for groups (IPTG), initiated to follow up phase one. The programme targeted 600 participants who lived in two of the most affected districts in the Northern Province. Group sessions were held, each group having between 10 and 12 people, a suitable size to enable active participation and provide group support as part of the holistic therapy process. Men and women were in separate groups. The course of therapy was at least 16 meetings, one a week. People diagnosed with depression were the target group, as identified with an ethnographic assessment

before they were brought into groups. The CSOs assisted the Provincial Ministry of Health and the College of Psychiatrists to identify people with depression, including their existing clients and those who were not part of their existing work, referring them to these groups. The groups were facilitated by therapists and counsellors trained by the Ministry of Health.

After completion of the IPTG group sessions, there was noticeable improvement in people's well-being. People who had been lost in the pain of the past shared their pain and reconnected with family and friends. Their ability to function normally in life improved substantially. They were also able to reach out to others who were still experiencing the pain they used to feel and direct them to the help they needed.

A successful pilot for Sri Lanka, this programme treated large numbers of community members with depression in a relatively short timeframe (four months).

Another positive result of the programme is that 20 CSOs who assisted in this programme are in the process of being recruited into the Sri Lankan government health structure in the Northern Province. This is especially noteworthy given that the title of CSO did not exist in the government structure prior to this programme. The significant impact the CSOs had in this programme made such innovative change possible. As a result, CSOs are continuing to assist in meeting the mental-health needs for the province.

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[19] Much of this material is adapted from 'REMIND' by Keith Balthazaar, former REMIND project manager, World Vision Lanka (2013). <http://thedifference.worldvision.com.au/thanga-mobile-timeline.html>

The Syria response

Tanya Penny

World Vision's interventions focused on supporting internally displaced people, refugee and host communities, beginning in Lebanon in FY12 and expanding to Jordan and Syria in FY13. The needs of Syrian children and families across the region were and continue to be significant. As previously mentioned, people affected in Syria totalled 6.8 million by the end of World Vision's FY13; this included more than 3.1 million children. In five neighbouring countries, 50 per cent of Syrian refugees (or those awaiting official registration as refugees) were children.[20]

As the crisis continues, the organisation is committed to supporting the vast needs of Syrian children and their families, as well as vulnerable host communities.

Lebanon

The sectorial focus of the Lebanon programme was initially food, non-food relief items (NFI), children in emergencies (CiE), and education, predominantly in Central and West Bekaa. Through existing World Vision interventions it became apparent that the increased refugee population was stretching the capacity of Lebanon's existing infrastructure and negatively affecting the lives of host communities. Assessments carried out in host communities in the Bekaa and the South revealed not only large needs in food, CiE and cash interventions, but also water, sanitation and hygiene (WASH). WASH was prioritised due

to extreme needs within the informal tented settlements during the summer months.

World Vision Lebanon determined the following groups to be most vulnerable amongst the refugee population: women-headed households with children, families living in sub-standard settlements, households with more than five dependent family members, families with children out of formal education, families with children who had dropped out of formal education, children enrolled in the Lebanese schools that are experiencing difficulties with their studies, families willing to enrol their children in the Lebanese curriculum, and families with children who had never attended a child-friendly space (CFS).

Jordan

World Vision started operational setup in Jordan in March and established an office in
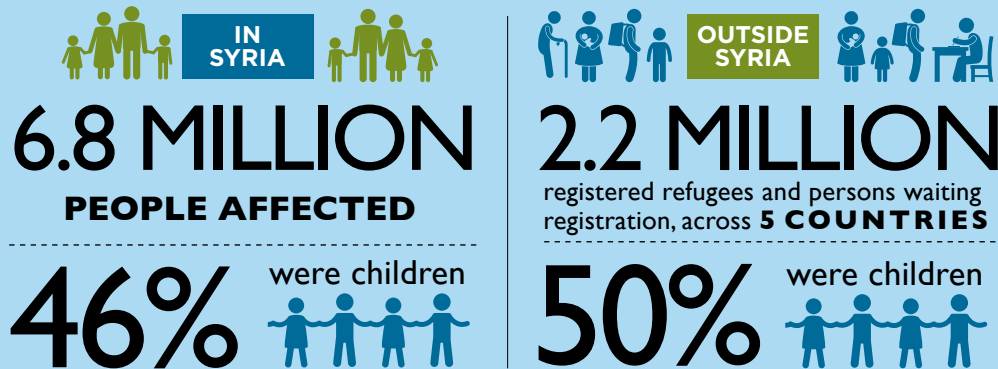
Amman. The intervention focused on providing assistance in camp and non-camp settings to both Syrian refugees and vulnerable Jordanians.

The sectorial focus for Jordan included WASH, food assistance, NFI, cash programming, and CiE in refugee camps, as well as assistance in host communities affected by the Syrian crisis.[21] Findings in World Vision's basic rapid assessment further prompted efforts to pursue funding to scale up CFS and AFS (adolescent-friendly spaces) non-formal and remedial education in host communities, WASH, alleviation of financial stress on Syrian refugees and vulnerable Jordanians, winterisation needs, and mitigation of the burden placed upon the Jordanian public infrastructure.
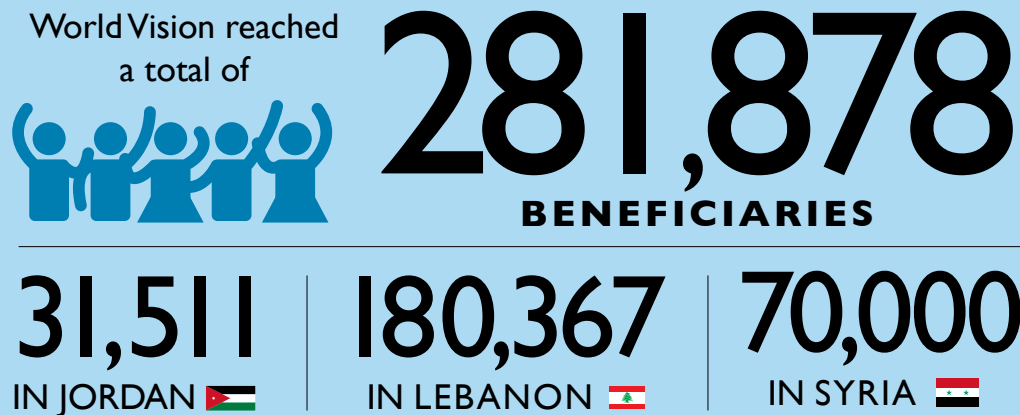
World Vision's first major work in Za'atari refugee camp focused on the most urgent WASH-related needs (identified by UNHCR and community

SYRIA CONFLICT AND RESPONSE IN 2013

DISASTER FACTS

IN SYRIA

6.8 MILLION
PEOPLE AFFECTED

46% were children

OUTSIDE SYRIA

2.2 MILLION
registered refugees and persons waiting registration, across **5 COUNTRIES**

50% were children

WORLD VISION'S RESPONSE

World Vision reached a total of

281,878
BENEFICIARIES

31,511
IN JORDAN

180,367
IN LEBANON

70,000
IN SYRIA

Focused response efforts on food assistance, children in emergencies, cash programming, education, water, sanitation and hygiene.

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feedback). Programmes included diaper distributions in the camp and plans for a drainage project to alleviate flooding during winter months.

World Vision also worked with partner organisations in Irbid to provide remedial education programmes for Syrian refugee children as well as vulnerable local Jordanian children. After teachers and administrators noticed an urgent need for lunch for the students (many would go through the whole school day without eating), a food component was added to the programme.

Syria

Starting in April, quick impact WASH projects – primarily rehabilitation of facilities – were implemented. These initial projects, which were low cost, served as a gateway into the community and a way for World Vision to become established in Syria, building relationships with local leaders and community members. These activities also boosted donor confidence in World Vision's capacity to operate in the challenging context of Syria. By May, World Vision had secured grant funding from various donors, allowing the team to plan for the implementation of larger and more long-term operations.

Operations continue in FY14 in Syria, Jordan and Lebanon. More information on World Vision interventions will be forthcoming during the year as events unfold.

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[20] UNICEF, 'Syria Crisis Bi-Weekly Humanitarian Situation Report' (20 September–10 October 2013).

[21] According to Jordanian government standards all programmes outside the camps were required to include vulnerable Jordanians as at least 35 per cent of their target populations.

Future view

Disaster Management 2020 – Brief overview

Heather MacLeod

The needs of vulnerable populations are evolving as the world faces an array of natural and man-made disasters. World Vision is also changing. As a child-focused agency the organisation exists to meet the needs of children and their families as they prepare for, mitigate and respond to disasters. Meeting these needs now and in the future requires World Vision to be more agile in responding to vulnerable children in all settings and contexts. With operations in 95 countries and a global commitment to having a sustained impact in the lives of children, World Vision is reinforcing its holistic approach to disaster management.

World Vision has a distinct advantage with its ability to leverage its global development footprint as a means to embed individual and community resilience, early warning, disaster preparedness and mitigation programming into community development models. World Vision is shifting from the old definitions of emergency response and development, which

maintained that the two types of interventions were completely separate. Instead, the organisation's new model is to integrate disaster management with development, which can most notably be seen in World Vision's current work, such as the organisation's on-going response to the Syrian crisis.

Substantive changes, however, require more than striving for operational excellence. World Vision's child-focused disaster management strategy, DM2020, represents an internal and external shift to a more nimble and responsive model underpinned by increased use of evidence-based impact, leading disaster management technologies and strengthened inter-agency collaboration. World Vision's initial priorities for FY14 will see the delivery of specific disaster management programmes focused on children, especially children in conflict and urban settings.

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Child-focused disaster management

Jamo Huddle

Children are described as the most vulnerable community members during disasters, and they usually make up 50 to 60 per cent of the people affected by disasters.[22] In the last decade more than 2 million children have died as a result of armed conflict, and an additional 6 million have been wounded or disabled. Approximately 6 million children were killed by natural disasters between 2002 and 2011.[23] When disasters happen, natural made by human beings, children are often faced with food shortages, lack of clean water, loss of shelter and the death of loved ones. These factors make them vulnerable to physical injury, disease, disruption of education, separation from families and an increased risk of trafficking and exploitation.[24]

'Under the UN Convention on the Rights of the Child children have inalienable rights in all circumstances – including disasters, when they are at their most vulnerable – and the right to participate in decisions that ultimately affect them.'[25]

These are compelling reasons to support children before, during and after disasters. World Vision's child focus in disaster management will continue to give priority to children, especially the poorest and most vulnerable, and empower them, together with their families and communities, to improve their well-being.[26] World Vision sees the child not in isolation but as part of a family and a community, because the quality of these relationships is very important for the resilience and well-being of children. Protective factors that assist children affected by disasters include (1) personal factors such as faith, belief that one individual can act to make things happen; (2) family factors such as a strong bond with the primary caregiver; the mental health of the mother, availability of other family caregivers; and (3) community-level factors such as social support, value of altruism and responsibility to care for others.[27]

World Vision is committed to helping children who are affected by disasters. Before disaster strikes, World Vision will work with children to ensure they understand how they and their families can reduce their vulnerability to disasters. During disasters, World Vision staff will assist families with their immediate needs and recovery from the crisis. Following a disaster, World Vision will help children and their families rebuild their lives.

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[22] UNICEF, *UNICEF and Disaster Risk Reduction* (n.d.), available on the unicef.org website.
[23] Centre for Research on the Epidemiology of Disasters (CRED), *Annual Disaster Statistical Review 2012: The Numbers and Trends* (Brussels: CRED, 2013). This figure was calculated based on the 10-year average numbers given in the report.
[24] UNESCO, 'Children Victims of War and Natural Disasters', available on the unesco.org website.
[25] UNICEF, *UNICEF and Disaster Risk Reduction.*
[26] World Vision, 'Integrated Focus Document' (2007).
[27] 'Developmental Literature Summary,' prepared for World Vision by Lara Hilton (2013).

Children in conflict

Maya Assaf

In FY13, over 1 billion girls and boys lived in countries affected by conflict. Of those, 7 million were refugees, and 4 million were internally displaced; 300 million were under 5 years of age; and 250 thousand were child soldiers.[28]

Children are the most vulnerable victims of conflict due to many factors. Besides being among the many civilian casualties during an armed conflict, children, especially girls, may be orphaned or separated from their families and become heads of households which makes them vulnerable to forced labour, sexual exploitation or recruitment into armed forces. Children are often malnourished and at risk of death from preventable or curable diseases in environments where basic services are dis-

rupted and livelihoods destroyed. The hardships of life in armed conflicts often force children to leave school. Many never return, even when conflict ends. Children who have experienced conflict must find ways to cope with their memories of distressing experiences which may well have long-term repercussions and affect their whole life.

As a child-focused agency committed to reaching the world's most vulnerable children, World Vision asked itself two questions: (1) Where in the world is the worst place for children to grow up? (2) What should World Vision do in these places to have a greater impact on children's well-being? These questions were difficult to answer when global humanitarian funding for children affected by conflict remained limited, and especially when donor fatigue grew due to the continuation of crises that had no end in sight. However, through its DM2020 global programme, World Vision envi-

sions becoming more intentional about working in conflict-affected areas where the most vulnerable children and their communities are, ensuring that the organisation's programmes improve the lives and well-being of children in conflict and fragile contexts. In practical terms this means that children and their communities will be helped to become more resilient in contexts of conflict through solid early warning systems, good conflict mitigation measures (community-level interfaith work and peacebuilding), preparedness for a solid humanitarian response relevant to the needs of children and their communities, and rehabilitation and post-conflict programmes that are sustainable, built on local capacities.

World Vision will:
- build partnerships with a range of internal World Vision groups from various sectors (health and nutrition, education, protection and others) as well as groups external to the organisation (community members, faith representatives, conflict-resolution networks)
- ensure adequate resources are available for implementation of priority child-focused programmes in conflict and fragile contexts
- ensure staff capabilities are strengthened to design and implement disaster management programmes in conflict settings
- ensure the use of innovative, creative approaches that reduce conflict and achieve maximum positive impact on vulnerable children and their communities.

[28] European Commission, Humanitarian Aid and Civil Protection, 'Children in Conflict', ECHO Factsheet (January 2014), available on the ec.europa.eu website.

WV'S HUMANITARIAN RESPONSES

Most of the humanitarian disasters to which World Vision responded in 2013 were conflict related, such as the large-scale disasters in Syria and South Sudan. In addition, World Vision had longer-term rehabilitation/recovery programmes in fragile and conflict-affected contexts like Somalia, Afghanistan and West Bank/Gaza.

Maya Assaf
is Advisor, DM2020 Conflict Change Team, World Vision International.

Through its DM2020 global programme, World Vision envisions becoming more intentional about ensuring that the organisation's programmes improve the lives and well-being of children in conflict and fragile contexts.

Urban disaster management

Brett Moore

The urbanisation of the world's population is accelerating. More than 50 per cent of the global population was already urban by 2008, with more than 1 billion people living in slums.[29] The megatrend of urbanisation will continue, with estimates suggesting that by 2050 more than 67 per cent of the world's population will be city dwellers. Urban populations are particularly vulnerable to risks, especially children, with climate change and conflict posing significant threats to the urban poor. World Vision must develop the competencies necessary to respond to this trend – to meet the needs of the world's most vulnerable children in urban contexts.

This challenge means that World Vision needs to adapt its approaches, programming models, staffing and systems to deal with urban contexts. The organisation needs to develop new competencies to ensure it is able to manage urban disasters. Key aspects of social, economic, technological and natural systems function differently in urban areas than in rural or camp settings, where World Vision (and most of the humanitarian community) has developed its response processes, skills and methods. Urban systems have specific features due to the density, diversity and dynamism of cities. This is evident, for example, in the ways that communities are defined and function; the ways that markets, economic development and employment exist; and the reliance on infrastructure,

the private sector and service provision for a range of goods and services. How will World Vision respond to this radically changing context when most of its experience is in rural settings? The adaptation and development required start with a vision of the organisation's desired future, a vision of World Vision properly equipped to respond to the challenges of the new urban century, including disaster management. In achieving this vision, World Vision aims to become:

- a leading humanitarian agency in urban contexts
- able to develop and implement effective responses with strong urban competencies
- urban ready, with a business model in place to be partner of choice in selected urban settings
- evidence based, bringing evidence to bear on both advocacy and operations.

This vision will be developed through four key areas to guide DM2020 strategy for urban disaster management:

- *System adaptation:* The need for speed, partnerships and good context analysis. Working closely with the Urban Centre of Expertise and changing approaches to World Vision's child sponsorship and development activities, World Vision will develop new skills and capacities, tools and approaches, including leadership, analysis and technical skills, and a better understanding of vulnerability in urban environments.
- *Sector focus and integration:* Cash and market-based programming, shelter and infrastructure, health, WASH and child protection are key needs in urban responses.

- *Advocacy and influencing:* Partnerships with private-sector actors, local and municipal governments, and other service providers will help to ensure relevance to urban systems, moving away from a direct service-provision approach.
- *A new fundraising model for urban disaster response:* New donor focus and targeting, linking more closely to academia and private-sector donors.

Each of these areas represents an opportunity for World Vision to ready itself for the urban future in a way that highlights the organisation's distinctive focus on children, its Christian identity and its integrated approach. The adaptations to be made, the focus, advocacy and fundraising can all be built upon child well-being through integrated programming.

To move towards improved strategy and practice in urban contexts, in FY13 World Vision started an internal review of its existing systems, tools and processes, comparing them to selected external actors and agencies. Iterative strategy development will unfold for FY14–FY20.

Brett Moore
is Shelter and Reconstruction Advisor, Global Rapid Response Team, World Vision International.

DISASTERS ALREADY ARE URBAN

- Urban disasters are now the norm. There will be many more mega-disasters like the Asia tsunami, Haiti earthquake and Philippines Typhoon Haiyan.
- Between 2000 and 2010, World Vision responded to 15 large-scale emergencies, 10 of which had significant urban dimensions.
- In 2011, urban disasters were estimated to have cost $380 billion (Rockefeller Foundation, Introduction to 100 Resilient Cities, World Urban Forum, Medellín, Colombia, April 2014).
- Africa and Asia are urbanising rapidly, with extreme risk and poverty. There are huge slums in which millions live in such abject poverty and violence that it is a humanitarian disaster (ECOSOC, *World Urbanisation Prospects*).
- Conflict is urban, for example, Georgia, Syria, Somalia, Kenya, Iraq and the Democratic Republic of the Congo.
- Chronic conflict and fragile contexts are becoming more urban – where most humanitarian crises (and funding) will continue to be.

[29] United Nations Population Fund (UNFPA), 'Linking Population, Poverty and Development' (May 2007), available on the unfpa.org website.

[30] United Nations Department of Economic and Social Affairs/ Population Division (ECOSOC), *World Urbanization Prospects: The 2011 Revision: Highlights* (March 2012), 2, available on the esa.un.org website.

Emergency Responses in FY 2013

MIDDLE EAST AND EUROPE

ASIA

NORTH AND LATIN AMERICA

AFRICA
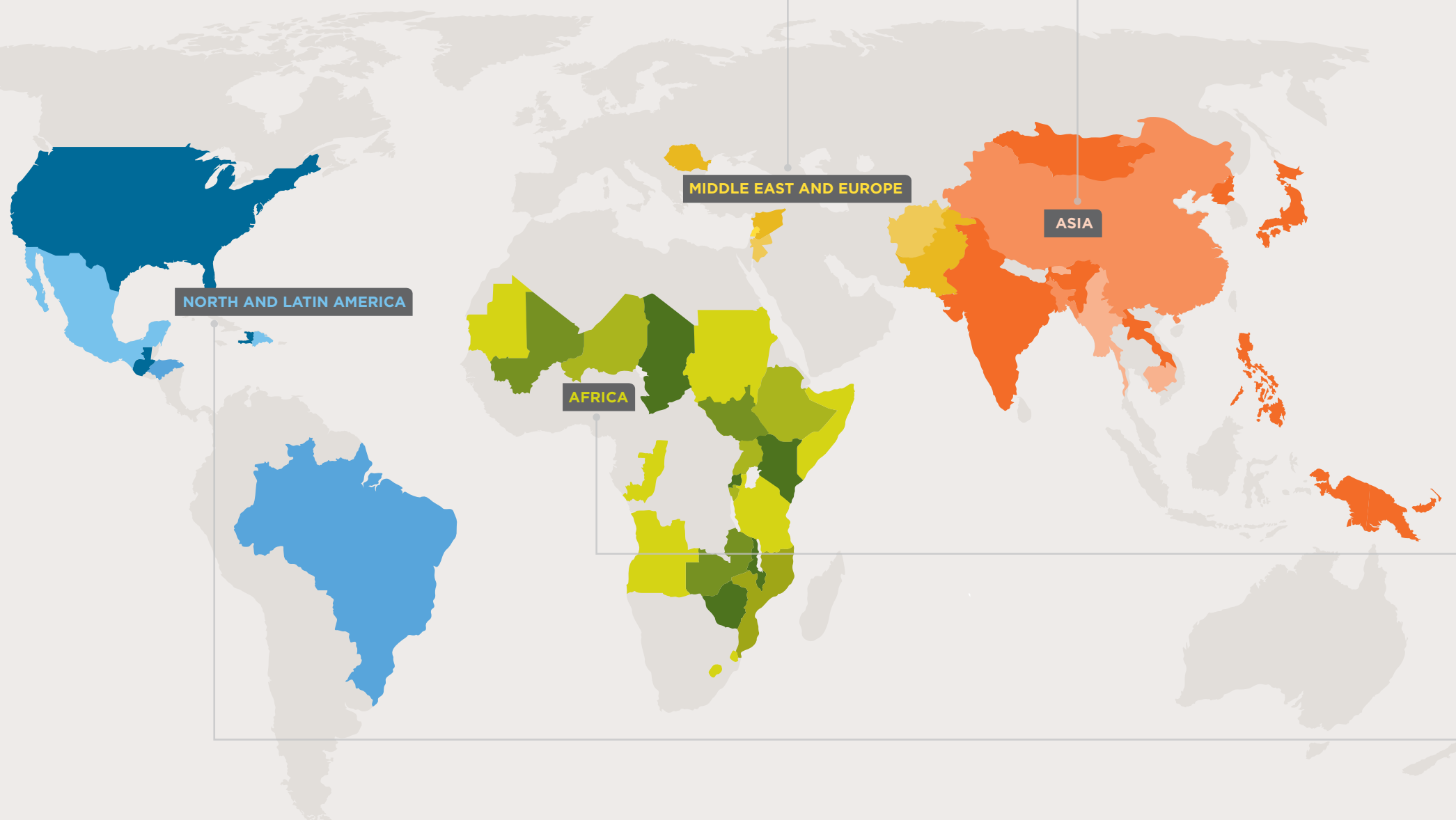
90 RESPONSES FOR FY13

51 COUNTRIES IN WHICH WV RESPONDED

11,024,826 BENEFICIARIES

ASIA

BANGLADESH
RESPONSE
BENEFICIARIES
24,000

INDIA
RESPONSE
x3 x2
BENEFICIARIES
42,000

LAOS
RESPONSE
BENEFICIARIES
30,400

NORTH KOREA
RESPONSE
BENEFICIARIES
18,600

SRI LANKA
RESPONSE
x2
BENEFICIARIES
18,000

CAMBODIA
RESPONSE
x2
BENEFICIARIES
666

INDONESIA
RESPONSE
BENEFICIARIES
75,503

MONGOLIA
RESPONSE
BENEFICIARIES
9,000

PACIFIC DEVT GRP
RESPONSE
BENEFICIARIES
3,750

THAILAND
RESPONSE
x2
BENEFICIARIES
5,484

CHINA
RESPONSE
x3
BENEFICIARIES
678,401

JAPAN
RESPONSE
BENEFICIARIES
54,773

MYANMAR
RESPONSE
BENEFICIARIES
14,234

PHILIPPINES
RESPONSE
x3
BENEFICIARIES
99,000

MIDDLE EAST AND EUROPE

AFGHANISTAN
RESPONSE
BENEFICIARIES
7,676

JORDAN
RESPONSE
BENEFICIARIES
32,000

PAKISTAN
RESPONSE
BENEFICIARIES
3,500

SYRIA
RESPONSE
BENEFICIARIES
70,000

JWBG
RESPONSE
BENEFICIARIES
23,520

LEBANON
RESPONSE
x2
BENEFICIARIES
180,000

ROMANIA
RESPONSE
BENEFICIARIES
1,500

RESPONSE TYPE

- CONFLICT
- REFUGEES
- EARTHQUAKE
- ENVIRONMENT
- FOOD INSECURITY
- VOLCANO
- HOA PHASED OUT
- COLD WEATHER
- FOOD EMERGENCY; GENERAL FOOD DISTRIBUTION
- DROUGHT; PROLONGED DROUGHT
- FLOODING
- MONSOON
- IDPS
- TSUNAMI
- BUILDING COLLAPSE
- NUTRITION CRISIS
- TORRENTIAL RAINS
- SCHOOL FEEDING
- CHOLERA; POLIO; YELLOW FEVER
- HURRICANE; TYPHOON; CYCLONE; TROPICAL STORM

NORTH, LATIN AMERICA AND CARIBBEAN

BRAZIL
RESPONSE
BENEFICIARIES
74,843

HONDURAS
RESPONSE
BENEFICIARIES
28,498

DOMINICAN REPUBLIC
RESPONSE
BENEFICIARIES
25,845

MEXICO
RESPONSE
BENEFICIARIES
34,925

GUATEMALA
RESPONSE
BENEFICIARIES
1,888

UNITED STATES
RESPONSE
BENEFICIARIES
50,000

HAITI
RESPONSE
BENEFICIARIES
365,491

AFRICA

ANGOLA
RESPONSE
BENEFICIARIES
1,327,775

ETHIOPIA
RESPONSE
BENEFICIARIES
349,712

MALI
RESPONSE
BENEFICIARIES
223,000

RWANDA
RESPONSE
BENEFICIARIES
63,217

SOUTH SUDAN
RESPONSE
BENEFICIARIES
600,000

UGANDA
RESPONSE
x2
BENEFICIARIES
474,432

BURUNDI
RESPONSE
BENEFICIARIES
88,198

KENYA
RESPONSE
BENEFICIARIES
264,318

MAURITANIA
RESPONSE
BENEFICIARIES
113,000

SENEGAL
RESPONSE
BENEFICIARIES
147,500

SUDAN
RESPONSE
BENEFICIARIES
426,557

ZAMBIA
RESPONSE
BENEFICIARY DATA NOT AVAILABLE AT THIS TIME.

CHAD
RESPONSE
BENEFICIARIES
138,900

LESOTHO
RESPONSE
BENEFICIARIES
807,761

MOZAMBIQUE
RESPONSE
BENEFICIARIES
416,117

SIERRA LEONE
RESPONSE
BENEFICIARIES
265

SWAZILAND
RESPONSE
BENEFICIARY DATA NOT AVAILABLE AT THIS TIME.

ZIMBABWE
RESPONSE
BENEFICIARIES
502,663

CONGO
RESPONSE
x2
BENEFICIARIES
1,432,619

MALAWI
RESPONSE
BENEFICIARIES
990,252

NIGER
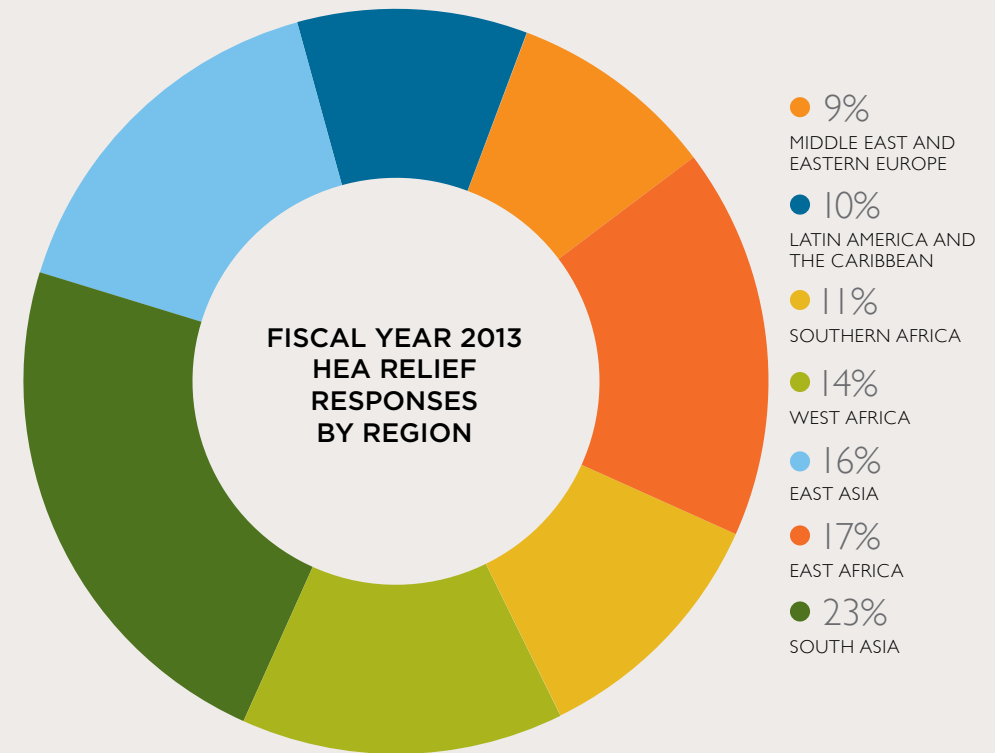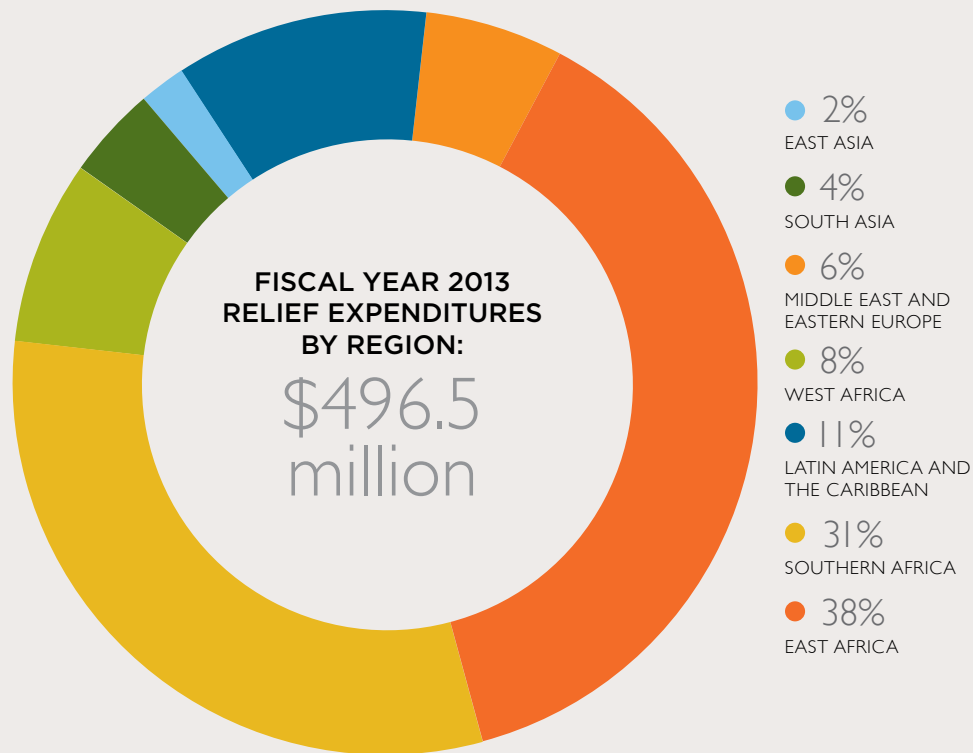RESPONSE
BENEFICIARIES
442,000

SOMALIA
RESPONSE
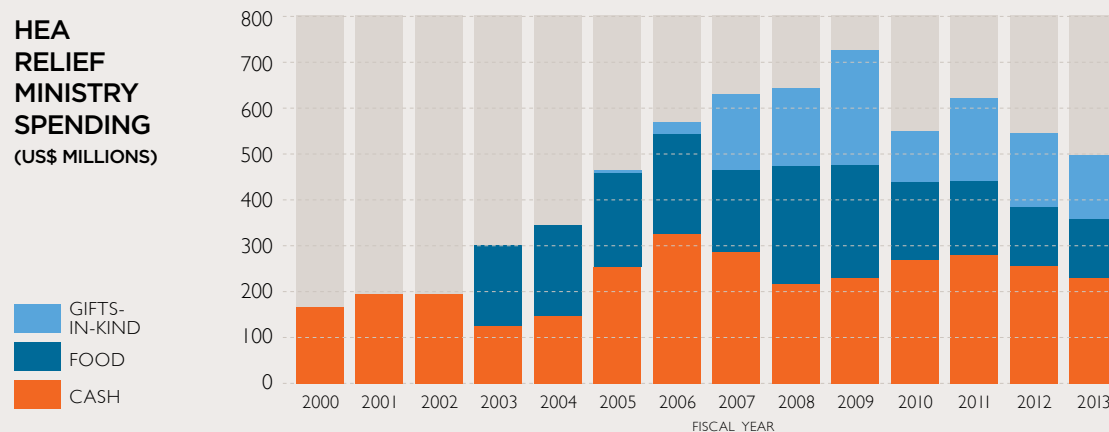BENEFICIARIES
115,000

TANZANIA
RESPONSE
BENEFICIARIES
128,043

Financial and other HEA statistics

FISCAL YEAR 2013 RELIEF EXPENDITURES BY REGION:
$496.5 million

- 2% EAST ASIA
- 4% SOUTH ASIA
- 6% MIDDLE EAST AND EASTERN EUROPE
- 8% WEST AFRICA
- 11% LATIN AMERICA AND THE CARIBBEAN
- 31% SOUTHERN AFRICA
- 38% EAST AFRICA

FISCAL YEAR 2013 HEA RELIEF RESPONSES BY REGION

- 9% MIDDLE EAST AND EASTERN EUROPE
- 10% LATIN AMERICA AND THE CARIBBEAN
- 11% SOUTHERN AFRICA
- 14% WEST AFRICA
- 16% EAST ASIA
- 17% EAST AFRICA
- 23% SOUTH ASIA

HEA RELIEF MINISTRY SPENDING (US$ MILLIONS)

FISCAL YEAR

- GIFTS-IN-KIND
- FOOD
- CASH

HEA NUMBER OF RESPONSES OVER TIME

NOTE: 1. LEVEL II RESPONSES (PRIOR TO 2012) CLASSIFIED AS NATIONAL
2. PRIOR TO 2010 WORLD VISION WAS SLOW TO 'UN-DECLARE' RESPONSES

NUMBER OF RESPONSES

FISCAL YEAR

- PARTNER
- GLOBAL
- NATIONAL
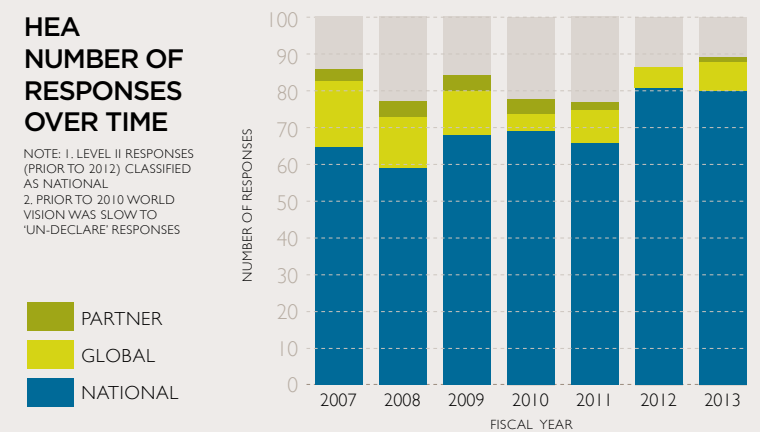
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