# **AHP Activation – Final Report**

Please note: Throughout this report, always refer to the most recently approved proposal or PIP when including project details such as targets, objectives, outcomes or indicators.

## 1. Overview

| Project Summary             |   |
|-----------------------------|---|
| AHP Activation              | Ambae Volcano Evacuation  |
| AHP NGO Lead/<br>Consortium | World Vision Australia  |
| Implementing<br>Partners    | List implementing partner/s including those in involved in contracting and finance arrangements (include members of the NGOs global network). Note whether name should be removed for security purposes   |
|                             | World Vision Vanuatu (WVV) in collaboration with in-country national partners,<br>including the Ambae Technical Advisory Committees (TAC), AHP Disaster<br>READY partners in Vanuatu, the Red Cross, the Government of Vanuatu WASH<br>and Gender & Protection Clusters, and the Vanuatu Society of Disability<br>Promotion and Advocacy.   |
| Project<br>Objective        | World Vision (WV) aims to improve immediate and medium-term access to<br>clean water, safe sanitation facilities, and basic waste management in the<br>schools and communities in the Bombua and Banban, Santo resettlement<br>areas for approximately 2,603 Ambae women, men, and children, reducing the<br>risk communicable diseases in school settings and community and family<br>violence due to unsafe and/or limited essential resources. |
| Project                     | Max 100 word summary of project   |
| Summary                     | The project achieved a number of key outcomes including:  |
|                             | > Construction of <b>12 Ventilated Improved Pit toilets</b> and <b>5 bathrooms</b> in 6<br>Evacuation Centres for evacuees living in camp type evacuation areas.  |
|                             | > Construction of 108 Ventilated Improved Pit toilets and 60 bathrooms in 13 wards within the project area of Bombua and Banban.  |
|                             | > Repair/construction of toilets and showers in 2 secondary and 2 primary<br>schools in Banban and Bombua   |
|                             | > 9 hygiene promotion awareness sessions for more than 213 students in 4<br>schools and 80 community members in 6 wards/communities within the<br>project area. Hygiene promotion activities lasted an hour and included hand<br>washing, faecal-oral transmission, water resource management and menstrual<br>hygiene management.  |
|                             | > 6 toilet Ventilated Improved Pit latrine construction training sessions<br>conducted across 3 communities reaching 80 people.   |



|   | <ul> <li>&gt; Emergency supplies distribution: 738 Family Hygiene Kits<sup>1</sup> to 429<br/>households; 728 10 L collapsible jerry cans to 364 households; 200 hippo<br/>rollers<sup>2</sup> to 200 households.</li> <li>&gt; 100,000 litres water trucked to two community water storage facilities at<br/>evacuation centres with poor water availability</li> </ul> |       |                      |                                   |                                  |      |  |  |  |  |  |
|---|--|-------|----------------------|-----------------------------------|----------------------------------|------|--|--|--|--|--|
| Total Funding<br>(AUD)  | \$351,351  |       | Proje<br>Time        | ct<br>frame                       |                                  |      |  | l end date<br>L May 2019   |  |  |  |
| Sectors<br>Mark "X" against<br>the relevant<br>sectors, refer to<br>proposal or PIP | <ul> <li>Health</li> <li>Food Security</li> <li>Logistics</li> <li>Emergency Telect</li> </ul>   |       | □ CC<br>□ Ed<br>⊠ Pr | ASH<br>CM<br>lucation<br>otectior | 1                                |      | Nutritic<br>Shelter<br>Early Ro<br>Other |  |  |  |  |
| Project<br>Location(s)  | Geographical areas: co<br>Banban and Bombua c<br>Sanma Province, Vanu  | ommur | , . ,                | -                                 |                                  | ugan | ville, San                               | ito Island,  |  |  |  |
| People Summary  |  |       |                      |                                   |                                  |      |  |  |  |  |  |
| # of people<br>affected by event  |  |       |                      |                                   |                                  | -    |  | Insert total estimated people affected by event, use up-to-date sources<br>Approximately 11,500 <sup>3</sup> people evacuated from the island of Ambae |  |  |  |
| Projected # of  | Category   | Male  |                      | Female                            |                                  |      |  |  |  |  |  |
| people to be  |  |       |                      | remaie                            | 9                                | Othe | r  | Total  |  |  |  |
| reached   | Adult without<br>disability  |       | 1034                 | remain                            | <b>1</b> 034                     | Othe | r  | <b>Total</b> 2068  |  |  |  |
|   |  |       | 1034<br>216          | remain                            | -                                | Othe | r  |  |  |  |  |
| reached<br>ref. to proposal,<br>PIP or agreed                                       | disability<br>Child without  |       |                      |                                   | 1034                             | Othe | r  | 2068   |  |  |  |
| reached<br>ref. to proposal,<br>PIP or agreed                                       | disability<br>Child without<br>disability  |       | 216                  |                                   | 1034<br>216                      | Othe | r  | 2068   |  |  |  |
| reached<br>ref. to proposal,<br>PIP or agreed                                       | disability<br>Child without<br>disability<br>Adult with disability   |       | 216                  |                                   | 1034<br>216                      | Othe | r  | 2068<br>432<br>103<br>None that<br>we are  |  |  |  |
| reached<br>ref. to proposal,<br>PIP or agreed<br>targets<br>Actual # people         | disability<br>Child without<br>disability<br>Adult with disability<br>Child with disability  | Male  | 216                  | Female                            | 1034<br>216<br>52<br><b>1302</b> | Othe |  | 2068<br>432<br>103<br>None that<br>we are<br>aware of  |  |  |  |
| reached<br>ref. to proposal,<br>PIP or agreed<br>targets                            | disability<br>Child without<br>disability<br>Adult with disability<br>Child with disability<br>Total   | Male  | 216                  |                                   | 1034<br>216<br>52<br><b>1302</b> |      |  | 2068<br>432<br>103<br>None that<br>we are<br>aware of<br><b>2603</b>   |  |  |  |
| reached<br>ref. to proposal,<br>PIP or agreed<br>targets<br>Actual # people         | disability<br>Child without<br>disability<br>Adult with disability<br>Child with disability<br>Total<br>Category<br>Adult without  | Male  | 216<br>51<br>1301    |                                   | 1034<br>216<br>52<br>1302        |      |  | 2068<br>432<br>103<br>None that<br>we are<br>aware of<br>2603<br>Total   |  |  |  |

<sup>&</sup>lt;sup>1</sup> Family Hygiene Kits were WVI Pacific Dignity Kits and included the following: 17 x Body Soap 75gms, 5 x Laundry Soap 200gms, 4 x Toothpaste 100gms, 5 x Toothbrushes, 1 x Large Comb, 1 x Standard Comb, 6 x Washable Baby Diapers, 12 x Diaper pins, 30 x Sanitary Napkins, 30 x A5 Brown Paper Bags (for sanitary napkin disposal), 5 x Disposable Razors, 4 x Rolls of toilet Paper, 3 x Women's Underpants (1 x L, 2 x XL), 1 x Small Torch, 1 x 15L White plastic Box with lid.

<sup>&</sup>lt;sup>2</sup> Hippo Rollers are a device used to carry and store 90L of water more easily and efficiently than traditional methods. It consists of a barrel-shaped container which holds the water and can roll along the ground, and a handle attached to the axis of the barrel. See https://www.hipporoller.org/

<sup>&</sup>lt;sup>3</sup> IFRC Emeregency Plan of Action Final Report stated the number at 10,488 people affected

<sup>(</sup>https://reliefweb.int/sites/reliefweb.int/files/resources/MDRVU006n2.pdf)



| hild with disability |
|----------------------|
|                      |

\*The numbers of actual beneficiaries reached is lower than initially projected due to the transient nature of the evacuees which saw some evacuees move into new areas or move back to Ambae before the response ended. We have also tried to ensure that children are not double counted as both students and household members through cross-checking enrolment lists with household distribution lists. The WVV response primarily targeted household and community level interventions. As such the number of interventions and the number of households that benefited were not affected by the drift of some individuals throughout the emergency between different parts of Santo, Maewo and Ambae islands.

# 2. Top Three Achievements

*Provide a brief description of the most important achievements in this project overall, and explain why each achievement is significant.* 

**Achievement 1**: All 429 evacuated families within the WVV project area were provided with appropriate water collection and storage containers such as 2x 10 litre collapsible jerry cans or 90 litre hippo rollers. In total 200 Hippo Rollers and 728 Jerry Cans were distributed This distribution complemented water trucking activities to fill water tanks in evacuation areas during the dry period s which provided life-saving access to water when no other water supply was available..

• Significance: Immediate access to safe and regular water supply was identified as a key priority during the response as evacuee numbers grew and Santo experienced less than average rainfall over the first few months of the response. In Banban community, which was transformed to a semi-permanent evacuation ground with many evacuees living in makeshift shelters there is limited access to town water supply, while in Bombua community where more than half of evacuees were living with Host Families where there is no access to town water supply. Jerry cans and hippo rollers, were both highly relevant and effective in providing a safe and clean water storage facility for households who do not have access household/community water tanks or the municipal water system. They are also easily transported with families who return to their original homes on Ambae Island or relocate to other areas on Santo Island.

Achievement 2: 28 Sanitation facilities were constructed or repaired in 4 schools in Banban and Bombua including 5 toilets retrofitted to enable easy access by users with disabilities. Facilities were also fitted with locks, lights and sanitary bins and essential supplies of toilet paper and soap were provided to schools.

**Significance:** Facilities at Banban and Bombua schools were inadequate to [cater for] the rapid increase in student registrations, creating a potential tension point between existing community members and newly arrived evacuees. Poor water and sanitation access that existed prior to the evacuation was exacerbated due to the rapid increase of school enrolments<sup>4</sup> in the target areas which had limited to no access to town water supply, access to latrines/toilets was well below SPHERE standards, and little to no handwashing facilities. Improving sanitation facilities to sphere standards supported schools to cope with the increased student numbers and [supported] students, including those with a disability, to continue their studies during the evacuation period.

Achievement 3: Nine hygiene promotion sessions were conducted in 4 schools and 6 wards within the target communities (evacuees and host communities) increasing awareness of what can and

<sup>&</sup>lt;sup>4</sup> Bombua Secondary school enrollments increased from 60 students to 96 students, while Bombua Primary School saw rapid and significant increase in enrollments increasing from 20 students to more than 120.



cannot be put down a toilet, handwashing promotion, waste segregation and disposal, and safe and dignified handling of menstrual hygiene and baby nappy waste.

**Significance:** Improving awareness of hygiene and waste management best practices for children and adults not only contributes to reducing the risk of communicable diseases in school settings and communities

# 3. Summary

## **Project Strategy**

#### Summarise the agreed strategy and approach which was used in the project.

World Vision is committed to working through and to Government of Vanuatu's priorities. Understanding that these priorities and directives are often not fixed, particularly in an emerging crisis, World Vision tailored its response to ensure that the needs of the people affected were met, aligned with Government priorities, and ensuring there was no duplication of efforts, coordinating with other agencies. World Vision worked closely with both the WASH and Education Clusters under the Sanma Emergency Operations Centre, and was the only international non-government organisation assisting with immediate substantive WASH needs in the Bombua and Banban resettlement areas.

World Vision's strengths are in its staff and community relationships. Our permanent local staff live and work in the communities they serve, many with years of experience in emergency response from Cyclone Pam and smaller responses such as the 2015-16 El Nino Response, and 2014 Cyclone Luci response. These staff speak the local languages and have a strong understanding of local customs. Their ability to connect with local communities ensures that tensions that arose in the families who were supporting evacuees were safely mediated. For the duration of response activities, World Vision worked with a 'community first' mindset, aligned with Government priorities and supporting Government plans.

World Vision also embraces adaptive programming, where local staff are informed and empowered to make decisions that influence programming on the ground. As needs emerged and priorities shifted during this response, World Vision staff made decisions that ensured activities met the immediate priorities of the context, rather than sticking to an outdated, inflexible plan ignoring changing conditions. This allowed flexibility and ability to adapt programming to consider gender and social inclusion priorities. in addition World Vision models the messages of gender equity and inclusion with a gender-equal senior management team, and has staff living with disability in leadership roles.

Throughout the project, World Vision also leveraged funding from Support Offices in Canada and the United States (\$65,000 USD) to support project activities, maximising the impact and reach of the Australian Humanitarian Partnership funding. While this additional funding did not result in additional beneficiaries reached (target areas for organisations to work in were defined and allocated through the cluster system and all sites with evacuees were covered by other agencies), this additional funding allowed World Vision to deepen impact and carry out further activities to target communities. These activities included a second distribution round of hygiene kits, increasing the number of latrines and bathrooms constructed, and supporting surge support staff to response activities.



# Achievement of Outcomes (Effectiveness)

Provide data against agreed outcome-level indicators. Ensure you disaggregate data. Add more rows if needed.

| Outcome                | Indicator/s                              | Target | Achievement against Indicator      |
|------------------------|--|--------|------------------------------------|
| 1. Women,              | • The number of                          | 2,171  | Total: 2070 people:                |
| men, girls<br>and boys | women, men, girls,<br>and boys with and  |        | Women without disabilities: 539    |
| have                   | without disability                       |        | Men without disabilities: 517      |
| immediate<br>access to | able to access                           |        | Women with disabilities:17         |
| dignified,             | dignified, safe toilets and showers      |        | Men with disabilities: 14          |
| safe, and<br>healthy   | and showers                              |        | Girls without disabilities: 467    |
| sanitation             |  |        | Boys without disabilities: 506     |
| facilities             |  |        | Girls with disabilities: 6         |
|                        |  |        | Boys with disabilities: 4          |
|                        | • The number of                          | 2,171  | Total: 2070 people:                |
|                        | women, men, girls,                       |        | Women without disabilities: 539    |
|                        | and boys able to<br>identify appropriate |        | Men without disabilities: 517      |
|                        | and respectful toilet                    |        | Women with disabilities:17         |
|                        | use practices                            |        | Men with disabilities: 14          |
|                        |  |        | Girls without disabilities: 467    |
|                        |  |        | Boys without disabilities: 506     |
|                        |  |        | Girls with disabilities: 6         |
|                        |  |        | Boys with disabilities: 4ed above. |
|                        | • The number of                          | 2,171  | Women without disabilities: 40     |
|                        | women, men, girls,<br>and boys able to   |        | Men without disabilities: 38       |
|                        | identify and access                      |        | Women with disabilities: 1         |
|                        | appropriate and safe                     |        | Men with disabilities: 1           |
|                        | waste management<br>practices            |        | Girls without disabilities:        |
|                        | procees                                  |        | Boys without disabilities:         |
|                        |  |        | Girls with disabilities:           |
|                        |  |        | Boys with disabilities:            |
|                        |  |        | ,                                  |
|                        | • The number of                          | 2,171  | Total: 2070 people:                |
|                        | vulnerable women,                        |        | Women without disabilities: 539    |
|                        | men, girls and boys                      |        | Men without disabilities: 517      |
|                        | in Luganville<br>provided with life-     |        | Women with disabilities:17         |
|                        | saving WASH dignity                      |        | Men with disabilities: 14          |
|                        | kits                                     |        | Girls without disabilities: 467    |
|                        |  |        | Boys without disabilities: 506     |
|                        |  |        | Girls with disabilities: 6         |
|                        |  |        |                                    |



|  |   |   | Boys with disabilities: 4   |
|--|---|---|---|
| Narrative  |   | n planned and expected progres<br>data and the influencing factors  | s or achievement, please provide a brief<br>s as necessary  |
|  | transient nature of the eva<br>back to Ambae before the<br>assessments and househol<br>to an <b>inflated average hou</b>  | icuees which saw some evacures which saw some evacures ended. At the begind lists were completed many <b>sehold size</b> . As people move on Santo outside of the Hos | an initially projected due to the<br>uees move into new areas or move<br>nning of the response when<br>families were living together leading<br>d back to Ambae or set about<br>st Communities, the number of   |
|  | settlements and hence att   | hat their <b>focus shifted to est</b><br>endance at training worksho<br>d at the beginning of the pro   | ps may not be as highly prioritised as  |
|  | costs within the city, their prioritised income-generat   | financial resources were qui<br>ing activities over WASH con  | ing to Luganville and the high living<br><b>ckly depleted</b> . Therefore they<br>struction activities.<br>Il stage, however the targets given  |
| 2. Women,<br>men, girls<br>and boys<br>have<br>immediate<br>access to<br>clean water<br>and safe<br>water<br>storage | • The number of<br>vulnerable women,<br>men, girls and boys<br>provided with WASH<br>assistance   | 2,171   | Total: 1812 people:<br>Women without disabilities: 471<br>Men without disabilities: 453<br>Women with disabilities: 15<br>Men with disabilities: 12<br>Girls without disabilities: 409<br>Boys without disabilities: 443<br>Girls with disabilities: 5<br>Boys with disabilities: 4 |
|  | <ul> <li>The number of<br/>women, men, girls<br/>and boys (with and<br/>without a disability)<br/>having their daily<br/>clean water needs<br/>met according to<br/>SPHERE standards</li> </ul> | 2,171   | Total: 2070 people:<br>Women without disabilities: 539<br>Men without disabilities: 517<br>Women with disabilities: 17<br>Men with disabilities: 14<br>Girls without disabilities: 467<br>Boys without disabilities: 506<br>Girls with disabilities: 6<br>Boys with disabilities: 4 |
|  | <ul> <li>The number of<br/>households storing<br/>water according to<br/>best-practice safety<br/>standards</li> </ul>  | 374   | 564 Households  |
| Narrative  |   | n planned and expected progres<br>data and the influencing factors  | s or achievement, please provide a brief  |



|                       | Targets were not get in the   | proposal that was approved             | by AUD. The targets in the table                                    |  |  |
|-----------------------|---|--|---|--|--|
|                       | _   |  | by AHP. The targets in the table scholds in target communities with |  |  |
|                       | all interventions, where re   |  | 5   |  |  |
|                       | The number of actual ben  | eficiaries reached is lower that       | an initially projected due to the                                   |  |  |
|                       | transient nature of the evacuees which saw some evacuees move into new areas or move  |  |   |  |  |
|                       | back to Ambae before the response ended. At the beginning of the response when  |  |   |  |  |
|                       | assessments and household lists were completed many families were living together leading   |  |   |  |  |
|                       | to an <b>inflated average household size</b> . As people moved back to Ambae or set about establishing their own base on Santo outside of the Host Communities, the number of |  |   |  |  |
|                       | people in the target comm   |  |   |  |  |
|                       | Many evacuees indicated t   | that their <b>focus shifted to est</b> | ablishing more permanent  |  |  |
|                       | settlements and hence att   | endance at training worksho            | ps may not be as highly prioritised as                              |  |  |
|                       | WV would have anticipate  | d at the beginning of the pro          | ject.   |  |  |
|                       | Evacuees also indicated th  | at due to the costs of relocati        | ng to Luganville and the high living                                |  |  |
|                       |   |  | <b>kly depleted</b> . Therefore they                                |  |  |
|                       | prioritised income-generat  | ting activities over WASH con          | struction activities.   |  |  |
| 3. Evacuated          | Number of   | 140                                    | 108 households  |  |  |
| households            | households able to  |  |   |  |  |
| and                   | meet their own  |  |   |  |  |
| communities<br>are    | sanitation needs in   |  |   |  |  |
| supported to          | Bombua and Banban   |  |   |  |  |
| meet their            | communities   |  |   |  |  |
| own WASH              | Number of   | 374                                    | 363 households  |  |  |
| needs in              | households able to<br>access and maintain   |  |   |  |  |
| resettlement<br>areas | clean water in  |  |   |  |  |
| ureus                 | Bombua and Banban   |  |   |  |  |
|                       | communities   |  |   |  |  |
|                       | Number of   | 18                                     | 6 households  |  |  |
|                       | households  |  |   |  |  |
|                       | proactively meeting   |  |   |  |  |
|                       | the specific WASH   |  |   |  |  |
|                       | needs of women  |  |   |  |  |
|                       | and people with   |  |   |  |  |
|                       | disability in their   |  |   |  |  |
|                       | own household in<br>Bombua and Banban   |  |   |  |  |
| Narrative             |   | e proposal that was approved           | by AHP. The targets in the table                                    |  |  |
|                       | _   |  | seholds in target communities with                                  |  |  |
|                       | all interventions, where re   |  |   |  |  |
|                       | The number of actual ben  | eficiaries reached is lower that       | an initially projected due to the                                   |  |  |
|                       |   |  | uees move into new areas or move                                    |  |  |
|                       |   | response ended. At the begin           |   |  |  |
|                       |   |  | families were living together leading                               |  |  |
|                       |   |  | d back to Ambae or set about<br>st Communities, the number of       |  |  |
|                       | people in the target comm   |  | se communicación de númber or                                       |  |  |
|                       |   |  | was less than anticipated as many                                   |  |  |
|                       |   |  | at the wharf rather than being                                      |  |  |
|                       |   |  | n expected reach of Number of                                       |  |  |



households proactively meeting the specific WASH needs of women and people with disability in their own household in Bombua and Banban.

Many evacuees indicated that their **focus shifted to establishing more permanent settlements** and hence attendance at training workshops may not be as highly prioritised as WV would have anticipated at the beginning of the project.

Evacuees also indicated that due to the costs of relocating to Luganville and the high living costs within the city, their **financial resources were quickly depleted**. Therefore they prioritised income-generating activities over WASH construction activities.

# 4. Analysis

Issues, Lessons and Responses

What issues arose during implementation, what has been learned through implementation, and how did the program respond to these – what, if anything, needed to change? Include reference to data presented against indicators, and link to additional data attached, if relevant.

The main challenges faced by World Vision during response activities were:

- Registration of evacuees: The lack of a centralised and coordinated registration process combined with a highly transient population were both anticipated challenges, faced by response partners during the first evacuation of Ambae Island. World Vision appointed a response project manager responsible for oversight of the project and coordination of a demographic survey and needs assessment across 421 households in Banban and Bombua. This information was collected using KoBo toolbox<sup>5</sup>, ensuring fast and accurate data collection, rapid analysis and easy dissemination of results to partners. The investment in a registration by WV was effective in better understanding the target population prior to service delivery and a similar process will be utilised in future responses.
- 2. *Disability data:* During the initial weeks of the evacuation, evacuees with disability were required to remain in a temporary evacuation site on the Luganville wharf whilst accessible and appropriate evacuation accommodation was sought for them. This resulted in some confusion in the early recording of disability data and some delays in the subsequent programmatic decision-making. While this challenge is indicative of changing and evolving response contexts, should there be future evacuations on Ambae (or other islands) World Vision will take into consideration similar scenarios.
- 3. Changing plans and shifting priorities: During the first four months of the project, the situation for Ambae evacuees who relocated to Santo shifted considerably and their decisions regarding their future plans unfolded accordingly. This was due to a number of factors including those outlined above, as well as evacuees indicating their intention to establish more permanent settlements on Santo and significant depletion of their financial resources after living in a costly urban centre. Therefore WVV took the decision to reassess our original activities and recommended some changes to our original implementation plan, however the overall project goal and outcomes remained the same. There have been few large scale evacuation responses in Vanuatu, and this was the first long-term evacuation of people from Ambae due to the volcano eruption. Should there be future responses of similar nature, WVV and other humanitarian actors and Government agencies will be better placed to anticipate what some of the push and pull factors for Ambae evacuees to return to Ambae may be (beyond when it is safe to return).

<sup>&</sup>lt;sup>5</sup> KoBoToolbox is a suite of tools for field data collection for use in challenging environments. The open source platform allows for data to be collected off-line on mobile phones or tablets and uploaded online when connectivity is possible. This process allows for quick and simple data analysis.



#### Relevance

Provide a brief statement regarding the relevance of the project (e.g. alignment with partner government priorities and the broader humanitarian response, appropriate partners, mechanisms, needs and priorities of affected population are being met).

By partnering with local government and in-country organisations during this response and early recovery, World Vision (WV) sought to enhance local capacity to ensure alignment with Government priorities and sustain project achievements over the long-term. The project was also supported by the Provincial Health Department who provided officers to conduct demonstration of toilet construction to ensure all VIP toilets were constructed in alignment with the sanitation standards defined by Clusters.

Training and skills development were programmed in to the recovery component of the project, and consistent gender and protection messaging were mainstreamed into all activities, meaning beneficiaries received consistent messaging and felt the impact of inclusive approaches.

WV worked closely with the WASH Cluster, the Gender and Protection Cluster, as well as the Shefa and Sanma Provincial Governments to ensure that safe, accessible, and dignified sanitation facilities for affected families and communities remained a key priority. This was intentional to ensure our interventions were relevant and meeting the needs of women, children and people with disabilities. It has been our experience from past disaster responses that protection and accessibility often get de-prioritised in favour of increased NFI distributions. This means that while families may get additional bars of soap and toilet paper rolls, there is often little or no budget allocated to ensuring that there are railings by toilets for accessibility, locks on shower stalls and toilet doors, and lights on outdoor facilities to reduce the risk of violence.

#### Innovation

#### Describe any significant examples of innovative practices.

Throughout the project, World Vision with support from their partner Field Ready developed and piloted innovative solutions to meet needs in the community. In all 5 innovative solutions were generated by Field Ready for use within World Vision's Ambae Response project: a 3D printed hose clamp to reduce leakage of the Luganville Municipal fire truck (used for water transport), locally made privacy screens / walling, latrine handrails for increased accessibility of new and existing sanitation infrastructure, jerry can cart for water transport and a standalone bamboo shade structure. In addition WV trialled a number of other innovative approaches including the use of copra bags dipped in cement mix as an inexpensive, private and secure walling of latrines and bathrooms, and a mould for building seat risers made from recycled rice bags.

Field Ready in their partnership with WV introduced the idea of using a 3D printer to make bespoke fittings at short notice to quickly problem solve in a rapidly evolving and changing response environment which may have difficulties surrounding procurement and logistic. This technology was used to develop a hose clamp to fix a leakage in the primary vehicle delivering water trucking services around Luganville. Challenges in measurement and demand and reliability of the technology meant that this solution was unable to be rolled out, however the introduction of this technology may provide valuable solutions in future responses.

Locally woven mats were used to develop standalone privacy screens and walling to provide privacy for toilets and showers as a means of promoting good hygiene behaviours, especially amongst women and girls. Although this technology was deemed appropriate for the context an alternate solution of utilising copra bags and cement was found to be quicker and cheaper and as such was preferred.



A self-standing handrail to be fitted to any existing latrine was developed by Field Ready as part of their partnership with WV. This was found to be a durable, inexpensive means of upgrading any existing latrine with sturdy handrails for improved access to sanitation. This was anticipated to be key piece of WV's accessible sanitation activities however the demand for this type of accessibility upgrade was low within the target population. There are a number of factors that are believed to have contributed to this. The first being the services provided to people with disabilities were centralised during the state of emergency and concentrated at the Luganville wharf facility. This meant that people with more significant mobility disabilities were likely to have spent a large proportion of their time at the wharf facility rather than in communities in the WV project target area. After the state of emergency it was expected that this population would integrate through the communities and as such WV consulted again with Banban and Bombua communities to demonstrate the handrail but there was very low need found. It is not certain whether the people with mobility disabilities - those expected to benefit from the handrail - were amongst those that travelled back to Ambae during this time or if they relocated to other parts of Santo outside the WV project area. While future responses may result in a different process, as a result of this response WV will anticipate that people with disabilities may not be settled in Host Communities and look to support organisations working in evacuation centres with accessible interventions.

The cart for transport of jerry cans and standalone bamboo shade structure were developed after the success of the hippo rollers and after lack of shelter was reported as being a major point of feedback from community consultation. As it transpired it seems that these two innovations did not appear to be more effective than existing techniques for water cartage and shelter construction and their foreign nature and relative expense found them to be less effective solutions in the context or the need they were meeting was not great enough to sustain their development. A workshop on the construction of the shelter was piloted with a community in Banban.

Two local construction techniques were found to be particularly effective and became widely used in the project. Both made use of readily available cement along with other locally available materials. Copra bags, a storage and transport material for raw coconut product (copra) were re-used by WV with a cement mix that produces a strong and effective material for walling that is highly cost-efficient as copra bags are typically a waste product from Copra storage. In addition a mould to build toilet seat risers, a piece of sanitation infrastructure particularly important for elderly, pregnant women and people with disabilities, was made from used rice bags filled with sand. This was found to be a resounding success, resulting in a fast and cost effective way of building the mould in turn leading to fast and cost effective production of bulk risers.

## Sustainability, Connectedness and Localisation

What was achieved regarding localisation and sustainability? How was the project coordinated with the broader response (e.g. partner Government, other AHP partners, UN organisations etc. To what extent did local and national partners have decision-making roles in the program and how did you channell funding to them (e.g. did they have a funding agreement for the entire duration/ multi-year period)? How did this influence implementation?

Throughout the project, WVV prioritised local partnering for effective delivery where possible. Partners were selected based on their level of social influence and relevant sectoral expertise, as well as leveraging international partnering for technical expertise. For example, the Disaster READY consortia in Vanuatu supported a Disaster Officer within the Vanuatu Society of People with Disability in Santo who was engaged to support WASH accessibility assessments.

WVV also has a strong relationship and the explicit support of the Ambae *Technical Advisory Committees (ATAC) in Luganville*. ATAC developed in response to the 2017 evacuation where it was recognised that the local Ambae voice was required in decision-making and advocacy. ATAC is a



representative body led by Ambae chiefs of all four areas on Ambae. Several ATAC members are also members of the national clusters, and the group has members specifically working on local disaster committees. Throughout the project, WVV liaised closely with ATAC recognising that they provided an excellent mechanism to access the wider Ambae community and to ensure that the Ambae community was driving response and recovery.

In addition, WVV is an active member of the Vanuatu Humanitarian Team and engaged in the Vanuatu Government sector cluster network, including the WASH and Gender and Protection Clusters regularly throughout the response. WVV is also an AHP partner in Vanuatu, working closely through the incountry consortia of Australian NGO's to support the Vanuatu Government's disaster risk reduction priorities. To ensure coordination and collaboration, reduce duplication, promote efficiency and effectiveness, and maximise learning and impact, we worked collaboratively with other AHP partners to align programming approaches, implementation, and have coordinated programming approaches, implementation and learning.

In response to the Ambae volcano humanitarian crisis, WVV supported the WASH Cluster to register and respond to host families in Santo during the 2017 response. Through these response activities, as well as other programming, we have developed strong relationships with provincial governments. This is evidenced by having recently updated and signed a five-year Memorandum of Understanding with the Sanma Provincial Government to support their long-term development plans. Throughout the response, we also leveraged long-term relationships with affected communities, particularly through local church networks which are highly active. These relationships have been fostered through the DFAT supported Gender Action Platform through which WVV is working directly with the Vanuatu Christian Council and Provincial Council of Churches to advocate for positive gender relationships in families and society, addressing the root cause of much gender based violence.

Immediate WASH needs were identified as a key priority during the response as evacuee numbers grew and Santo experienced less than average rainfall over the first few months of the response. In partnering with local government and ensuring close collaboration with schools, we ensured local ownership of WASH structural inputs for long-term maintenance and sustainability. World Vision also connected its WASH response for Ambae evacuees with its long-term, five-year WASH programming work in Sanma through the Water for Women Fund project (funded by DFAT), which continues to embed gender and protection messaging and work through an innovative WASH approach delivered with and through partners.

## Protection

How did the project protect the safety, dignity and rights of affected people? What efforts were made to ensure assistance was impartial, avoiding exacerbating risks and negative impacts? Was information shared with affected populations and did they participate in design, implementation and review? To what extent were safe and responsive feedback mechanisms available and used?

Throughout the project World Vision Vanuatu (WVV) kept the rights and needs of affected people at the core of its project. WV worked closely with leaders in both the evacuated and host communities to ensure interventions were relevant and met changing and adapting needs and communicated regularly about project activities, distributions, etc.

Participatory needs assessments informed design ensuring affected communities self-identified needs and priorities were reflected in the design. In addition the needs assessments asked people with disabilities and their carers what WASH improvements needed to be made to ensure dignified and accessible use according to specific impairments. Budget was also specifically allocated for any unexpected/unreported needs to be addressed effectively.



WV staff hosted regular community update meetings in target communities to answer and address any questions or concerns affected communities have. In addition, WVV recognise that at a community leadership level in Vanuatu, women and people with disabilities are rarely represented or have the opportunity to voice their concerns. Awareness sessions were run with infrastructure improvements to ensure that communities and households understood how to manage facilities to maximise access by all and specifically priority groups such as people with disability and pregnant women.

In addition, recognising the increased risk women and children face in times of emergencies, World Vision leveraged funding from the CAN DO (Church Agencies Network for Disaster Operations) Consortia<sup>6</sup> which in partnership with World Vision were awarded grant funding<sup>7</sup> in order to "meet the immediate protection needs of 2,000 children and 500 women and to reduce the negative consequences of the crisis on communities, as well as building resilience to future hazards among at least 5,500 community members (at least 50% of the population of Ambae)."

Through this partnership, WVV was contracted by Anglican Overseas Aid (AOA) for the provision of training to increase awareness, skills, and strategies regarding prevention and response to gender based violence (GBV) to those affected by the Ambae Manaro Volcano emergency. Under the agreement, World Vision worked closely with AOA through the Anglican Church in Vanuatu to implement family violence prevention and response training through a faith perspective with Ambae community and faith leaders.

The training reached 64 participants (28 women and 36 men)

WVV's program uses a faith based approach to prevent and reduce GBV. The model is based off World Vision International's Channels of Hope for Gender approach, contextualised to Vanuatu. WVV created a workshop outline based on the needs identified by AOA and the CANDO consortium in order to meet the needs of the Ambae evacuees. Trainings were held in in Maewo from 17 - 21 September, 24 - 28 September in Santo, and a follow-up training one month later from 6 - 9 October. Participants included Faith Leaders, Chiefs, Women Leaders, Sunday School Teachers, and youth.

Broadly the workshops addressed:

- 1. Understanding and acknowledging gender and vulnerabilities
- 2. Building good foundations of understanding and compassion to prevent family violence
- 3. Steps for working with adult victims of family violence, including referral pathways

During the first workshop participants came to acknowledge that some of their own attitudes and behaviours are abusive and needed to change. This is a huge step towards heads of communities and congregations modelling positive behaviours. Participants from both the Santo and Maewo trainings expressed personal transformations in attitudes and behaviours around family and intimate partner violence. This was demonstrated by participants sharing regrets over how they have treated their spouses and children, and their acknowledgement that these behaviours were perpetuated due to beliefs and social norms which indicated these behaviours and attitudes were appropriate. Participants voiced their appreciation of the way the workshop approached family violence & child protection using a biblical perspective. Given the limited scope of this activity there was no opportunity to triangulate these results.

<sup>&</sup>lt;sup>6</sup> the Adventist Development Relief Agency (ADRA) Vanuatu and Anglican Church of Melanesia (ACOM)

<sup>&</sup>lt;sup>7</sup> The funding for this activity was provided under the CAN DO consortium and is additional to World Vision's AHP funding



## Risk, Security and Fraud

Summarise major risk management issues, including security, and outline how these were effectively managed.

No major risk management issues arose during this response, however the following risks were identified during the design period with appropriate risk mitigation strategies put in place:

| Risk  | Likelihood          | Mitigation Strategy   |
|---|---------------------|---|
| Government changes its position on response support for communities in Luganville.  | Low                 | WVV liaised closely with Government, the Provincial Emergency Operations Centre (PEOC) in Sanma, acknowledging that this was a rapidly evolving situation and we will endeavour to respond with a flexible and adaptive programming approach.   |
| The WASH Cluster has previously had<br>significant challenges coordinating and<br>overseeing WASH activities across wide, varied<br>populations.  | Moderate to<br>High | WVV national Health and WASH Technical Advisors liaised<br>closely with the WASH Cluster which has been reinforced with<br>Unicef, MFAT, and DFAT technical assistance. WVV worked<br>with our implementing staff to make modifications to the<br>proposed interventions as needed, while adhering to the<br>project's core goal of ensuring a dignified standard of living for<br>evacuees through the provision of WASH services and<br>support.  |
| Households are continually moving as the<br>evacuation becomes protracted. Families are<br>experiencing frustration due to burdens<br>placed on them by the 2017 response and the<br>protracted nature of this crisis. Risks for<br>family and gender-based violence are<br>increasing daily. | Moderate to<br>High | WVV deployed our current WASH team (4 plumbers and 1<br>engineer) to carry out rapid repairs within the schools and<br>communities. Referral pathways and faith-based violence<br>reduction messaging were used during awareness and<br>engagement sessions with families to ensure they are aware<br>of heightened risk and have strategies and resources to<br>manage it. WVV engaged with the Gender and Protection<br>Cluster to tap into any additional support networks for<br>preventing or managing violence.   |
| Casual staff from affected communities may<br>prioritise their families/friends for<br>interventions  | Low                 | World Vision employed a number of Ambae community<br>members and community chiefs as casuals to support with<br>response activities. Community chiefs contributed<br>significantly to community liaison efforts and ongoing<br>community engagement. World Vision was conscious of the<br>potential risk of perceived preferential treatment towards<br>these casuals with regards to the provision of materials for<br>construction of VIP toilets. To mitigate this risk, regular<br>update meetings were held with Banban and Bombua<br>communities which facilitated clear communication and<br>provided a forum for addressing any emerging concerns<br>early. |

## Gender and Disability Action Plan

Summarise the implementation of the Gender & Disability Action Plan. Include discussion of challenges faced, how they were addressed, and lessons learned.

| COMPONENT 1: Planned actions to respond to the different needs and priorities of women, girls, men and boys |   | Responsibility            | Timing    |
|---|---|---------------------------|-----------|
| Need Assessment   | World Vision (WV) worked with the Emergency<br>Operations Centre (EOC) and Clusters in Luganville and<br>the ATAC to assess the WASH needs of the Bombua and<br>Banban. | World Vision<br>WASH lead | Completed |



|   | anned actions to respond to the different needs and<br>n, girls, men and boys   | Responsibility   | Timing    |
|---|---|--|-----------|
|   |   |  |           |
| Design and<br>planning  | Needs assessments informed specific WASH<br>interventions (i.e. taps that work won't be improved –<br>only broken elements will be fixed). Safety and<br>accessibility were mainstreamed into infrastructure<br>elements.<br>Needs assessments often engage Community Leaders<br>such as Chiefs and Faith Leaders who in Vanuatu are<br>predominantly men. To overcome this barrier and<br>ensure the needs of women and girls and boys were<br>taken into consideration WVV engaged with women's<br>groups and Community Leaders Spouse's to ensure the<br>priorities of all community members were reflected in<br>design and planning. | World Vision<br>Senior<br>Programme<br>Quality Officer                             | Completed |
| Participation   | WV worked with and through the Gender and<br>Protection Cluster led by the Department of Women's<br>Affairs as well as with the AHP Disability Officer. The<br>ATAC also have representatives from all areas of<br>Ambae.   | Project Manager  | Ongoing   |
| Equal access to<br>and benefit from<br>project services                   | Awareness sessions were run with infrastructure<br>improvements ensuring that communities and<br>households understood how to manage facilities to<br>maximise access by all and specifically priority groups<br>such as people with disability and pregnant women.   | Project Manager  | Completed |
| Prevention and<br>response to GBV,<br>Sexual<br>Exploitation and<br>Abuse | Primary prevention strategies were mainstreamed<br>throughout the approach. WV employs rigorous checks<br>for its own staff and partners and responds swiftly and<br>with transparency to any complaints.   | World Vision<br>Vanuatu and<br>Pacific Timor-<br>Leste Gender<br>Technical Officer | Completed |
| Gender-focussed<br>monitoring,<br>evaluation and<br>accountability        | World Vision disaggregated all data by gender and<br>ensured that any focus-group discussions involved all<br>genders. Discussions were run in safe settings by a<br>gender-balanced team.  | World Vision<br>Senior<br>Programme<br>Quality Officer                             | Completed |
| Coordination with<br>other actors   | World Vision worked with AHP partners, local and<br>national government, the ATAC, VSPD, etc.<br>As with all disaster response, there are often many<br>coordinating bodies and clusters to participate in which<br>can be challenging for a small implementation team to<br>balance responsibilities.  | Project Manager<br>and Operations<br>Manager                                       | Ongoing   |
| Internal gender<br>capacity (agency<br>and partner/s)                     | Relevant to this response project, World Vision has a New<br>Zealand accredited Social Work and Gender technical<br>advisor capable of delivering child protection and family<br>safety services. World Vision also has an ongoing<br>partnership with CARE Australia through its Water for<br>Women grant which takes a similar approach.  | Senior<br>Programme<br>Quality Officer   | Ongoing   |



| COMPONENT 2: Plann<br>with disabilities (PWD                           | ed actions to respond to the different needs of people<br>)   | Responsibility   | Timing    |
|--|---|--|-----------|
| Need Assessment  | World Vision worked with the EOC/Clusters in<br>Luganville to assess the WASH needs of people with<br>disability living with host families and in temporary<br>shelters.  | World Vision<br>WASH Lead  | Completed |
| Design and planning  | Needs assessments informed specific WASH<br>interventions (i.e. appropriate tap heights, toilet<br>railings as necessary, etc.). Safety and accessibility<br>were mainstreamed into infrastructure elements<br>such as lights and locks.<br>Needs assessments often engage Community<br>Leaders such as Chiefs and Faith Leaders who in<br>Vanuatu are predominantly men without disabilities,<br>to ensure the needs of people with disabilities was<br>refelected in design and planning, project staff met<br>with people with disabilities and their carers to                        | World Vision<br>WASH Lead and<br>Disability<br>Technical Officer           | Completed |
| Participation  | discuss their priorities and needs.<br>Needs assessments asked people with disability and<br>their carers what WASH improvements needed to be<br>made to ensure dignified and accessible use<br>according to specific impairments. Budget has been<br>specifically allocated for any<br>unexpected/unreported needs to be addressed<br>effectively.   | Disability<br>Technical Officer  | Completed |
| Equal access to and<br>benefit from project<br>services                | Awareness sessions were run with infrastructure<br>improvements to ensure that communities and<br>households understood how to manage facilities to<br>maximise access by all and specifically priority<br>groups such as people with disability and pregnant<br>women.<br>While the project partnered with Field Ready to<br>develop disability accessible WASH interventions, as<br>explained in the report many people with disabilities<br>remained at facilities at the Wharf rather than in<br>communities.   | Disability<br>Technical Officer,<br>DPO partner,<br>Project Manager        | Completed |
| Disability-focussed<br>monitoring,<br>evaluation and<br>accountability | WV disaggregated all data by gender and disability<br>and ensured that any focus-group discussions<br>involved people with disability if possible.<br>Discussions were run in safe settings by a gender-<br>balanced team and in partnership with VSPD or WV<br>staff members with disability.<br>While WVV disaggregated data to include people<br>with disabilities, there were less people with<br>disabilities in target communities than initially<br>projected as many stayed at evacuation centres at<br>the Wharf rather than Host Communities where<br>World Vision was serving. | Disability<br>Technical Officer,<br>Senior<br>Programme<br>Quality Officer | Ongoing   |
| Coordination with other actors   | World Vision worked with AHP partners including<br>the AHP Disability officer, local and national<br>government, the ATAC, VSPD, etc.   | Project Manager<br>and Operations<br>Manager                               | Ongoing   |



| COMPONENT 2: Plann<br>with disabilities (PWD              | ed actions to respond to the different needs of people<br>)   | Responsibility                         | Timing  |
|---|---|--|---------|
| Internal disability<br>capacity (agency and<br>partner/s) | World Vision has an ongoing partnership with Sally<br>Baker (International Development Specialist,<br>Disability and Social Inclusion) through its Water for<br>Women grant which takes a similar approach. Sally<br>is mentoring our national Disability Technical Focal<br>Point and provides advice and guidance on best<br>practice approaches. | Senior<br>Programme<br>Quality Officer | Ongoing |

# 5. Exit Strategy

Briefly describe the exit strategy and closure steps for the project and an assessment of the sustainability of the results, i.e. the extent to which the benefits of the project will continue after its closure. Detail how the project contributed to the resilience of communities, built the capacity of local partners, and supported long term strategies to reduce humanitarian needs, underlying vulnerabilities and risks.

Throughout the response, World Vision Vanuatu sought to ensure meaningful change could be sustained where possible and supported the long-term resilience of communities. By partnering with local government and organisations in-country during this response and early recovery, WVV sought to build local capacity to sustain project achievements over the long-term. Training and skills development were programmed in to the recovery package to ensure that any ongoing maintenance or operation of latrines and systems could be managed by evacuee/host communities. World Vision has actively participated in various lessons learned events such as those led by the Sanma Provincial Government and the gender and protection cluster to ensure that lessons from the project were shared widely with other key stakeholders.

In addition consistent gender and protection messaging was mainstreamed into all activities, meaning that all beneficiaries heard the same messages and felt the impact of inclusive approaches over the year of project implementation. Ongoing support and strengthening of Area Councils and the Sanma Provincial Government to be better prepared respond to disasters and emergencies, including to meet the needs of people living with disabilities, will continue under the AHP Disaster Ready. Lastly, WVV has a five-year engagement with Sanma Province through the Water for Women Fund which will continue to embed gender and protection messaging and work through an innovative WASH approach delivered with and through partners.

## 6. Communications

*Please provide a summary of the communications products produced for AHP, including the case studies or Field Stories provided to the AHP Support Unit.* 

Throughout the course of the project World Vision produced two case studies for the project which were shared on online mediums including World Vision Vanuatu's Facebook page and World Vision Vanuatu's website.

These case studies are attached.

Project partner Field Ready also reported on their AHP project and work on the Ambae response on their website and blog.

Throughout the project World Vision also provided ongoing updates on the response and the emergency situation through its social media platforms; facebook and twitter which have 2998 and 71 followers respectively. This included the posts below:





From tents to concrete....when World Vision extended a water system into the Bombua Primary school, water was available for the construction of new classrooms.

This has made it easier for the 131 students who had been evacuated from 16 different schools on Ambae. Classrooms had been a challenge when the large number of students came into the school and they had to use tents or quickly constructed structures.

Response work was funded by the Australian government through the Australian Humanitarian Partnership and private donations from World Vision Australia, World Vision USA and World Vision Canada.

Australian High Commission, Vanuatu Australian Government Department of Foreign Affairs and Trade





World Vision Vanuatu 22 March · @

Happy World Water Day!

Mathilda who wants to be a teacher one day says "During hygiene awareness we learnt a lot of new things. We were also reminded on the risk of ignoring important hygiene practices like washing hands." Mathilda and Shirley are among 91 students at the Bombua school who were evacuated from Ambae. Work to provide hygiene awareness and to provide access to water is funded by the Australian government through the Australian Humanitarian Parnership and private donations from World Vision Australia, World Vision USA and World Vision Canada

Australian High Commission, Vanuatu



WVV also leveraged previous investment in developing Information, Education, Communication (IEC) materials relating to handwashing and menstrual hygiene and also IEC materials developed by World Health Organisation to promote handwashing and safe water consumption.

WVV also utilised communication channels between other AHP NGOs and within the Vanuatu emergency management system. Where appropriate this was inclusive of the local level (community disaster and climate change committees), intermediary level (area council and provincial council inclusive of provincial level working groups and through activated Provincial emergency operations centres) and national (National Disaster Management office inclusive of the clusters). In addition to these standard channels of communication WVV also utilised its relationship with the ATAC to ensure that the Ambae voice remained strong amongst the various communication levels from which this work will interact.

## **Annex 1: Additional Data**

*Please provide additional data regarding project achievements, outputs or activities which are significant, and which were instrumental in achieving project outcomes.* 



#### Annex 1:

No Cost Extension Request which explains changing contexts and rationale for revised activities.

