

We contribute to:



HEALTH, WASH AND NUTRITION

Basic needs, such as clean water, health care, food, and sanitary services, are important preconditions for sustainable development and resilience of vulnerable children and their families.

In 2023, Help a Child implemented Health, WASH, and Nutrition programmes in DRC and Somalia. In our holistic Child-Centred Community Development programme, Health, WASH, and Nutrition are integrated aspects, involving, for example, the strengthening of community structures, awareness campaigns, and lobbying and advocacy activities. Early Childhood Development Centres are also taking up their role, especially in detecting and defeating malnutrition.

In the protracted crisis in DRC, we constructed WASH facilities such as toilets, showers, and water points in schools to enable a safe learning environment for vulnerable children. In Somalia, together with our partner Medair and four local partners, we implemented an integrated Health, WASH, and Nutrition programme to provide lifesaving support to malnourished children, improve their health through a community-based health awareness programme and ensure access to clean water to prevent waterborne diseases. Help a Child also supported Medair to set up Child Friendly Spaces and extra attention was devoted to the identification and treatment of victims of Sexual and Gender-Based Violence.



End hunger, achieve food security and improved nutrition and promote sustainable agriculture



Ensure healthy lives and promote well-being for all at all ages



Ensure availability and sustainable management of water and sanitation for all

Key statistics:

 **43,001** people supported through clean water supply

Soap distributed to **42,374** people 

 **109,886** people have been reached with hygiene promotion messages

17,937 young children received treatment for malnutrition 



SOMALIA

MEDAIR

each life matters

The Care Group model: a pillar in community health

In Somalia, the Care Group model, facilitated by dedicated volunteers like Asha Said*, has become a pillar in community health. Despite initial challenges of scepticism and resistance due to traditional beliefs, Asha and her team persisted, educating households on hygiene, nutrition, and disease prevention.

Through house-to-house visits and persistent follow-ups, they fostered behaviour change, leading to a reduction in malnutrition and communicable diseases. Asha's role extends beyond education; she trains fellow volunteers and coordinates screenings for malnutrition, ensuring prompt referrals for treatment. Across

south-central Somalia, Care Group volunteers have screened over 263,872 children for malnutrition and reached nearly 50,000 individuals with hygiene messages, showcasing the programme's significant impact on community health and empowerment.

* Fictitious name



17,937

children received treatment for malnutrition



149,632

children screened for malnutrition



Care Group volunteer during a home visit.



DRC

Sanitation success: from open defecation to community toilets

In fifteen villages of the health zones of Masisi and in seven villages of Fizi, community members helped each other with the voluntary construction of family toilets. The toilets were built after the introduction of the CLTS approach (Community-Led Total Sanitation).

This participatory approach contributes to a change in behaviour of the local population regarding hygiene by promoting the voluntary construction of family toilets, emphasizing the importance of handwashing at key times, and the elimination of household waste in the health areas of

Loashi and Bukombo. The CLTS approach enabled communities to conduct their own analysis of open defecation and take their own measures to curb it. Help a Child supported the implementation of these activities in different ways, for example by facilitating trainings, financial support, and supporting stakeholders in implementing the approach.



Supported by their local leaders, the health zone, and the local environmental service, community members succeeded in building 5,068 family toilets with local materials in three health areas usually exposed to cholera. Remarkably, during the whole of 2023, the epidemic did not affect the villages involved in the CLTS approach.



