Simavi
Basic health for all.

Strategy 2014 - 2020
1. Introduction

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1.1 Where we are now

The world around us is undergoing major changes. While the traditional North-South paradigm is steadily becoming a thing of the past, the gap between rich and poor within developing countries and within regions is becoming ever larger. At the same time, population is growing at an astounding rate. The current world population will increase by more than 1 billion over the next 10 years, and will reach 9 billion in 2050. The population in developed regions will remain largely unchanged at around 1.3 billion, in stark contrast with the populations of the lesser developed countries in Africa and Asia, where populations are projected to double by 2050.

This rapid population growth brings with it a major new challenge - a challenge that has already become noticeable around us: the resources challenge. Or in other words, we are starting to see food, water, energy and mineral crises. The agricultural sector already uses seventy per cent of available drinking water, while the world’s demand for food (and with it, water) is set to double over the coming fifty years. This presents a threat to low and middle-income communities all over the world.

Along with population growth and the resource crisis, a trend of rapid urbanisation is also taking place all over the world. Today more than fifty per cent of people already live in cities. But whilst the eyes of the world are on its cities, large groups of people still live in remote areas without safe drinking water or clinics where women can give birth safely.

Every year 290.000 women still die as a result of pregnancy or childbirth; unmet need for contraception remains as high as 38% in sub-Sahara Africa; and every day 20.000 girls below the age of 18 give birth in developing countries. These problems concentrate in the poorest countries, regions and rural areas in the world, showing major inequalities.

Also access to safe drinking water and sanitation is distributed unequally, whether measured between urban versus rural areas, between slums and formal settlements, men and women or disadvantaged groups and the general population. As of today, nearly 800 million people still have no access to improved sources of drinking water protected from outside contamination, 2.5 billion people lack access to improved sanitation and over one billion people still practice open defecation. This situation leads to diseases such as diarrhoea, typhus and cholera, deaths in Africa alone 115 people die each hour due to poor sanitation, poor hygienic conditions and contaminated drinking water) and economic losses which can amount to 1.5% of gross domestic product of a country. To compare, every day, more people die of diarrhoea than of HIV/AIDS. These are unnecessary deaths, because diseases such as diarrhoea, typhus and cholera can be easily prevented when WASH services are in place.

We know that investing in Sexual and Reproductive Health and Rights (SRHR) - including access to health services, contraceptives and sexuality education - as well as investing in Water, Sanitation and Hygiene (WASH), are indispensable to poverty reduction and sustainable development. Simavi realises that the best way to address these complex challenges is by working together. Working together not only as governments and NGOs. It is a fortunate trend that development aid is no longer the domain of development organisations and governments alone. The private sector, in its search for new markets, is increasingly taking its activities to developing countries. At the same time, a new type of business - social entrepreneurship - presents new opportunities to achieve lasting change. Public-private partnerships are realising a sustainable impact all over the world. Simavi has embraced the new opportunities arising from this combination of trade and aid, as our partnerships with the private sector show. Besides, knowledge institutions play a crucial role in our search for innovative solutions.

1.2 Strategy 2014 - 2020

Above mentioned trends and developments have influenced the way Simavi works which resulted in this organisational strategy.

Times are changing, and Simavi is keeping pace. But what is not changing is our deep-rooted conviction that everyone is entitled to healthy living conditions. This strategy encompasses our redefined vision, mission and a Theory of Change aimed at achieving structural change. Furthermore it explains our main objectives on the four strategic priorities that have been formulated to guide the organisation towards structural improvement of the basic health of 10 million people by 2020. The Strategy 2014 – 2020 is built upon the following strategic priorities: 1) Live our Theory of Change to realise structural improvement to the health of people; 2) Diversified fundraising and innovative partnerships; 3) A strong brand and transparent communication; and 4) A people oriented organisational culture nourishing entrepreneurship and innovation.
Vision
Simavi strives for a world in which basic health is accessible to all, since basic health is the first step towards building a better existence and creating a way out of poverty. We can break the cycle of poverty by investing in basic health.

We believe that everyone has the right to healthy living conditions. Unfortunately, too many people in developing countries are falling ill or even dying, due to a lack of knowledge about health and hygiene, a lack of health services and difficult political, cultural and economic circumstances. As a consequence, perpetuating (gender) inequality and deadly diseases such as diarrhoea, dysentery, typhus, cholera and HIV/AIDS still occur on a large scale.

Mission
Simavi realises structural improvement to the health conditions of people in marginalised communities in Africa and Asia. We invest in Water, Sanitation and Hygiene (WASH) and in Sexual and Reproductive Health and Rights (SRHR).

Our programmes focus on:
- Empowering communities to demand quality services and to engage in healthy behaviour;
- Creating an enabling environment, ensuring that governments, private sector and NGOs are involved, are held accountable and know their roles and responsibilities;
- Ensuring that affordable, suitable and sustainable WASH and SRHR services are actually utilised by the people.

It is our ambition to structurally improve the basic health of 10 million people in marginalised communities in Africa and Asia by 2020.

Core values
To realise our ambition, we have defined five core values that drive our decisions, and state what we stand for and how we work:

Sustainable: Our work is based on a long-term vision for the future. We aim for structural changes. We use an effective integrated programmatic approach.

Powerful: We are seen as powerful and confident. We are proud of our daily work. We believe in the strength and the passion of people.

Connecting: We put our heart and soul into what we do. By doing so, we cooperate intensively with others. Together we can make a difference.

Inspirational: We bring forward new ideas and we think out of the box. We inspire each other and the partners with whom we work. We offer an inspiring working environment.

Righteous: We believe that everyone has the right to healthy living conditions. We have respect for the differences between people, cultures and organisations. We work according to people’s equal right to development.

Basic health definition
In Simavi’s vision, basic health is a crucial stepping stone for building a better existence and creating a way out of poverty. It refers to fundamental health conditions that need to be fulfilled in order to allow development; people can only go to school, engage in work and contribute positively to their community, when they are in good health.

To achieve the goal of basic health, Simavi invests in water, sanitation, hygiene (WASH) and in sexual and reproductive health and rights (SRHR). We know from experience that WASH and SRHR are crucial for people to be able to lead a healthy life, build a better existence and find a way out of poverty.
To realise structural improvement of the health of people in marginalised communities, Simavi has developed a threefold, integrated approach: our Theory of Change. In the first place, our work focuses on empowering communities to ensure they will demand quality services and engage in healthy behaviour. Secondly, we build an enabling environment in which all stakeholders are aware of their roles and responsibilities, work together and can be held accountable for their responsibility of fulfilling people’s rights. And finally, we ensure that affordable and sustainable WASH and SRHR services are in place and are actually utilised by the people. Our Theory of Change helps us to realise this structural change.

Pillar 1: Empowered Communities

How does it work?
Simavi empowers communities through setting up and training community groups. This includes for example raising awareness on WASH and SRHR issues and training the organisational skills of WASH and health committees. Increasing the capacity of community groups leads to a better understanding and monitoring of the health situation in their village. The community groups play a key role in engaging the whole community. People become aware of their rights, the importance of health and the behaviour that is necessary to prevent diseases. Thereby, people’s demand for water, sanitation and sexual reproductive services and rights is being expressed. Empowering communities means making sure that this ‘voice of the community’ is being heard and the interests of all community members, irrespective of age, gender, sexual preference, religion or ethnicity, are being represented.

What is the outcome?
Empowered communities have the ability to analyse their own health problems, they know their rights, can articulate their needs, and urge those whose duty it is to fulfil their needs. People know how to prevent WASH and SRHR related health problems. They act accordingly, for example by washing hands or demanding safe deliveries attended by skilled birth attendants. Finally, our community empowerment work stimulates communities to partner with local stakeholders in demanding adequate and sustainable services in the field of WASH and SRHR.

Pillar 2: Enabling Environment

How does it work?
A supportive, enabling environment means that stakeholders, such as governments and authorities on all levels, as well as stakeholders from the private sector, are actively involved in a community’s health situation. All stakeholders work in line with their roles; they act according to laws and policies, rules and regulations, and are accountable for their responsibilities. Moreover, they work together to align their interests and efforts to improve the health of people. Simavi involves these relevant stakeholders and strengthens their capacity. The focus of our work in this area is on training governmental health and WASH providers and making them aware of national laws and regulations. Another priority is involving the private sector. An instance of this is training local craftsmen to build latrines in more sustainable ways, or supporting small-scale businesses in producing quality latrine floors that meet the demands in communities. International advocacy is a crucial factor in increasing the impact of our approach. We ensure that local evidence and information from the communities and partners we work with is heard and used by influential (inter)national stakeholders. This contributes to the development of an enabling environment with good policies in place, and sufficient budget allocation for WASH and SRHR both internationally and in the countries where we work.

Pillar 3: Utilisation of sustainable WASH & SRHR services

How does it work?
Access to qualitative and affordable WASH and SRHR services is needed in order to improve basic health. These services should meet community needs and be set up according to the five sustainability principles of FIETS: financial, institutional, environmental, technical and social sustainability. To this end, we train WASH and SRHR service providers, amongst others, in organisational and financial management. For example, we train WASH committees in simple bookkeeping, and in setting up a financially sound water and sanitation maintenance system for their communities based on actual water consumption, availability and costs. More specifically, we ensure that they attain capacity with regard to health...
FIETS sustainability

Simavi works according to the five aforementioned sustainability principles: Financial, Institutional, Environmental, Technological and Social (FIETS) sustainability. Any programme will only lead to structural improvement of basic health and to sustainable development if all five principles have been integrated.

FINANCIAL SUSTAINABILITY means establishing local payment systems, working based on business models, involving the local business community and mobilising government budget locally. This is how we prevent structural dependency on donated money.

INSTITUTIONAL SUSTAINABILITY means that systems, institutions, policies and procedures at the local and national level are functional and meet the demand of users of services. All relevant parties are aware of their own roles, tasks and responsibilities. We set up alliances with these parties and we work on capacity building, policy influencing and monitoring.

ENVIRONMENTAL SUSTAINABILITY implies placing interventions in the wider context of the natural environment. It takes into account that interventions connect to and affect the natural environment and hence impact people’s livelihood. For WASH interventions it for example includes implementing an approach of integrated and sustainable management of (waste) water flows and resources.

TECHNOLOGICAL SUSTAINABILITY means that the technologies we use in our work suit local needs and are adapted to the local situation. Quality, affordability and availability form a fundamental part of the decision-making process.

SOCIAL SUSTAINABILITY means that our work responds to local demands and needs and is accessible to the poor, to women and to vulnerable groups. We have a strong focus on equal rights, regardless of gender, social position, sexual preference, religion or culture.
Simavi formulated four strategic priorities that we will work on to realise our ambition and structurally improve the basic health of 10 million people by 2020:

1. Live our Theory of Change to realise structural improvement to the health of people
2. Diversified fundraising and innovative partnerships;
3. A strong brand and transparent communication;
4. A people oriented organisational culture nourishing entrepreneurship and innovation.

Below we define our main objectives and activities on these priorities.

### 4.1 Live our Theory of Change to realise structural improvement to the health of people

In the coming years Simavi will incorporate the Theory of Change in all programmes. This helps us to exceed our added value, make optimal use of our core competences and realise change that lasts. The Theory of Change will be used as a practical tool in the design, development and evaluation phases of our programmes management. We will focus on the following objectives:

**Objective 1: Measure our results and collect evidence of the sustainable changes we realise**

Being able to transparently report on our results is not only crucial to donors but also to be able to continuously improve our programmes and reach more people with better results. This is key in the field of gathering evidence supporting our Theory of Change. Do we achieve progress as we planned to do?

According to our Theory of Change, Simavi will work towards the following long term outcomes:

- **Empowered communities including healthy behaviour of individuals**
- **Supportive enabling environment including government, private sector and NGOs**
- **Utilisation of sustainable WASH and SRHR services**

We will define evidence-based Key Performance Indicators for the three pillars of the Theory of Change to measure our outputs, outcomes and long term outcomes. In 2015 and onwards we will implement the monitoring system in all countries and with all local partners and measure and evaluate the progress made.

**Objective 2: Improve our core competences to ensure excellent programme implementation and results**

Simavi’s added value is expressed in our core competences. Because of these core competences our Theory of Change can be implemented successfully. Our core competences show what we can add to a partnership. The coming years Simavi will focus on developing these core competences to ensure excellent programme implementation and lasting change. We defined six core competences that are explained on page 13 and 14.

**Objective 3: Excel in our expertise areas**

To further increase Simavi’s added value, we defined more specific areas of expertise within the fields of SRHR and WASH. Those are the expertise areas in which we will continuously invest in order to excel. Between 2014 and 2020 Simavi will further strengthen the following areas of expertise:

- **Safe motherhood**
  
  To combat maternal mortality and child deaths, we focus on healthy pregnancies and safe child births, by promoting healthy practices and quality services such as antenatal care, safe deliveries, choices in contraceptives and, if necessary, safe abortion.

- **Maternal mortality audits**
  
  When a mother dies during pregnancy or child birth, this tool enables a timely investigation and adequate registration of the main causes. This encourages behavior change and provides evidence to responsible authorities to improving access to essential and quality services.

- **Menstrual hygiene management**
  
  Because of a lack of knowledge, use of unhygienic materials and cultural taboos, many women across the globe suffer from infections and are excluded from public activities during their period. Our work on Menstrual Hygiene Management ensures that women know about proper menstrual hygiene, that sanitary pads or other appropriate solutions are available and that taboos leading to exclusion are discussed.

- **The FIETS approach in health**
  
  Improving health according to the five sustainability principles of FIETS: financial, institutional, environmental, technical and social sustainability. (For FIETS see page 10 and for health (SRHR) see page 13)

- **Sustainable WASH**
  
  WASH services meet community needs and are set up according to the five sustainability principles of FIETS: financial, institutional, environmental, technical and social sustainability. (For FIETS see page 10 and for WASH see page 13).

- **WASH in schools**
  
  WASH in Schools leads to better health and hygiene and as such supports pupil’s process of learning. WASH in schools includes: creating sustainable management

### Core competences

<table>
<thead>
<tr>
<th>1. Expertise on Sexual and Reproductive Health and Rights (SRHR)</th>
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<tr>
<td>We know that investing in SRHR, including access to health services, contraceptives and sexuality education, is indispensable to poverty reduction and sustainable development. Crucial elements of SRHR that Simavi focuses on are bringing planned pregnancies to a good end, decreasing maternal mortality and ensuring that children are born in safe and hygienic circumstances. We also work on family planning (including birth spacing and reduction of child marriage) and sexual transmitted diseases. Within the field of SRHR, Simavi has specific expertise on: motherhood, maternal mortality audits, menstrual hygiene management, behavioural change and the FIETS approach in health.</td>
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<tr>
<td>2. Expertise on water, sanitation and hygiene (WASH)</td>
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<tr>
<td>Good hygienic behaviour and using clean water and safe sanitation facilities are crucial to prevent diseases such as cholera, diarrhoea, typhus and hepatitis A. Simavi supports people to improve their living conditions by increasing the use of water and sanitation facilities and by promoting good hygiene in their communities. Within the field of WASH, Simavi has specific expertise on: sustainable WASH, WASH in schools, faecal sludge management and behavioural change.</td>
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<tr>
<td>3. FIETS sustainability principles</td>
</tr>
<tr>
<td>Simavi has a particular focus on sustainable operation, management and maintenance of WASH and health facilities. Making sure our work contributes to permanent development means we always work according to our five sustainability principles: Financial, Institutional, Environmental, Technological and Social (FIETS) sustainability (see chapter 3). Only if all five principles are integrated in a programme, it will lead to structural improvement of basic health and to sustainable development.</td>
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To increase the impact of the community-based approach, we ensure that local information from the communities and partners can be used to influence international and national stakeholders. Simavi’s advocacy strategy at community level therefore has a specific focus on social accountability. Social accountability is an interactive process that aims to increase citizen influence (voice) and to strengthen the response of the local WASH and SRHR providers and decision-makers. Social accountability breaks social and systemic barriers in contexts where national policies seem to be adequate, but where, in reality, these policies are insufficiently implemented and where inequality prevails. Social accountability supports the development of an enabling environment and budget allocation for WASH and SRHR - both internationally and in the nine countries in which we work (see objective 5, page 15). |

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**Objectives table**

- **Objective 1:** Measure our results and collect evidence of the sustainable changes we realise.
- **Objective 2:** Improve our core competences to ensure excellent programme implementation and results.
- **Objective 3:** Excel in our expertise areas.

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**Key competences**

- Safe motherhood
- Maternal mortality audits
- Menstrual hygiene management
- The FIETS approach in health
- Sustainable WASH
- WASH in schools
Our work starts in the local communities. Over the past years, Simavi has built up an extensive network of reliable and capable local partners in the nine countries in which we are active. Some partners are specialised in facilitating community mobilisation or establishing a supportive network of governments, private sector and the civil society. Others are partners that specifically focus on implementing WASH and SRHR services. Our decades-long experience in countries across Africa and Asia, has given us an extensive understanding of the religious, ethical and cultural sensitivities within communities. This is a crucial factor for implementing successful, context specific and culturally relevant programmes.

Simavi is able to manage complex projects and programmes that are designed to reach complete regions or districts. The past years we gained ample experience in leading and participating in large alliances and consortia that included multiple stakeholders. We are used to working with the private sector (Philips, Royal Haskoning DHV, Witteveen+Bos, Vitens Evides International, Women on Wings etc.); government agencies (Swiss Development Agency, various embassies, Dutch government), international and Dutch Foundations and many partner NGOs from the sector. We know how to identify and mitigate risks and make timely adaptations if needed to ensure that results are achieved as planned.

Secondly, our broad network of reliable local partners (see above, community based approach) is key to successful project management. We are able to address the diversity and complexity of local contexts in which our programmes are initiated. We can design and manage tailor made programmes that are always based on a broad sector and stakeholder analysis.

With an extensive local and international network within the WASH and SRHR sectors, Simavi brings organisations together into one project to realise structural change as a strategic alliance. As a linking pin between governments, NGOs, the private sector and local communities, Simavi creates synergies and promotes the exchange of experiences. A success factor of our partnership strategy is that the partners have to be complementary to each other, and bring in their own expertise and networks to create added value together. Besides, working together with companies can be a powerful lever to leverage more funding and to increase the scale of our work.

We link our local partners to a national and often international network. Organising exchange visits or working together on innovative methodologies or approaches, are key to unlocking the potential of these connections. The other way around, we know how companies can successfully work in lower income communities and what is needed to implement government policies in practice.

4. Our community-based approach

5. Programme and project management

6. Network and partnerships

Objective 5: Continue our advocacy work to ensure sustainable changes

Advocacy activities are crucial in the process of creating an enabling environment (see Theory of Change, page 8). Lasting change only happens if governments, private sector, NGOs and communities know what their roles and responsibilities are, and work together. This is also reflected by the 1 and 5 of our FIETS approach (see page 10), referring to Institutional and Social sustainability. Sustainable results can be achieved when citizen influence (voice) increases and is used to strengthen the response of the local, national and international decision-makers. Therefore our strategy is aimed at increasing social accountability from the local communities and enable them to voice their concerns on national and international fora. Only when people and organisations at all levels – community, regional, national and international – are aware of their roles and responsibilities and work together, structural improvement of basic health can be realised. Simavi will strengthen this chain by facilitating access of our local partners on all levels of policy making. At the same time, we will continue our advocacy work at international level. Simavi’s advocacy activities will focus at three topics: 1. Ensure commitments that policymakers made are realised on all levels (community, nationally and internationally); 2. Improve policies on WASH and SRHR; and 3. Maintain or increase budgets for WASH and SRHR.

4.2 Diversified fundraising and innovative partnerships

Simavi will further broaden the scope for fundraising, going from mainly Dutch private and governmental donors, to working together with companies, other business associates and (inter)national foundations and governments. Simavi will put great emphasis on working together with institutional partners and business associates. During the next years, our focus on cooperation with the private sector will be further intensified. With this revised strategy, we aim at creating a mix of financing by governments, the private sector, international foundations, private funding and other sources. The following four key activities will be done to increase innovation and entrepreneurship within our financing approach:

Objective 4: Scale up our programmes and invest in innovative solutions to solve existing problems

To realise our ambitions scaling up and innovation are indispensable. The objective to realise scale is always integrated in our programme design and management. To this end we work together with partners that have the capacity to bring together the supply and demand side of WASH and SRHR and to develop innovative financing models for WASH or SRHR services for larger groups of people. We will continue to identify new partners, who understand our approach and have the capacities and networks to help us roll out our Theory of Change in the nine countries in which we are active.

We will also further invest in innovative initiatives. Examples are our contribution to the development of the PeePoo business model in Kenya, a model for urban led total sanitation in Ghana, ecological sanitary pads in India and in Bangladesh and an integrated testing kit with mobile application for a timely detection of diseases during pregnancy together with the Dutch research institute TNO.
• Institutional fundraising: As financing by the Dutch government is under pressure, we will work on strengthening our relationships with development agencies of international governments, and international foundations. We will invest in our expertise areas in order to be able to offer high quality and innovative programmes, including measurement of results and impact.

• Public-private partnerships (PPPs): Working together in consortia with the private sector, in which each partner brings in specific expertise and network, has proven to be a success. In the next few years, we will actively look for new opportunities to develop business cases and enter into long term PPPs. This is crucial for scaling up, sustainability of results, and attracting investors (see 4.1 networks and partnerships).

• Direct fundraising: Intensifying our relations with private donors in the Netherlands, with family and corporate foundations and within the Dutch private sector, will retain them as true and loyal ambassadors of Simavi. A personal strategy is planned to remain at about the current level (between €13 and €15 million euro, excluding income for the WASH alliance). A second important strategic objective is to keep the revenues from direct fundraising and third-party campaigns at the same level as 2013 (4 million euro). So called unearmarked funds that can be spent without prerequisites are a crucial part of these revenues. 2014 and 2015 are financially stable years for Simavi. During these years we will invest in programme and organisational development. Depending on the success of developing new partnerships, Simavi future income will vary. The graphics below illustrates Simavi’s current division of income and the desired situation in 2016 to 2020.

Financial outlook 2014 - 2020

Other financial key performance indicators that Simavi will keep using for steering financial targets are:

• The percentage of the expenditure on direct fundraising as compared to the income of direct fundraising activities will remain below the norm of the Dutch Central Bureau for Fundraising (CBF): less than 25%.

• The percentage of the expenditure on Simavi’s objective as compared to the total expenditure has to be at a minimum of 85%. Good performance is above 90%.

• The percentage of costs spent on administration and management will be less than 4,8% (maximum). Below 5% is an indicator for good performance.

4.3 A strong brand and transparent communication

Simavi needs to be a strong brand to achieve our ambitious goals. Only then we will be considered and recognised as the preferred partner for integrated WASH and SRHR programmes by current and future partners. It is our objective to enter the Top 15 of Dutch charities on international cooperation according to the Beerda brand benchmark of Dutch NGOs.

To ensure clear communication to our stakeholders we will focus on the following main activities:

• Segmented communication: We will develop communication messages that meet the needs, and take into account the reality of our three stakeholder groups: corporate (institutional) stakeholders, the private sector and our marketing communication target groups within the Dutch public.

• Focused communication: To support our positioning and recognisable brand, our communication will start from our core values and focus on our integrated approach, Theory of Change and expertise.

• Evidence-based communication: In order to convince donors and partners that Simavi is the right partner to become involved with when it comes to integrated WASH and SRHR, we will show the impact of our programmes, and back this up with evidence. Communication will show how our approach creates structural improvement of basic health.

• Being a proactive sparring partner: We will share our experience with our partners and with the sector at large. We hold an open attitude towards cooperation. We will develop innovative approaches and link & learn together.

• Two-way communication: We do not simply spread a message or a story, but make sure people can engage with us.

4.4 A people oriented organisational culture nourishing entrepreneurship and innovation

In 2015 Simavi will exist 90 years. To remain effective, the ability to transform is essential for our organisation. In the past years Simavi has further developed and become an entrepreneurial and outwardly oriented organisation. This process of cultural transformation will continue in the years to come. The strategy 2014-2020 provides a clear basis and direction. Our vision, mission and core values will be central in our development. Our people are key to the success of our organisation. Simavi employees are experienced and engaged professionals, open to learn and grow, creative, and constantly working on both their personal development and that of Simavi as a whole. They are trusted to take up their roles and responsibilities and be a leader in their area of expertise. Together we build a powerful organisation that stimulates innovation and entrepreneurship. Our culture is focused at realising impact, fostering talent, rewarding achievement, and creating the preconditions for long term careers. We aim for a culture in which we not only focus on performance but also on the health and well-being of our organisation and co-workers.

Teambuilding is crucial to make sure all employees of the organisation are aligned. We train the ability to listen, to give feedback, to explore our personal values and see how they match the organisational values. Over the years to come, we will encourage our employees to give it their all every single day. To this end, every employee will receive the opportunity to participate in a personal development programme. Learning and development through training or workshops will be actively promoted in the organisation. We believe that open dialogue and constructive feedback among our employees and between employees and management is extremely valuable for the growth of our organisation. Therefore, we will stimulate this physically, in our office space, and emotionally, by empowering our people.

The coming years the cultural transition remains an important strategic priority for Simavi. A yearly satisfaction survey will reflect the progress made. If Simavi is able to change over time and to empower its employees, we will go from strength to strength and reach the ambition set out in this strategy: structural improvement of the basic health of 10 million people in marginalised communities in Africa and Asia by 2020.