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# **GENDER ASSESSMENT**

## **USAID/MALAWI**

June 2008

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# **GENDER ASSESSMENT USAID/MALAWI**

## **DISCLAIMER**

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## LIST OF ACRONYMS

ADP	Agricultural Development Program
AEI-AGSP	African Education Initiative-Ambassadors Girls Scholarship
ART	Antiretroviral Therapy
BASICS	Basic Support for Institutionalizing Child Survival
BCC	Behavior Change Communication
C-FISH	Captive Fisheries for Income and Strengthened Households
CBDA	Community Based Distribution Agent
CIW	Children in Wilderness
D&G/DG	Democracy and Governance
DAGG	Development Assistance Group on Gender
DOT	Directly Observed Therapy
EMIS	Educational Management Information System
FAWE – MA	Forum of African Women in Education – Malawi
FO	Functional Objective
FP	Family Planning
GBV	Gender-based Violence
GOM	Government of Malawi
HHCC	Household-to-Hospital Continuum of Care
HPN	Health, Population and Nutrition
HSA	Health Surveillance Assistant
I-Life	Improving Livelihoods through Increasing Food Security
IEC	Information, Education and Communication
ITN	Insecticide Treated Nets
M&E	Monitoring & Evaluation
MBG	Milk Bulking Group
MCC	Millennium Challenge Corporation
MGDS	Malawi Government Development Strategy
MIRI	Malawi Interactive Radio Instruction
MNH	Maternal and Neonatal Health
MOAFS	Ministry of Agriculture and Food Security
MOEST	Ministry of Education, Science and Technology
MOH	Ministry of Health
MoWCD	Ministry of Women and Child Development
MTTA	Malawi Teacher Training Activity
NORAD	Norwegian Agency for Development
ORS	Oral Rehydration Salts
OVC	Orphans and Vulnerable Children
PCAR	Primary Curriculum Assessment Reform
PEPFAR	The President’s Emergency Plan for AIDS Relief
PEP	Post Exposure Prophylaxis
PMP	Performance Management Plan
PMTCT	Prevention of Mother-to-Child Transmission (of HIV/AIDS)
PSSP	Primary School Support Program: School Fees Pilot
PTA	Parent-Teacher Association
RHP	Reproductive Health Policy
SEG	Sustainable Economic Growth
SMC	School Management Committee
SO	Strategic Objective

SRGBV	School-related Gender Based Violence
SSP	Safe Schools Program
STI	Sexually Transmitted Infections
SWAp	Sector-Wide Action Plan
TBCAP	Tuberculosis Control Assistance Program
UNDP	United Nations Development Program

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## **EXECUTIVE SUMMARY**

### ***Introduction***

Both the Government of Malawi (GOM) and USAID/Malawi seek to mainstream/integrate gender concerns in all of their activities. For the GOM, this means generating and implementing a Revised National Gender Policy to promote gender mainstreaming throughout the public sector; for USAID, this means the utilization of policies and approaches to programming to integrate gender equality into all activities. Policy documents and implementation practices by both institutions have sought to address gender inequalities on all levels. However, in both cases, integrating/mainstreaming gender has been problematic. While the terminology of gender mainstreaming appears in many documents, it has been difficult to implement these practices, and even more challenging to monitor them.

This Gender Assessment of the USAID/Malawi portfolio is intended to assist the mission in integrating gender into program planning, project design, procurement, implementation, reporting, and monitoring and evaluation. It discusses how the GOM is addressing gender issues through its Revised National Gender Policy (RNGP) and ways that USAID can support the GOM in achieving its goals.

The USAID portfolio includes projects under four Strategic Objectives (SOs): Democracy & Governance (DG); Education; Sustainable Economic Growth (SEG); and Health, Population & Nutrition (HPN). All projects in these sectors were analyzed in terms of gender integration. The team reviewed mission and project documents, and interviewed mission teams, program personnel and partners, and key personnel in the government ministries and the NGO community to obtain the information presented in this report.

### ***Democracy & Governance***

Many GOM branches are involved in pursuing transparency in this sector. The RNGP goal is good governance, realized human rights, and equal participation of men and women in national development. USAID/Malawi is supporting this goal through the implementation of four projects:

- Children in the Wilderness (CIW), which focuses on human rights;
- Malawi Business Action Against Corruption (MBAAC), which focuses on ways in which the private sector can reduce corruption through the development and signing of a Code of Conduct;
- The Millennium Challenge Corporation – Malawi Threshold Program, which focuses on moving Malawi to compact status;
- United Nations Development Program – Elections and Political Process, which focuses on Malawi's preparation for elections.

Recommendations for D&G are very project-specific, but, in general, state that data on all people-oriented indicators should be disaggregated by sex, and the circumstances surrounding each project should be considered for gender implications.

### ***Education***

In the education sector, the GOM seeks to make its main Strategic Priority the improvement of quality, equity, relevance, access and efficiency in Basic Education, working to meet the Millennium Development Goals. Complementing this main priority, Secondary Education will double enrolment

during the ten years, while focusing on upgrading quality, and on retention of girls.<sup>1</sup> The RNGP supports this goal and advocates for a gender-responsive curriculum, reduced dropout rates for girls and boys, and increased enrollment of girls in science and technology. USAID/Malawi is supporting these goals through the implementation of eight projects:

- Malawi Teacher Training Activity (MTTA), which focuses on student retention through the improvement of teacher professional skills;
- Primary School Support Program (PSSP): A School Fees Pilot, which seeks improved access to quality basic education;
- Education Management Information System (EMIS) Support Activity, which focuses on the collection and annual publication of statistics for all schools and decentralization of information for decision-making;
- Tikwere!/Malawi Interactive Radio Instruction (MIRI), which improves teacher effectiveness through the radio broadcasting of educational programs for Standards 1 through 3;
- African Education Initiative – Ambassador’s Girls’ Scholarship Program (AEI-AGSP), which provides scholarships (primarily to vulnerable girls) to improve gender equity in schools;
- The Safe Schools Program (SSP), which focuses on the reduction of school-related gender based violence in schools;
- Teachers for Africa (TFA) program, which places six to eight volunteers in various higher education institutions and Teacher Training Colleges to provide technical assistance; and
- Bachelor’s of Arts Program, which supports five Malawian primary school teachers to study in the U.S., with a focus on Education, placed as TTC lecturers upon their return.

While recommendations are made for specific projects, key sector recommendations include:

- Making the school environment more welcoming to girls, including the provision of desks to girls in grades five and above, identifying girls for class leadership positions, and holding club meetings at times when girls can attend;
- Assessing the extent to which curriculum is gender sensitive, including book illustrations;
- Undertaking a 360-degree assessment of the needs of girls and boys whose lives have been affected by HIV/AIDS to be able to identify community structures for support;
- Identifying the number of female and male teachers at different types of schools teaching different grades and working with MOEST to recruit male/female teachers in order to address gender imbalances in teaching based on these findings;
- Supporting a diagnostic of women in the Education workforce to identify issues, gaps and opportunities;
- Supporting MOEST in its recruitment of female teachers, particularly in rural areas; and,
- Mobilizing the community to address the causes of drop out.

### ***Sustainable Economic Growth***

The top priority of the GOM is achieving food self-sufficiency. Women constitute the vast majority of participants in food production, distribution, and preparation. The RNGP supports this priority and seeks to “increase women’s and other vulnerable groups’ access to and control over agricultural productive resources and technologies for food and nutrition security,” among other objectives. USAID/Malawi supports this GOM goal through four major projects:

- I-Life Development Assistance Program, focused on increased rural food security;

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<sup>1</sup> Government of Malawi, Ministry of Education, Science and Technology, National Education Sector Plan 2008-2017, February, 2008, p. 1.

- Malawi Dairy Development Alliances, designed to increase rural dairy farmer income through increased milk production;
- C-FISH: Captive Fisheries for Income and Strengthened Households, which will establish for-profit businesses to link smallholder fish producers with new and existing micro-, small and medium enterprises in the sector; and,
- Chia Lagoon Watershed Project, a project to promote the sustainable use of resources in the Chia Lagoon Watershed, for increased food security and incomes.

Key recommendations for this sector include:

- Conducting a gender analysis to determine how men and women are differentially affected in each area of project operations;
- Identifying different ways in which income is utilized by men and women in the family (rather than just assuming it is pooled);
- Seeking ways to increase women's capacity to exercise greater control of resources; and
- Addressing situations in which sex is utilized to augment financial transactions.

### ***Health, Population and Nutrition***

The GOM priority is to raise the health status of all Malawians through the development of a health delivery system capable of promoting health, preventing, reducing and curing disease, protecting life and fostering the general well being and increased productivity, and reducing the occurrence of premature death. Particular concerns include reproductive health, maternal and child health, HIV/AIDS, Tuberculosis, and Malaria. The RNGP supports these goals by specifically addressing reproductive health – increased access to health services and reduced maternal and neonatal mortality rates; and HIV/AIDS, by mainstreaming gender in all HIV/AIDS strategies. USAID/Malawi is supporting GOM goals in the implementation of eight projects:

- ACCESS, focused on improving the availability and access to quality, sustainable facilities and community maternal and newborn health services;
- Community-based Family Planning and HIV/AIDS Services, which addresses the use of integrated, high-quality, accessible Family Planning and Reproductive health services;
- Basic Support for Institutionalizing Child Survival (BASICS), which focuses on the delivery and coverage of essential child health and nutrition interventions, and includes a small grants program to improve malaria prevention and treatment;
- Enhanced HIV/AIDS Prevention and Improved Family Health Program, involved with HIV/AIDS prevention, malaria prevention, and child survival;
- BRIDGE, an HIV/AIDS prevention program;
- PEPFAR Gender Initiative on Girls' Vulnerability to HIV, which seeks to alleviate the contextual factors that render girls vulnerable to HIV;
- PACT Malawi: HIV Prevention, Care and Support Grants, which focuses on HIV/AIDS prevention, testing, and provision of quality care through the administration of a small grants program; and
- Tuberculosis Control Assistance Program, in support of the GOM National TB Program.

Sector recommendations include:

- To train all health care workers and project participants on gender issues to ensure appropriate project outreach;
- To ensure that girl children are receiving the same level of care as boy children;
- To share lessons learned and cultural knowledge among all service providers;
- To spot check households to ensure that ITNs are being used for the purpose intended;

- To mobilize the community to identify solutions to the problems of early onset sexual relations.

### **Recommendations towards a Gender Plan of Action**

Two specific recommendations are made to USAID/Malawi to improve its ability to address gender equality and to assume a leadership role in assisting the GOM in achieving its gender-related goals:

#### **Strengthen the Management Structure for Implementing the Gender Plan of Action.**

- Hire a senior level gender specialist to assist the mission in all of its procurements, and monitoring and evaluation **or** identify a senior individual on the country team to act as the gender focal point to do the same type of work.
- Identify a gender focal point on each programmatic team. These individuals can form a small working/consultative group to tackle or discuss gender-related issues as they arise in the mission or on a regularly set schedule (for instance, in preparation for or as follow-up to SOPIRs and other such reviews), as well as assist the senior level gender specialist or senior level individual by providing team-level input, advice and guidance. They can also be the point person to help disseminate key messages or decisions coming out of the ongoing work being done or guidance being developed in the area of gender for the mission to each of the teams.
- Provide intensive gender training to all teams so that each team has the capacity to integrate gender in each of its objectives.

#### **Improve Donor Coordination and Overall Support to GoM Gender Initiatives by:**

- Joining the Development Assistance Group on Gender to actively participate in a donor/GOM joint dialogue on how to meet gender goals in the programs of each ministry.
- Working directly with line ministries and the Ministry of Women and Child Development to prioritize the GOM and USAID/Malawi mainstreaming of gender in all program activities, thus setting an example of donor collaboration with the line ministries for gender integration. The report concludes with recommendations for consideration of gender at each stage of the project cycle including: Strategy and Project Design; Procurement; Implementation; and Monitoring and Evaluation.

## I. INTRODUCTION

The Government of Malawi (GOM) cites gender issues as an integral part of its national strategy for growth and development. Consequently, it is preparing a Revised Gender Policy to promote gender mainstreaming throughout the public sector. USAID policies and approaches to programming promote gender equality through the integration of gender considerations into all activities. Policy documents and implementation practices by both institutions have sought to address gender inequalities on all levels. However, in both cases, integrating and/or mainstreaming<sup>2</sup> gender has been problematic. While the terminology of gender mainstreaming appears in many documents, it has been difficult to implement these practices, and even more difficult to monitor them.

This Gender Assessment of the USAID/Malawi portfolio is intended to assist the mission in integrating gender into program planning, project design, procurement, implementation, reporting, and monitoring and evaluation.

The Mission currently works in the following sectors:

- Health, Population and Nutrition (HPN)
- Education
- Democracy & Governance (DG)
- Sustainable Economic Growth (SEG)

The Gender Assessment team was asked to review each of the projects in the mission portfolio to 1) determine project success in addressing gender concerns, 2) identify areas of good practice, 3) consider any “missed opportunities” to address gender concerns more strategically, and 4) offer guidance for taking gender issues into account for future activities in strategic or functional objectives (SO/FO).

The report begins with a brief introduction to gender terminology and the USAID approach to gender integration in its policies and programs. It then outlines the USAID/Malawi and GOM priorities concerning gender policies and implementation practices, and briefly discusses the methodology used by the team.

In the subsequent sections of the report, the findings, lessons learned, best practices, and recommendations are organized according to SO/FO in the following order: DG, Education, SEG and HPN. Each SO/FO section begins with a brief statement of the GOM’s priorities and the ways in which these priorities are to be gender mainstreamed in accordance with the Draft Revised Gender Policy. The findings on different projects reviewed are then discussed, including comments on the indicators in the project Performance Management Plan (PMP) as well as the overall PMP for each sector. The report concludes with recommendations regarding the development of a Mission-wide Gender Action Plan.

Several of the appendices have been written as stand-alone documents for each SO/FO team to use as the basis for conceptualizing, designing, implementing and monitoring future gender-responsive projects. These “checklists” and “questions to consider” will assist the mission and its partners in integrating gender throughout their programs and projects.

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<sup>2</sup> See discussion of Gender Mainstreaming and Gender integration in the Background section. The GOM is concerned with mainstreaming gender in all its activities (as a result of signing international accords), while USAID/Malawi is concerned with integrating gender in its projects and programs.

## II. BACKGROUND

### ***Incorporating Gender into USAID Programs***

The integration of gender considerations in development requires an understanding of the relationship between men and women in society in terms of the roles they play, which are different and interdependent. An understanding of the power dynamic between men and women is crucial, as is consideration of the discrepancies in their access to resources. Both aspects of this relationship are important in applying gender analysis to development: different but interdependent roles; and, differences in power and access to resources between men and women.

**Gender** refers to “the economic, social, political and cultural attributes and opportunities associated with being male and female.”<sup>3</sup>

From the point of view of development programming, gender integration is concerned with **the impact of these relationships on program results**, and on **the impact of the program on the relative status of men and women**. The purpose is to analyze the implications of each program or policy for men and women and to incorporate the needs and experiences of women and men as an integral part of the program design, implementation and monitoring.

Gender integration usually – but not always – involves a focus on women, because women almost always occupy a subordinate position in society. USAID focuses on gender not only because gender affects program results, but also to promote gender equality and empowerment of women.

**Gender integration** is taking account of both the differences and the inequalities between men and women in program planning, implementation, and assessment. Experience has shown that sustainable changes are not realized through activities focused on women alone.

**Gender mainstreaming** is the term used in the Platform for Action adopted by the 1995 Fourth World Conference on Women in Beijing to designate the methods and institutional arrangements for achieving gender equality. Gender mainstreaming goes beyond accounting for gender considerations in programs; it treats gender as a critical consideration in policy formulation, planning, evaluation, and decision-making procedures. In addition to gender integration, it confronts the institutional structures that constrain and affect gender mainstreaming at all levels and incorporates this information into policy-making, decision-making, budgeting, and program design and implementation.

**Gender analysis** refers to the socio-economic methodologies that identify and interpret the consequences of gender differences and relations on the achievement of development objectives. [An examination of gender differences and relations cannot be isolated from the broader social context.] Differential access to and control over resources (land, labor, capital, information, knowledge, institutions, and social networks) is an essential issue to consider in the analysis, as is the comparative participation of men and women in the exercise of power and decision-making. Collection of sex-disaggregated quantitative and qualitative data provides the empirical foundation for assessing the potential impact of gender relations on the program, and the relative benefits to men and women.<sup>4</sup>

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<sup>3</sup> Development Assistance Committee, Guidelines for Gender Equality and Women’s Empowerment in Development Cooperation. OECD: Paris (1998).

<sup>4</sup> ADS Guide to Gender Integration and Analysis

USAID focuses on gender considerations throughout the programming process and specifically with respect to the following steps:

- Strategic and Operational Planning
- Performance Monitoring Systems
- Activity Design and Activity Approval Documents
- Issuance of Requests for Proposals and Requests for Applications

This report is a program-wide assessment intended as a basis for identifying the dimensions and indicators of gender relations in each program area. It is not a stand-alone document. Gender integration requires gender analysis as a part of each sectoral assessment. This report constitutes only a baseline reference document highlighting major issues and considerations. The analysis and recommendations can serve as an initial guide for the mission to meet activity-level gender requirements, define indicators, and prepare a Gender Action Plan (see *Appendix A – Scope of Work* for the specific guidance provided in conducting this assessment in Malawi).

### ***The GOM Role in Gender Mainstreaming***

The GOM is developing a Revised Gender Policy.<sup>5</sup> It is anticipated that the Revised Policy will be submitted to the Cabinet and approved before the end of 2008. Concurrently, a government-wide decentralization process that is presently underway has created some confusion as to responsibilities. Local government is to be held responsible for the implementation of the Gender Program developed by the Ministry of Women and Child Development (MoWCD), with the central ministry providing technical support for all activities. In the past, a system of Gender Focal Points was established in each ministry to design and implement such programs, but this effort has met with only mixed success. Some ministries, such as Education and Agriculture, have a relatively strong and developed focus for mainstreaming gender in their programs, while others are lacking in this area.

Gender is directly addressed in the Malawi Government Development Strategy (MGDS) 2006-2011 (pp. 50-52) in the following statement:

Gender issues are an integral part of the overall national development agenda. Gender inequalities in accessing productive resources, development opportunities and decision making affect economic growth and development. The Gender Development Index for Malawi of 0.374 indicates that large disparities between men and women exist. Women who constitute about 51 percent of the population are marginalized in social and economic spheres such that they are unable to effectively contribute to social, economic and political development of Malawi.

The long-term goal of the GOM is [. . . to mainstream gender in the national development process to enhance equal participation of both sexes for sustainable development.]

The medium-term expected outcome is [. . . reduced gender inequality.]

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<sup>5</sup> The MoWCD has just received feedback from other ministries on its Revised National Gender Policy. The first policy was operational from 2000 to 2005. Toward the end of that period, the MoWCD developed the National Gender Program, a plan of implementation to support the policy. Since several items were added to the Program that were not originally in the Policy, MoWCD developed a revised Policy to include the items that had been left out.

The key strategies used by the GOM to achieve this goal are:

- Strengthening the institutional capacity for effective coordination of gender policy implementation;
- Taking affirmative action to increase the numbers of women decision makers in high levels of the public and private sectors;
- Promoting gender equality through advocacy;
- Changing the cultural/traditional factors that create and perpetuate gender inequalities.

Gender mainstreaming can be found in several of the GOM output indicators and key actions:

- **1.5 Sub-Theme 5: Economic Empowerment** (p. 91) – 3. Women, youth and the disabled fully participate in the productive economy: increased number of women in private and public sector organizations; and increased number of youth employed. The output includes programs for building women’s entrepreneurial skills and opportunities to participate in the economy developed, as measured by number of women-owned businesses. The gender-focused strategies include: enhance institutional framework supporting the development of women entrepreneurs; train women in entrepreneurial skills and ability to manage business; institutional framework and legislation is supportive of women’s integration to economy; enforce empowerment act.
- **2.1 Sub-Theme 1: Protecting the Vulnerable** (p.93) – Outcome: The most vulnerable, with limited factors of production, are sufficiently cared for as are the vulnerable who can be natively impacted by economic shocks: improved health and nutritional status of under five children, school age children, orphans, pregnant and lactating mothers, destitute families; the poor who are provided opportunities, graduate from programs. Key Actions: provide supplementary feeding to malnourished pregnant, lactating mothers, and under five children.
- **3.2 sub-Theme 2: A. Education – Primary** (p. 95) – Outcome: reduce absenteeism to 5% by 2012 and reduce dropout by 50% at primary (primary school completion rates for girls, 41% in 2004), repetition rate for girls, 18.8% in 2004); reduce girls absenteeism, repetition and drop out rates in order to improve girls learning outcomes. Output: primary education equitable to girls – proportion of girls in school (50% in 2005). Key Actions: Review policies related to girls and special needs; provide block grants to schools to address equity issues. (Similar goals have been set for secondary and tertiary levels of education.)

Key indicators to be used by GOM to track progress on gender include:

- **Health** – Maternal mortality ratio; percentage of pregnant women who slept under insect-treated nets the previous night; total fertility rate; proportion of births attended by skilled personnel.
- **Gender** – Women in decision making positions; gender development index.
- **Education** – Female literacy rate; completion rates in primary school; primary school net enrolment rates (by gender); primary school gross enrolment rate (by gender); primary school dropout rate (by gender); primary school repetition rates (similar indicators for secondary school).
- **HIV & AIDS** – HIV prevalence among pregnant women aged 15-24 years; % of sexually active persons who have voluntarily tested for HIV (disaggregated by sex); % of HIV+ pregnant women receiving a complete course of antiretroviral prophylaxis to reduce the risk of Mother-to-Child Transmission.

There is a distinct overlap between the GOM and USAID/Malawi efforts to mainstream/integrate gender in all projects and programs. For each, implementation presents challenges. These

challenges, however, also offer opportunities for increased joint activities, such as an ongoing dialogue among USAID/Malawi's SO/FO teams, the relevant ministries and, if present, with the Gender Focal Persons, and the MoWCD on how to address gender imbalances in each of their respective program areas. Special joint initiatives might be launched, especially in agriculture and education, to serve as models for other ministries on how to mainstream gender, and how to work with donors to mainstream gender while achieving all ministry objectives.

An additional opportunity exists for USAID/Malawi to take the lead with other donors and implementing partners in integrating gender across all donor-guided activities in support of ministry objectives. The fragmented nature of bilateral and multilateral assistance regarding gender can be overcome through greater coordination and sharing of lessons learned and best practices. The most appropriate forum for this is the Development Assistance Group on Gender (DAGG), which meets monthly. Further direction could be provided to this organization in setting common agendas among donors, many of which have conducted their own independent gender studies. Coordination of donor efforts could reduce the challenges facing the GOM by working with various ministries from a common agenda.

### **III. METHODOLOGY**

The Gender Assessment is based on three main sources of information: a review of mission and project documents; interviews with mission SO/FO teams, program personnel, and partners; and interviews with key personnel in the government ministries and NGO community. Visits to project sites were limited to those in Lilongwe. The team worked in Malawi for approximately three weeks in March 2008.

Members of the team covered the following SOs/FOs or portions thereof:

- Seodi White – DG, MCC, and in HPN - HIV/AIDS and Tuberculosis
- Adarck Chidumu – HPN - Reproductive Health, Maternal and Child Health, Malaria
- Nancy Horn (team leader) – Education and SEG

All team members participated in briefing meetings with SO/FO team leaders, and then divided the work in terms of meetings with ministries and projects, conducting background reading, and writing portions of this report. The list of ministries and projects visited appears in *Appendix B - Meetings Held*.

In addition, the team held a gender sensitization workshop for stakeholders (24 attended) on March 17 and an internal USAID workshop on March 18, which was attended by 21 staff members.

## **IV. GENDER CONSIDERATIONS AND RECOMMENDATIONS IN USAID/MALAWI PROGRAMS**

### **A. Democracy and Governance**

#### **GOM Priorities**

##### ***Ministry Involvement***

In Malawi, democracy and governance policies are coordinated by a number of ministries and government agencies as follows:

- Ministry of Justice - advises government on the law and legal reform
- Anti-Corruption Bureau - the Government watchdog in the fight against corruption

- Ministry of Economic Planning and Development - formulates the GOM agenda on national development
- Parliament - the law-making body and a watchdog on the separation of powers
- Judiciary - interprets the law
- Constitution - the overarching document from which all government departments derive their authority

GOM priorities in the area of improved governance include several sub-themes: macroeconomic growth, public policy formulation, fiscal management, corruption, public sector management, decentralization, justice and rule of law, security, corporate governance, and human rights. There is no specific mention of gender in the explanation of these themes. USAID/Malawi activities have largely targeted good governance, and in the future, the mission will work with the National Electoral Commission to prepare for the next election.

### ***Draft Revised National Gender Policy***

The Draft Revised National Gender Policy is scheduled to be submitted to the Cabinet and approved by the end of 2008. Its Policy Theme Goal in Governance and Human Rights is:

*Attained good governance, realized human rights and equal participation of women, men, girls and boys in national development.*

Four objectives are being pursued:

- To promote full and equal participation of women, men, girls and boys in decision-making at all levels;
- To effect all International Conventions, Declarations and other legal instruments on Human Rights to which Malawi is a signatory;
- To create a conducive policy and legal environment for women and men of Malawi to enjoy their human rights;
- To build capacity of civil society, private sector and government institutions on gender and human rights.

USAID/Malawi, in future procurements, could assist the GOM in creating more equitable laws to guarantee human rights to all. As mentioned previously, USAID/Malawi could take the lead in working with MoWCD, line ministries and government agencies, as noted above, to provide advice on how to integrate gender into the policies and legal framework of the GOM and to advance the cause of human rights.

### ***USAID/Malawi Projects Supporting Government Priorities***

Each DG project has been reviewed for its focus on gender. The findings of this review, as well as each project's M&E Plan and PMP indicators, are presented below:

#### ***CHILDREN IN THE WILDERNESS (CIW) (HUMAN RIGHTS)***

CIW is an outgrowth of an American NGO, The Hole in the Wall Camps, and is implemented by Wilderness Safaris. CIW specifically targets rural orphans and vulnerable children (OVCs) for participation in summer camps. In follow-up activities that take place throughout the year, children learn skills that are the fundamental building blocks of healthy citizenship, including mutual respect, teamwork, self-esteem, ability to advocate, leadership skills, and practical skills related to education, access to justice, human rights, and health. CIW builds democracy skills and networks through its work with community leaders, including educators, traditional leaders, and orphan sponsors to integrate, encourage, and provide community structure to the support of OVCs. The three-year project is scheduled to end November 30, 2008. Two camps per year are offered to 50 pupils, of

whom half are girls. These camps are run in two game parks: Mvuu Camp in Liwonde, and Chintheche in Nkhatabay.

CIW ensures gender equality in camp attendance so that both boys and girls can benefit. The empowerment approach, in which life skills are being developed among children in rural communities, is particularly commendable because it targets the excluded, potentially marginalized individuals and groups.

Indicators used to monitor progress include:

- Percentage of participants who demonstrate increased knowledge in program areas from before entering program to directly after camp program;
- Percentage of participants who demonstrate increased knowledge in program areas from directly after camp program to one year after camp program;
- Percentage of children attending community functions;
- Number of children attending follow-up activities;
- Number of children displaying improved behavior and attitude since start of program.

### **Recommendations**

#### **Rationale:**

The indicators are crafted in such a way that they have the ability to show outcomes.

**CIW Recommendation 1:** Since each indicator refers to the children, data presented should be disaggregated by sex to determine if there is any difference in either the outputs or the outcomes so the project can be adjusted accordingly.

**Rationale:** When teaching young people about environmental protection, care should be taken to ensure that women – who collect firewood from forests – are not portrayed as people breaking the law, but as people who are trying to care for their families. Where women are prevented from doing the work they need to do, illicit activities can emerge, including “sex for firewood” exchanges with forest guards or game rangers.

**CIW Recommendation 2:** In protected areas, CIW should include, as part of its curriculum, the development of a problem-solving strategy that will address the need for fuelwood while at the same time addressing conservation.

### **MALAWI BUSINESS ACTION AGAINST CORRUPTION (MBAAC)**

The premise of this project is that corruption in Malawi could be reduced significantly if the business community would make strides in the area of corporate corruption. As a result of the Malawi Leaders Forum on Building Alliances to Eliminate Corruption, a conference held in June 2005, a taskforce called the Malawi Business Action against Corruption was established. The aim of the taskforce is to actively support and mobilize private sector commitment to combat corruption and find practical ways of creating effective and sustainable partnerships between business and government in tackling corruption. Its work has culminated in a Code of Conduct to Combat Corruption. To date, over 200 businesses have signed the code.

Questions the project uses to track progress are:

- Have incidences of corruption involving the business as well as other sectors decreased or are they being more actively addressed as a result of MBAAC activities?
- Have companies with CEOs who originally signed, progressed to more comprehensive implementation of all the required steps needed to fully adhere to the Code of Conduct?

## **Recommendations**

**Rationale:** Although this taskforce is led by a female, the reviewed document does not address the gender composition of the taskforce. Corruption may very well affect men and women differently, and to have the voice of women represented would ensure that these effects are taken into account.

**MBAAC Recommendation 1:** In their already approved PMP, the MBAAC should include information on the two questions they are tracking, and address the issue of how corruption in business affects men and women differently. This should reveal not only whether corruption has increased/decreased as a result of MBAAC activities, but also whether it has anything to do with gender.

**Rationale:** Related to the discussion of MCC below, it is important to understand how civil society and private sector-based organizations can make government accountable for and contribute to the reduction of corruption.

**MBAAC Recommendation 2:** MBAAC should be encouraged to identify how it can contribute to MCC efforts to continuously monitor corruption, as it relates to the signed Code of Conduct, and how corruption might create differential consequences for men and women operating private sector businesses. MBAAC might also develop a report, perhaps with other civil society organizations, to demonstrate how their actions have helped to reduce corruption and analyze how that has freed male- and female-operated businesses from threatening practices.

## **MILLENNIUM CHALLENGE CORPORATION (MCC) - MALAWI THRESHOLD PROGRAM**

On December 12, 2007, MCC chose Malawi as the only compact-eligible country worldwide. The four Threshold Country Plan implementing partners installed equipment for the Integrated Financial Management Information System Disaster Recovery Site, the Financial Intelligence Unit began processing several corruption cases, and National Assembly staff continued their efforts to disseminate the NA Strategic Plan for 2006-2009, ensuring that Members of Parliament are fully apprised of the tasks that lie ahead.

This program is coming to a close as Malawi has qualified for compact eligibility. GOM will work with MCC to develop a proposal that will be subject to review over the next three years.

Although MCC has a gender policy, it was not mentioned in review documents. Aside from the recommendation made for MBAAC above, a further recommendation would be to encourage the MCC to incorporate the provisions of this policy in both planning and implementation.

## **UNITED NATIONS DEVELOPMENT PROGRAM (UNDP) (ELECTIONS AND POLITICAL PROCESS)**

In this project, USAID/Malawi will support Malawi's preparations for elections and related political processes. Support will include training election officials and conducting voter education outreach.

As this project will be implemented by UNDP prior to the next election, no M&E Plan/PMP was available. However, two indicators were reported:

- Number of elections officials trained with USG Assistance;
- Number of people reached by USG-assisted voter education.

## **Recommendations**

**Rationale:** As an implementing agency, UNDP may not be fully cognizant of USAID gender requirements. It is also unclear how UNDP and other agencies will identify both male and female election officials.

**UNDP Recommendation 1:** The manner in which UNDP will identify both male and female election officials must be articulated. Once the training has been conducted, the indicators must be disaggregated by sex, i.e., both male and female election officials must have equal access to training, and the number of people reached should be counted by sex.

**Rationale:** Voter education can occur in places that may be hazardous to women. In a former USAID-funded voter education project, funding was channeled through churches that called for members from special groups (women's and men's) to become voter educators. Because of the deep rural outreach of the church, men and women were able to hold voter education classes in the vicinity of the church, which was considered a "safe place" for women. As a result of this outreach more women (having participated in voter education) than men voted in the election. The "lesson learned" is that balanced numbers of men and women should be trained to be voter educators, that women's community-based groups should be targeted as participants, and that meetings should be held in "safe" places.

**UNDP Recommendation 2:** UNDP should adopt the USAID voter education project procedure and identify appropriate voter educators to address both women and men.

### **USAID/Malawi DG Performance Monitoring Plan**

The performance indicators listed in the PMP for DG fall into three categories:

- Rule of Law and Human Rights
- Good Governance – Anti Corruption Reforms
- Political Competition and Consensus Building – Election and Political Process

Because the indicators are all project-specific and recommendations have been provided for each project, no further comments are directed to the PMP.

For future DG procurements, however, we incorporate the guidance provided by several organizations as to how to integrate gender in DG activities. We also direct the DG team to *Appendix C – Gender Policy on Governance and Human Rights* developed by the MoWCD to identify relevant project cycle indicators that are in accordance with GOM priorities.

## **B. Education**

### **GOM Priorities**

#### **Ministry of Education, Science and Technology (MOEST)**

Education is the only Sub-theme under Social Development in the MGDS that has a specific reference to equity and increasing the number of girls attending and being retained in school. The plan seeks to address "backward cultural attitudes of education for girls, ..." (GOM, 2006:50) and to provide "a conducive environment for girls..." (ibid., p. 51).

The MOEST has taken these priorities and developed specific areas in which action is being taken:

**Priority 1 – Quality and Relevance:** improve teaching inputs; reduce class size; enhance the relevance of the primary curriculum for Standards 1 and 2; and introduce appropriate incentives to teachers and supervise their performance.

**Priority 2 – Access and Equity:** increase net enrollment and completion rates; improve enrollment, particularly female enrolment, in Standards 5 to 8; improve, expand and

maximize use of educational infrastructure; optimize private sector participation; and strengthen complementary basic educational modalities for learners including Interactive Radio Instruction, Complementary Basic Education and Open and Distance Learning.

**Priority 3 – Governance and Management:** mobilize communities to participate in whole school development and management; ensure appropriate decentralization of delivery of education services; introduce policy measures to reduce the size of classes in Standards 1 and 2, to reduce repetition, drop-out and enrollment of over- and under-age children, and to encourage promotion between standards; and monitor performance and strengthen internal efficiency of the sub-sector.

### ***Draft Revised National Gender Policy***

Policy Theme 2 of the draft policy is: Gender, Literacy, Education and Training. The Policy Theme Goal is: High quality, equitable education and training. It has five key objectives (pp. 11-14):

- To increase access to quality education to all school age children at (early childhood) primary, secondary and tertiary levels;
- To promote the development and use of gender responsive curriculum, educational materials and equipment at all levels;
- To reduce dropout rates of girls and boys at all levels of education;
- To increase enrollment of girls in sciences and technology;
- To empower women and men through equitable access to adult basic education.

Each of these objectives has a number of strategies, listed in *Appendix D – Gender Policy: Gender, Literacy, Education and Training*. It is the responsibility of the MOEST to translate these strategies into action plans that can be achieved within the confines of human resource and budgetary constraints. To address the budgetary challenge, MOEST has partnered with a number of donor organizations to implement programs.

There is a decided emphasis on gender in the Planning Department of MOEST. The Department's concerns with the girl child are much more purposeful this year and seek to address, holistically, the many facets of education that prevent girls from being successful in school. While enrollment in lower primary (Standards 1-4) is almost at par, a severe dip in girls' enrollment is apparent in Standard 5 (see *Appendix E – Cultural Factors in Education* - for possible explanations). Various approaches have been taken to reduce the challenges girls face, especially mobilizing the School Management Committees (SMCs) and Parent-Teacher Associations (PTAs) to take a direct interest in tending to the needs of girls. However, these bodies do not necessarily prioritize gender concerns, as their activities are generally targeted at solving basic facilities, books, latrines, and water problems.

The focus on retention of the girl child in primary school is not matched with the targeted recruitment of female teachers<sup>6</sup>. Research has shown that when girls have a female teacher as a role model, enrollment is maintained. Also, maturing girls are more comfortable interacting with female teachers on a number of personal topics. When a female teacher is not available, the girl may opt to be absent. This is especially an issue in rural areas, where low representation of female teachers may result in part from general practice where women follow their husbands who are employed as civil servants to the urban areas. This decreases potential for girls to see female role

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<sup>6</sup> In 2003, just over one-third of qualified primary school teachers in Malawi were women: Banda, 2003: "Gender Sensitive Educational Policy and Practice: The Case of Malawi"

models in education in rural areas. The MOEST Plan, unfortunately, does not target the recruitment of female teachers.

### **USAID/Malawi Projects Supporting Government Priorities**

In support of the MOEST, USAID's Education program seeks to address:

- The shortage of qualified primary school teachers;
- The poor management of teachers;
- Inadequate teaching and learning materials;
- Poor monitoring and supervisory systems;
- Poor participation of school committees and their communities in school management.

The USAID/Malawi education portfolio focuses on:

- improving the quality of primary education through teacher training and teacher management, the promotion of greater parent and community involvement, and the introduction and implementation of interactive radio instruction,
- making education more accessible to children, particularly girls, HIV/AIDS orphans and other vulnerable children,
- improving decentralization for education, including use of data available for policy and local decision-making, and
- reinforcing HIV/AIDS prevention and mitigation through the curriculum and school system.

While it is not yet a stated priority in a specific USAID/Malawi project, in future procurements USAID/Malawi could build upon global experience to focus on helping the MOEST devise a strategy to recruit more female teachers. The EMIS project (discussed below) has identified the number of teachers in the system, but must disaggregate this number by sex. Once this information is known and linked to the inventory of female teachers in different schools, efforts could be made to recruit more female teachers for schools that lack them.

**Malawi Teacher Training Activity (MTTA)** is improving teacher professional skills and increasing school effectiveness through pre-service teacher training in Life Skills at all Teacher Training Colleges and in-service training in math, science, and English in four districts (Phalombe, Machinga, Kasungu, and Mzimba North) to support new Primary Curriculum Assessment Reform (PCAR) roll-out. The project includes complementary school environment activities and School Based Anti-AIDS clubs. All of the training that MTTA provides is documented with sex-disaggregated statistics. The project was launched in 2004 and will end later this year.

### **The MTTA PMP**

Some of the indicators used to track MTTA progress include:

- Number of teachers trained in math, science and English (in target districts);
- Percentage of teachers using participatory teaching methods during instruction in math, science or English (in target districts);
- Number of pre-service teachers trained in Life Skills for HIV/AIDS curriculum (in target schools);
- Number of school-based pilot clubs created (in target schools);
- Number of primary school head teachers selected and trained in club leadership skills (in target schools);
- Number of youth mentors selected and trained to assist club leaders (in target schools);

- Number of Chichewa versions of the Sara Comic Book Series disseminated to the school-based pilot clubs (in target schools);
- Percentage of school-based pilot clubs supervised and/or supported in a month (in target schools).

### **Recommendations**

**Rationale:** In her qualitative study of five MTTA schools, Kendall (2008:92-3) found that:

*For the most part, the classrooms displayed a high level of gender-equality in terms of how often teachers called on boys and girls, how teachers responded to correct and incorrect responses given by boys and girls, and the curriculum itself. . . . Biases in favor of male pupils were most evident in classrooms where the teacher did not appear to be attending to whom they called on, or primarily called on pupils who raised their hands (who were predominantly male).*

**MTTA Recommendation 1:** Because Malawian culture accepts the notion that girls are not as “clever” as boys, the “default” pattern of calling on pupils in class is to call upon boys. Hence the project should emphasize further that teachers must be mindful or “attend” to their patterns of calling on pupils.

**Rationale:** Kendall reports on the gender-based opportunity cost of labor when girls must miss school to take care of household responsibilities and when boys must miss school to take care of cattle (Kendall 2008:93).

**MTTA Recommendation 2:** When data is disaggregated by sex, explanations should be given as to why, in a particular location, school attendance may be erratic for either girls or boys. This information should be presented to SMCs and PTAs so they can generate and implement solutions to the issue.

**Rationale:** In the student-centered learning processes taught in MTTA, a teacher normally identifies student leaders to help conduct small group work. Kendall’s study found that these leaders are most often males (Kendall 2008:94).

**MTTA Recommendation 3:** Teachers should be directed to create a gender balance in classroom leadership.

**Rationale:** While, after training, female teachers indicated they felt more confident to teach upper primary grades, as a matter of school culture and acceptable practice, most women teach only the lower grades.

**MTTA Recommendation 4:** MTTA should inquire into this practice and work with the MOEST as well as the local school to change any perceptions about females teaching higher grades and males teaching lower grades. While this practice may be advantageous to teachers who are breastfeeding, once their children are less dependent, female teachers may want to teach other grades where they can serve as role models to older girls.

### **Best Practice**

In developing the PMP, the implementing partner has done an excellent job in identifying indicators that 1) identify inputs and outputs to/of teacher training, and extending these outputs into output/outcome indicators by 2) measuring student progress as a result of the increased inputs provided by teachers. This is an excellent way of overcoming the lack of outcome indicators in USAID Operational Plan guidelines.

### **PRIMARY SCHOOL SUPPORT PROGRAM (PSSP): A SCHOOL FEES PILOT**

The core goal of the PSSP is to achieve equitable access to quality basic education under a US Congressional mandate to develop strategies to reduce the cost of schooling that still hinders

access, especially for the most vulnerable children. This holistic project is being piloted in all Dowa District schools. The project was launched in 2006 and will end in 2008.

The following three objectives serve as the project's parameters:

- To increase access to basic education and improve learning with a special focus on orphans, vulnerable children, girls and children with special needs;
- To increase resources at the school level;
- To improve teaching and learning outcomes in schools in Dowa.

Some of the indicators used to track performance include:

- Increased percentage of pupils achieving in English reading at Standard six;
- Increased percentage of pupils achieving in mathematics at Standard six;
- Decreased pupil dropout;
- Decreased pupil repetition;
- Increased pupil completion rates;
- Increased percentage of girls and OVCs enrolled in primary school;
- Increased percentage of teachers using participatory teaching methods during classroom instruction;
- Increased percentage of primary teachers trained in and applying early literacy teaching techniques in the classroom;
- Change in the percentage of pupil absenteeism.

In reports, indicators, where appropriate, are all disaggregated by sex. However, the indicators do not directly comment on the core problem the project seeks to alleviate: the hidden costs of schooling. The project does extremely well in addressing the three objectives, but there is no indicator spelling out how the hidden costs are being reduced. The set two indicators focus on the capacity building of the SMCs in how to increase and manage school funding, but these output indicators do not include how the SMC is lowering costs incurred by students and their families. Additionally, the project seeks to improve teaching and learning (set three indicators), but there is no indicator of how increasing the number of female teachers is being addressed (a key variable in maintaining girls' enrollment).

### **Recommendations**

**Rationale:** The implementing partners have done a commendable job in reporting sex-disaggregated data. In the future, a gender focus should guide the collection of numerical data as well in reporting the narrative that refers to "teachers" or "learners."

**PSSP Recommendation 1:** Studies, such as the literacy needs assessment, should present sex-disaggregated data. Validation meetings, reading and debate clubs, and other support meetings should report attendees by sex, and the partner should monitor this information to determine where special attention is needed to increase girls' participation.

**Rationale:** Reports identify a number of efforts in which schools are engaged to increase resources. One report asserts that 4,701 SMC members were trained in financial management and lobbying skills, but the number of women and men trained is not stated.

**PSSP Recommendation 2:** Any training should report participants by sex.

**Rationale:** In the development of facilities, one report states that 125 pit latrines were constructed.

**PSSP Recommendation 3:** When reporting on the construction of facilities, such as pit latrines, the number constructed for girls and boys should be disaggregated. In the narrative, the "safe" location of the latrines should also be documented. Other facilities, such as desks constructed/

purchased, should be reported on as well, because as girls mature, they need to be able to sit at a desk rather than on the floor. To make sure that girls are assigned these desks in the same proportion as boys, teachers should be encouraged to assign seats appropriately.

**Rationale:** One report noted that in teacher trainings, a specific module was taught on gender equality in education, and examples that addressed gender were highlighted. While this may be a step in the right direction, it is most important that teachers, in particular, review curriculum and classroom practices with a gender focus so that they can discern the range of differences (and similarities) between female and male learners.

**PSSP Recommendation 4:** In addition to an introductory module on gender equality in education, the implementing partner should address the curriculum as a whole and train teachers on how to recognize and change any biased presentation of learning materials. Moreover, learning materials must address the different types of hazardous situations in which girls may find themselves, and how to avoid these situations if at all possible, e.g., *ganyu* labor (rural agricultural piecework).

**Rationale:** That communities and SMCs have been mobilized to address the need for girls to remain in school is positive, because it means community members have accepted that girls must remain in school and the community must support it.

**PSSP Recommendation 5:** The community and SMCs should be trained and encouraged to deconstruct some of the prevailing cultural myths that girls are inferior to boys. Community coalitions composed of both women and men need to agree on how to combat the harmful traditional beliefs surrounding girls and other vulnerable children.

**Rationale:** The establishment of clubs to support continued girls' enrollment is one option that has been explored to encourage girls to remain in school, but it might prove problematic in day schools due to the household work burden placed upon girls, especially girls who have reached Standard 4.

**PSSP Recommendation 6:** Community mobilizers should tackle this issue directly in working with parents to redistribute work roles so that members of both sexes might participate in after-school activities. *Gule Wankulu* (see best practice below) might also support after-school activities. Alternatively, clubs might be held at a time when both girls and boys would be more available and safe.

**Rationale:** Indicators capture various outputs related to project activities, but in at least three cases outcome indicators are required to be able to document whether the project is achieving success in reducing the hidden costs to education and addressing contributing factors that may extend girls' enrollment.

**PSSP Recommendation 7:** Outcome indicators on the following should be developed and tracked: 1) Decrease in hidden costs of education (these should be spelled out in the narrative); 2) Increase in SMC decisions to reduce the hidden costs of education; and 3) Increase in the number of female teachers in all grades.

**Rationale:** The general situation of poverty in Malawi prevents girls from continuing in school due to the opportunity cost of labor, the lack of resources to purchase sanitary supplies, the lack of defined work opportunities in the future, and the need to take on the responsibilities of the household in light of sick or deceased parents, etc.

**PSSP Recommendation 8:** In light of the broader societal problems of poverty and the HIV/AIDS pandemic, PSSP should undertake a 360-degree assessment of the needs of both the girl and boy child for both to remain in school. For instance, many children come to school without having eaten; this could be resolved by involving World Food Program in providing food for a school breakfast/lunch program. If girls must take care of younger siblings, the SMC and PTA should

address this problem and create some type of alternative care so girls would be free to attend school. If girls must take care of ailing parents, other community mechanisms (such as churches) could be mobilized to provide care and to release girls to go to school.

### **Best Practice**

A very noteworthy best practice of PSSP is the co-opting of the *Gule Wankulu*, traditional leaders who call children for initiation and other ceremonies. The project has been successful in building their awareness on the need for girls and boys to remain in school. Now, instead of holding initiation ceremonies when school is in session, they hold them during school breaks. Also, the leaders are now advocates for children remaining in school, and when they find a child in the community during the week, they direct him/her to go to school. Follow-on research should be conducted to determine if this is making a difference in enrollments.

Another best practice is exposing girls to female role models within and outside of the community. The project has identified women working in different professions and either invites them to come to schools and talk about their work, or field trips are organized so that girls, in particular, can learn of the possible futures that can be created if they remain in school. Follow-up evaluations should be conducted on these to determine if they are a factor in girls remaining in school.

Overall, PSSP is doing extremely well in documenting gender issues and results. In the future, if the PSSP is to be scaled up, focus should be placed on the selection of partners that can deliver the same type of intensity over a broader geographic area.

### **EDUCATION MANAGEMENT INFORMATION SYSTEM (EMIS)**

In general, EMIS has done a commendable job in collecting and analyzing a range of significant data that address the education sector. The project was launched in 2003 and will end in 2008.

#### **EMIS PMP**

The PMP specifically targets activities to produce annual statistics for all schools in Malawi. One of the indicators being tracked as a process indicator (tracking the steps in the process: updated master list, review questionnaire, annual statistics reports etc.) is: "Annual Statistics manuscript completed in same year for last three years since project started."

#### **Recommendations**

**Rationale: Table 1.8 – Number of Teachers in All Schools** – is not disaggregated by sex. This number would show where female teachers are teaching – either in public or private schools. Inquiries could be made as to the recruiting and retention of female teachers at all schools and this information used in future efforts to increase the number of female teachers.

**EMIS Recommendation 1:** The number and sex of teachers by school in each district should be presented to show the pattern of female teacher employment.

**Rationale:** The level of personnel involved in data collection, analysis and use, who receive training and are reached through EMIS, reflects the gender inequities in the Education workforce. Most of the Education administration personnel (non-teachers) are men. Therefore, women miss out on the opportunities inherent in being involved in information collection processes, as well as any decision-making using this information.

**EMIS Recommendation 2:** EMIS should support MOEST in promoting greater representation of women in non-teaching, administration and management positions in the education sector, in addition to their recruitment efforts of female teachers.

### **TIKWERE//MALAWI INTERACTIVE RADIO INSTRUCTION (MIRI)**

This interactive radio project is being implemented to provide PCAR Radio Support through 150 30-minute educational programs annually for Standards 1 through 3 nationwide. Ten thousand free-play wind-up radios were provided to all public primary schools. The purpose of this outreach is to assist under-trained teachers in delivering learner-centered lessons. Teacher monitoring and support are provided. The project was launched in 2007 and will end in 2010.

The scripts build directly on the new curriculum, supplemented in radio form through the use of various male and female characters. In the one script reviewed, gender concerns were being addressed through: 1) balanced calling on students for answers; and 2) the girl and boy student actors. The teacher character for Standards 1 through 3 is a woman, which may be stereotyping. There were no specific, gender-related activities delivered in the 30-minute program; all appeared to be directed to all children.

MIRI progress is being monitored in the following areas:

- Increasing children's participation in learning activities;
- Achievement of learning;
- Improving teaching skills of participating teachers;
- Improve the institutional capacity of government officials to develop and manage radio programs.

Some of the performance indicators include:

- Number of primary schools students enrolled in MIRI-targeted schools;
- Number of teachers trained in interactive radio instruction;
- Number of education officials trained in education management;
- Number of teachers' guides, radios, and other teaching and learning materials distributed to schools.

The M&E plan states that the sex of students enrolled, teachers trained and education officials trained will be reported for all activities. The M&E plan also outlines a follow-up strategy to determine if teachers are following the *Tikwere* training effectively so as to meet project objectives. The only document reviewed for this project (in addition to the M&E plan) addresses the selection and training of radio script writers (that achieved a gender balance), and a finished script. Hence, recommendations are made only on the substance of the radio program script reviewed.

### **Recommendations**

**Rationale:** It is not sufficient in radio programming to develop just one module that addresses gender. Rather, all modules should be developed from a perspective informed by gender, one that considers male and female learners as part of a gendered socio-cultural environment. Programming might also address how gender equality could be established in learning at this early, impressionable age.

**Tikwere Recommendation 1:** In developing scripts, the implementing partner should develop broadcast topics from a gender perspective, and aim for content that is either gender neutral or gender sensitive.

**Rationale:** That a female plays the role of teacher for the Standards 1 through 3 broadcasts may be building on a stereotype.

**Tikwere Recommendation 2:** A male teacher character might be introduced for the Standards 2 and 3 programs to provide a gender balance and to send the message that men can also teach lower primary grades.

### **AFRICAN EDUCATION INITIATIVE - AMBASSADORS GIRLS SCHOLARSHIP PROGRAM (AEI – AGSP)**

The purpose of the Presidential Initiative for African Education is to improve gender equity by assisting approximately 3,300 primary school girls each year with scholarships and mentoring so that they enroll and stay in school. The program targets academically-motivated girls who are vulnerable because they are: 1) from economically disadvantaged households; 2) AIDS-affected; 3) orphaned (the loss of one or both parents); and/or 4) living with a physical handicap. Vulnerable children are also defined as those who are living in child-headed households, or with parents who are sick with AIDS. The project mobilizes the school community to support girls' education. Mentors address issues that prevent girls from remaining in school and work with the girls to highlight the importance of education, health and hygiene, gender-based violence, and HIV/AIDS mitigation and prevention. Classes are taught in Life Skills and HIV/AIDS.

#### **Recommendations:**

**Rationale:** While the project has experienced success in reducing girls' dropout rates, the success rate could be further improved with greater focus on the causes for dropping out.

**AEI/AGSP Recommendation 1:** The implementing partner should provide community awareness training on the causes for the high incidence of girls dropping out (e.g., pregnancy, early marriage, etc.), work with the community on how to address these issues, implement the solution, and then train specific community members to track and report on dropouts.

**Rationale:** In conducting classes in Life Skills and HIV/AIDS, it is not clear that each topic is considered from a gendered perspective.

**AEI/AGSP Recommendation 2:** In reviewing the Life Skills and HIV/AIDS lessons, attention should be paid to the differences and similarities between young men and women, especially in light of the program that will be started for boys.

#### **Best Practice**

The program has successfully decreased dropout rates (due to pregnancy and/or early marriage) over the three years of implementation. Mentors conduct follow-up meetings with all girls to determine their well-being and whether they are facing particular challenges. Special tutorials are arranged for girls who are experiencing learning difficulties. Mentoring is offered on the importance of education, health and hygiene, gender-based violence, and HIV/AIDS mitigation and prevention.

### **THE SAFE SCHOOLS PROGRAM (SSP)**

A USAID/Washington Office of Women in Development gender-focused program (implemented in Malawi and Ghana), SSP addresses the negative impact of traditional gender roles on learning, participation, and mobility within schools. The program is designed to ensure that schools are gender safe, so that all boys and girls have equal opportunities to learn, gain skills through classroom and extracurricular activities, and are psychologically, sexually, and physically safe from threats, harassment, or harm in all parts of the school. In Malawi, the program has six facets:

- Establishing and implementing a Code of Conduct (Behavior Change and Communication);
- Establishing and implementing counseling at each school (largely through development of School-related Gender Based Violence (SRGBV) leaders and clubs);
- Provide teacher training on SRGBV;
- Mobilize communities to create Community Action Planning against SRGBV;

- Pilot the Student SRGBV Prevention Manual as part of Life Skills courses;
- Conduct advocacy efforts.

The Code of Conduct seeks to achieve the following outcomes:

- Knowing and understanding the different forms of gender-based violence against both boys and girls;
- Understanding the role of head teachers in creating an environment conducive for reporting gender-based violence, rather than of protecting perpetrators;
- Awareness of the illegality of teacher/student relationships, including those that seem or appear as though the student is consenting;
- Mobilizing SMCs in tackling and discussing issues of gender-based violence;
- Strengthening the role of the head teacher in confronting SRGBV;
- Awareness of the illegality of SRGBV, a crime punishable by law.

The objective of the Safe Schools project is: SRGBV reduced in intervention schools. The interim objective is: to develop and have in place prevention, reporting and response systems regarding SRGBV in select schools. To monitor progress, Safe Schools tracks the following indicators:

- Improved awareness and advocacy of SRGBV at the national level;
- Improved systemic prevention, reporting and response mechanisms at the institutional level;
- Increased community SRGBV recognition, response and monitoring;
- Enhanced development of healthy relationships at the individual level;
- Increased global levels of knowledge of issues surrounding SRGBV.

Challenges reported for this project emanate largely from the cultural practices that prevent adult participants from seeing that there is anything wrong about SRGBV. The comprehensive and persistent approach that the implementing partner is taking, however, is having an effect in reducing SRGBV and in re-orienting the mentalities and assumptions that lead to the perpetration of violent acts.

In reviewing the provided reports, the team found that a very comprehensive job was being done in meeting project objectives and in responding to specific needs as they arise. We have no recommendations for this project.

### **Best Practice**

The support network that the program has developed includes: teachers, community counselors, peer leaders, life skills club members, and head teachers. Each participant in this network is trained to be able to identify SRGBV, accept reports of occurrences, protect and counsel the victims, and take action against the perpetrators, whether student or teacher.

### **USAID/Malawi Education Performance Monitoring Plan**

The Table of Performance Indicators listed in the December 2007 version of the Basic Education PMP addresses the disaggregation of gender in almost all categories. There are a few exceptions; these serve as the basis for our recommendations.

### **Recommendations**

**Rationale:** To understand the range of entry points to address gender concerns in the USAID/Malawi education programming, the following adjustments should be made to the PMP.

**PMP Recommendation 1: 3.2.1.2.5 – Number of teachers with degree in Primary Education at teacher training colleges.** There should be percentages for males and females in

this category so that there might be a greater understanding of the different variables that explain why there is a shortage of female teachers. Because of the stereotype that female teachers should teach Standards 1 through 3, the following should be tracked: 1) the number of female and male teachers with degrees in Primary Education who are teaching lower and upper primary teacher training courses; and 2) the number of female and male students who are participating in either lower or upper primary teacher training courses.

**PMP Recommendation 2: 3.2.1.2.9 – Number of Parent-Teacher Associations or school governance structures supported.** The composition and leadership of PTAs should be disaggregated by sex to determine how imbalances can be addressed not only in membership but also in the gender-based issues the PTA will address.

**PMP Recommendation 3: 3.7.1.7.2 - Implementation of pre-service life skills in six teacher training colleges.** Attendance of these courses at Teacher Training Colleges should be tracked by sex, as such courses are more likely taught by women than by men.

In addition to the suggested further integration of gender concerns into the PMP, the Education team should be more intentional about gender as it considers curriculum reform and the curriculum for teacher training in the future. For instance, Forum of African Women in Education – Malawi (FAWE-MA) is currently involved in a number of internationally-proven endeavors to address curriculum reform, textbook development, book illustrations, grading systems, etc. The “Gender Responsive Pedagogy” developed collectively by FAWE African chapters is an excellent resource for teacher trainers and teachers as they demonstrate how to embed gender concerns in the entire curriculum. They have also taken on the task of distributing sanitary napkins to girls in Standards 6-8 (as a pilot here in Malawi, but as an accepted, common practice in several other African countries). FAWE-MA has successfully used “Theatre for Development” strategies to mobilize the community to address a range of gender-related issues, especially violence against women and girls. They have established “Tusemi” Speak-Out Clubs in which girls receive training in life skills, human rights, and HIV/AIDS so that the girls, in turn, can become community advocates. This organization, whose goal is to have more girls enroll and stay in school, can be tapped for future participation. As a part of an all-African network of educated women, their chief concern is the education of girls and all of the activities that support this goal.

Similar organizations do not exist for boys largely because they have constituted the majority in school enrollment. However, the introduction of life skills, human rights, and HIV/AIDS sensitization courses must consider the roles and responsibilities of boys and men. Boys should also participate in the classes offered and any gender-based stigma attached to these classes should be reduced.

Since no one strategy will succeed in increasing girls’ school enrollment and retention, it is important that USAID/Malawi take a holistic approach in its programming. For instance, any school-based program should address what goes on in the classroom (increase in the number of female teachers, improvement of teacher skills, abilities, management practices, and learning processes) as well as outside the classroom in the school environment (SRGBV, HIV/AIDS, harmful cultural/traditional practices, after-school activities (including building dormitories for girls, at least at the secondary level), absenteeism, and student-student as well as teacher-student relationships). Attention should also be given to the development of community support groups (e.g., PTAs) as well as SMCs and other types of community coalitions (e.g., traditional leaders, faith-based institutions, and schools) that could address the gender concerns in the school-community. Because so many children are economically vulnerable, schools should also launch in-school feeding programs and/or

“rations” for the most vulnerable to carry home to feed their families (so children don’t have to drop out to earn an income). In education sector meetings with the GOM, other donors and implementing partners, gender-related information and research findings should be shared.

## **C. Sustainable Economic Growth**

### **GOM Priorities**

#### ***Ministry of Agriculture and Food Security (MOAFS)***

GOM priority investments for 2008-2012, as reported in The Agricultural Development Program (ADP) by the MOAFS of December 10, 2007, include the following:

- Increasing sustainable maize productivity for food self-sufficiency;
- Diversifying food production (crops, livestock and fish) to ensure adequate household nutrition;
- Increasing productivity of high value crops and livestock for the domestic and export markets.

MOAFS strategies have three focus areas:

- Food security and risk management;
- Commercial agriculture, agro processing and market development;
- Sustainable land and water management.

The MOAFS includes gender equity and empowerment as a cross-cutting issue in which 1) gender disparities will be reduced, and there will be 2) enhanced capacity of youth, women and men within the sector. Examining the extended discussion of each of the investment priorities and focus areas, gender has not been integrated into the action statements, even though there is a gender specialist in the ministry. Gender is addressed in a stand-alone paragraph, as follows (p. 45):

Women who constitute about 51% of the population are marginalized in social and economic spheres such that they are unable to contribute to their full potential to social, economic and political development of Malawi. Women are also the main contributors to agricultural production in the smallholder sector. . . . If the production tasks are done late or poorly, food production decreases, making the household food insecure.

Appendix I to the ADP, which outlines field output and outcome indicators in each of the focus areas, does not include any gender focus nor does it state anywhere that data collected will be disaggregated by sex, not even where farmers/participants/recipients/beneficiaries are to be counted. In addressing the cross-cutting issue of gender, it is grouped together with HIV/AIDS. The outcome indicator is “Increased capacity of staff and farmers to mainstream gender, HIV and AIDS in ADP interventions,” and the output indicator is number of staff trained, and number of farmers trained. Yet, there is no evidence of mainstreaming either of these cross-cutting issues.

The Controller of Agricultural Extension and Technical Services in the MOAFS said, “It is easy to talk about gender, but hard to do it.” He indicated that MOAFS has targeted certain populations for certain interventions: leadership, including greater participation by women; production, targeting women for improved practices, since they dominate in this sector; and benefit sharing, where men dominate in making decisions as to how to utilize household resources.

In trying to hire more female extension agents, the Controller discussed the difficulty of keeping married women in the service because of their husbands’ locations. Additionally, an upcoming problem he sees is the increase in the number of children farmers due to the death of parents to

HIV/AIDS. The children are very young, are in need of a great deal of support to make appropriate decisions, and need significant assistance with labor.

### **Draft Revised National Gender Policy**

The policy addresses sustainable economic growth under several themes, including:

#### **Agriculture, Food Security and Nutrition**

**Policy Theme Goal:** Household, community and national food and nutrition security enhanced

#### **Specific Objectives:**

- To increase women's and other vulnerable groups access to and control over agricultural productive resources and technologies for food and nutrition security
- To reduce nutritional disorders among women and children

#### **Natural Resources and Environmental Management**

**Policy Theme Goal:** Equal and equitable participation of women, men, girls and boys and other vulnerable groups in the sound management, conservation and utilization of natural resources and the environment for sustainable development

#### **Specific Objectives:**

- To increase participation and involvement of women, men, girls, boys and vulnerable groups in planning, designing, implementation and evaluation of natural resources and the environment;
- To minimize negative natural resource and environmental impacts thereby enhancing environmental benefits of projects to the majority of the vulnerable groups.

#### **Poverty Eradication and Economic Empowerment**

**Policy Theme Goal:** Enhanced women's economic and social empowerment

#### **Specific Objectives:**

- To promote women's access to and control over productive resources and economic opportunities;
- To integrate gender issues into overall national development strategies and solicit support from development partners;
- To create a favorable environment for equal employment opportunities and benefits for women and men in both formal and informal sectors.

For a full presentation of the draft gender policy in terms of these three themes, please see *Appendix F – Gender Policy on Economic Growth*.

### **USAID/Malawi Projects Supporting Government Priorities**

USAID/Malawi's activities contributing to economic growth focus on creating an enabling environment in agriculture, diversifying and increasing agricultural production, promoting dairy development, increasing smallholder productivity and income, promoting aquaculture/fish farming, deepening micro-credit and capacity-building for Micro, Small and Medium Enterprise lending, improved natural resource management, and improving the famine early warning system. In addition, PL 480 foods are imported into Malawi and sold to provide funding for local development initiatives.

### **I-LIFE DEVELOPMENT ASSISTANCE PROGRAM (DAP)**

**I-Life** (Improving Livelihoods through Increasing Food Security) is a Title II project implemented through the work of a consortium of humanitarian international NGOs. The goal of the project is to reduce food insecurity among vulnerable households and communities in rural Malawi.

I-Life was designed to address food security (availability, access, and utilization of food) through the strengthening of agricultural production, marketing, and health and nutrition coupled with a broader livelihoods strategy. The Mid-Term Evaluation documents many program successes, but gender issues are not addressed. One implementing partner staff member indicated that gender was not even considered in the writing of the proposal, and the Indicator Performance Tracking Table (required of Title II grantees) and Operational Plan Implementing Mechanism Indicator Results Template of USAID has no mention of gender.

The 2006 Annual Report presents some vignettes on women that might be illustrative (or exceptional) outcomes of project interventions, but there has been no attempt to gather data and disaggregate it by sex. The 2007 Annual Report presents percentages of beneficiaries and households achieving project goals, but offers no sense of who these beneficiaries are and how gender equality in receiving benefits might have been achieved. All reports focus on structural aspects of the project.

Approximately 35 community members attended a meeting held in Dzabwa Village (about 15 females and 20 males). They were asked several questions to which a response was requested from at least one female and one male. The following insights emerged:<sup>7</sup>

- Men/husbands decide how to utilize income generated by any member of the family. Women can make suggestions, but men decide.
- Men/husbands provide the weekly savings deposits required of female Village Savings & Loan members. Consequently, when women receive loans, men exercise control over their use.
- If women use income they generate without consulting their husbands, they are said to be stealing the money.
- On the irrigated plots of land allocated to families, men and women share the work differently from the way they work on their traditional plots.
- Women do not eat at the same time as men. Women see their husbands as children who must be fed first.
- Women take care of HIV/AIDS-infected women directly, and provide the support work (washing, cleaning, etc.) to infected men.
- Women who are not married or who have been abandoned are free to make choices as to how their incomes are utilized.

The I-Life project focuses on three strategic objectives and relevant indicators:

**Livelihood capacities of vulnerable groups are protected and enhanced;**

- Increased agricultural production
- Increased rural household incomes
- Improved community assets through Food for Work

**Nutritional status of vulnerable groups protected and enhanced;**

- Improved food utilization of vulnerable groups is protected and enhanced
- Increased adoption of improved nutrition and complementary health behavior practices by vulnerable groups

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<sup>7</sup> These statements are drawn from one community group discussion in one village, but may point to a need for further investigation.

**Capacity of community and district institutions to protect and enhance food security is improved;**

- Improved district and community accountability, transparency and effectiveness
- Enhanced capacity of civil society to sustain development process
- Knowledge management

These results indicators address economic units and/or behaviors. As there was no directive to disaggregate data by sex, I-Life does not take gender concerns into account. Indicators, for instance, make tacit assumptions that: the household is a financial pooling unit where, in most cases, it is not; seek to document improved food utilization, but do not identify who is utilizing food; and indicate that nutrition and health behaviors have been improved, but do not ask whose nutrition and health behaviors have been improved and how.

**Recommendations**

**Rationale:** Because I-Life has not focused on gender in any of its reporting mechanisms (save for some “success stories”), I-Life should undertake several changes:

**I-Life Recommendation 1:** Before receiving additional USAID funding, I-Life should conduct a gender assessment to ascertain how women and men are differentially affected (through differential participation) in each area of project operations. *Appendix G – Gender Issues in Achieving Food Security* - can serve as the basis for conducting a gender analysis in all the activity domains and geographic areas in which I-Life is operating. The assessment would then be the basis to revise implementation strategies, M&E indicators, data collection and report writing.

**Rationale:** Results indicators address institutional outcomes rather than people outcomes.

**I-Life Recommendation 2:** People-related indicators should be disaggregated by sex, if appropriate, and a narrative should be written to explain any gender differences in results and how the results will affect the relative status of women.

**Rationale:** Because I-Life is a Title II project, USAID/Malawi regulations on gender disaggregation and reporting may not be fully applicable.

**I-Life Recommendation 3:** USAID/Malawi should consult with USAID/Washington on how best to address the M&E and reporting requirements regarding gender with Title II and devise a common strategy that ensures gender reporting in Title II projects.

**MALAWI DAIRY DEVELOPMENT ALLIANCE**

Funded under the Global Development Alliance, the goal of this cooperative agreement with Land O’Lakes is to increase incomes for rural dairy farmers and participating stakeholders by building economies of scale in milk production, collection and processing and meeting demand for affordable, locally produced, dairy products.

In examining two quarterly reports, we found no mention of gender and no attempt to address gender inequities that might exist at different stages of dairy sector development. In an interview, the current country manager reported that women are organizing women farmers into milk bulking groups (MBGs), and that, according to self-made by-laws, female membership of MBGs must be at least 20%. MBGs are also reported to have women at the executive level. A number of women can also be found in processing plants, with one being led by a female Managing Director. Since USAID did not require reporting on gender in the past, people-related data collected is not disaggregated by sex.

The project addresses two FOs: 1) agriculture sector productivity, and 2) private sector competitiveness. These FOs are to be achieved by accomplishing the following key performance indicators:

- Increase in household income for participating dairy farmers;
- Increase in value and volume of milk collected by MBGs;
- Increase in number of MBGs operating above the break-even point;
- Increase in percentage of milk delivered to processing plants that meets or exceeds processors' pre-established quality standards.

Project performance indicators include:

- Increase in number of MBGs operating above the break-even point;
- Increase in processing plant capacity utilization;
- Increase in value of investment by public, private and non-governmental organizations in the dairy sector;
- Increase in household income from milk sales for participating dairy farmers;
- Increase in number of people employed in the dairy market chain.

### **Recommendations**

**Rationale:** Men's and women's income is presumed to be pooled by the household with all relevant members making decisions on how the income is to be utilized.

**Dairy Development Recommendation 1:** An indicator differentiating male and female income should augment the household income indicator to determine who is actually benefiting from the project.

**Rationale:** Male and female farmers may be delivering very different quantities of milk to MBGs.

**Dairy Development Recommendation 2:** The sex of the farmer delivering milk should be identified and the amounts of milk being delivered to MBGs by sex should be tracked and reported to determine if women farmers have the same number of cattle and are able to produce milk in the same proportions as men. If they are not, project implementation should be adjusted to improve women's ability to own and produce the same amount as men.

**Rationale:** Female leadership of MBGs and input service suppliers has been anecdotally reported in interviews, but it is unclear how the project is cultivating women in leadership.

**Dairy Development Recommendation 3:** Land O'Lakes should build the capacity of women in leadership roles in MBGs and input service suppliers. The results of this capacity-building should be tracked and reported in the M&E system.

**Rationale:** Because Land O'Lakes has not integrated gender into its M&E Plan and reporting practices, it is unclear how gender-focused the project is.

**Dairy Development Recommendation 4:** To assist Land O'Lakes in integrating gender into all of its activities, *Appendix H – Gender Integration of Milk Project* has been created and can serve as the starting point in conducting a gender analysis. It is important that Land O'Lakes reconsider how it is implementing this project to be more gender responsive, and it should also report on how gender affects the sustainability of the project as well as how the project affects gender relations.

### **C-FISH: CAPTIVE FISHERIES FOR INCOME AND STRENGTHENED HOUSEHOLDS**

The C-FISH Global Development Alliance of seven members will develop and implement an innovative, sustainable, for-profit business development services model that will link smallholder fish producers with new and existing micro-, small and medium enterprises in the sector.

The goal of this project, as reported in the first Annual Work Plan, is: Improved production and commercialization of pond-raised fish in the Zomba basin and other high potential areas for aquaculture in Southern Malawi. There are four Intermediate Results:

- **Increased availability of high-quality cost-effective fingerlings;** (Improved Tilapia fingerling selection, production and distribution and improved technical capacity of existing small and medium enterprise fingerling producers.)
- **Developed soy-based fish feeds using appropriate technology and local manufacturing;** (Improved technical capacity of Maldeco Aquaculture to formulate and produce fish feed and improved technical capacity of small and medium enterprise feed producers to formulate and produce fish feed.)
- **Increased availability of producer and supplier credit mechanisms;** (Developed credit products that target C-FISH farmers, including women, and other value-chain entrepreneurs and developed strategies to facilitate women's participation in formal credit systems for aquaculture value-chain activities.)
- **Improved fish production and distribution to urban and peri-urban markets;** (Established sustainable BDS knowledge transfer and technical assistance system (Fish PROS); Developed local marketing channels for C-FISH products; and, Developed strategies to facilitate women's participation in aquaculture value-chain activities.)

### **Recommendations**

**Rationale:** Several of the intermediate results imply people-oriented results.

**C-Fish Recommendation 1:** Specific intermediate results that can be considered from a gender perspective include the following:

- The technical capacity building of both female and male fingerling producers should be tracked and reported;
- Women's participation in formal credit systems should be tracked and reported;
- The BDS system must include female information providers and receivers. The data on participants should be disaggregated by sex;
- Marketing channel development must address the particular transaction hazards that may entail the use of sex for the completion of a sales transaction. Care should be taken to understand the many points in the value chain that could produce more hazardous conditions for women, and the project should address each point to mitigate the consequences. How this has been done should be reported in the narrative.

As this project is just starting up on all fronts, there is nothing further to report on gender integration.

### **CHIA LAGOON WATERSHED PROJECT**

This multifaceted project was initially funded by USAID in 2004-2007 and then NORAD took over funding. It is anticipated that USAID will again pick up funding next year. The goal of the project is to sustainably manage the natural resources in the Chia watershed to economically empower the community. The project includes: 1) community mobilization and the formation of community-based clubs to take on the activities of the project; 2) reforestation of deforested areas; 3) enterprise development (using natural resources – beekeeping, mushroom cultivation, and captured fish and aquaculture); 4) Sustainable agriculture (soil and water development) focusing on growing nitrogen-fixing trees, development of erosion contours, protecting stream banks, and conducting conservation agriculture; 5) crop diversification (rice, beans, cassava); 6) food security – irrigation with treadle pumps; and 7) eco-tourism.

The M&E plan for the project indicates that all people-related quantitative indicators will be disaggregated by sex. Selected activities tracked in the plan include:

- Improved conservation and management of Chia land/forest resources;
- Improved management of Chia lagoon resources;
- Crop diversification;
- Multiplication of improved material;
- Water and sanitation;
- Enterprise development.

The project has addressed gender in the following ways:

- Recognizing that women are responsible for forested areas because they must regularly fetch firewood in the forests; they are the “managers” of the natural woodlands.
- Women have been taught how to develop forest-based enterprises: growing mushrooms and beekeeping (which men also do).
- Women have been supported in buying and selling fish as an enterprise, but the “sex for fish” issue has not yet been addressed in the project. Many women have left the fish business and established mushroom production in order to be more self-sufficient and not to have to use their bodies to make transactions when buying fish to smoke or to sell.
- Aquaculture clubs for fish farming must have 30% women members. Women generally manage the ponds, although men dig them. Feed is a significant problem as it is not affordable. The project is experimenting with different mixes that will provide the fish the nutrients and the calories needed at an affordable price.
- Seeds for crop diversification (rice, beans, cassava) are distributed through women’s clubs as women are largely responsible for the cultivation of these crops.
- In polygamous areas (such as Nkhotakota), women cultivate their own plots so that their own families can benefit. They seek to generate incomes that can be directed to their own children rather than the children of another wife.
- The use of treadle pumps for irrigation is being promoted. This technology can be used by women as they grow maize, cabbage, tomatoes, onions, and paprika. Because they use the pump, women do not have to cultivate streambeds.

### **Recommendations**

**Rationale:** The “sex for fish” problem has led to a significant number of women dropping out of the fish trade.

**TLC Recommendation 1:** This problem should be taken to the Beach Village Community for resolution; the implementing partner should track the incidences of these extra transactional costs.

**Rationale:** The implementing partner reported that there is little focus on gender in indicators and that data are not generally disaggregated by sex.

**TLC Recommendation 2:** If USAID/Malawi picks up the funding for this project, a gender analysis should be undertaken to make some of the “backstage” information about gender more explicit and brought to the “front stage” so that it can be integrated into programming and results indicators.

### **Current and Future Food Security Strategies**

The SO for Food Security programs is: Food insecurity in vulnerable populations reduced. The Food Security Programming Strategy does an excellent job of pointing out gender issues in terms of food availability, access and utilization. Different points raised in the strategy, supplemented by other comments related to food security, are presented in *Appendix G – Gender Issues in Achieving*

*Food Security* as the beginnings of a guideline to help USAID consider how and which gender issues to address in its future food security strategies.

### **USAID/Malawi SEG Performance Monitoring Plan**

The indicators used to track progress in the SEG area include the following:

#### **Agriculture**

- Number of individuals who have received short-term agriculture enabling environment training as a result of USG assistance (sex-disaggregated);
- Number of policy reforms analyzed as a result of USG assistance;
- Number of vulnerable households benefiting directly from USG assistance;
- Number of rural households benefiting directly from USG interventions;
- Number of producer organizations, water user associations, trade and business associations, and community-based organizations receiving USG assistance.

#### **Inclusive Financial Markets**

- Number of clients at USG assisted microfinance institutions;
- Total savings deposits held by USG assisted microfinance institutions;
- Number of microfinance institutions supported by USG financial or technical assistance;
- Percent of USG assisted microfinance institutions that have reached operational sustainability.

#### **Natural Resources and Biodiversity**

- Number of hectares in areas of biological significance showing improved biophysical conditions as a result of USG assistance;
- Number of people with increased economic benefits derived from sustainable natural resource management and conservation as a result of USG assistance;
- Number of people receiving USG supported training in Natural Resources Management and/or Biodiversity Conservation.

Only one of the indicators includes a focus on gender because it requires the reporting of data disaggregated by sex. However, many other indicators address people and participants that should present data disaggregated by sex.

#### **SEG PMP Recommendations**

**Rationale:** When partners report on the different quantitative indicators, it is important to discuss how these numbers were achieved, i.e., what human activities took place in which men and women participated?

**SEG PMP Recommendation 1:** In the analysis of activities, a narrative of how the indicator was achieved should describe how men and women participated, whether any type of differential effect was observed and what the project did to address the differences.

**Rationale:** The gender-based division of labor inherent in any work means that any SEG intervention will be differentially experienced by men and women.

**SEG PMP Recommendation 2:** In reporting on the outputs of work performed, the worker should be identified as either male or female, and the outputs disaggregated by sex.

By disaggregating data by sex and by providing a narrative addressing gender issues within each domain of activity, USAID will have a clearer understanding of how to reach the indicators and create the potential for gender equality in Malawi.

## **D. Health, Population and Nutrition**

### **GOM Priorities – Reproductive Health, Maternal and Child Health, HIV and AIDS, Tuberculosis and Malaria**

#### ***Ministry and Organizational Policies and Priorities***

Major health challenges in Malawi are high HIV/AIDS prevalence (12%); high fertility (6.0); and high infant mortality rates (76/1000, 133/1000, and 984/100,000). Lack of knowledge about health behaviors, chronic malnutrition, communicable disease outbreaks and disparities in access to quality health services exacerbate the situation. Consequently, GOM policy, put forward by the Ministry of Health (MOH), is to raise the health status of all Malawians through the development of a health delivery system capable of promoting health, preventing, reducing and curing disease, protecting life and fostering the general well being and increased productivity, and reducing the occurrence of premature death. The emphasis on building the health delivery system will, in the long run, address each aspect of disease prevention, patient care, well-being, and harmful traditional practices.

The MOH Reproductive Health Policy (RHP) goal is to provide accessible, affordable, and convenient comprehensive reproductive health services to all women, men and young people in Malawi, and to improve sexual and reproductive health for all men, women and young people in Malawi, especially the vulnerable and underserved.

In Malawi the components of reproductive health care are as follows:

- Safe motherhood and newborn health;
- Adolescent reproductive health;
- Family planning;
- Prevention and management of Sexually Transmitted Infections (STIs);
- Prevention, early detection of and management of cervical, prostate, and breast cancer;
- Elimination of harmful practices and reduction of domestic violence and infertility.

The focus on gender equity is explicit in the RHP and is included in MOH program objectives:

- To promote adequate development of responsible sexuality, permitting relations of equity and mutual respect between the genders and contributing to improving the quality of life of individuals;
- To ensure that women, men and youth have access to the information, education, supplies and services needed to achieve good health and exercise their reproductive rights and responsibilities;
- To promote behavior change communication (BCC) and family life education to men, women and young people for the purpose of increasing demand for services;
- To provide quality services that are integrated, gender sensitive, and responsive to the needs of clients (GOM, MOH Reproductive Health Policy, 2002: pp. 3-4).

A National Reproductive Health Strategy (2006-2010), developed with USAID support, was approved earlier this year. It addresses several key gender issues, including male involvement in decision making and impact of domestic violence on reproductive health.

In 2003, the GOM, through the National AIDS Commission in the Office of the President and Cabinet, developed the national AIDS policy entitled “A Call for Renewed Action.” The goals of this policy are to: 1) Prevent the further spread of HIV infection, and 2) Mitigate the impact of HIV/AIDS on the socio-economic status of individuals, families, communities and the nation.

The policy outlines three objectives:

- To improve the provision and delivery of prevention, treatment, care and support services for people living with HIV/AIDS;
- To reduce individual and societal vulnerability to HIV/AIDS by creating an enabling environment;
- To strengthen the multi-sectoral and multi-disciplinary institutional framework for coordination and implementation of HIV/AIDS programs in the country.

To promote HIV/AIDS prevention, treatment, care and support, the GOM developed the following strategies:

- Information, Education and Communication (IEC) for Behavior Change;
- Routine Testing;
- Condoms for HIV prevention;
- Prevention of mother to child transmission;
- Post Exposure Prophylaxis (PEP).

To promote protection, participation and empowerment of vulnerable populations, especially women, the GOM prioritized the following:

- Ensure that women and girls regardless of marital status have equal access to appropriate, sound HIV-related information and education programs, means of prevention and health services;
- Ensure that women and girls are protected against violence, including sexual violence, rape and other forms of coercive sex as well as against traditional practices that may negatively affect their health;
- Ensure women's legal rights within the family in matters such as divorce, inheritance, child custody, property and employment rights.

The policy also recognizes widows and widowers as vulnerable to exploitation and therefore undertakes to ensure that: 1) communities, especially women and the elderly, have access to accurate and comprehensive information, both about laws protecting legal rights of surviving spouses to inherit property and about ways to enforce these rights; and 2) victims of property grabbing and custody disputes have access to affordable legal support services to enforce their rights.

The policy identifies customary practices that increase the risk of HIV infection and therefore undertakes to:

- Ensure that support services are available for spouses who assert their rights to safer sex with their partners and are abused or thrown out of the home;
- Ensure the provision of support services and access to PEP for people who reject the practice of widow- and widower inheritance;
- Promote correct and consistent use of condoms in marital sex where there is real or perceived risk of HIV infection and other STIs.

### ***The National HIV/AIDS Action Framework***

In July 2004, an end of term review of the National Strategic Framework for HIV and AIDS in Malawi 2000-2004 was commissioned by the GOM through the National AIDS Commission to identify key achievements, challenges, and emerging issues in the management of the national HIV response. Subsequently, the GOM developed a National HIV/AIDS Action Framework for 2005-2009, with its overall goal being informed by the goal of the National HIV/AIDS policy. It reads:

*To prevent the spread of HIV infection among Malawians, provide access to treatment for PLWHA and mitigate the health, socio-economic and psychosocial impact of HIV/AIDS on individuals, families, communities and the Nation.*

The following are the eight priority areas under the framework:

- Prevention and behavior change;
- Treatment care and support;
- Mitigation - socioeconomic and psycho-social support;
- Mainstreaming partnerships and capacity-building;
- Research and development;
- Monitoring and evaluation;
- Resource mobilization, tracking and utilization;
- National Policy, coordination and program planning.

Each priority area includes a number of objectives that can serve as guidelines to donors in designing projects to support the GOM HIV/AIDS strategy. For more details, please see *Appendix I – The Connection between Gender Inequality and HIV/AIDS*.

### **Draft Revised National Gender Policy**

The revised policy sets goals for the reproductive health policy theme and the HIV/AIDS policy theme as follows:

The **Reproductive Health** Policy Theme Goal is:

*Gender responsive health system (instituted) where gender issues and concerns are addressed throughout the National Health Service provision, especially at primary health care level.*

Three Objectives set the parameters for implementing this policy theme:

- To increase access to health services for women, men, boys and girls and all vulnerable groups;
- To lobby for improvement of quality health services so that they equitably address the needs of women, girls, men and boys and all vulnerable groups;
- To reduce high maternal and neonatal mortality rates to acceptable levels in Malawi.

The **HIV/AIDS** Policy Theme Goal is:

Strengthened Gender Responsive HIV and AIDS programming.

One objective guides the implementation of this policy theme:

To mainstream gender concerns and gender issues in all HIV and AIDS strategies.

For a full presentation of the Reproductive Health and HIV/AIDS policy, please see *Appendix J – Gender Policy on Reproductive Health and HIV/AIDS*.

### **USAID/Malawi Projects Supporting Government Priorities**

USAID is supporting the GOM overall goal of strengthening the health system, especially at district and zonal levels, by participating as a discrete donor in the Sector Wide Approach (SWAp). In this regard USAID supports:

- Maternal and Neonatal Health (MNH)
- Child Health
- Malaria Control

- Tuberculosis Control
- HIV/AIDS

Specific projects implemented in support of these priority areas include the following:

### **ACCESS**

ACCESS is a two-year project aimed at improving availability and access to quality, sustainable facilities and community maternal and newborn health services, leading to the increased utilization of services and practice of healthy maternal and neonatal behaviors. This integrated community and facility-based program focuses on antenatal care, basic emergency obstetric care and postpartum care along the Household-to-Hospital Continuum of Care (HHCC).

ACCESS seeks to achieve the following results at the national, district and community levels:

- Increased access to and availability of quality essential maternal and newborn care services at central and district hospitals, health centers, and through community level services;
- Strong MNH policies, planning and management in place at the national, zonal and district level;
- Increased adoption of household behaviors that positively impact the health of mothers and newborns;
- Increased uptake of intermittent preventive treatment of malaria in pregnancy.

The ACCESS M&E Plan is tracking the development of the following three processes and outputs:

**Enabling Environment:** The project is tracking increased national capacity to: train skilled providers to deliver Essential Maternal and Newborn Care; control malaria in pregnancy; empower communities to improve newborn and maternal health care; and improve integrated MNH services.

**Hospital and Health Centers:** The focus is on Performance and Quality Improvement for Integrated Reproductive Health Services and Service Delivery Improvements to control Malaria in Pregnancy.

**Communities:** Selected activities include: Community Maternal and Newborn Health Trainers in place at the district level in focus districts; Community Mobilization Trainers in place at the district level in the three districts; increased use of Essential Newborn Care and increased immediate and exclusive breastfeeding practice; increased participation of women in community decision-making process on MNH issues; and active engagement of community in the monitoring and evaluation of MNH activities.

### **Recommendations**

**Rationale:** ACCESS trains Health Surveillance Assistants (HSAs) on essential and preventive MNH. HSAs are government employees. The government has said it wants to increase the number of HSAs to reach a ratio of one HSA /1000 population. ACCESS is not involved in selection or recruitment of these staff.

**ACCESS Recommendation 1:** As gender awareness is a crucial element of program design, ACCESS should ensure that it is included in the HSA trainings. For example, constraints that women face when seeking health care, such as permissions from their husbands or the distance to the health clinic should be discussed. Additionally, attention should be paid to gender-related constraints in how decisions are made at the household level about spending, transportation, women and children leaving the community, etc.

**Rationale:** Drama groups have been an effective way to communicate MNH message to the community.

**ACCESS Recommendation 2:** Drama groups should include gender equality messages and their link to health care access during their presentations.

For other insights into gender issues regarding reproductive health and family planning, please see *Appendix K – Creating a Gender Sensitive Health Facility Environment* and *Appendix L – Gender Issues to Consider in Reproductive Health and Family Planning Programs*.

### **Best Practice**

The project provides individual and group counseling through household visits and group meetings to reduce neonatal mortality and to teach both women and men how to recognize specific complications in pregnancy and childbirth as well as how to recognize when a newborn is sick. Including men in this type of training helps to make them more responsive to health-related issues in pregnancy, childbirth and the care of newborns.

### **COMMUNITY BASED FAMILY PLANNING AND HIV/AIDS SERVICES**

This project is just being rolled out. By 2010, the project will have increased the use of integrated, high-quality, accessible family planning/reproductive health (FP/RH) services by Malawian women, men and young people. Project participants will have more information about modern contraceptive methods and will be able to make informed choices about which method to use. The project has an HIV/AIDS component, which primarily addresses HIV/AIDS prevention, especially PMTCT.

To achieve these outcomes, the implementing partners are engaging in two strategies:

- Creating demand and outreach through BCC networks; and
- Defining and developing the supply and capacity of Community-Based Distribution Agents (CBDAs) and providers from health centers, dispensaries and referral hospitals in both public and private sectors.

The M&E system is tracking the following FP/RH indicators:

- Increased access to community FP/ RH services;
- Strengthened contraceptive delivery systems;
- Innovative approaches to expand contraceptive methods available to women;
- Behavior Change Communications;
- Increased demand for family planning services;
- Improved quality of family planning services.

### **Best Practice**

The involvement of women's groups, youth associations, faith-based organizations, men's groups and elderly networks such as 'Gogos' (grandmothers) in creating demand and outreach through BCC networks illustrates the type of gender sensitivity inherent in this project. Men, grandmothers and the entire community support the strategy and are building it into their social system as an integral component of meeting people's basic needs. In this way, the provision of FP/RH services will become demand driven and sustainable.

The project has recruited a Gender and Communications Specialist to ensure that gender messages and issues are addressed in all activities at all levels.

At the policy and advocacy level, the project works to change laws, practices and policies that restrict women's ability to make FP choices, and to support policies that enforce existing laws and policies that promote gender equity.

At the provider level, the project is increasing the number of female CBDAs through advocacy campaigns targeting those selecting the CBDAs. At the district and community level, all CBDAs, clinicians and supervisors are trained in gender awareness and reducing gender-based violence (GBV). Gender messages are being incorporated into BCC campaigns to raise awareness of the problem of GBV and its costs.

The project addresses women's roles in family planning and HIV prevention. The project also recognizes that women need community support to engage in safer family planning.

### ***BASIC SUPPORT FOR INSTITUTIONALIZING CHILD SURVIVAL (BASICS)***

BASICS is strengthening delivery and maximizing coverage of essential child health and nutrition interventions in eight target districts. BASICS implementation is characterized by 1) a commitment to gender-equitable development; 2) adaptation to local cultures and beliefs; 3) a focus on Malawian capacity development; and 4) transcendence of the public sector health delivery system to empower civil society, the private sector, and local government to assume responsibility and accountability for child health and nutrition.

The two objectives of this project target child survival and pediatric HIV/AIDS prevention:

- To improve the effectiveness, quality and accessibility of child health services through the development and implementation of high impact interventions that prevent and reduce illness, mortality and malnutrition among children under the age of five;
- To assist the national HIV program in its efforts to decrease HIV transmission to infants and children by scaling up PMTCT services and increasing post-partum follow up and access to pediatric HIV diagnosis, care and treatment services at facilities and in communities.

BASICS is involved in the following activities to support the improvement of child health and survival:

- Community-based prevention and selected treatment;
- Facility-based treatment and prevention;
- Support for the zonal levels to support district management;
- Improved preventive nutrition at community level.

The overarching indicators and activity areas include:

- Improved prevention and management of childhood illness, which includes availability and access to services, quality of services, and demand for services;
- Improved preventive nutrition at the community level, including skill building and reach of nutrition program;
- PMTCT and HIV/AIDS focus on, among other things, increased male and community involvement in PMTCT programs, including testing, treatment, and infant and child weaning and feeding issues and strengthened district and community provision and management of child health and nutrition promotion services and of HIV counseling and testing;
- Malaria, consisting of prevention, care seeking and treatment.

The BASICS project started in October 2007, and its activities are only in the beginning stage, with no progress data to report. However, in speaking with project staff, it is clear that gender integration is a high priority.

### **Recommendations**

**Rationale:** The M&E plan for the child survival portion of BASICS collects sex-disaggregated data on facility-based and community-based health workers, children aged 0-59 months, and newborns. Reporting activities and outputs by sex is particularly important for newborns and children because of a cultural preference for male children. Girls may not receive the same amount of care as boys, so disaggregating the data by sex yields information on how the project might be adjusted to extend girl child survival if the rate is less than boys.

**BASICS Recommendation 1:** Semi-annual analysis on collected data should be performed in order to determine if any evidence exists of preferential treatment and care of newborn boys over newborn girls.

**Rationale:** Public sector facilities in BASICS districts distribute mosquito nets to pregnant women and households that include a child under 5 years of age. In all ITN projects, anecdotal evidence suggests that the family may not be using the nets as intended.

**BASICS Recommendation 2:** BASICS should link with other malaria partners to develop a spot-check system to determine if families are using ITNs appropriately and if pregnant women and children under five do indeed sleep under the nets. The spot check should include the sex of the child/children sleeping under the net and whether there is any bias in protecting the male vs. the female child and if the pregnant woman is able to use the net, i.e if it has not been taken over by the spouse.

### **BASICS Grants Program**

As part of the BASICS project, the grants program is key to significantly improving malaria treatment and prevention behaviors. The aim of the program is to disburse malaria grants to successful community-based NGOs to scale up implementation of innovative malaria intervention programs at the community level. Sensitization campaigns on importance of ITN use and ownership, prompt treatment of fever and change of malaria drug policy, mobilizing men and women as malaria caretakers, encouraging women to go to health clinics and receive treatment, and case management, are some of the activities that will be done through NGO grantees. At the time of writing of this report (May 2008), negotiations with six NGOs were underway.

**Rationale:** New grantees should be sensitive to potential gender constraints in achieving their objectives.

**BASICS Grants Program Recommendation 1:** As part of the startup process, trainings for the grantees should be held to address gender-based constraints and possible mechanisms for reaching women with their malaria campaign, as well as to identify gender differences in monitoring their progress.

**Rationale:** Community-based NGOs may be constrained in their access to information or lessons learned in other programs.

**BASICS Grants Program Recommendation 2:** A knowledge-sharing network among grantees should be formed; monthly or quarterly meetings to discuss gender-related and other challenges and most effective ways to overcome them. Additionally, if one grantee is particularly strong in gender integration, they can provide advice, guidance, or training to others.

**Rationale:** Women are reluctant to go to health clinics for malaria treatment, often preferring traditional remedies.

**BASICS Grants Program Recommendation 3:** Grantees should work with local communities and health clinics in finding the most effective ways of encouraging women to go to the clinics for malaria treatment. These strategies may include educating the community about the effectiveness of malaria drugs compared to traditional rituals practiced locally, addressing the issue of distance, and educating women on the importance of receiving malaria treatment, particularly when they are pregnant.

**Rationale:** It has been noted that many insecticide-treated net (ITN) owners do not use them properly, and often, the fathers or men in the family sleep under the net, while women and children are left exposed to mosquito bites.

**BASICS Grants Program Recommendation 4:** Since pregnant women and children under five are at high risk of contracting malaria, the importance of women and children sleeping under the net must be a core element of malaria sensitization campaigns.

### **Best Practice**

PMTCT protects women's sexual and reproductive health rights as it protects women and their children from high risk birth practices. The project provides a critical safe strategy for HIV-positive women to have children and protect their children from being infected. The cultural pressures to bear children can produce very high-risk sexual behavior. Without PMCTC, the incidence of pediatric HIV/AIDS would increase.

Male and community involvement in post PMTCT care of children and HIV pediatric child care recognizes that women's autonomy to nurse a newborn is constrained by societal and family expectations. The project makes it easier for a woman to follow health guidelines on breast feeding because it enlists spousal and community support. For example, mother support groups meet on a monthly basis to discuss issues regarding the health of their children, nutrition, etc. Although these groups are mostly intended for pregnant women and mothers of children under the age of two, fathers are invited and frequently attend.

### **ENHANCED HIV/AIDS PREVENTION AND IMPROVED FAMILY HEALTH PROGRAM**

This project includes three major objectives:

- **HIV/AIDS Prevention Intervention** – activities target secondary school-age young people and include the following:
  - 1) *Youth Alert!* – promotes the importance of setting goals in life, identifies barriers to achieving those goals (HIV, STIs, and unintended pregnancies), and identifies ways to overcome them effectively through activities and messages that take gender into consideration by presenting balanced but separate messages to boys and girls.
  - 2) *Pilot Faith Communities Program* – these pilot activities include workshops for married couples addressing faithfulness and for youth promoting life skills so they are better able to abstain from sex, as well as trainings for faith leaders and vocational skills training for orphans and vulnerable children.
  - 3) *Promotion of Correct and Consistent Condom Use/Other Prevention* – wide range of IEC/BCC strategies to promote correct and consistent use of Chishango condoms, while ensuring their accessibility to target populations (men 25-49 years of age who engage in casual sex, especially truckers, fishermen, men in uniform and other mobile men and female prostitutes).

The goal indicator tracking progress for this part of the project is “decreased incidence of STIs and HIV Infection.” Output indicators include: increased personal risk perception of HIV/AIDS; improved access to reproductive health information for school-aged youth; and improved perception of and sustained high access to condoms. Examples of tracked performance indicators include: reduced percentage of secondary school students reporting ever having had sex and increased median age of secondary school students of first sexual encounter.

- **Malaria Prevention Intervention**

- 1) Targeted LLIN/ITN Promotion Strategy (Clinic and Community Green Nets) – the target population includes pregnant women attending ante-natal clinics; newborn children delivered in health facilities; and children at their first EPI visit if they did not receive a net at birth. LLINs are free of charge, which removes many of the economic barriers that might have blocked women from getting funds to procure even a highly subsidized net in the past.
- 2) Introduction of information about ACT Anti-Malarial Treatment in Malawi- key target groups will receive IEC materials about the new anti-malarial drugs and critical behaviors needed to ensure their proper use and dosage. These activities encourage male involvement.

Goal Indicators tracking progress for this part of the project include: reduction in malaria-related mortality for children under five; and, reduced malaria-related morbidity among pregnant women. Examples of output indicators include increased access to ITNs and increased demand for ITNs.

Selected performance indicators include: increase in the percentage of children under five who slept under a mosquito net during the previous night; increase in the percentage of pregnant women who slept under a mosquito net during the previous night; and increase in the number of treated nets sold.

- **Oral Rehydration Salts (ORS) Promotion Intervention** – this activity focuses on social marketing of Thanzi ORS, targeting mothers/primary caregivers of children under five.

The Goal Indicator tracking progress for this part of the project is “decrease in child mortality from diarrheal disease.” Output indicators include: sustained high access to ORS; and, increased informed demand for ORS among mothers/caregivers. Lastly, examples of indicators tracking performance include: increased percentage of children under five with diarrheal disease in the past two weeks who are reported by mothers/caregivers as having been treated with ORS; and, increase in total number of sachets of Thanzi sold.

This multi-faceted program based in a comprehensive communications strategy for community mobilization has experienced significant success. Gender integration is a high priority among staff and in project implementation.

### **Recommendations**

**Rationale:** The social marketing approach taken in this project targets a range of activities. In quarterly reports, there is little indication as to the sex of the person delivering and receiving the message and how this affects changes in behavior. In the ultra-sensitive environment of teen sex, it is especially important that women talk to girls and men talk to boys. It is also important that boys and girls find a culturally acceptable way to talk to each other (perhaps through the enactment of role plays or dramas) so that each understands the hazardous situation created in engaging in

premarital sex. While faith-based organizations may play a role in disseminating these messages, it is important that condemnation not be a part of the message.

**HIV/AIDS and Family Health Recommendation 1:** The implementing partner should consider the specific cultural practices that lead to adolescents engaging in sex (such as initiation) and work with community members to reorient this process into something more acceptable in today's environment. This partner should learn the lessons of the PSSP project (discussed under Education above) to mobilize the *Gule Wankulu* to work as a positive force in the prevention of HIV/AIDS infection and STIs by preventing, rather than encouraging, early sexual encounters. Where appropriate, faith-based organizations should be brought into the process to develop and implement a strategy for changing hazardous behavior among young people.

**Rationale:** There are a limited number of Malawian professionals with gender training or expertise, hence making it very difficult to hire local experts.

**HIV/AIDS and Family Health Recommendation 2:** The project should hire a short-term gender and health consultant to train current staff interested in gender issues. This would prove beneficial not only for the project, but would build local capacity and create more gender experts.

**Rationale:** It is not clear, due to the cultural preference for boys, whether mothers (for the most part) address dehydration and other childhood illnesses in the same manner for girls and boys.

**HIV/AIDS and Family Health Recommendation 3:** A case study should be done in order to determine whether boys receive preferential treatment to girls in receiving ORS. This case study should include monitoring treatment of sick and dehydrated children in a single village, conducting interviews with their care-takers, and local health clinics. The results of the study could potentially influence PSI's marketing strategies of ORS.

### **Best Practice**

The social marketing strategy utilized includes the evidence-based “*usiku uliwonse chaka chilichonse*” (“*each night, all year round*”) communication campaign theme. This type of approach has every possibility of reaching community members, especially women.

### **BRIDGE**

BRIDGE is a multi-faceted HIV/AIDS prevention program designed to change the way Malawians think, speak and act about HIV/AIDS. This behavior change intervention program: 1) engages Malawians to move from knowledge to preventive action; 2) assists stakeholders to move from strategy to coordinated implementation; and 3) helps communities move from a hopeless present to a more hopeful future. By the end of the program, Malawians will be able to openly discuss HIV/AIDS with their partners, children and peers; have a sense of hope and efficacy; and have skills to act. Underpinning this action is an increased technical capacity among Malawians to design, implement and monitor effective behavior change strategies and interventions. The project was launched in 2003.

BRIDGE includes several components:

- Mass Media
  - *Nditha!* Media Campaign and *Nditha!* Community Outreach
  - People Living with AIDS Radio Diaries
- Capacity Building
  - Strengthening community groups
  - MANASO “Center of Excellence”
- Community Mobilization
  - Hope Kit Updates

- African Transformation: The way forward
- Youth Activities
- *Tisankhenji* and Engaging Very Young Adolescent Girls
- PSI/Youth Alert!
- Youth Resources and Materials Development: Nditha! Sparks
- Girls' Congress
- Community Drama Skills with Nanzikambe

BRIDGE Intermediate Results Indicators include:

- 30% increase in the number of adult men and women that score above 75% on a knowledge test about HIV prevention and transmission;
- 10% increase in youth who “definitely can” remain abstinent until they are married;
- 20% increase in youth who are “generally” or “strongly” confident that they can use a condom every time they have sex;
- 10% increase in married adults who “definitely can” have sex only with their spouse;
- 20% increase in adults who are confident they can talk about the use of condoms with their sexual partner.

Sexual Practices Intermediate Results Indicators include:

- 6.5% increase in median age at first sex (from 15 to 16);
- 2% increase in youth whose last reported sex was with a regular partner;
- 1% increase in adults whose last reported sex was with a regular partner;
- 15% increase in condom use at last sex by unmarried youth;
- 16% increase in condom use at last sex by adults;
- 20% increase in condom use by adults with non-regular partners.

BRIDGE’s design is geared to improve gender equality. It builds its approach around an inherent recognition of gender dynamics that fuel the HIV/AIDS pandemic (e.g., social expectations of masculinity which drive men to engage in high risk sexual behaviors).

### **Recommendations**

**Rationale:** Women have limited space in the context of culture and gender relations to exercise their self-efficacy. It is important for communication to engage the society holistically and challenge the social norms that create women’s vulnerability to HIV/AIDS.

**BRIDGE Recommendation 1:** A strategy that may be implemented in addition to *NDITHA!* is “Communication for Social Change,” a process utilized in the President’s Emergency Plan for AIDS Relief (PEPFAR) girls’ vulnerability project discussed below (see *Appendix M – Communication for Social Change in HIV/AIDS Prevention*).

**Rationale:** Women are in a high-risk category for contracting HIV/AIDS by virtue of their status as women. Women are poorer than men and they are socially and culturally disempowered. Married women are also in a high risk category because of the extra-marital sexual relations of their husbands.

**BRIDGE Recommendation 2:** BRIDGE should expand its target audience from just girls to include women because of their high vulnerability to infection.

### **Best Practice**

The self-efficacy agenda followed in *NDITHA!* has the capability of convincing women and men to believe in their innate capabilities to fight HIV/AIDS and to be empowered to do something about it.

Therefore one big achievement of BRIDGE is found in its design: it has created space for men and women to believe in themselves and come up with strategic choices for a more hopeful future without HIV/AIDS.

### **PEPFAR GENDER INITIATIVE ON GIRLS' VULNERABILITY TO HIV**

This initiative is being rolled out in Botswana, Malawi and Mozambique. At a conceptual level the program shifts the focus from the individual-as-risk-taker, which places the onus on the individual, to the contextual factors that render girls vulnerable, which are systemic and foundational. It recognizes that girls are vulnerable to HIV in large part because the social systems in which they live have failed to protect them.

Interventions will utilize a social ecological framework,<sup>8</sup> i.e., considering the individuals as nested or embedded within a system of socio-cultural relationships—families, social networks, communities, nations—that are influenced by and influence their physical environments. By taking the onus off individual and placing it on the communities, it is anticipated that the following dual results will be achieved: 1) Reduce vulnerability among young girls at highest risk, and 2) Build capacity in local implementing organizations in program design/ implementation and monitoring/evaluation through on-the-job training, eLearning and other mechanisms.

Illustrative output indicators include:

- Number of communities in which the integrated model is implemented;
- Number of communities with multi-sectoral services offered to vulnerable girls;
- Number of structural, community, peer, and individual-level activities implemented;
- Number of vulnerable girls participating in comprehensive programs;
- Number of community members participating in activities to create a safer, more supportive environment for vulnerable girls.

This project is inherently gender mainstreamed. It recognizes the critical nexus between gender, youth and HIV/AIDS. It is strategically conceptualized to deal with this intersection.

### **Best Practice**

The concept of this project is cutting edge in that it recognizes that women's and girls' autonomy and decision-making with regard to their own bodies are imbedded in limitations imposed by the societies in which they live.

As the project is just being rolled out, no further gender-based commentary is possible at this time.

### **PACT MALAWI: HIV PREVENTION, CARE AND SUPPORT GRANTS**

In support of GOM's second National HIV/AIDS Action Framework 2005-2009 and the USG's Emergency Plan strategy and targets, PACT's objectives are:

- To prevent HIV transmission through multiple activities, including approaches that promote abstinence, faithfulness, partner reduction and appropriate use of condoms, other prevention activities including positive prevention for people living with HIV and services aimed at PMTCT;
- To promote and increase access to HIV testing and counseling services;
- To provide comprehensive quality care and support services for people living with HIV;

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<sup>8</sup> Kincaid, D. L., Figueroa, M. E., Kincaid, D. L., Storey, D.; Underwood, C. (2007). A social ecology model of communication, behavior change, and behavior maintenance. Working paper. Center for Communication Programs, Johns Hopkins Bloomberg School of Public Health.

- To provide quality comprehensive and compassionate care for support services for orphans and other vulnerable children.

The program goal is: Contribute to scale up a comprehensive and quality civil society response to HIV and AIDS in Malawi. Results indicators fall into three categories:

- **Quality of services improved** - through regular monitoring supervision of partners and services conducted; support of partners in trainings for care givers/ volunteers to expand PMTCT, Prevention, HIV care services and Injection safety; development of appropriate evidence based messages to promote healthy behaviors, etc.;
- **Access to services increased** includes: coverage of NGOs providing prevention, care and support services; providing support to partners with outreach campaigns and with peer to peer model in communicating HIV and AIDS messages;
- **Civil society capacity strengthened** – results are measured through the following selected activities: training of partners in Financial Grants management; M & E; stigma and Discrimination reduction, HIV-related policy development, HIV-related institutional capacity building; strategic planning and leadership; and community resource mobilization; provision of technical assistance and mentoring; provision of funding for programs, facilities and materials in a prompt manner.

### **Recommendations**

**Rationale:** Thorough understanding of gender roles, constraints and relationships is a crucial part of becoming a strong civil society organization.

**PACT Recommendation 1:** Training in gender analysis should be one of the categories under the above indicator “Civil Society Capacity Strengthened”.

**Rationale:** It is not clear what type of guidelines PACT provides to its potential grantees in developing gender-responsive proposals.

**PACT Recommendation 1:** PACT proposal guidelines should require a description of how gender will be integrated into each relevant part of the proposal submitted, including the M&E system. Where a gender analysis is needed, PACT could require a potential grantee to conduct the analysis as part of the proposal requirements. PACT also should develop gender-related criteria for assessing proposals and awarding grants.

**Rationale:** Since PACT will be awarding a sizeable number of grants to community-based organizations (15 in 2007 and 15 in 2008), the staff reviewing proposals and providing capacity-building services to these organizations may benefit from additional understanding of gender issues in order to advise them on integrating gender in their proposals, implementing strategies, and M&E plans.

**PACT Recommendation 2:** Training on gender integration in projects should be provided to PACT field staff.

### **TUBERCULOSIS CONTROL ASSISTANCE PROGRAM (TBCAP)**

TBCAP, a multi-country project, works on TB control via a model of comprehensive integrated TB and HIV care, ensuring that all levels of the health care system (individuals, families, and communities) are receiving necessary care/information needed for healthy lives. The program seeks to increase access to TB diagnosis and treatment through the decentralization of laboratory services to selected health centers and to improve the role of public providers in preventing, diagnosing, and treating TB.

It is important to note that TBCAP works closely with the National TB program in tuberculosis control in Malawi. The National TB program contributes to the goal and objectives of the GOM MOH five-year TB strategic plan, which includes strengthening of Directly Observed Therapy (DOT) programs by increasing case detection and treatment success, including the prevention and control of multi-drug resistance TB and dually infected individuals; improving political commitment to TB control and management capacity, particularly at the decentralized levels; strengthening and expanding public/private DOTS partnerships; improving collaboration between TB and HIV programs; improving human institutional capacity; and engaging communities in TB control. The National TB program has a gender focal point – a program officer who is responsible for rolling out gender within the institution – although she is not trained in addressing gender concerns.

**Rationale:** One of TBCAP’s five key strategies is to “provide Global Leadership to all TB programs, encouraging them to include gender considerations and gender equity in their program planning and evaluation systems.” It is not clear how, if at all, this key strategy is being implemented in Malawi TBCAP program.

**TBCAP Recommendation 1:** The project should hire a gender specialist to provide leadership and plan of action for integrating gender into all project activities; to liaise with the overarching TBCAP body on the matters relating to this key strategy; and to work together with the National TB program gender specialist.

**Rationale:** There is a lack of sex-disaggregated analysis regarding contracting TB. In the past more women than men suffered from TB, but now the numbers are nearly equal. This shift in numbers has not been thoroughly analyzed.

**TBCAP Recommendation 2:** TBCAP should, in collaboration with the National TB program, take the lead in analyzing TB infection by sex and undertake a study of whether sex has any effect on contracting this disease.

**Rationale:** TBCAP uses ex-TB patients to deliver health talks at health centers and community gatherings. These individuals have previously suffered from TB and are usually well known in the community. They give testimony of their experience as a TB Patient and discuss signs and symptoms of TB, diagnosis, treatment and motivations for continuing the treatment, as well as advice on these issues. ex-TB patients' contributions during community sensitization meetings have a positive impact on the audience.

**TBCAP Recommendation 3:** It is unclear whether these ex-TB patients are male and female. It is advisable that both men and women be used in this capacity, possibly together, so that their messages can resonate with both men and women.

### **USAID/Malawi HPN Performance Monitoring Plan**

Selected indicators used to track progress in the HPN area include the following:

#### Relevant Tuberculosis Indicators

- Percent of all registered TB patients who are tested for HIV through USG-supported programs;
- Case notification rate in new sputum smear positive pulmonary TB cases in USG-supported programs;
- Number of people trained in DOTS with USG support;
- Existence of a multi-drug resistance for TB at the national level;
- Number of TB cases reported to National TB Program by USG-assisted non-MOH sector.

#### Relevant Malaria Indicators

- Number of houses sprayed with insecticide with USG support;
- Number of people reached through community outreach activities that promote the correct and consistent use of ITNs;
- Number of people reached through community outreach that promotes the treatment of malaria according to national guidelines;
- Number of people trained in malaria treatment or prevention with USG funds;
- Number of ITNs distributed that were purchased or subsidized with USG support;
- Number of Artemisin-based Combination Treatments (ACTs) purchased and distributed through USG support.

#### Relevant Maternal and Child Health Indicators

- Number of children reached by USG-supported nutrition;
- Number of antenatal care visits by skilled providers from USG-assisted facilities;
- Number of women receiving active management of the third stage of labor through USG-supported programs;
- Number of newborns receiving essential newborn care through USG-supported programs;
- Number of cases of child pneumonia treated with antibiotics by trained facility or community health workers in USG-supported programs;
- Number of USG-assisted service delivery points experiencing stock-outs of specific tracer drugs;
- Number of improvements to laws, policies, regulations, or guidelines related to improved access to and use of health services drafted with USG support;
- Number of information gathering or research activities conducted by USG support (Avian flu, MCH, FP);
- Number of people trained in child health and nutrition through USG-supported health area programs.

#### Relevant Family Planning and Reproductive Health Indicators

- Number of people trained in FP/RH with USG funds;
- Number of new approaches successfully introduced through USG-supported programs;
- Number of counseling visits for FP/RH as a result of USG assistance;
- Number of USG program interventions providing services, counseling, and/or community-based awareness activities intended to respond to and/pr reduce rates of gender-based violence.

#### Relevant HIV/AIDS Indicators

- Number of outlets providing, individuals/pregnant women reached with and health workers trained in PMTCT services;
- Number of individuals reached with, individuals trained in HIV/AIDS prevention through ABC and other prevention methods;
- Number of individuals trained in medical injection safety;
- Number of outlets providing, individuals reached with and individuals trained in Palliative Care including Community Home Based Care;
- Number of Orphans and Vulnerable Children served with and OVC care givers trained in OVC Care and Support services;
- Number of outlets providing, individuals reached with and individuals trained in HIV/AIDS Counseling and testing.

### **Recommendations**

**Rationale:** The majority of indicators listed above do not ask for data disaggregated by sex.

**HPN PMP Recommendation 1:** Indicators should request sex-disaggregated data. For example, having data on whether more boys or girls were reached by USG-supported nutrition programs may lead to a discovery that mothers feed boys more often and with greater care. Analysis of this data could then lead to a community-wide campaign about the importance of equally feeding boys and girls. Existence of a multi-drug resistance for TB at the national level, is another example why sex disaggregated data should be used. If the data suggest that men or women are more resistant to TB, a study could be conducted to account for these differences and a plan of action put forth to address them.

**Rationale:** One maternal and child health indicator - Number of improvements to laws, policies, regulations, or guidelines related to improved access to and use of health services drafted with USG support should be expanded.

**HPN PMP Recommendation 2:** This indicator should expand to address not only numbers of improvements on a policy level, but also how fast they are being implemented. As is the case in many areas of the world, a change in law or policy does not necessarily immediately take effect. Therefore, just because a progressive change in a law or policy has been made, does not mean that people will start benefiting from it right away. It is important to monitor rates of changes as they may give away a bias towards one sex over the other. For example, do changes dealing specifically with women (i.e. maternal health) take more or less time to be implemented than those including both sexes?

## **IV. RECOMMENDATIONS TOWARD A GENDER PLAN OF ACTION**

This final section provides recommendations to USAID/Malawi to contribute to formulation and implementation of a mission Gender Plan of Action. USAID's approach to gender integration is built around the project cycle and attention to gender concerns in the strategy, project design, procurement and implementation, and monitoring and evaluation. The fact that the Mission has requested this assessment speaks to its commitment to take account of gender issues in all aspects of its program. At the project level, gender considerations are addressed more directly in some projects than in others. The Chia Lagoon Watershed Project, BASICS and ACCESS seem to have a particularly strong understanding of how to integrate gender into their activities. Our recommendations in the preceding pages are meant to provide guidance to project staff in starting or refining gender integration processes in their activities. At the mission level, two sets of recommendations are offered to enhance the mission's capacity to address gender concerns and to take the lead among other donors and implementing agencies to integrate gender in all projects and programs.

### **USAID/Malawi Structural Recommendations**

Various options may be considered to strengthen the management structure for implementing the Gender Plan of Action.

- Hire a senior-level gender specialist to assist the Mission in all of its procurements, M&E, and evaluations (if a full-time person cannot be hired, then a consultant to review activities and provide input at stated intervals could be contracted) or identify a senior individual on the country team who can act as the gender focal point to do the same type of work as noted in the first bullet above.
- Identify a gender focal point on each programmatic team. These individuals can form a small working/consultative group to tackle or discuss gender-related issues as they arise in the mission or on a regularly set schedule (for instance, in preparation for or as follow-up to

SOPIRs and other such reviews), as well as assist the senior level gender specialist or senior level individual by providing team-level input, advice and guidance. They can also be the point person to help disseminate key messages or decisions coming out of the ongoing work being done or guidance being developed in the area of gender for the mission to each of the teams.

- Provide intensive gender training to all teams so that each team has the capacity to integrate gender under each of its FOs/SOs.

Further coordination and cooperation with GOM ministries and other donors can be fostered by the following actions:

- Join the DAGG to lead and/or participate in a donor/GOM joint dialogue on how to meet gender goals in each ministry, programs and projects;
- Work directly with line ministries and the MoWCD to prioritize GOM and USAID/Malawi mainstreaming and/or integration of gender in all program activities, thus setting an example of how donors can work collaboratively in support of gender integration in line ministries.

For more details, please see *Appendix N – Malawi Gender Networks in Development*.

### **Project Cycle Recommendations**

In USAID, two broad questions are used as guides in identifying gender issues to be addressed in programming:

- How do gender relations affect on the achievement of sustainable results?
- How do the proposed results affect the relative status of men and women?

Please see *Appendix O – General Questions for Mainstreaming Gender throughout the Project Cycle*.

### **Strategy and Project Design**

- In the Strategy Statement and the Operational Plan the Mission addresses gender issues where they exist and discusses their implications for programming.
- In conceptualizing a new project, conduct a gender analysis. Examine key result areas in different locations where the project will operate and take account of cultural differences.
- In designing a new project, determine appropriate programmatic responses to gender issues identified by the analysis and develop indicators to track gender-specific outcomes.

### **Procurement**

- USAID procurement policy for contract solicitations states that the Contracting Officer should confirm that a Request for Proposals includes a statement outlining gender issues in the activities, or a statement of rationale for not specifying gender issues as part of the activity approval.
- Likewise, USAID should include a statement outlining gender issues or a rationale for not including such a statement in the competitive Requests for Applications or Annual Program Statements. The Approving Official determines the appropriateness of the statement or the rationale as part of the pre-obligation requirements.
- For solicitations for both contracts and grants/annual program statements, the solicitation document should include appropriately weighted technical review criteria addressing the two key questions cited above. Criteria also may include evidence of gender mainstreaming in the organizational structure and personnel, past experience in gender analysis and implementation, as well as the quality of the discussion of the steps to address gender issues in project implementation.

**Implementation**

- Require that project staff be provided orientation in gender integration and/or demonstrate existing expertise in gender analysis and implementation.
- Provide gender orientation workshops to contract and grantee staff to familiarize them with gender issues in the project and to ensure compliance with gender requirements in reporting.
- Each partner organization should identify a gender focal person on its staff to provide guidance on and be responsible for compliance with the steps specified in the work plan for addressing gender issues.

**Monitoring and Evaluation**

- Quantitative person-level indicators in the project PMP should be disaggregated by sex when appropriate and included in the monthly/quarterly project monitoring reports.
- In the monitoring reports, partners should analyze and explain significant differences by sex in indicators and develop plans for actions to mitigate outcomes that increase inequality.
- In project evaluation, examine and discuss project results in terms of the two key gender questions: impact on project results, and impact on gender equality.

Bibliography used in this gender assessment can be found in *Appendix P*.

## **APPENDIX A: USAID/MALAWI GENDER ASSESSMENT SCOPE OF WORK (SOW)**

### **I. Purpose**

The purpose of the gender assessment is to identify key gender issues, gaps, and constraints that need to be addressed in proposed and existing USAID interventions in Malawi. In addition to the mandatory nature of the assessment USAID/Malawi practices a comprehensive approach to development in which matters such as gender are not only considered, but fully understood and incorporated across its functional objectives. A gender assessment and action plan—outlining specific, prioritized points of entry to address gender issues in projects and programs—supports this obligation and thus enhances USAID/Malawi’s impact across all sectors while fostering a more gender fair environment in Malawi.

### **II. Background**

The Government of Malawi (GOM) implemented the National Gender Policy of 2000-2005 to apply gender priorities at all levels of planning and implementation of development programs in Malawi. The GOM acknowledges that strong traditional and cultural forces exist that cause disparities between men and women in actual power sharing, participation and control over decision-making process, that impinge on equal participation of both men and women in development endeavors.

The GOM has emphasized gender mainstreaming and recognizes the need to address gender imbalances as an integral part of the Malawi Growth and Development Strategy for 2006-2011. The following bullets outline the key actions in addressing these gender imbalances:

- To enhance and support national efforts towards poverty eradication through equal participation in and benefit from the national development process by women, men, girls and boys.
- To provide all key actors in national development such as policy makers, the private sector, nongovernmental organization (NGOs), and donors, reference guidelines for recognizing and addressing gender concerns, make informed development policy decisions, and ensure that gender perspectives are mainstreamed in all policies and programs to benefit both men and women equitably.
- To review and revise development policies, programs and laws to make them gender responsive, so as to ensure the participation of both women and men at all stages of the development process.
- To promote and facilitate equal access to and control over productive resources, services and opportunities.
- To redress imbalances that arise from existing gender inequalities including traditional, cultural and social attitudes that hinder equal participation of women and men in development and put women in subordinate positions. To promote the recognition and value of women’s multiple roles and responsibilities, their contribution towards national development and as beneficiaries of the development process.
- To promote collection and use of gender disaggregated data in the planning and implementation of development programs.

- To clarify and establish an institutional framework with the mandate to initiate, coordination, implement, monitor and evaluate gender responsive national plans and programs.

These objectives outlined by the GOM compliment USAID's own drive towards a focus on gender in development. In this spirit, USAID/Malawi will conduct a gender assessment as part of the procurement planning and awards process.

Carrying out a gender assessment of mission programs prior to beginning a new procurement process will help to guide the procurement design and formulation and insure gender integration into the final product. Furthermore, the action plan will outline prioritized points of entry to be integrated into existing programs.

### III. Scope of Work

#### Tasks

The four tasks related to this Scope of Work are:

- 1) Review key gender issues and gender-based constraints in Malawi;
- 2) Assess attention to gender in current Mission programs;
  - a. Identify specific project and portfolio achievements.
  - b. Identify gaps and constraints in the project portfolios.
- 3) Assess the institutional context supporting integration of gender issues into both the Mission and the country programs
  - a. Include a mapping of gender programs in the country and what other donors are doing throughout Malawi.
  - b. Analyze Malawi Gender Policy and its implementation across sector Ministries.
- 4) Provide key recommendations by functional objective for a gender action plan that identifies and prioritizes how the USAID mission can support gender mainstreaming into its existing and proposed programs.
  - a. Identify entry-points for incorporation of gender in carry-over activities and potential new programs; this includes identifying constraints and opportunities for addressing gender issues relevant to each Functional Objective.
  - b. Identify sources of sex-disaggregated data (and possibly other variables as appropriate e.g., age, income, ethnicity) for developing gender-appropriate indicators and evaluation criteria, preparing for Portfolio Reviews, the annual report and other requirements.

### IV. Methodology

I. Comprehensive review and analysis of pertinent literature and documents, including, but not limited to, materials suggested by the mission and local gender experts, including the following documents:

- Country Strategic Plan, Gender Analysis, Activity Approval Documents, Annual Reports, Portfolio Reviews, Performance Management Plans, Operational Plans, and other USAID-specific documents as required.
- Mission mechanisms/programs/elements by sector:
  - **Health Population and Nutrition (HPN)** – Analyze and review gender application in existing programs and how new mechanisms can further address gender.
  - **Education and Training (EDU)** – Analyze and review gender issues and application in the following: Interactive Radio Instruction Program; Primary School Support Program; Malawi Teacher Training Activity; Education Management Information System and education bursaries.
  - **Sustainable Economic Growth (SEG)** – Review and analysis of gender issues in Food for Peace, the I-Life Consortium, and Small Scale Irrigation.

- **Democracy and Governance (DG)** Review and analyze gender issues and application in the Democracy and Governance sector and the Millennium Challenge Corporation program.
  - Studies and assessments conducted by donors, NGOs, national governments, regional organizations, and the academic community.
  - Demographic Health Survey conducted in Malawi in 2004.
  - Recent literature that addresses gender issues in specific sectors and areas of strategic interest to Malawi (e.g., food security, housing and water resources management, health, democracy and governance, education, anti-corruption, health and HIV/AIDS).
  - Global Fund technical application – look specifically at round seven and its implications to health programs
2. Meetings and discussions with USAID/Malawi SO teams and other USAID/Malawi staff involved in developing the Strategic Plan. These shall include where possible:
- Entry briefings with the Front Office, the Program and Project Development Office, all SO Team Leaders, and the Strategic Information Officer for USG;
  - A preliminary briefing session for USAID/Malawi staff on USAID approach to gender (workshop);
  - Meetings with SO teams on specific sectors and areas of interest, to identify possible links to gender issues in each proposed SO and determine whether these issues are adequately considered; to identify possible entry points for the incorporation of gender considerations into ongoing (as appropriate) and future activities, and to verify whether gender considerations are adequately treated in the USAID/Malawi strategy;
  - A meeting with germane/relevant USAID/Malawi partners to present how USAID/Malawi addresses gender in its programs, solicit their input on key issues related to gender and identify what data or other resources they need to integrate gender into their programs;
  - A presentation of the draft gender assessment and action plan to obtain feedback from USAID/Malawi staff, and,
  - Exit briefings with the Front Office, the Program and Project Development Office, the Team Leader of HPN, and the Strategic Information Officer for USG.
3. Interview selected key external stakeholders and implementing partners in the field involved in current and proposed programs, including local gender expert resource groups about challenges, successes, and potential for improving attention to and integration of gender into USAID/Malawi programs.

## V. Deliverables

Drawing on data from field visits, interviews and secondary sources, there are six deliverables expected from this SOW.

1. **Fieldwork Report:** A list of sites/organizations/institutions visited and people interviewed, findings and recommendations shall be submitted to the Mission upon completion of the fieldwork (one electronic copy and two hard copies). This report may also be included as an annex to the assessment.
2. **Gender Assessment of USAID/Malawi:** A gender assessment of Malawi will be completed according to a schedule negotiated with the Mission (one electronic copy and three hard copies of each document). The Mission shall provide any additional written comments electronically within 10 working days of receipt of the revised drafts.
3. **Action Plan to Integrate Gender Assessment Findings into USAID/Malawi Programs:** The Final Gender Assessment and Action Plan (one electronic copy and two hard copies of each

document) will be submitted to the Mission within 7 working days after receiving comments on the revised draft from the Mission. The Gender Assessment must include entry points in new and old procurements as well as actionable key steps that include the what, who, and when for each sector (i.e., checklist/guidelines for incorporating gender issues in site visits). These identified steps may be further divided into short and long term items.

4. **Internal Gender Workshop:** Promote awareness of, and build skills in, addressing the gender issues facing Malawi. In particular, action oriented exercises should address how to integrate gender programmatically as well as within the culture of the Mission itself.
5. **External Stakeholders Meeting:** Promote awareness of, and build skills in, addressing the gender issues facing Malawi. Share proposals of entry points where gender challenges can be addressed in the field.

In addition to immediate utilization at the Mission, these documents may also be the basis for further technical assistance provided by USAID/Washington.

#### **VI. Estimated Level of Effort**

The estimated level of effort is 78 days for the team leader (international gender expert) and 2 local consultants. This time includes preparation, days spent in the field in Malawi collecting data, and days writing and revising documents.

#### **VII. Estimated Performance Period**

The overall performance period is February 22, 2008 through May 9, 2008. It is estimated that the final assessment and action plan incorporating Mission comments will be completed and submitted by May 9, 2008.

#### **VIII. Team Qualifications**

The team should demonstrate a firm understanding of USAID procedures and the Malawian gender context. Other skills necessary include:

- Previous experience with gender assessments and a proven track record in the field of gender
- Background and familiarity in health or a related social sector/field required
- Bachelors Degree required; Masters in related field preferred
- Strong interpersonal communication and excellent oral communication and writing skills (English required)
- Computer literacy in Microsoft Word, Excel, and PowerPoint.

#### **IX. Budget & Logistics**

A comprehensive budget should be submitted for review and approval by the Mission. Provision of office space, computers and all other administrative materials will be the responsibility of the consultancy team. Transportation needs to the field, etc, must be organized by the team as well. Mission vehicles may only be used if and when team members are accompanied by an Activity Manager or Cognizant Technical Officer (CTO) from USAID/Malawi during site visits to partners and/or projects.

#### **ANNEX A: List of key stakeholders to be consulted**

**Other USG departments:** Peace Corps, PEPFAR Coordinator (State), CDC, DOD

**USAID Teams:** HPN, Education, SEG, DG, Front Office/PDA

**Key Ministries:** Ministries of Health, Education, Agriculture and Women

USAID Implementing partners under each team

NAC

Civil Society/ NGOs that have a focus on gender issues

Relevant Private Sector stakeholders  
**Other Donors:** UNICEF, DFID, UNFPA

**APPENDIX B: MEETINGS HELD**

<b>DATE</b>	<b>TIME</b>	<b>VENUE</b>	<b>PERSONS MET</b>	<b>PURPOSE</b>
<b>March 4</b>	9:00 a.m.	USAID	Alisa Cameron, Health Team Leader; Ndasowa Chitule, HIV/AIDS Specialist	Go over SOW; discuss reasons for Gender Assessment; provide overview of USAID programs
	10:00 a.m.	USAID	1) Lilly Banda-Maliro, Deputy Team Leader; 2) Aly Cameron, Team Leader; 3) Catherinee Chipfazi, Child Health Specialist 4) Kate Wolf, Senior Malaria Advisor; 5) Ndasowa Chitule, HIV/AIDS Specialist 6) Humphreys T. Shumba, HIV/AIDS specialist 7) Matt Barnhart, HIV/AIDS Team Leader	Meet HPN Team; understand different projects and programs within HPN
	1:15 p.m.	USAID	Aly Cameron and Ndasowa Chitule	Go over deliverables; begin discussing feedback sessions during last week
	2:00 p.m.	USAID	Richard Kimball, Acting Director and General Development Officer	Official Welcome; discussion of changes since 2006; impact on USAID programs
	3:00 p.m.	USAID	1) Marisol Perez, Team Leader; 2) Ramsey Sosola, Program Management Specialist 3) Florence Nkosi, Program Management Assistant	Meet Education Team; understand different projects and programs within Education
<b>March 5</b>	9:00 a.m.	USAID	1) Mark Visocky, Team Leader 2) Martin B. W. Banda, Program Development Specialist/Agriculture Specialist 3) Patricia Ziwa, Program Management Assistant	Meet Sustainable Economic Growth Team; understand different projects and programs within SEG
	1:30 p.m.	USAID	1) Catherine Brokenshire-Scott, Strategic Information Liaison Advisor 2) Archanjel Chikunda, MIS Specialist	Understand PEPFAR and other program indicators; discussion of how to get behind the numbers
<b>March 6</b>	9:00 a.m.	USAID	1) Paul Kaiser, Team	Meet Democracy and

			Leader 2) Stephen R. Mwale, Program Management Specialist, MCC	Governance Team; understand different projects and programs within D&G and MCC
<b>March 7</b> Seodi White	8:30 a.m.	MSH	1) Rudi Thetard, COP, Basics, MSH 2) Deliwe Matema, Family Planning Technical Advisor 3) Mwate Chintu, Community Health and Nutrition Advisor	Discuss BASICS programs
	10:30 a.m.	Johns Hopkins, School of Public Health	1) Glory Mkandawire, COP, BRIDGE 2) Alirafe Kasiya, Country Manager, Girls Vulnerability Project 3) Jane Brown, Senior Program Officer, JHSPH	Discuss BRIDGE project
	1:30	PACT	1) William Luca, Finance & Admin (Acting COP) 2) Brodex Kathyobi, Senior Grants Manager	Discuss PACT projects
	3:30	TB Secretariat	Felix Salaniponi, Professor, Health Care Management, Director of National TB Control Programme	Discuss National TB Program
	8:30 a.m.	MSH	As above for Seodi White Dr. Augustine Kamlongere, Director of Planning	As above for Seodi White Discuss MoEST current activities and future directions in support of the girl child
Adarck Chidumu Nancy Horn	8:00 a.m.	MOE	Mamadi Yilla, PEPFAR Coordinator	Discuss overview of PEPFAR programs and need for gender guidance
	11:00 a.m.	USAID		
	2:30 p.m.	FAWEMA	1) Esther Mswoya, National Coordinator 2) Dan Kitto, M&E Officer 3) Arnold Chikuse, Accountant	Discuss the many roles FAWEMA plays in enrolling and supporting the girl child in school until completion
<b>March 10</b> Seodi White	1:30	Casals & Associates	Thusitra Pilapihya, COP	Discuss programs under the anti-corruption project

Ardack Chidume	8:00	I-LIFE	As per Nancy Horn	
	2:00	JHPIEGO	Abigail Kelly, Country Director	Discuss ACCESS project
Nancy Horn	8:00	I-LIFE	Christina Hansen, Learning and Communication	Travel to Lilongwe West project; conduct gender interviews with community members
	1:30	Total Land Care	1) Richard Museka, Project Manager 2) Vincent Kamwanya, Fisheries & Aquaculture	Discuss Chia Lagoon Watershed Project
	3:30	Ministry of Agriculture	Jeffrey Ruhinga, Controller of Agriculture, Extension & Technical Services	Discuss MoA focus on gender in agriculture; USAID future focus on gender
<b>March 11</b> Seodi White	8:30	Ministry of Planning & Economic Development	Cliff Chinda, Director of Development	Discuss partnership with USAID under the Millennium Challenge Corporation
	10:30	African Institute of Corporate Citizenship	Daisy Kambilame, Country Manager	Discuss project on anti-corruption in corporate sector
	1:00	Ministry of Health, HIV/AIDS Dept.	Dr. Kelita Kamito	Discuss partnership with USAID on PMTCt
	2:00		As per Nancy Horn listing	
Adarck Chidumu	8:00	Ministry of Health, Reproductive Unit	Fannie Kachale, Acting Deputy Director	Discuss RH unit
	10:00	Ministry of Health, Malaria Control Program	Dr. Kabuluzi, Director of Preventive Services/ Malaria	Prevention of Malaria among pregnant women
	2:00		As per Nancy Horn listing	
Nancy Horn	8:00	PSSP Project,	1) Cassandra Jessee, Deputy COP 2) Ernest Pemba,	Discussion of gender

	2:00	Dowa  Ministry of Women & Child Development	Community Mobilization, CRECCOR 3) Sophie Mhoni, Teacher Professional Development (Mwai) 4) Nick Shawa, JM&E  1) Mr. Msefula, Director of Women's Affairs 2) Harry Gama, Assistant Director of Women's Affairs	aspects of each facet of PSSP project; meeting at primary school with head teacher, 12 chiefs, 11 members of SMC, and 11 teachers re gender issues at school and discussion of enrollment  Discuss new draft gender policy; relationships with other ministries; various guidelines; advice to USAID on gender mainstreaming
<b>March 12</b> Adarck Chidumu	8:30	USAID	Meet with HPN Team	Discuss different aspects of gender in programming
<b>March 13</b> Adarck Chidumu	9:00	USAID	1) Aly Cameron, HPN 2) Ndsowa Chitule	Discuss stakeholders' meeting and feedback workshop with USAID staff
	11:00	Cresta Hotel	Andrew Miller, PSI Director of Communications	Discuss PSI projects
Nancy Horn	9:00	USAID	As per Adarck Chidumu above	
<b>March 14</b> Nancy Horn	8:00	UNFPA	Veronica Njikho, Gender Coordinator	Discuss structure of collaborators to mainstream gender into projects and programs; discuss M&E Matrix focus on gender; discuss UN Agency gender focus, Development Assistance Group on Gender (DAGG), and NGO Gender Network
	3:00	Malawi Human Rights Resource Center	Emma Kaliya, Chairperson	Discuss how NGO members of the network are addressing gender in their programs

<b>March 17</b>	9:00	Old Mutual PAS Center	24 Stakeholders representing MSH, JHUCCP, CARE, CRS/I- LIFE, USAID/M, ACCESS, Land O'Lakes, Project Concern, PSSP:SFP, AICC:BAAC, PACT	Hold stakeholder skill building workshop
<b>March 18</b>	8:30	Old Mutual PAS Center	USAID SO Team Leaders and Staff	Hold skill building and feedback workshop
Nancy Horn	3:00	Cresta Hotel	Gretchen Villages, Country Manager, Land O' Lakes; Derek Mullen, Project Manager, C-FISH	Discuss Malawi Dairy Development and C-FISH projects under SEG
<b>March 19</b>	4:00	USAID	Aly Cameron	Final debriefing before departure of team members March 20

## APPENDIX C: DRAFT RNGP ON GOVERNANCE AND HUMAN RIGHTS

### 3.5 POLICY THEME 5: GOVERNANCE AND HUMAN RIGHTS

#### 3.5.1 Policy Theme Goal

Attained good governance, realized human rights and equal participation of women, men, girls and boys in national development.

#### 3.5.2 Objective 1

*To promote full and equal participation of women men, girls and boys in decision-making at all levels*

##### **Strategies**

- 3.5.2.1 Empower women to participate effectively in socio-economic and political arenas through leadership, management and gender training
- 3.5.2.2 Facilitate the creation of a conducive environment for incorporating gender perspectives in governance and human rights;
- 3.5.2.3 Create awareness among women and men to appreciate, support and promote women in decision-making positions at all levels;
- 3.5.2.4 Advocate for legislation and policies to enhance women participation at all levels of governance and decision making.
- 3.5.2.5 Create and strengthen support systems for women to take an active part in decision making at all levels.
- 3.5.2.6 Engender socialization process for boys and girls to increase equal participation in decision making
- 3.5.2.7 Promote the provision of information to stimulate women to effectively participate in decision making processes at all levels
- 3.5.2.8 Lobby for the appointment of 50% women to decision-making positions;
- 3.5.2.9 Lobby for the quota system in the selection of women to parliament;

#### 3.5.3 Objective 2

*To effect all International Conventions, Declarations and other legal instruments on Human Rights to which Malawi is a signatory.*

##### **Strategies**

- 3.5.3.1 Advocate for the review of the national laws and policies so that they are in harmony with international and regional conventions and declarations;
- 3.5.3.2 Domesticated and implement international, regional conventions and other legal instruments to which Malawi is a party

#### 3.5.4 Objective 3

*To create a conducive policy and legal environment for women and men of Malawi to enjoy their human rights.*

##### **Strategies**

- 3.5.4.1 Advocate for the review of all oppressive gender insensitive constitutional, statutory and customary laws and policies that perpetuate gender discrimination;
- 3.5.4.2 Advocate for the translation and dissemination of the gender sensitive constitutional, statutory and customary laws into vernacular languages

### **3.5.5 Objective 4**

*To build capacity of civil society, private sector and government institutions on gender and human rights.*

#### **Strategies**

- 3.5.5.1 Strengthen women's and human rights network to exchange information and ideas, and to collaborate on joint initiatives;
- 3.5.5.2 Involve women's groups in human rights promotion and advocacy campaigns, specifically to promote all thematic areas in the National Gender Policy
- 3.5.5.3 Encourage women's and human rights groups to join women worldwide in commemorating International and regional events affecting women and children
- 3.5.5.4 Train civil society, private sector and government institutions on investigating, reporting, monitoring and evaluating women's and human rights
- 3.5.5.5 Provide support, training and advice to Women's Parliamentary Caucus and parliamentarians to ensure that women's rights and gender issues are brought to the attention of the legislature;
- 3.5.5.6 Ensure that a substantive gender and women's human rights segment is included in all human rights training activities for government partners such as law enforcement professionals, the military and government officials.
- 3.5.5.7 Sensitize the population on their human rights.

## **APPENDIX D: DRAFT REVISED NATIONAL GENDER POLICY ON GENDER, LITERACY, EDUCATION AND TRAINING**

### **3.2.1 Policy Theme Goal**

High-quality, equitable education and training

### **3.2.2 Objective 1**

*To increase access to quality education to all school age children at(early childhood) primary, secondary and tertiary levels.*

#### **Strategies**

- 3.2.2.1 Advocate for strong legal measures to outlaw sexual violence and harassment in schools, with clear procedures for dealing with abuse, which are widely communicated;
- 3.2.2.2 Ensure the implementation and enforcement of legal commitments to gender equality in relation to sexual violence and harassment in schools.
- 3.2.2.3 Ensure that training in gender is included in the teacher-education program, both in pre-service training and in-service college-based or school-based training;
- 3.2.2.4 Advocate for provision of a conducive environment for girls' personal hygiene for management of menstruation and sanitation and students with special education needs to enhance equity;
- 3.2.2.5 Advocate for the adaptation and rehabilitation of existing schools and build additional school infrastructure including teachers houses at all levels to cater for the increased number of pupils and students;
- 3.2.2.6 Implement affirmative policies relating to selection of pupils and students to secondary and tertiary levels where possible;
- 3.2.2.7 Reinforce social mobilization campaigns to enroll all school age children and retain them in school, particularly girls;
- 3.2.2.8 Encourage parents and community members to play an active role in the management of the education resources to ensure they are used for the benefit of both girls and boys equitably;
- 3.2.2.9 Advocate for gender parity and put girls' education on the agenda for all service providers;
- 3.2.2.10 Involve traditional and religious leaders in promoting girls' education at both national and local levels;
- 3.2.2.11 Advocate for the reinforcement of the re-admission policy at all levels to allow more girls who dropout to come back to school;
- 3.2.2.12 Advocate for girls' boarding facilities and more classroom space to cater for increased numbers of students;
- 3.2.2.13 Advocate for legislation for Compulsory Universal Primary Education;
- 3.2.2.14 Address all socio-economic factors that undermine retention of girls in school
- 3.2.2.15 Advocate for parenting centers for young mothers who have to go back to school after delivery.

### **3.2.3 Objective 2**

*To promote the development and use of gender responsive curriculum, educational materials and equipment at all levels.*

#### **Strategies**

- 3.2.3.1 Integrate gender in the school curriculum from lower classes
- 3.2.3.2 Develop the capacity and role of the inspectorate and gender units to support gender equality in the classroom;
- 3.2.3.3 Advocate for gender sensitive curriculum, educational materials and equipment for primary, secondary and tertiary education.
- 3.2.3.4 Strengthen the Gender Unit at Malawi Institute of Education and Gender Studies Unit at the University of Malawi;

3.2.3.5 Advocate for establishment of Gender Units in tertiary institutions.

### **3.2.4 Objective 3**

*To reduce dropout rates of girls and boys at all levels of education.*

#### **Strategies**

- 3.2.4.1 Advocate for modification of cultural practices that have negative effects on girls' education;
- 3.2.4.2 Empower teachers to analyze and challenge gender stereotyping and gender bias in curriculum materials, in language use and relations in the school and with the community;
- 3.2.4.3 Advocate for training and employing more female teachers and deploy more of them in rural areas
- 3.2.4.4 Create an enabling environment in learning institutions for students to report sexual, verbal abuse and harassment;
- 3.2.4.5 Improve the teaching-learning environment to reduce absenteeism, repetition and dropout rates for both boys and girls;
- 3.2.4.6 Encourage parents and community members to take an active interest in their children's learning and ensure that the school learning environment is healthy and safe;
- 3.2.4.7 Lobby for the legislation and enforcement of non-employment of school age children;
- 3.2.4.8 Create awareness on the legal provision for the minimum age of marriage of 18 years according to the law;
- 3.2.4.9 Advocate for the reinforcement of the re-admission policy at all levels to allow more girls who dropout due to pregnancy to come back to school after delivering.
- 3.2.4.11 Provide incentives to parents who keep their girl children in school.

### **3.2.5 Objective 4**

*To increase enrolment of girls in sciences and technology,*

#### **Strategies**

- 3.2.5.1 Encourage girls and boys to study science subjects including ICT;
- 3.2.5.2 Increase the number of female teachers in mathematics, science and ICT in schools at all levels to act as role models for girls;
- 3.2.5.3 Advocate for equal access to scholarships and career planning for women, men, girls and boys;
- 3.2.5.4 To integrate science and technology subjects in institutions that train frontline staff.

### **3.2.6 Objective 5**

*To empower women and men through equitable access to adult basic education*

#### **Strategies**

- 3.2.6.1 Lobby for investment in adult education for achievement of national development strategies;
- 3.2.6.2 Broaden the concept of literacy from 'learning to read and write and do arithmetic' to the acquisition of skills for social action and women's empowerment;
- 3.2.6.3 Form relationships and programs with donors who prioritize adult education;
- 3.2.6.4 Develop new and stronger links with NGOs advocating gender equality to engage in advocacy for gender equality in basic education.

## APPENDIX E: CULTURAL BELIEFS AND PRACTICES THAT MAY PREVENT GIRLS FROM ENROLLING AND REMAINING IN SCHOOL

### I. INTRODUCTION

In this appendix, we set forth a number of gender-based harmful cultural/traditional beliefs and practices that prevent girls from either enrolling or remaining in school. Some of these have been culled from project documents, while others were gathered during the course of our research. The list is not meant to be exhaustive, but rather illustrative of the types of culture-based questions that should be asked in the course of designing school-based projects.

### 2. OVERARCHING PRACTICES

**2.1 Girls' Initiation** – Girls as young as 10 (or Standard 4) are called by families and communities to initiation ceremonies. During this process, girls are initiated into different sexual practices with a range of men, beginning with the “hyena,” an older man of the community who may have sex with five or six initiates in one evening. After initiation, it is expected that girls will be married and not return to school.

**2.2 Early/Forced Marriage and Kidnapping** – Parents can arrange a marriage for a girl as young as 10 years old, and generally an older man will receive his “prepaid” wife. If the girl runs away, the parents must “kidnap” her to bring her back to her husband.

**2.3 “Thank You” “Wives”** – When a husband has been “good” to his wife, the wife’s family may give him her little sister in thanks for being so good.

**2.4 Complicity of Traditional Leaders** – Chiefs must realize some sort of benefit when bride price is paid. So, regardless of how young the girl is, the chief must receive a cow or goat or some amount of money as part of the bride price. (One more thoughtful traditional leader charges families a goat if they do not send their daughters to school.)

**2.5 Sexual Touching of Girls' Breasts by Boys** – Fondling is welcomed as it is believed that such actions make the breasts grow larger.

**2.6 Marriage and Esteem** – Because prostitution is a real threat to parents who have daughters, they encourage their daughters to marry early so that 1) they do not have to go into prostitution to earn money, and 2) the family will have one less mouth to feed. To make marriage an early possibility, girls are pressured into creating liaisons.

**2.7 Pregnancy** – Girls who fall pregnant and give birth have a right to return to school, although many communities are not aware of the rules and regulations that encourage girls to return to school and finish their education (“Revised Readmission Policy Procedures, November 2006, Ministry of Education). Girls who are married and give birth may be prevented from returning to school by their husbands.

**2.8 Opportunity Cost of Girls' Labor** – Beginning largely in Standard 4, girls drop out of school so that they can either tend to chores in the household or earn some type of income to support the family. In households where a parent is suffering from HIV/AIDS, it is most often the elder girl who must stay home and provide continual care to those infected.

**2.9 Economic Imperatives and Labor** – As the cost of goods and services increases, it is imperative that more family members earn an income and shoulder part of the family’s economic responsibilities. This can take the form of child labor in different industries (tobacco, fishing, agriculture,

etc.) or the most harmful child labor practices: prostitution, smuggling, drug-dealing, and other illicit activities. The immediacy of demand on household economics prevents parents from encouraging their children to stay in school as it is not clear whether those who have had more education (especially girls) will succeed in getting a job.

**2.10 Boys' Early Marriage** – Boys who are OVC might be motivated to marry early because such an act would give them access to land for farming and would increase their status in the community.

**2.11 Boys' Initiation** – The *Gule Wankulu* masked dancers call boys for initiation, where they are circumcised and taught lessons on how to be a man. Boys are absent from school to attend initiation rituals and, as an initiation group, to attend periodic ceremonies. What occurs at initiation is “secret” and so it is difficult to identify strategies that will help the *Gule Wankulu* to foster growthful cultural practices and eliminate those that are harmful. During initiation, boys (and girls in their initiation) do not wear any clothes, thus allowing their private parts to become unclean or dusty. It is believed that “cleaning” can be accomplished by having sex. After initiation, boys are also encouraged to have sex with several partners and then marry.

**2.12 Female Genital Cutting** – Among certain cultural groups in Malawi, i.e., the Yaw and those in the southern regions of the lake shore, young females have their labia stretched out and/or the tip of their clitoris cut off. It is believed that sex will be more pleasurable if these cuttings are done.

**2.13 Churches and Initiation** – In trying to combat traditional initiation practices, churches have called groups of girls and boys for a church-type initiation. This is held during school times as well, however, so children who attend will miss at least a week of school.

**2.14 Presents for Initiation** – An initiate must provide a chicken to each community and/or traditional leader who has contributed to the initiation. Families are hard-pressed to cover this expenditure, and often children are required to generate some sort of income so that the appropriate presents can be distributed.

**2.1.5 Value of Education** – Education is not essential for the girl child. She is often called from school to prepare for funerals, take care of younger siblings, generate an income, provide household help, and the like.

### 3. SCHOOL-BASED PRACTICES

**3.1 Student/Teacher Interactions** – Families believe that if a girl receives special/sexual attention from a male teacher, it is a good thing because it might afford the girl some type of advantage or even lead to a marriage to someone who is earning a living.

**3.2 Corporal Punishment** – It is acceptable in most schools for teachers to mete out corporal punishment for both boys and girls for even minor infractions of the rules or “just because.” The form the punishment takes may be gender specific and include sexual abuse.

**3.3 Late Initial Enrollment** – Many girls are delayed from starting school at the appropriate age (6). Consequently, ages of children in Standard 1 may range from 6 to 12 as there is, as yet, no comprehensive way of addressing the learning needs of older girls (and boys). When girls and boys fail to learn in Standards 1 and 2, they must repeat, making them older in lower grades. Repetition causes frustration and can lead to dropping out.

**3.4 Separate Latrines** – Not all schools have proper sanitary facilities, much less a separate facility for girls and boys. Due to 3.3 above, and the natural maturing of children through the educational process, it is not acceptable for girls and boys to use the same latrine.

**3.5 After-School Activities** – Girls who are day students are less likely to attend after-school activities and clubs because of the chores they must complete at home and the hazards that a girl faces in moving to and from school, especially if she is walking alone. Girls who are living in school dormitories are more likely to participate in these activities.

**3.6 Menstruation** – Girls may miss up to a week because they have their periods and do not have access to sanitary pads. Also, there are cultural taboos on girls “soiling” seats or clothes, so girls do not come to school for fear that an “accident” will occur (the belief is that if soiling occurs and someone sees it, the girl’s mother will die). Girls should not even be observed washing their underwear.

**3.7 Female Teachers** – It is a commonly held belief that women should be teachers of children in Standards 1-3 while men should teach upper primary classes. This leaves older girls more vulnerable. Moreover, female teachers who have training in upper primary are not generally assigned to those grades.

**3.8 Classroom Seating** – Many teachers do not allow girls to sit with boys in upper primary grades either for regular classroom activities or small group work. Oftentimes, girls are seated at the periphery, making boys more visible when raising their hands to answer questions.

**3.9 Teacher Placement** – Female teachers often leave rural postings due to the location where their husbands are working, or if the housing provided is not adequate. These lead to a pronounced shift to a preponderance of teachers in the urban areas.

**3.10 Absenteeism** – Girls beginning in Standard 4 may have to be absent frequently because: 1) their grannies are heads of household, and the girls need to provide household assistance; 2) parents, especially mothers, who are ill are taken care of by their daughters; 3) girls may be household heads themselves due to their orphan status and must take care of siblings and the household.

**3.11 Teacher Use of Abusive Language** – Female teachers appear to be some of the worst perpetrators in using abusive language and in making innuendo against girls. When this type of behavior persists, girls’ self-esteem is lowered, and there is a greater desire to drop out.

**3.12 Unemployed Form 4 Graduates** – The “dream” horizon of the future of girls is very limited to farming, marriage, and children. As most are not exposed to possible futures, they continue in more traditional roles. Even though a girl or boy may have finished Form 4, there are few options for local employment. When girls, especially, see older girls who have finished more schooling than they and are not employed, girls don’t see any value in continuing with schooling and drop out.

**3.12 Songs and the Reinforcement of Values** – Traditional songs taught to children in school can be biased against girls and reinforce the idea that girls are inferior to boys.

**3.13 Clean Clothing** – Around the time of puberty, girls and boys become more concerned about their clothes. Many households cannot afford to buy soap powder, and this becomes a matter of shame to the young people. Rather than come to school with dirty clothes, they are absent and/or drop out.

**3.14 Desks in Classrooms** – Around the time of puberty, girls become very self-conscious and concerned about revealing any parts of their bodies. Hence, when they have to sit on the floor, they must be extremely careful about covering their bodies. When sitting at desks, this problem does not exist to the same extent.

**3.15 Victimization** – The girl child is easily victimized when in school and are also subject to more extreme forms of exploitation and violence on the part of boys and teachers.

**3.16 Access to Facilities** – If desks are in the classroom, boys will often be given seats while girls must sit on the floor.

**3.18 Access to Water** – Many schools do not have water available on the school grounds. During monthly menses, this becomes a problem when staining occurs and girls cannot wash out the stain.

## APPENDIX F: DRAFT REVISED NATIONAL GENDER POLICY ON ECONOMIC GROWTH

### 3.3 **POLICY THEME 3: AGRICULTURE, FOOD SECURITY AND NUTRITION**

#### 3.3.1 **Policy Theme Goal**

*Household, community and national food and nutrition security enhanced*

#### 3.3.2 **Objective 1**

*To increase women's and other vulnerable groups access to and control over agricultural productive resources and technologies for food and nutrition security*

##### **Strategies**

Advocate for gender analysis and mainstreaming in all food and nutrition security policies, programs and projects intervention;

Ensure that women, persons with disabilities, poor and other vulnerable groups have equitable access to agricultural inputs and services;

Promote gender awareness and analytical skills at all levels for gender responsive nutrition and food security policies, programs, projects, plans and activities;

Promote dissemination of appropriate gender responsive labor and time saving technologies for increased food production, processing, preparation and storage;

Revise laws and policies to improve women's economic rights to property, inheritance, and labor force participation;

Promote women's access to agricultural market information and infrastructure;

Advocate for research on gender responsive agricultural technologies;

Lobby for favorable credit conditions for women and other disadvantaged groups.

#### 3.3.3 **Objective 2**

*To reduce nutritional disorders among women and children*

##### **Strategies**

Promote diversified household food production, storage and consumption of six food groups by women and children;

Promote the involvement of men and boys in the production and preparation of diversified food;

Advocate for the elimination of food taboos, cultural practices and eating habits that negatively impact on the nutritional status of women and children;

Promote engendered grain banks and safety net programs that ensure that women, persons with disabilities and other vulnerable groups are primary beneficiaries;

Integrate gender in the monitoring mechanisms of food and nutrition;

Promote consumption of iodized salt and food rich in iron, oils, folate, vitamins and proteins.

Encourage small livestock by vulnerable groups including women and the physically challenged;

Promote food and nutrition campaigns according to area specific available foods;

Promote appropriate food and nutrition education to prevent and address nutritional disorders;

Promote the linkage of food and nutrition to economic empowerment, literacy and education, agriculture, health and environmental management and other related disciplines.

Facilitate the development of IEC materials on food and dietary diversification for the various gender categories

Promote research on nutritive value of locally available food for the benefit of the women and other vulnerable groups.

### 3.4 **POLICY THEME 4: NATURAL RESOURCES AND ENVIRONMENTAL MANAGEMENT**

#### 3.4.1 **Policy Theme Goal**

*Equal and equitable participation of women, men, girls and boys and other vulnerable groups in the sound management, conservation and utilization of natural resources and the environment for sustainable development.*

### **3.4.2 Objective 1**

*To increase participation and involvement of women, men, girls, boys and vulnerable groups in planning, designing, implementation and evaluation of natural resources and the environment*

#### **Strategies**

Promote women's participation in community afforestation, water, land management programs;

Promote gender responsive irrigation technologies;

Empower women and men to manage their own water resources and services;

Promote research on gender responsive natural resource management systems;

Promote gender analysis and mainstreaming in natural resource policies and programs

Empower both women and men to invest in the management of their own and community water resources and services;

Raise public awareness on the need of involving women, persons with disabilities and other vulnerable groups in the management of natural resources and environment;

### **3.4.3 Objective 2**

*To minimize negative natural resource and environmental impacts thereby enhancing environmental benefits of projects to the majority of the vulnerable groups.*

#### **Strategies**

Promote energy saving technologies to reduce women's time and energy on reproductive activities;

Promote more involvement of women, men and vulnerable groups in issues of waste management and pollution;

Create awareness among women, men, girls and boys on global warming and climate change;

## **3.6 POLICY THEME 6: POVERTY ERADICATION AND ECONOMIC EMPOWERMENT**

### **3.6.1 Policy Theme Goal**

*Enhanced women's economic and social empowerment*

### **3.6.2 Objective 1**

*To promote women's access to and control over productive resources and economic opportunities*

#### **Strategies**

Promote capacity building of women in the areas of business, credit management, economic literacy, skills development, production, processing and marketing;

Promote marketing possibilities for products produced by women at both local and international levels;

Lobby for the creation of a special fund by government to financially support women's businesses;

Advocate for the setting up of sustainable social security schemes and soft loans for persons with disability, the elderly and other vulnerable groups;

Improve women's access to technology for production and marketing of products

Lobby for women's ownership of land and property.

### **3.6.3 Objective 2**

*To integrate gender issues into overall national development strategies and solicit support from development partners.*

#### **Strategies**

Ensure that the national economic and development strategies such as the Malawi Growth and Development Strategy (MGDS) Public Sectors Investment Program (PSIP) fully integrate gender issues and concerns.

Ensure that national budgets are planned, approved, implemented, monitored and audited in a gender-sensitive way.

Ensure provision of frameworks or mechanisms for the implementation, monitoring and evaluation of the national development strategies.

Mobilize donor support for national commitments to gender equality and women's empowerment.

### **3.6.4 Objective 3**

*To create a favorable environment for equal employment opportunities and benefits for women and men in both formal and informal sectors.*

#### **Strategies**

Advocate and lobby for the review of conditions of service and labor laws to be gender responsive;

Provide labor market information in schools and colleges (career talks);

Advocate for the formulation of gender responsive policies, rules and regulations that support the development of the informal sector;

Eradicate occupational segregation and all forms of employment discrimination;

Advocate for the enforcement of legislative measures that ensure equal pay for equal work and equal remuneration for jobs of equal value for women and men;

Advocate against calls for extensive work experience by organizations for the recruitment of qualified young women and men;

Promote dissemination and provision of trade and investment information and backstopping services to women and men entrepreneurs;

Promote functional adult literacy education for both women and men engaged in MSMEs.

## APPENDIX G: GENDER ISSUES IN ACHIEVING FOOD SECURITY

The following statements were either culled from project documents or reported in the course of visiting projects.

### **Food Availability**

- The contribution of individual households to national food availability statistics must be considered from a gender perspective. Who is responsible for producing which crops is often negotiated within the household, and once a decision is reached, labor is allocated to different crops. In male-headed households, men tend to focus on the production of some type of crop for market, and women tend to focus on production for home consumption or local market distribution.
- Decisions on how much of the land is planted to which crop is generally a male decision, but sometimes is discussed.
- In female-headed households, women are responsible for all production, which may take place in more denuded soils because the resources are not there to replenish them. Hence, a vicious cycle exists in agricultural production when a female is the head of household. Similar arguments can be made when a grandparent becomes head of household. Without resources, including labor, the production of crops declines.
- Women are less likely to engage in cash crop production because of the labor required; female-headed households are labor constrained.
- Often the use of improved varieties of a given crop require more labor input in weeding; this job is one that women perform.
- Water management committees must include both female and male members in order that female farmers gain equal access to water for their farms.
- Although women have property rights, they often do not have access to land.
- Women-headed households are less likely than male-headed households to receive fertilizer coupons under the GOM's Agricultural Input Supply Program. If FHHs do receive coupons, it is likely they receive fewer.
- Women are more likely to grow crops for home consumption and less likely to use fertilizer and less likely to obtain extension services.
- Women have less access to cash than men and find it more difficult to raise the K950 payment to redeem their coupon for fertilizer.
- Women gain access to cash through *ganyu* labor and through various income generating activities, such as beer brewing.
- Owing to women's household and child rearing responsibilities, women are unable to wait days in a queue to receive their allotment of fertilizer. Hence, women lose control over their coupons and thus forfeit any fertilizer.
- Women bear a lot of responsibilities for the work; men in most cases are involved in social activities.

### **Access to Food**

- Women are less likely to have access to agricultural extension services and, if they do, many women are illiterate and cannot read literature provided in support of extension lessons. Hence, the input they might have from extension agents to improve cropping may be reduced because of their lack of literacy and numeracy skills.
- Poverty is a major detriment to obtaining access to food. Poverty rates are higher in female-headed households (58% compared to 51% for male-headed households), but in terms of numbers, more poor people live in male-headed than female-headed households.

- Women are less likely to have access to credit for farm improvements.
- If women need money to purchase food, they might become day laborers in neighborhood farms, to the detriment of their own farm.
- If cooperatives or agriculturally-related groups are formed for any part of the agricultural process, care must be taken in how these groups are formed. If groups include members of both sexes, it is highly likely that women's voices will not be heard and the decision makers will be men.
- Male farmers do not always re-invest income into the household, but women do.
- Market information is not often available, especially to women, because of their general behavior of staying close to home and taking care of the household. If some type of cell-phone information system is developed, women should be targeted recipients of capacity building in how to access information.
- Food for Work programs most often rely on women's labor.
- Village savings and loan (VS&L) groups (a variant of Myrada's Self-Help Groups) are best formed by groups of single sex individuals. Research has shown that when males are in the same groups as females, they dominate and intimidate women to provide the men larger loans than originally agreed upon in by-laws. For this reason, it is important that the VS&L groups should be linked to microfinance organizations so that when a farmer requires a larger loan, he or she can be referred to the MFI.
- Men receive the money mobilized by women and make all economic decisions.

### **Food Utilization**

- The high incidence of women's Chronic Energy Deficiency (CED) may result from inadequate energy intake because of lack of food access, anorexia due to infection and nausea, discriminatory intra-household food distribution, and self-sacrificing behavior.
- Women's heavy physical labor can exacerbate CED (e.g., hauling water and fuel)
- In certain cultures in Malawi, women in the household eat last. This means possibly that less nutritionally rich food is available for women's consumption.
- Women eat certain foods at different times in the life cycle. Care should be taken to provide more disease- or drought-resistant varieties of crops that are needed to improve the nutrition of women and children.
- Pregnant women eat certain foods to increase their nutrient level and that of the fetus. Absent any on-farm assistance, women cultivate what will bring the largest return instead of what is best for their bodies.
- Lactating mothers are fed a variety of foods that help in the production of milk. Females generally are responsible for cultivating these crops in their gardens.

### **Health Issues**

- Women have problems accessing health care due largely to inadequate transport facilities, money to pay for transport, and/or distance to the nearest facility.
- Access to potable water is extremely limited throughout the country.
- Women are infected with HIV/AIDS at an earlier age than men, largely due to the traditional practice of initiation during which girls have sex with many partners before they marry.
- Women are economically more vulnerable when their husbands pass on because of their lack of title to property, which can be taken by the relatives of the male.

## APPENDIX H: GENDER ISSUES IN MILK PROJECT

### ***Provision and Care of the Heifer***

- The person in the household to whom the heifer is provided is charged with the care of the animal. Documentation must be presented on how many men and how many women are given heifers.
- How many households are female-headed? How many have both a male and female adult head? How many are child-headed households?
- In follow-up activities, whose labor is maintaining the heifer should be documented, as well as who is making any financial outlay for the upkeep of the heifer.
- Who in the household is responsible for purchasing the supplementary feed? What is the source of income to purchase this feed?
- As household economies may not be “income pooling,” tracking funds generated and expended is a critical issue in discerning gender inequities.
- Who decides whether a heifer requires any veterinary care or AI services? Who pays for that care/service? What is the source of funds?

### ***Sales to Milk Bulking Groups and Others***

- Do women and men have an equal possibility of becoming milk bulkers?
- Is equal pricing given to men and women delivering milk to the MBGs?
- Is the quality of the milk being sold to MBGs the same when the farmer is either a man or woman? What explains the difference, if there is any?
- Is milk being produced by either female or male farmers entering into the informal milk market? Why?

### ***Other Project Facets***

- Does the farmer-to-farmer program address both female and male farmers? What communications problems are there between foreign male farmers and local female farmers? How are these communications problems overcome?
- Is membership to local farmer organizations open to both women and men? What are the requirements for membership? How do women meet these requirements (in light of possible lower literacy and numeracy skills)?
- Is travel to neighboring countries to learn more about the dairy industry open to both females and males? What are the criteria for choice and participation?
- What is the sex breakdown of input suppliers?
- Whose job will it be to cultivate forage shrubs for dairy cattle consumption? How will this added responsibility affect the household division of labor?
- How has the dairy household improved since participating in the project? What new household assets have been purchased? Have nutrition levels of ALL members of the household increased? Are more children, especially girls attending school? What differences exist in benefits in accordance to the type of household (e.g., female-headed, etc.)?
- In the dairy supply chain, how are women involved, i.e., what roles do they play? How many females and how many males have found employment in the dairy market chain since the beginning of the project?
- In providing capacity building to dairy associations, how many females and males participate? What role does each play in the management of the associations?
- In providing small grants under the new operational plan, how is gender incorporated into the proposal and contracting process?

## APPENDIX I: THE CONNECTION BETWEEN GENDER INEQUALITY AND HIV/AIDS

### Is HIV/AIDS a Gender Issue?

- Yes. Unequal gender relations (social, economic, power) are driving the HIV/AIDS epidemic.
- Gender inequality causes increased HIV transmission, and the consequences of HIV/AIDS leads to increased gender inequality.
- Women and girls are more vulnerable to HIV infection than men and boys.

### Some Aspects to Consider

- Although HIV/AIDS affects both men and women, numerous studies show that females are getting infected earlier and dying younger.
- In Malawi, women and girls are more at risk of HIV infection than men and boys.
- Every year, the percentage of those infected with HIV and AIDS becomes more “female”.
- 58% of all adults infected with HIV in Malawi are women.
- In Malawi, most of the new HIV infections occur in young people. Females tend to contract HIV at a younger age than males.
- 60% of all new HIV cases of people under 30 years are in women and girls.
- More females are reported to have AIDS in the 15-29 age group than males. AIDS-related deaths are highest amongst women in their 20s.

WHY are women and girls more vulnerable to HIV infection than men and boys? WHY are women and girls impacted more by the consequences of HIV/AIDS than men and boys?

### Biological Differences between Males and Females:

- Women are biologically more vulnerable to HIV infection than men. HIV is more easily transmitted from men to women than from women to men.
- The vagina absorbs HIV more easily.
- The biology of the female reproductive system is more vulnerable to infection. The virus can enter through small tears in the vaginal lining, which may occur during sex.
- The vagina can be torn very easily during forced sex. These tears make it easier for the virus to enter the female body.
- There is more of the HIV virus in sperm than in female vaginal fluids. Because of this, it is twice as common for women to get HIV from men.
- The presence of untreated STIs is a risk factor for HIV. If the skin of the vagina is inflamed, which happens when you have an STI, then HIV transmission is more likely to occur.
- *[Why do STIs go untreated in women? Because many STIs are not apparent, so they go untreated. Also, because the stigma associated with STIs is greater for women because it suggests promiscuity, so they are often afraid or unwilling to seek health care].*

### Economic Differences between Males and Females:

- ◆ Economic and material dependence on men means that women cannot control when, with whom and in what circumstances they have sex (the terms of sex). Women have little power negotiating the terms of sex, including condom use.
- ◆ Due to gender-based economic inequalities, women are often driven to barter sex for survival. This can be either through commercial sex, or through informal sexual transactions whereby women exchange sex as a family survival strategy such as fish for sex, firewood for sex, medicine for sex, casual labor for sex which are common in Malawi.
- ◆ Some community-based public service providers demand that women trade sex in exchange for access to public services.

**Social and Cultural Differences between Males and Females:**

- Low social status prevents many women from having control over their sexual lives. Women and girls often cannot refuse unwanted or unprotected sex.
- If women refuse sex or request condom use, they often risk abuse as there is suspicion of infidelity.
- It is not culturally acceptable for women to make decisions about their sexual relationships.
- There is widespread social acceptance of multiple sexual partners for men.
- Extramarital partners means a higher risk of getting infected with HIV. When men do get infected, they usually transmit HIV to their wives.
- Society suggests that having many sexual partners, insisting on the terms of sex, and refusing to have sex with a condom makes a man a “real” man.
- Society seems to accept that forced sex in marriage is not rape. As a result, it is acceptable for a man to force his wife to have sex.
- A culture of silence surrounds the issue of sexual violence, making it difficult to address. Girl children are at risk of HIV infection due to sexual abuse and other traditional high-risk practices.
- Cultural practices such as wife inheritance increases the possibility of HIV transmission.
- Women suffer discrimination because they are often blamed for spreading the infection.
- Women and girls usually assume greater responsibility than men and boys for the care of the sick and dying family members. Girls are often pulled out of school before boys to fulfill household duties.
- Due to AIDS deaths, women have more household responsibilities to care for the children, not only of their own family, but also of their extended family.
- Female-headed households are increasing. When a husband has died, a woman can face the loss of social support from family members, and lack of legal protection to inherit land and property.
- Property grabbing leaves widows with no way of supporting themselves. Sometimes, they resort to prostitution or to prostituting their children in order to make ends meet.

**Perceptions about Sex and Sexuality**

- There is a widespread perception that sex with a condom is not real sex.
- That having sex with a condom is not satisfactory.
- That sex without a condom is an indication of commitment by one partner to another to the exclusion of others. (Because the person is taking this risk, he or she must be willing to die for you.)

## **APPENDIX J: GENDER POLICY IN REPRODUCTIVE HEALTH AND GENDER AND HIV/AIDS**

### **3.1 POLICY THEME 1: GENDER AND REPRODUCTIVE HEALTH**

#### **3.1.1 Policy Theme Goal**

***Gender responsive health system (instituted) where gender issues and concerns are addressed throughout the National Health Service provision, especially at primary health care level.***

#### **3.1.2 Objective 1**

*To increase access to health services for women, men, boys and girls and all vulnerable groups.*

##### **Strategies**

- 3.1.2.1 Advocate for more user friendly health facilities and services that benefit women and girls, men and boys and vulnerable groups especially those in rural areas.
- 3.1.2.2 Promote access to and control over primary health care services by women, men, boys and girls.
- 3.1.2.3 Promote access to reproductive health information and care services for women and men, boys and girls.
- 3.1.2.4 Advocate for gender sensitive information, education and communication (IEC) services on reproductive health services of national, district and community level among women.
- 3.1.2.5 Advocate for increased involvement of men and boys in reproductive health services.

#### **3.1.3 Objective 2**

*To lobby for improvement of quality health services so that they equitably address the needs of women, girls, men and boys and all vulnerable groups*

##### **Strategies**

- 3.1.3.1 Promote research and gender analysis for informed specific health care needs of women, men, boys and girls and other vulnerable group.
- 3.1.3.2 Advocate for improved responsive technical and professional training of all health personnel so that they address the gender needs particularly those of women and other vulnerable groups.
- 3.1.3.3 Strengthen preventive programs that promote women's health; using a gender-sensitive and rights based approach.

#### **3.1.4 Objective 3**

*To reduce high maternal and neonatal mortality rate to acceptable levels in Malawi*

##### **Strategies**

- 3.1.4.1 Lobby for sufficient budgetary allocations to the Road map maternal and other reproductive health services to ensure accessibility and quality RH services for women particularly those in rural areas.
- 3.1.4.2 Lobby for ring fencing of facility budgetary allocations on maternal and neonatal services to ensure accessibility and quality maternal and neonatal health (MNH) services for women particularly in rural areas.
- 3.1.4.3 Lobby for easily accessible family planning, prenatal, antenatal and delivery services to all women in the reproductive age group even those in rural areas.
- 3.1.4.4 Advocate for training, recruitment and retention strategies for more midwives, community health workers (HSAs) and doctors and for their equitable deployment in the rural and urban areas.
- 3.1.4.5 Promote awareness of sexual and reproductive health rights amongst the youth.
- 3.1.4.6 Advocate for the legalization of provision of safe abortion services for medically-at-risk mothers.

### **3.7 POLICY THEME 7: GENDER AND HIV AND AIDS**

#### **3.7.1 Policy Theme Goal**

*Strengthened Gender Responsive HIV and AIDS programming.*

#### **3.7.1 Objectives**

***To mainstream gender concerns and gender issues in all HIV and AIDS strategies.***

##### **Strategies**

- 3.7.1.1 Advocate gender responsive research and analysis for HIV and AIDS programming in all sectors
- 3.7.1.2 Ensure that policy and decision-makers, in public, private sector and civil society organizations put in place and implement sectoral policies that effectively address HIV and AIDS gender issues and concerns.
- 3.7.1.3 Ensure the effective participation of vulnerable groups particularly women, girls, People Living with HIV (PLHIV) and people with disabilities in all decision making processes in gender policies and programming of HIV and AIDS.
- 3.7.1.4 Ensure that the rights and dignity of those living with and affected by HIV and AIDS particularly women and children are respected, protected and upheld in a conducive legal, political, economic, social and cultural gender friendly environment.
- 3.7.1.5 Facilitate the development of gender responsive policies and programs by providing adequate gender disaggregated data in all sectors.
- 3.7.1.6 Make gender equality and women's empowerment central to all strategies, policies and programs to effectively prevent, treat and mitigate HIV and AIDS.
- 3.7.1.7 Promote access to non-discriminatory, confidential and gender friendly HIV and AIDS services, appropriate for and accessible to women, the youth and other vulnerable groups.
- 3.7.1.8 Lobby for stiffer punishments on sexual violence and the enactment of a law on elimination of harmful cultural practices that promote women's susceptibility and vulnerability to HIV and AIDS.
- 3.7.1.9 Facilitate the provision of post-exposure prophylaxis (PEP) as a legal requirement for victims of sexual abuse.

#### **3.7.3 Objective 2**

***To promote behavior change and preventive interventions relating to HIV and AIDS to address the specific gender needs of the different categories of the vulnerable groups.***

##### **Strategies**

- 3.7.2.1 Develop adequate IEC gender responsive, accessible and effective material on HIV and AIDS;
- 3.7.2.2 Provide care, treatment and support to HIV-infected and affected women, children and their families.
- 3.7.2.3 Strengthen prevention strategies of HIV infection in the general population among women of child bearing age and their partners, especially for young and pregnant women.
- 3.7.2.4 Intensify male involvement in addressing family health and HIV and AIDS activities.
- 3.7.2.5 Systematically target the media to raise gender awareness about STIs, HIV and AIDS.
- 3.7.2.6 Ensure the meaningful involvement of PLHIV, especially women, in public awareness campaigns, policy formulation and program implementation processes.
- 3.7.2.7 Ensure that the number of Counseling and Testing, and Prevention of Mother to Child Transmission (PMTCT) services are increased and women are encouraged to use the services;
- 3.7.2.8 Advocate for, and facilitate, male involvement in all programs and strategies aimed at educating the public about HIV and AIDS.
- 3.7.2.9 Intensify community leaders' involvement in eliminating harmful cultural practices that promote the spread of HIV and AIDS.

## **APPENDIX K: SUGGESTED ACTIVITIES TO CREATE A GENDER-SENSITIVE/RESPONSIVE ENVIRONMENT AT HEALTH FACILITIES**

Many USAID-funded health projects entail institutional capacity building. This appendix outlines how the environment of health facilities can be made more gender sensitive.

- Equip all health workers at facility with simple analysis skills/tools to enable your team to:
  - Engender the health facility – create a gender sensitive/responsive working environment for workers.
  - Provide gender-sensitive SRH services, and pass the relevant information and skills to the community.
- Have friendly attitudes towards women and girls, men and boys who come to health facilities, and empower them with information. This will encourage them to continue using the services and to seek more information for further empowerment.
- Investigate and document who makes decisions on health in a relationship and target them for sensitization.
- Carry out training to sensitize the community and policy makers, and impart skills on SRH. Give special attention to adolescents and men for empowerment to develop interest in and seek quality SRH services.
- Address issues of heavy workload and the cultural and social division of labor
- Create awareness on the need to have equitable access and control of resources.
- Sensitize and empower community (through community outreach programs) to appreciate gender-related factors that hinder them from taking advantage of the SRH services.
- Plan the gender in SRH interventions with the community to facilitate buy-in and ownership.
- Sensitize men and women on the gender related SRH rights. These include the right of women and men to the highest attainable standards of SRH which embrace the basic rights of all couples and individuals to decide freely and responsibly the number, spacing and timing of their children. Ensure that the messages you use are culturally sensitive.
- Increase knowledge and awareness among the community members to promote improvement of women’s status (by empowering them economically and in decision making). This is a prerequisite to access to, and demand for, quality SRH services. This will enhance achieving rights to SRH services for women, men, girls and boys, and foster development at individual, family and community levels.
- Advocate for policies and programs that:
  - Take a holistic approach to men’s and women’s empowerment
  - Encourage active involvement of men in sexual and reproductive health issues.

### **HOW TO FOSTER CONSTRUCTIVE MALE INVOLVEMENT IN SEXUAL AND REPRODUCTIVE HEALTH**

Some possible suggestions on how to constructively involve men in SRH services include the following:

Making deliberate efforts to ensure active male participation through gender sensitization and training focused on:

- Organizing and conducting gender sensitization campaigns for health workers, mainly focused on their attitude to promote positive attitudes towards men and create a male-friendly environment at the health facility
- Using persuasive and friendly language to encourage men and boys to access SRH services and to be involved in the care-taking role

- Using appropriate and relevant information, education and communication (IEC) materials to sensitize the family members, the community and peers on the need to encourage men and boys to seek SRH care and involve them in health care taking.
- Carrying out advocacy campaigns to create favorable environments in the form of policies, procedures and regulations at the work place to promote male involvement.
- Recruiting progressive men in your effort to reach the male community members, especially if you are in a male-dominated community where patriarchal issues are rigidly adhered to
- Organizing and conducting peer sensitization forms with men and women (initially carry out separate forums for each sex, and later mixed forums)
- Working with men to devise mechanisms of sensitizing men on gender and gender issues, depending on your environment.

NOTE: It is important to note that we do not live in a gender-equitable world and that male participation in SRH services, though of crucial importance, is still far from being fully realized.

## **APPENDIX L: GENDER ISSUES TO CONSIDER IN REPRODUCTIVE HEALTH AND FAMILY PLANNING PROGRAMS**

1. Women prefer female HSAs for reproductive health information and services.
2. Family planning is considered a woman's issue and problem, yet the men make the final decision as to what is allowable.
3. In terms of family planning methods, women prefer to use depo as in "invisible" SRA method.
4. Grouping men and women for reproductive health programs means that the women will keep quiet and the men will do the talking.
5. Male preferences to have sons means that if a son is born, the father will take greater interest and be more involved in child health care. If a daughter is born, the interest and involvement is reduced.
6. Hidden/harmful cultural and religious practices target sexual reproductive health, and mostly target women.
7. For a woman to seek assistance during her pregnancy, she must ask her husband for funds for transport.
8. Certain cultural groups do not encourage women to acknowledge a pregnancy until she is "showing;" this may prevent a woman from coming to the clinic early in her pregnancy to receive vitamins and medications to strengthen the child.
9. It is unclear if pregnant women perceive that they are obtaining value in attending antenatal care clinic, so they may not come or may not come consistently.
10. The opportunity cost of women's labor may be too much to take time for clinic visits when a woman is pregnant.
11. Traditionally, men are not involved in the pregnancy or birthing process, but they are involved in the process of dying. Understanding why this is may yield insights into how men can become more involved in their wife's pregnancy and birthing as part of the life cycle.
12. Pregnant women may choose not to come to a clinic because of the treatment they receive by the health practitioners who should always create a welcoming environment.
13. Pregnant women may have some concerns about the vitamins and other medicines they are given at the clinic; they may perceive that these are injurious to the baby, or they may have side-effects.
14. Traditional birth attendants are valued more highly than going to a clinic or hospital to deliver.
15. Revealing a pregnancy during the first five months is hazardous as women fear being bewitched.
16. If a woman has morning sickness, she will go to a traditional healer for help.
17. Newborns (one week old) are given specific herbs to protect them from evil spirits. Thereafter, other herbs are given to foster the healthy growth of the child.

18. If a newborn (or a child up to six months) becomes ill, a decision on the type of care to seek is made either by the husband or the grandmother (mother's mother).
19. A sexually active woman is given herbs to help choose the sex of a child.
20. The herb "mwanamphepo" is drunk by pregnant women who are about to deliver to open the birth canal to make delivery easier.
21. Traditional birth attendants provide women who are about to deliver certain herbs to speed and make the delivery easier.
22. Traditional birth attendants have an excellent "bedside manner" in welcoming pregnant women and making them feel as comfortable as possible during the birthing process.
23. If a boy is born on the way to the hospital, either a sugar cane peel or "chitenje" is used to cut the cord.
24. The traditional birth attendant buries in a pit dug within the TBA homestead the part of the cord that falls off the child some days after birth.
25. Post-natal care includes bathing the newborn to remove any debris from the birth; babies are not bathed again until the remainder of the cord falls off.

Harmful reproductive health practices identified by MSH include the following:

- Inheritance of a wife or husband
- Practice of hiring of man for sex or conception (*fisi*)
- Death rituals such as hiring of a man for the widow to drive out the spirits (*kupita kufa*)
- Sexual cleansing (*kusasa fumbi*)
- Use of traditional herbs that induce labor
- Insertion of herbs into the vagina for dry sex
- Performance of traditional circumcision under unsterile conditions
- Male or female prostitution
- Prolonged postpartum abstinence that predisposes a man to promiscuity
- Traditional treatment of vulva/vaginal warts and hemorrhoids (i.e., by cutting)
- Denying pregnant women certain foods, which interferes with nutrition (e.g., eggs – eating eggs will lead to prolonged labor since the egg is enclosed in a shell)
- Polygamy
- Offering a second wife (young sister, cousin, or niece) as a token of thanks to a good in-law (*mbirigha hlazi* or *nthena*)
- Temporary spousal swapping (*chimwana mayi* or *mwana wa mama*)

## APPENDIX M: COMMUNICATION FOR SOCIAL CHANGE IN HIV/AIDS PREVENTION

### What is Communication for Social Change All About?

In September 2007, UNAIDS issued a briefing note on some recent advances in technical guidance on communication for social and behavioural change in HIV prevention. The issues that were taken into account in issuing this briefing were as follows:

- Communication strategies need to take into account the complex nature of human behavior and the underlying factors that fuel the epidemic.
- Traditional approaches to communication have been based on “Information, Education, Communication” or “Behavior Change Communication.”
- These approaches have had limited success as they have relied overly on individualistic approaches, and have failed to take sufficient account of context, often been ‘victim-blaming,’ and have sometimes been simplistic and didactic in nature.
- In contrast, effectively designed communication for social and behavioral change can impart accurate information, shift attitudes and social norms, change behaviors, reverse stigma, and increase the use of services.
- Without a communication strategy, other components of a broader strategy, such as PMTCT programs, counseling and testing, treatment adherence and new technologies such as microbicides and male circumcision are less likely to succeed.

### UNAIDS Definition of Communication for Social And Behavioral Change

Based on the recent technical consultation, the UNAIDS Secretariat has proposed the following definition of communication for social and behavioral change:

*Communication for social and behavioral change for AIDS is the strategic use of advocacy, communication and social mobilization to systematically facilitate and accelerate change in the underlying drivers of HIV risk, vulnerability and impact. It enables communities and national AIDS programs to tackle structural barriers to effective AIDS responses, such as gender inequality, violation of human rights and HIV related stigma. Successful programs have the capacity to blend participatory methods of community dialogue and empowerment with mass media approaches and other forms of informational and motivational communication and advocacy. The goal of such programs is to act as a catalyst for action at the individual, community and policy levels. Social change communication methods support development of locally owned and implemented solutions for social change that can be measured and tracked over time. Monitoring and evaluation of social change communication fosters both local engagement and quality improvement of change activities. They also foster the ability to share results horizontally and vertically for learning and accountability.*

*Social change communication programs work. They have been rigorously evaluated and shown to make significant and durable change in deeply rooted harmful practices; from domestic violence to police complicity in violence against men who have sex with men; from denial of HIV in rural communities to fear of using condoms in stable couples.*

## **APPENDIX N: MALAWI GENDER NETWORKS IN DEVELOPMENT**

### **1. INTRODUCTION**

A deliverable under the Gender Assessment SOW is a listing of donors and projects in Malawi that are gender focused. Because of difficulties in contacting the relevant umbrella organizations (many people had left for Easter vacation), we present here what we learned from the UN and NGO umbrella bodies. We were unable to obtain a list of organizations and projects, but encourage USAID to contact each of the agencies described below to obtain this information.

### **2. UN GENDER COORDINATION**

A number of coordinating bodies exist to foster and monitor the mainstreaming of gender in projects and programs. The UN family supports a Gender Coordinator, located within UNFPA, and gender focal points within each of the UN agencies operating in Malawi: FAO, UNDP, UNICEF, UNAIDS, UNHCR, and WFP. Their work is in support of the MGDS and focuses on five thematic areas:

- Sustainable economic growth and achievement of national food security
- Social protection and disaster risk reduction
- Increased equitable access to and utilization of quality basic social services by 2011
- National response to HIV/AIDS scaled up by 2011, to achieve universal access to prevention, treatment, care, and support
- Good governance, gender equality, and a rights based approach to development enhanced by 2011

In the coordinating body's (UNDAF) Monitoring and Evaluation Matrix, country program outcomes/outputs are listed as well as indicators that, where appropriate, require reporting on improvement in gender disparities. Each of the themes presented above is championed by a cluster leader to ensure that gender concerns are included in activities and monitoring. The Gender Technical Working Group seeks to strengthen dialog, consensus building and technical oversight on how gender as a crosscutting theme should be addressed in the implementation of projects and programs in line with national development frameworks and national and international instruments that promote gender equity and equality. The TWG is composed of Gender Focal Points for each of the five themes noted above. The UNDAF Gender TWG meets once a month, and is chaired by the Gender Coordinator in UNFPA.

### **3. DEVELOPMENT ASSISTANCE GROUP ON GENDER (DAGG)**

Bilateral donors, such as NORAD, DfID, CIDA and implementing organizations such as Action Aid, work together under the Chairmanship of a Secretary who works for CIDA. The goal of this group is to provide guidance to the MoWCD in prioritizing critical gender issues. The group meets monthly (the first Wednesday of every month) and is open to all development donors. We were not able to interview the Chair of the DAGG because of his out-of-town schedule. However, we were informed that the Chair has a list of gender-related projects being implemented by the various bilateral donor and UN agencies. Because of the potential for synergies to be created, USAID should attend the DAGG.

### **4. NGO GENDER COORDINATION NETWORK**

Membership in the network is comprised of 41 Malawian NGOs organized to work in the following five thematic areas:

- Gender-related laws
- Women in politics and decision making
- Gender-based violence
- Child Rights
- Agriculture and women's economic empowerment

The network was formed in 1998 and is an independent organization focusing on creating gender equity and equality in the five thematic areas. The members of the Network are guided by SADCC and AU gender policies, as well as the gender policies put forward by the MoWCD. International NGOs might be associate members, especially if they provide funding for Network initiatives. Network oversight is provided by nine trustees: the five leaders of the thematic areas, the chair, secretary, treasurer and a national coordinator.

The Network has been successful in organizing national initiatives related to the thematic areas, but has not been as successful in garnering support for the Gender Program put forward by MoWCD. To garner support, all donors/partners in Malawian development should be members of the DAGG so that efforts can be coordinated and a map of programs can be developed.

## **APPENDIX O: GENERAL QUESTIONS FOR MAINSTREAMING GENDER THROUGHOUT THE PROJECT CYCLE**

### **Gender Mainstreaming**

#### **Stage One: Identification of a problem**

- What is the main problem you are trying to address?
- How are women/girls and men/boys affected by the problem?
- Is one sex being given unequal opportunities in accessing resources or opportunities?
- What gender gaps exist that put men and women in a different problem situation?
- Is gender discrimination part of the problem?
- Does the problem seem to favor men above women?
- What is the level of participation of both women and men in the creation of and solutions to that problem?
- What are the needs of women/girls and men/boys relating to the problem?

#### **Stage Two: Project Planning**

- How do you plan to address the problem?
- Does the project strategy take into account gender concerns that have been identified as part of the problem?
- What are the project's goals?
- Do the project goals address the gender issues that have been identified as part of the problem?
- What are the project's objectives?
- Are the project objectives gender-sensitive/responsive?
- What programs, activities or services does the project have to ensure that gender needs and concerns will be addressed?
- Will the project activities address the needs of both men and women?
- Do the project activities take into account gender concerns and issues that have been identified as part of the problem?
- Is the project likely to have negative effects for women?

#### **Stage three: Project Implementation (Activities)**

- How will women and men participate in the project?
- How will the project affect women's and men's time?
- Are there any factors that may prevent women from fully participating in the project? How have these factors been addressed?
- Will the project activities require changes in the work patterns of women?
- Are project personnel familiar with gender issues?

#### **Stage four: Project Monitoring and Evaluation**

- Is there a framework for monitoring and evaluation?
- Has separate data been collected on women and men?
- Have indicators been developed to monitor and evaluate the project from a gender perspective?
- Are data collected in monitoring disaggregated by sex?
- Are gender-based indicators integrated into the monitoring and evaluation framework?

Does the project keep records to evaluate the outcomes and /or impact of the project on women and men separately?

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