



Hope for African  
Children Initiative

**END OF PROJECT EVALUATION**  
**Scaling Up Support to Orphans & Vulnerable Children GAD**  
**MWI 1024**



**REPORT**  
**Compiled by**

Peter Mbiko JERE & Bright B. SIBALE  
Centre for Development Management Consulting  
P.O. Box 30905  
Lilongwe 3  
Tel/fax: (265) 1 762755  
Mobile: (265) 8 850016/8 839847/09420034  
Physical address: Area 15 Plot No 161 Near Bambino Private School  
Email: [bbsibale@sdpn.org.mw](mailto:bbsibale@sdpn.org.mw) or [pjere@globemw.net](mailto:pjere@globemw.net)



Registration # 66136

**Submitted to**  
Plan International  
P.O. Box 2053  
Lilongwe

## **Acknowledgement**

The Evaluation Team (ET) would like to thank the Plan Malawi and its development partners for having decided to award the Evaluation of the “Scaling up Support to Orphans & Vulnerable Children” project to the Centre for Development Management, CDM and for the support provided that enabled us carry the said evaluation without major problems. Particularly, we want to thank Ronnie Hara and Andrew Machado for providing technical and financial coordination of the evaluation so well and ensuring that we had the necessary technical, material and financial resources to facilitate the smooth start and completion of the task. The ET would like to extend their thanks to the management and staff of all HAI partners, namely: Plan International, Care Malawi, World Vision International, Public Affairs Committee, Society for Women and AIDS in Malawi and Save the Children for the technical and logistical support provided to the evaluation team. Without your support, the evaluation could not have been so successful in such a short time.

We further thank all Community Based Organizations, Faith Based Organizations and other project stakeholders we visited in the sampled project areas for generously taking their time to provide information and contribute to the evaluation of the project. Without their support and commitment the ET would never have completed this important task.

We also thank all Research Assistants for the formidable team work and a job well done. To everybody concerned, we hope we have adequately reflected the key findings based on our investigations and that the ET key findings, lessons learnt and recommendations contained in the preliminary findings report will contribute, in both the shorter and long-term basis to further improvement in efficiency and effectiveness of HAI and other related projects in future.

We are accountable to you all and therefore take responsibility for any omissions, misinterpretations of facts and other errors in this report.

***Bright B. Sibale (Team Leader)***  
***Peter Mbiko Jere (Associate Consultant)***

## Table of contents

ACKNOWLEDGEMENT .....	2
TABLE OF CONTENTS .....	3
LIST OF ACRONYMS.....	4
<b>1.0 INTRODUCTION .....</b>	<b>5</b>
1.1. WHAT IS THIS DOCUMENT? .....	5
1.2. BACKGROUND TO THE PROJECT .....	5
1.3. EVALUATION OBJECTIVES .....	7
1.4. EVALUATION METHODOLOGY .....	7
1.5. STUDY LIMITATIONS.....	11
1.6. THE OPERATING ENVIRONMENT FOR THE HACI PROJECT AT NATIONAL LEVEL.....	11
<b>2.0 KEY EVALUATION FINDINGS.....</b>	<b>15</b>
2.1 PROJECT RELEVANCE.....	15
2.2 PROJECT EFFECTIVENESS .....	20
2.3 PROJECT EFFICIENCY .....	29
2.4 PROJECT IMPACT .....	31
2.4.1 REDUCED CASES OF STIGMA AND DISCRIMINATION .....	31
2.4.2 CHANGE OR DEATH OF HARMFUL CULTURAL PRACTICES.....	32
2.4.3 INCREASED ACCESS TO SECONDARY SCHOOL EDUCATION FOR OVCS.....	33
2.4.4 OVCS DEVELOPED LIVELIHOOD SYSTEMS .....	34
2.4.5 INCREASED ENROLMENT TO CBCCs.....	34
2.4.6 IMPROVED COMMUNITY RESPONSE TO CHILD ABUSE CASES.....	35
2.4.7 IMPROVED COMMUNITY ORGANIZATION FOR HIV AND AIDS MANAGEMENT.....	36
2.4.8 IMPROVED FAMILY STABILITY .....	36
2.5 SUSTAINABILITY.....	37
2.6 LESSONS LEARNT .....	42
<b>3.0 RECOMMENDATIONS.....</b>	<b>45</b>
<b>4.0 ANNEXES.....</b>	<b>48</b>
4.1 ANNEX 1: LIST OF STAKEHOLDERS INTERVIEWED .....	48
4.2 ANNEX 2: PROGRAMME FOR PARTNER VISITS ON FRIDAY – 23/05/08 .....	49
4.3 ANNEX 3: PROGRAMME FOR SITE VISITS – HACI EVALUATION .....	50
4.4 ANNEX 4: DATA COLLECTION TOOLS .....	51

## List of Acronyms

ADC	Area Development Committee
AIDS	Acquired Immuno-Deficiency Syndrome
CAC	Community AIDS Committee
CBCC	Community Based Child Care Centre
CBO	Community Based Organization
CDM	Centre for Development Management
DA	District Assembly
DDF	District Development Fund
DDPS	District Development Planning System
ECD	Early Childhood Development
ET	Evaluation Team
FBO	Faith Based Organization
FGDs	Focus Group Discussions
GoM	Government of Malawi
HBC	Home Based Care
HACI	Hope for the African Children Initiative
HCT	HIV Counseling and Testing
HIV	Human Immunodeficiency Virus
IEC	Information Education and Communication
IGA	Income Generating Activity
MACRO	Malawi AIDS Counseling and Resource Organization
MGDS	Malawi Growth and Development Strategy
M&E	Monitoring and Evaluation
NAC	National AIDS Commission
NAF	National Action Framework
NAPHAM	National Association for People Living with HIV and AIDS
NGO	Non Governmental Organization
NICE	National Initiative for Civic Education
OVC	Orphans and Vulnerable Children
PLWHA	People Living with HIV and AIDS
ToRs	Terms of Reference
VAC	Village AIDS Committee
VCT	Voluntary Counseling and Testing
VDC	Village Development Committee
VSL	Village Savings and Loans

## **1.0 INTRODUCTION**

### ***1.1. What is this Document?***

This is an End of Project Evaluation Report - “Scaling up Support to Orphans & Vulnerable Children” (GAD MWI 1024), a project coordinated by Plan Malawi and implemented by HACI Malawi, a consortium of 6 NGO partners, namely: Plan Malawi, Care Malawi, World Vision International, Public Affairs Committee, Society for Women and AIDS in Malawi and Save the Children. The report has been compiled by two evaluators: Bright Sibale, Team Leader and Peter Mbiko Jere, Associate Consultant, from the Centre for Development Management, herein after called the Evaluation Team (ET). The evaluation took place between 13<sup>th</sup> May 2008 and 25<sup>th</sup> June 2008. The evaluation relied on participatory investigation methods.

### ***1.2. Background to the Project***

HACI Malawi is a consortium of six NGOs namely: Plan Malawi, Save the Children US, CARE Malawi, World Vision Malawi, Society of Women and AIDS in Africa and Public Affairs Committee. It is part of the pan-African response to the situation of orphans and other children made vulnerable by HIV and AIDS which was established in 2000. HACI’s vision is to offer hope for a future of dignity as part of a functioning and stable community to millions of African children and their families affected by HIV and AIDS. Its mission is to mobilize a global initiative to address the needs of African children affected by HIV and AIDS and to engage, strengthen capacities, mobilize and share effective practices among stakeholders at all levels. HACI has four strategic objectives that it supports, at both pan-Africa and national levels. These strategic objectives are:

- Building awareness and reducing stigma
- Extending the partner-child relationship
- Preparing families for transition and
- Ensuring the future of the child

In 2005 Plan Malawi on behalf of HACI Malawi, signed a Grant Agreement with Norway National Office to a tune of NOK 4,303,257 (USD 624,444) and this was to be given in yearly instalments for a period of 3 years to enable it implement *Scaling-Up Support to OVC” project*. The funding has been increasing every year due to deviations such that by October 2007, the total funds released to the project had come to USD1,177,473.92. The project was expected to benefit over 48,000 households in 10 districts, targeting orphans, OVCs, PLWAs, HBC patients and youths.

HACI Malawi has been implementing this three year “Scaling-Up Support to OVC” project from February 2005 to December 2007 through the six partners in their respective focus districts: Lilongwe, Kasungu, Mchinji, Dedza, Chikwawa, Nkhotakota, Mangochi, Machinga, Zomba and Mzimba.

The project focussed on children who lost one or both parents and those who had been made vulnerable as a result of HIV and AIDS. NAC estimates showed that there were 840 thousand orphans in the country in 2003. Of these, about 50% was attributed to AIDS. In addition to orphans there are also other children who have been rendered vulnerable. OVCs have difficulties in accessing their basic daily needs. They also lack psychosocial support.

The long term goal of this project was to improve the well being of children by increasing access to services and building the capacity of families, communities and other stakeholders to effectively participate in prevention, care and support to OVC and affected families. This was to be done consistently within the HACI Strategic Framework (objectives).

HACI works by supporting local NGOs, Community Based Organisations, Faith Based Organisations and relevant government Ministries that are addressing HIV and AIDS and children's issues including child rights. It assists them to scale up sustainable programs supporting orphans and vulnerable children and to monitor and evaluate the effectiveness of their support to OVC

Concrete objectives that the project set out to achieve during the three years were:

- To increase access to HIV Voluntary Counselling and Testing services
- To increase and strengthen OVC and PLWHA access to psychosocial support
- To support families and communities in succession planning
- To increase access to education, vocational training and life skills

Activities of the project included lobbying for and support the opening of more HCT centres in Lilongwe, Kasungu and Mzimba districts

- Conduct sensitization and mobilization activities to raise demand for HCT
- Pilot a HCT workplace program
- Train religious leaders, teachers and community members to provide psychosocial support
- Sensitize communities on Prevention of Mother to Child transmission of HIV
- Advocating on inheritance rights for children and women
- Training PLWA families in Memory Book and Will writing and appointing guardians
- Provide secondary school educational support to OVCs
- Train OVCs and youth in life skills education
- Train older out of school OVCs in vocational skills

By the end of three years the project was to achieve the following targets:

- At least 400 people supported to access HCT services
- 450 OVC accessing psychosocial services
- 1000 PLWHA accessing psychosocial support
- 100 youth clubs formed to provide peer counselling

- 400 religious leaders trained to provide psychosocial counselling to at least 1000 OVC families
- 250 OVC equipped with life skills
- 1500 OVC supported to access education
- 100 OVC supported to access vocational training
- 1500 PLWHA trained in will writing and memory book writing

### ***1.3. Evaluation Objectives***

The main goal of the Consultancy was to assess how well the project met the intended outcome and impact to the targeted children and women and effectiveness of the strategies used. Specifically, the evaluation was intended to address the following:

- Establish to what extent the project has achieved its objectives and delivered the planned interventions/activities. Comment on what are the positive things and/or negative things that can be learnt from the project
- How appropriate or inappropriate were the strategies used in this project
- What is the relevance of the project strategies and activities carried out
- Whether the project activities/interventions were cost effective and efficient
- What changes has the project brought about at different levels and with the different stakeholders (Malawi HACI partners, communities including children and partners) both positive and negative (outcomes and impact)
- Timeliness and the effect it had on the program
- Sustainability of the interventions beyond the life of the project
- Challenges and obstacles during project implementation and how these were overcome/addressed
- Lessons learnt and best practices during project implementation which can be used for scaling up and/or shared with partners within and outside the organization
- Recommendations for improvement in HACI Program and other related projects

### ***1.4. Evaluation Methodology***

As required by the ToRs, the ET approached the evaluation with an open-minded participatory process using focus group discussions and key informant interviews.

The exercise was undertaken with regular feedback to and from the Districts. For example, at the beginning of the evaluation, the ET held **entry** meetings with all partners implementing the project to obtain an overview of the project in general and specific to the relevant partner. The implementing partners were also requested to complete an overall project assessment form during the same meetings to highlight specific achievements their projects have achieved against their targets. After these meetings, the ET visited CBOs and FBOs implementing the project at district level to obtain more insights on project implementation in terms of its achievements, constraints, lessons learnt and recommendations. The meetings also involved interviews with project

beneficiaries to confirm how they participated and benefited from the project. This process enabled the project implementing partners and beneficiaries to actively participate in the evaluation, while we maintained our independence. Overall the evaluation was done in the following schedule.

### **Preparation for the evaluation**

The evaluation process began with preparatory meetings and discussions with Plan Malawi management led by the HAI Malawi Project Coordinator. The objective of these preliminary discussions was to enable the consultant fully understand the project, in terms of its rationale, objectives, strategy and implementation arrangements. The discussions also involved agreements on the methodology, evaluation plan and the logistics required for enabling a successful evaluation. We then developed an evaluation framework to guide the evaluation and the data collection process. The ET then developed tools for data collection, which included Focus Group Discussions (FGD) checklists for implementing partner staff, OVCs, CBOs and FBOs,

### **Stakeholder Consultations**

There were two sub-phases of consultations: The first sub-phase involved consultations at the project coordination level with Plan Malawi and HAI partners. The second sub-phase level was field-based and involved visiting 5 carefully sampled districts and their respective sites to interview key project stakeholders and implementers. Groups of stakeholders that we interviewed included, OVCs, district assemblies, CBO/FBO leaders, Care Providers (for CBCCs and HBC), PLWAs, and youths. Due to the nature of the project, Community AIDS Committees, Village AIDS Committees, CBOs and FBOs were the major community level stakeholders involved in the project and hence were key to the study. Therefore efforts were made at each site to interview the leaders.

### **Sampling framework**

The project was implemented in 10 districts, namely Lilongwe, Kasungu, Mchinji, Dedza, Chikwawa, Nkhosakota, Mangochi, Machinga, Zomba, and Mzimba districts. This means that there were 4 implementation districts in the southern region, 5 in the central region and 1 in the northern region. The project worked through a grants arrangement with community based organizations or faith based organizations.

A purposive sampling framework was adopted for the study and was intended to make sure that a representative sample of the project sites was assessed. The sample design was based on the following parameters:

- 100% representation of implementing partners to ensure that implementation lessons are drawn across the spectrum of partners
- 50% of districts were visited representing 5 districts where the project was implemented. This means that within the 5 districts, specific project sites representing the 6 implementing partners were selected
- Based on regional representation, the study was conducted in 2 districts in the southern region, 2 in the central region and one in the northern region selected

purposefully based on the presence of a significant proportion of partners in the district.

- Wherever practical, one site for each of the 6 implementing partners was visited in each of the 5 districts. In case some partners were not represented in the district, the number of sites to be visited was drawn from among the available partners. In cases where the partners were over-represented, like Lilongwe, we planned to assess more than 6 sites
- In each site, our team interviewed beneficiaries in different categories depending on the scope of the project. To ensure gender representation wherever possible, we undertook to interview all gender groups

The table below shows distribution of project sites by partner and district. The table gives a holistic picture of project coverage in all the ten districts

**Table 1: Distribution of project sites by HACI partner and district**

DISTRICT	PAC	PLAN	SWAAM	CARE	SCF	WVM	# of partners represented in a district
Lilongwe							6
Dedza							1
Kasungu							2
Mchinji							1
Chikwawa							1
Nkhotakota							1
Mangochi							2
Machinga							1
Zomba							1
Mzimba							2
# of districts covered by partners	7	3	1	1	2	4	

Based on the table above, Lilongwe district had a 100% representation of HACI partners, with Kasungu, Mangochi and Mzimba having about 33% representation of partners each. We therefore suggested to select the 4 districts for the study sample based on the principle of selecting districts with a significant partner representation. We also envisaged that where other partners were not represented, the existing partners would provide the required number of sites or CBOs to be studied. Below is a picture of the number of sites that each partner provided in the sampled districts for the study:

**Table 2: Number of sites planned to be visited in the sampled districts**

Partner	Lilongwe	Kasungu	Mangochi	Chikwawa	Mzimba	Total sites presented by partners
PAC	1		2	4	2	9
PLAN	2	2			3	7
SWAAM	2					2
CARE	2					2
SCF	2					2
WVM	2	3	3			8
TOTAL # OF SITES PER DISTRICT	11	5	5	4	5	<b>30 - TOTAL # OF SITES</b>

You will note that the final outcome of the sampling exercise generated an imbalance on the number of sites to be assessed among the implementing partners. It is however evident that the three partners with the most sites to be studied represented 50% of the number of partners which is a good sample against which to make conclusions on the overall performance of the project. This was however not achieved due to logistical challenges due to the limited time available to conduct the evaluation exercise. Table 3 below presents the actual number of sites that were visited in the sampled districts by the ET:

**Table 3: Actual number of sites visited in the sampled districts**

Partner	Lilongwe	Kasungu	Mangochi	Chikwawa	Mzimba	Total sites presented by partners
PAC			3	2	2	7
PLAN		1			2	3
SWAAM	2					2
CARE	2					2
SCF	2					2
WVM	1	3				4
TOTAL # OF SITES PER DISTRICT	7	4	3	2	4	<b>20 - TOTAL # OF SITES</b>

Table 3 above shows that the sample size dropped by 10 sites, from 30 to 20 but still covering the planned 5 districts (out of 10) and all 6 partners. Overall, the ET visited more sites in Lilongwe district as originally planned. Although 10 sites represent a significant decline in the sample size, we feel that the geographical coverage and partner coverage is of reasonable size to be used to determine the performance of the project considering that the evaluation was based on qualitative methods.

You will also note that the district level distribution is almost even except for Lilongwe where 11 sites will be studied in line with the high concentration of partners compared

to the other districts. While the other districts have been selected based on representation of partners (at least 2 in the district), Chikwawa (with only one partner) has been selected because of its unique demographic and socio-economic profile which contributes to representativeness of the study sample

### ***1.5. Study Limitations***

The HACI project under review was completed in December 2007. Our assessment took place in June, some 6 months after completion of the project. As a result, the ET experienced challenges to generate information from project stakeholders on the project as most of them had lost memory of what had exactly happened. This was further exacerbated by the fact that the NORAD funded portion of the project was only a build up on previous funding cycles by other donors since the HACI project started much earlier than 2005, the year when NORAD funding commenced. Many times respondents had difficulties to differentiate NORAD funded activities from those funded by other donors. We attempted to mitigate the two challenges through triangulation with secondary as well as primary data although some elements in the report may be misrepresented as a result of the same.

### ***1.6. The Operating Environment for the HACI Project at National Level***

While we appreciate that we were not asked to analyze the socio-economic and geo-political environment, in which the HACI GAD MWI 1024 project was implemented, we felt duty bound as evaluators to do so to enable ourselves and our client to appreciate some “big picture” issues that have surrounded the implementation of the project. We believe that the issues identified below, might have influenced, positively or negatively the level of success or failure of the HACI GAD MWI 1024 project. This analysis is important as it also ascertains whether the assumptions that might have been made for the project at design phase have held so or not.

#### ***1.6.1 Macroeconomic Management***

The HACI GAD MWI 1024 project has been implemented since 2005, a year after Malawians ushered in a new government. Since the new government took office in 2004 without a parliamentary majority, it has generally been difficult for the Government to implement certain legislative provisions which are quite critical to the country's development. There has generally been increased conflict between the Government and the opposition. Budget approval has been delayed annually, resulting in delayed delivery of public services to people, including those in HACI GAD MWI 1024 project impact areas. For example, the 2007-2008 agricultural season experienced delays in provision of the inputs subsidy to the poor as a result of delays in budget approval which affected acquisition of the inputs from international suppliers. In most parts of the country and especially in the central and southern regions, farmers received subsidized inputs when their maize crops had already reached tussling stage. This led to most farmers growing without fertilizer and harvesting little in the process.

Besides these political developments, the economy is on a fast recovery path registering average growth rates of between 6-8% annually purely on the basis of improved

agricultural production, weather reliability and improved donor confidence in the government. The inflation rate has also been reducing and is now around 7.2%, the official interest rate has reduced from around 52% during the former regime to around 17% with the current government.

### **1.6.2 Agricultural Policy**

According to the Malawi government (MGDS, 2006), agriculture is the single most important sector of the economy as it employs about 80% of the work force, contributes over 80% of foreign exchange earnings and accounts for 39% of gross domestic product (GDP). Above all, it also contributes significantly to national and household food security. The Draft Agricultural Development Programme for Malawi divides the agricultural sector into two main sub-sectors - the smallholder sub-sector that contributes more than 70% and the estate sub-sector that contributes less than 30% to agricultural GDP (MOAFS, 2008). Smallholders cultivate mainly food crops such as maize (the main staple grain), cassava and sweet potatoes to meet subsistence requirements while estates focus on high value cash crops for export (tobacco, tea, sugar, coffee and macadamia). Smallholder farmers cultivate small, fragmented land holdings under customary tenure with yields lower than in the estate sector.<sup>1</sup>

The agriculture sector is characterized by low and stagnant yields, over dependence on rain fed farming which increases vulnerability to weather related shock, low levels of irrigation development and low up-take of improved farm inputs among others. This is exacerbated by weak links to markets, high transport costs, few and weak farmer organizations, poor quality control and inadequate information on markets and prices. Due to high risks in agricultural production and poor access to credit, investment and re-investment have been poor, (GoM, 2008).

The problems described above facing the agricultural industry cascade downwards to the district and community levels. Food insecurity is the main problem facing development in all the HACL GAD MWI 1024 project impact districts (District Development Plans - 2007). Almost all households depend on agriculture for their livelihoods, but agricultural production has been affected negatively by weather unreliability in the form of dry spells, heavy rains, floods and droughts, especially in Chikwawa district. In addition, most of the project impact areas face serious environmental degradation in the form of deforestation, which has also contributed negatively to the impact of floods.

### **1.6.3 Agricultural Input Subsidy Programme**

Limited access to agricultural inputs, especially seed and fertilizers, high dependence on rain-fed agriculture and the unreliability of weather are major causes of food insecurity in Malawi. To address these constraints, the new government introduced the much talked about fertilizer and seed subsidy, a programme where targeted farmers are provided with coupons to buy fertilizers and seed at subsidized prices from retail

---

<sup>1</sup> GOM (2001) notes that owing to population pressure, resulting in the fragmentation of land, the national mean land holding size has fallen from 1.53 hectares per household in 1968 to 0.80 hectares per household in 2000.

markets across the country. Although the programme has had some operational problems such as timely implementation, targeting (who gets what, when), logistics, and corruption, it has yielded quite substantive impacts, in terms of food security, especially at national level. For example, for the first time over the past decade, Malawi attained a national surplus of maize of about 1 million metric tones in the 2006-2007 agricultural season attributed largely to good rainfall and the national agricultural input subsidy programme. In the HACI GAD MWI 1024 project sites, the ET did not particularly establish who benefited from the input subsidy, but it is obvious from our discussions with staff and beneficiaries at field level, that some beneficiaries had been included in the programme. The subsidy programme must have complemented the achievements and impacts made by the HACI GAD MWI 1024 project.

#### **1.6.4 Policy and institutional framework for OVC support**

The ET has noted that the HACI GAD MWI 1024 project has been implemented with certain policy and institutional frameworks. The Malawi Government pursues economic growth and development through the Malawi Growth and Development Strategy (MGDS) which is the overall national development framework and every stakeholder is expected to implement priorities identified in the strategy. Theme two of the MGDS is social protection and disaster risk management. Sub-theme one under theme 2, the Government aims is to improve the life of the most vulnerable. Agriculture and food security is another important priority area in the MGDS. The aim also is to reduce food shortages at all times, even in times of disasters.

HIV and AIDS is also recognized as a national disaster. The HIV and AIDS priorities of the MGDS are implemented through the National HIV and AIDS Action Framework (NAF) which is coordinated by the National AIDS Commission (NAC). The four core objectives of the HACI GAD MWI 1024 project specifically address the impacts of HIV and AIDS on the targeted communities. More specifically, the objectives of HACI address the overall goal of the National Policy on Orphans and other vulnerable children which is to facilitate support for care, protection and development of orphans and OVCs in a coordinated manner in order to provide them with an environment in which they realize their full rights and potentials.

We also noted that the HACI GAD MWI 1024 project has been implemented in an environment of decentralization for local governance. Although at the moment there are no elected members of the District Assembly due to failure by Government to hold local government elections, the mere presence of Decentralization Policy has facilitated some changes at various levels. For example, the establishment of Area and Village Development and Executive Committees has opened opportunities for enhanced community involvement in decision making on issues affecting their lives, including OVC issues. The creation of the District Development Fund (DDF) has diversified funding sources and increased potential availability of financial resources for HACI related projects at community level. In some communities, the capacity created by the implementation of the HACI GAD MWI 1024 project has the potential to enable communities to link up with these new funding mechanisms, but there is room for more linkages.

### **1.6.5 Poverty and high levels of vulnerability**

In all the 5 districts we visited, the ET noted high levels of abject poverty within communities. The high levels of abject poverty and vulnerability has created unexpected pressure on the project, to the extent that all communities in the implementation areas, expected to receive tangible benefits from the project support. Demand for the projects meager resources in all communities visited is generally high and understandably so because of the increasing numbers of OVCs and orphans due to the impacts of HIV and AIDS. For example, the number of OVCs on secondary school scholarship has been dwindling through the years with most CBOs only supporting 6-9 children in 2007 from 20 and above in 2005 and 2006. It is from this point that linkages with the DDF and other NGO funds at district level could be helpful in fully implementing the communities' OVC plans.

### **1.6.6 Gender, HIV and AIDS and Culture**

The HIV&AIDS epidemic has had a devastating impact on Malawi's social and economic fabric. It is estimated that there are now around one million people living with HIV&AIDS and a further one million orphaned or vulnerable children in the country (out of Malawi's total population of 13.2 million). Reports from various agencies estimate that women make up to 58% of the total population that is living with HIV and AIDS. The HIV/AIDS prevalence in adults (15 to 49 years) in Malawi in 2005/2006 is 14% (NAC, Monitoring and evaluation Reports). The Demographic and Health Survey (DHS) reports a figure of 12%. Unfortunately the age group affected most by HIV and AIDS is also the most economically active, which means that HIV and AIDS has a direct impact on how the community can respond to other disasters at all levels of the economy. For most sites visited, gender inequality and culture remain key challenges in addressing the needs of OVCs in the context of HIV and AIDS. Cases of stigma and discrimination are deeply engrossed in the people's culture. Harmful cultural practices are still prevalent although the project has made significant progress in addressing some of them.

## 2.0 KEY EVALUATION FINDINGS

The findings have been categorized into five evaluation issues as follows 1) relevance, 2) effectiveness, 3) efficiency, 4) impact and 5) sustainability. Project relevance refers to how well the project addressed the key issues or problems expressed in the project design and the national context. Project effectiveness is an assessment of whether the project has achieved its set objectives. Efficiency refers to the extent to which the project has used the least possible resources to achieve the required quality of outputs/outcomes. Impact is the systematic analysis of the changes in people's lives (children, families and communities) brought about by the project. Sustainability is the extent to which the impact of the project will continue after the project has ended?

### 2.1 Project Relevance

Assessment of project relevance concerns whether the results, purpose and overall objectives of the project are in line with the needs of and aspirations of the beneficiaries as reflected in the national or sub-national (decentralized) policy framework.

#### 2.1.1 Global and National level context

Our assessment shows that HACI GAD MWI 1024 project is consistent with the objectives of the Malawi Government, as outlined in the Malawi Growth and Development Strategy. In particular, the project was instrumental in contributing to priority number 6 of the MGDS – prevention and management of nutrition disorders, HIV and AIDS. The main goal of priority number 6 of the MDGS is two fold: 1) To prevent further spread of HIV and AIDS and mitigate its impact on the socio-economic and psychosocial status of the general population and high risk groups; 2) To ensure the nutritional well being of all Malawians; 3) To improve the nutritional status and support services for people living with and affected by HIV and AIDS. We can therefore confirm that at national level, the HACI GAD MWI 1024 project addresses key development policies of the Malawi Government as indicated in the Malawi Growth and Development Strategy (MGDS).

By promoting initiatives intended to build awareness and reducing HIV and AIDS related stigma, extend parent-child relationship, prepare families for transition and ensuring the future of the child the project is directly contributing to the MGDS priority number 6 as stated earlier. And by promoting OVC access to education and early childhood development, the project is directly contributing to theme number 3 of the MGDS, social development and the sub theme



OVCs undergoing tailoring skills training at Tukamilane FBO in Mangochi– 03/06/2008

on education. Because of its direct linkages with the MGDS, the HACI GAD MWI 1024 project is directly contributing to the aspirations of the Millennium Development Goals, especially goal 1 - poverty eradication, Goal 3 - gender and women empowerment, and Goal 6 - HIV and AIDS. Activities implemented in the impact areas included but not limited to behaviour change training, business management training, bambo wa chitsanzo<sup>2</sup> training, sensitization on HIV & VCT, stigma and discrimination awareness, establishment of VCT centres, paying school fees for OVCs in secondary school, HBC support, crop production, vocational skills training (like tailoring, carpentry, tinsmithing, basket weaving), IGAs, will and memory book writing training, formation of PLWA support groups, establishment of and supporting CBCCs, nutrition support to OVCs, psychosocial training, life skills training, and guardian training on OVC care etc.

### 2.1.2 District and community Levels

The HACI GAD MWI 1024 project is a community based project, therefore its relevance can best be measured by examining how it has addressed the needs of districts and communities where it is being implemented. To address this issue, the ET looked at the priorities of the 4 out of 5 districts which we visited, as contained in the District Development Plans (DDPs) of the districts in question. The table below shows some examples of how the project relates with DDPs in some districts where we had information. The key development issues that the HACI GAD MWI 1024 project has addressed are italics.

**Table 4: Summary of the key issues in the District Development Plans**

<b>District Assembly</b>	<b>Development priorities as identified in the District Development Plan/Socio-economic Profile</b>
Lilongwe	<i>Inadequate safe water, food insecurity, low education quality, high illiteracy, high maternal and child mortality, high prevalence of HIV and AIDS, poor access to health services, poor housing, poor roads, high population growth, environmental degradation, poor communication and high crime rates.</i>
Mangochi	<i>Food insecurity, low income levels at household level, environmental degradation, high infant and maternal mortality rates, poor education facilities, unemployment, limited access to safe water, high illiteracy levels.</i>
Chikwawa	<i>High incidences of HIV/AIDS, Food insecurity, floods and drought prone areas, environmental degradation, dependency syndrome.</i>
Mzimba	<i>Food insecurity, Low quality education, High environmental degradation, High incidences of infant, child and maternal mortality rate, Limited access to safe water and sanitation, Lack of access to transport and communication facilities, High prevalence of HIV/Aids, Low Household Income, High Population growth, High gender imbalance, High illiteracy rate of 46%, High crime Rate</i>

<sup>2</sup> Bambo wa chitsanzo means “A role model husband, man or father”

The HACI GAD MWI 1024 project supports communities by building their institutional capacity to mitigate the impacts of HIV and AIDS. The project works through established community based committees (CACs & VACs), CBOs or FBOs, run and managed by community members themselves to respond to community needs in order to improve the welfare of children in their areas. Intensive capacity building initiatives in form of training have been conducted to enhance the governance capacity of the community structures so that they are able to sustain project support to their areas. For the ET, capacity building of communities using existing community structures has been the major strength of the HACI GAD MWI 1024 project.

Child centeredness is the primary principle of this intervention. Thus, all interventions are targeted towards OVCs to ensure their protection, needs based support and inspire hope for the future. HIV and AIDS has impacted quite negatively on the local communities making the lives of most children, especially orphans, quite unbearable. The extended family system is threatened under the burden of care for orphans and widows. This, coupled by chronic poverty levels, has significantly compromised the capacity of families to provide quality care to children, and more especially orphans. All this has made HIV and AIDS a very serious community disaster in all the sites we visited. Migration to South Africa is a serious factor contributing to poor quality of lives for children, especially in Mzimba and Mangochi districts. Cases of absentee spouses, especially husbands, is quite rampant and in some cases they don't even provide resources to their families for protracted periods of time. The people we interviewed in all sites recognise this situation and have mobilised themselves to undertake initiatives

targeting families to enhance their capacity to provide quality care to children. Activities being implemented have contributed well to food security in households supporting OVCs. PLWAs have been organized in support groups where they receive different types of support to enhance their positive living. There are also extensive networks of HBC volunteers that have been trained and are doing tremendous work of caring for HBC patients to improve their welfare and that of their children. School fees support has enabled a significant number of OVCs to access secondary school and sometimes tertiary education while vocational skills



Charles Jimu, a graduate of the carpentry skills training at Nchalo Trading Centre in Chikwawa working at his carpentry shop – 04/06/2008

training has equipped many youths with skills that are being used today to develop their livelihood systems from which they are able to earn a decent living. This is actually an improvement on most OVCs from a state of dependency to self reliance.

### **2.1.3 Assessment of project design**

Assessment of design strengths and weaknesses is an important element of project evaluation as it helps to explain factors that might have contributed to the success or failure of a project. It is also an important evaluation issue because it generates lessons learned that can be adopted in future design of similar projects. The ET has noted the following strengths and weaknesses of the project design that might partly explain success or failures.

#### **Strengths**

- 1) The project focused on capacity building of existing community structures (CBOs, FBOs, CACs and VACs) and families which means that knowledge and skills in HIV and AIDS management would be locally available at community level. The evaluation team notes that the focus on capacity building is important for sustainability, especially at community level.
- 2) The project worked through a consortia and network approach. The HACI consortia comprised 6 international as well as national NGOs. The HACI network was established as an avenue for sharing lessons and experiences in management of child focused initiatives. Through this arrangement, the project was able to scale up support to OVCs and orphans to a wider constituency in the country. The arrangement was also an opportunity for learning and sharing in terms of implementation approaches as well as complementarity in sharing/mobilizing expertise and resources as it was managed based on partner comparative advantage.
- 3) The project was also designed to use organizations that are already on the ground and implementing HIV and AIDS related activities. This arrangement enabled the project to benefit from implementation experience of the partners. The arrangement also enabled the project to benefit from utilization of existing human resources without additional salary payments as well as resources from other projects where HACI finances experienced disbursement delays.
- 4) The project was also designed based on a common Monitoring and Evaluation Framework which was developed through a participatory process at regional level and a common logical framework to guide project implementation by all partners. This provided a mechanism for coordinated implementation and project monitoring to achieve common objectives and targets. It is however evident that the arrangement lacked human capacity to manage as the coordinating agency did not provide a full time officer to undertake this work
- 5) The project was also designed to employ participatory management approaches. By making the project participatory, the implementers allowed it to address the critical needs of the people within the framework of the rights based approach.

### **Design weaknesses**

The ET noted that if the following areas were improved in the design, more impact might have been achieved.

- 1) The project design was not very clear on strategies for integration with the decentralization structures at district as well as community levels. As a result, the project was implemented with limited engagement with the decentralization structures of District Assemblies like District Executive Committees (DECs), Area Development Committees (ADCs) and Village Development Committees (VDCs). Working through decentralization structures would have linked the project initiatives more strongly to the district development planning system (DDPS) and the District Development Fund (DDF). The arrangement has the potential to promote sustainability and integration of OVC principles and priorities in the district development planning system, providing opportunities for synergy at district assembly level.
- 2) The project design committed the role of consortia coordination to an officer who was not full time. Our study has noted that the role of the coordinating officer was quite enormous and therefore required full time attention. Some of the weaknesses of the project experience are clearly a result of inadequate coordination capacity of the HACI secretariate.
- 3) The project design set up a criteria for financial resource allocation to the six implementing partners that remained unclear and contentious throughout the project implementation period with some partners arguing that the criteria used was technically not viable because their organizations had a wider coverage than some partners that received bigger allocations. The criteria, which was a source of distress to some partners, allocated more resources to some partners and less resources to others. The criteria predetermined allocations to partners in percentages and was set at Country Programme Council level, a body that provided policy level oversight to the programme. The ET feels that the criteria should have been developed in a more transparent and participative way to ensure technical soundness and buy in.

## 2.2 Project Effectiveness

### 2.2.1 Effectiveness towards achievement of goals and core objectives

The HACI GAD MWI 1024 project goal was improved well being of children by increasing access to services and building the capacity of families, communities and other stakeholders to effectively participate in prevention, care and support to OVC and affected families. The success of a project is measured by how much it addressed the purpose for which it was created, i.e., how it addressed the problems which it was designed to solve. The HACI GAD MWI 1024 project was designed within the HACI Strategic Framework, which has four core objectives that HACI Malawi subscribes to: 1) Building awareness and reducing stigma, 2) Extending the parent-child relationship, 3) Preparing families for transition and 4) Ensuring the future of the child.

In assessing how successful the HACI GAD MWI 1024 project goals have been met we have looked at both how the above core objectives have been addressed singly or in an integrated way.

#### 1) Output: At least 400 people supported to access Voluntary Counselling and Testing (VCT) services

The ET notes that HIV Counselling and Testing (HCT) is an entry point for prevention and care and is widely acknowledged as an effective strategy for both HIV and AIDS prevention and care. This NORAD funded HIV & AIDS project has been working with the Ministry Health through district health offices to scale up HIV testing and counselling services. During the three years, the project has supported the establishment of 7 health facility based HCT centres through Plan Malawi and WVI in Mzimba, Kasungu and Lilongwe districts by renovating and furnishing rooms to cater for services. The project also supported 6 CBOs to start providing community based and mobile HCT services in project districts of Lilongwe, Mzimba and Dedza through Plan Malawi and Save the Children. In addition to this, it supported the training of 60 HCT volunteers in various districts. To insure sustainability, the responsibility for provision of supplies and technical support was passed on to District Health Offices.



Rehabilitated VCT centre at Kapelula in Kasungu by WVM – 28/05/2008

According to monthly reports from HCT centres established through this project, a cumulative total of 13,115 people (6150 male and 6951 females) have been counselled, tested and received their results. The project, SWAAM in Lilongwe, Plan Malawi, Save the Children and PAC also facilitated the formation of over 39 post-test clubs and 11 PLWA support groups that reinforced the counselling message clients received and educated the general public on the importance of knowing one's sero status. In Mangochi district, through WVI, the project supported mobile HCT services during this years HCT week reaching 5449 people (2975 male, 2474 female)



Tovwirane VCT centre at Zuwayumo in Mzimba built by Plan – 29/05/2008

## 2) Outputs: 450 OVCs, 1000 PLWAs and 1000 OVC families accessing Psychosocial Support

The ET notes that the basic needs of children infected or affected by HIV and AIDS are not only material (food, shelter, clothing etc.) but a combination of material and psychological needs. Meeting these needs is important for the growth and ability of the child to succeed through life.

With support from NORAD, various HAI partners set out to strengthen psychosocial services. Over 80 people (extension workers, religious leaders, CBCC care givers, HBC care providers, primary school teachers and CBO/FBO representatives have been trained as trainers in psychosocial support (PSS). In turn the trainers have trained numerous other volunteers. For example, Care Malawi trained 12 CBO representatives who provided PSS services to 11, 907 OVCs in their project sites and Plan Malawi through Tovwirane HIV & AIDS Organization and YOCAFO, a local NGO



Members of Kazomba FBO in Mzimba who underwent psychosocial support training– 29/05/2008

and CBO respectively, in Mzimba, trained 104 volunteers who over the three years have provided PSS services to over 19,897 OVCs through CBCCs, primary schools, and home visits.

Through Save the Children, Plan Malawi and Society of Women Against AIDS in Malawi (SWAAM), the project also identified and trained 85 home based care (HBC) volunteers in psychosocial support counselling so that they integrate it with palliative care services. Cumulatively, 519 PLWAs have been reached by these volunteers.

### **3) Output: 100 Youth Clubs formed to provide peer counselling**

The ET established that all HACI partners (Public Affairs Committee, SWAAM, WVI, Save the Children, Care Malawi and Plan Malawi) through CBOs and local NGO, facilitated the formation of over 46 new youth clubs, increasing the total number youth clubs in NORAD funded project impact areas to over 213. In Lilongwe district, through Care Malawi, 29 youths (16 boys, 13 girls) were trained in peer education approaches. Areas covered in this training included: growth and development of young people, parenting, counselling, communication, decision making, assertiveness and problem solving, HIV & AIDS and STIs, teaching methods and mentoring. These youths were able to reach 5109 youths (2,608 boys, 2,501 girls).

Care Malawi in partnership with youth clubs also established youth corners at Thonda and Chileka in Lilongwe district which act as Youth Resource Centres. Registers at the centres showed that 36,745 youths (24,981 boys, 11764 girls) have patronised the Youth corners since their establishment eleven months ago.

HACI Malawi, with NORAD funding has trained 1,753 youths (885 boys, 868 girls) in life skills education which equipped them with reproductive health and HIV & AIDS information, decision making, negotiation and assertive skills. About 15 youth clubs were provided with foot balls and net balls and other recreational materials such as board games. Sporting activities have shown to be very effective way of mobilizing youths. Kazomba and Tukumulane FBOs in Mzimba and Mangochi districts have extensively used sports as a methodology for mobilising youths to participate in HIV and AIDS activities. PAC, the facilitating organization provided the youths with sports equipment and trophies which are competed for among youths from different FBOs and CBOs.

#### 4) Output: 1500 OVCs supported to access education

The ET notes that children in households affected by HIV and AIDS, among other things, face reduced opportunities for schooling and education largely because of economic reasons. But education can empower a child to compete with peers in the job market and achieve self-sufficiency. Thus ensuring that OVCs remain in school has been one of the most important and successful interventions in this project. Over three years and



OVCs benefiting from school fees support at Tukumulane in Mangochi– 03/06/2008

across the 10 districts, 716 OVCs (394 male, 322female) were supported with secondary school fees. Most beneficiaries got tuition fees for one school calendar year and few for more than a year due to inadequate funding.

Among these, some have completed their secondary school education and have since gone into tertiary education while others have sought employment. Mbawemi CBO in Mzimba has continued using its own resources to support one of their beneficiaries to pursue tertiary

education at Livingstonia University in the northern region. Demand for school fees support was generally high due to increasing numbers of OVCs in the midst of diminishing financial resources. For example, in 2007 almost all partners reduced numbers of OVCs on scholarship by over 50 percent and in some cases did not provide enough resources to pay for uniform and learning materials, leading to some OVCs being expelled from school. But overall, the intervention has yielded significant results. In reaction to a question on the impact of the scholarship, one student said:

*“Ine ndine mwana woyamba pa ana 6 kwathu kuwanda ku secondary. Ndine mwana wachiwili komalizira. Enawo makolo akuti fees inasowa ndiye amangochita ma gain ndi kugulitsa nsomba<sup>3</sup>”. Manje Aron from Tukumulane FBO – one of the OVCs in form three benefiting from school fees support.*

---

<sup>3</sup> The quote as translated: “I am the first of 6 children in our family to get to secondary school level. I am 5<sup>th</sup> born in the family. Parents said they could not pay school fees for the others because they didn’t have money. As a result the children have resorted to doing business and selling fish”.

On the other hand, some the project has supported early childhood development through construction of CBCCs and provision of learning equipment and materials.

Through the CBCCs, the project has trained CBCC care givers and provided financial resources towards nutritional support in the CBCCs. The initiative has benefited over 1000 OVCs in the project sites and has helped to improve



CBCC children getting food support at Mbawemi FBO in Mzimba– 30/05/2008

the quality of students going into primary school. The nutrition support in CBCCs has significantly supported OVCs with a source of food, hence improving their nutrition status and motivating them to attend CBCC activities. The initiative has also given parents space to attend to other productive activities when their children are attending school. It is however evident that most CBCCs were housed in borrowed premises or in temporary structures, most of which did not provide the best environment for student learning. The ET established that limited financial resources contributed to the project failure to invest in construction of CBCC structures.



CBCC structure built by the community at Mbawemi FBO in Mzimba– 30/05/2008

### **5) Output: 100 OVCs Supported to access Vocational training**

The ET recognizes that vocational skills training is an appropriate and effective way of empowering older children affected by AIDS and for whom school attendance is no longer a possibility. Through NORAD HACI project, 324 OVCs received vocational skills training in carpentry, tailoring, basket weaving and tinsmith through community based training or by attachment to a practicing artisan in order to equip them with hands on skills to enable them earn a living on their own. The vocational skills training project has not only given OVC skills but is contributing to improvement in their lives and that of their families as most of them have established their own enterprises. Care Malawi supported OVCs in Lilongwe district reported making average profits of US\$17 per week. In Mangochi and Mzimba, trained OVCs in tailoring have trekked to South Africa to seek employment using the skills gained.



Charles Mpondanguwo, a deaf and dumb graduate of the tailoring skills training at Nchalo Trading Centre in Chikwawa working at his tailoring shop – 04/06/2008

The major weakness of the vocational skills training is that partners were able to provide equipment for training but did not provide any as starter pack for graduating students. As a result, over 50 percent of graduates have not utilized their skills while others are clearly underutilizing them. Where students have acquired sewing machines, the CBOs identified them from other sources. For example, in Chikwawa, graduate students in vocational skills training, like one in the picture above, got their sewing machines from MASAF support. Lack of provision of starter packs to graduate students increases the risk of putting skills learnt to waste.

The other challenge is that the equipment that was meant for training stays idle for long spells of time waiting for students to be trained when the equipment could have been put to other productive use by the CBOs. For example, Kazomba CBO in Mzimba kept sewing machines idle for almost 6 months since January 2008 claiming that they are exclusively for training purposes.

### **6) Output: 1500 PLWAs Trained in will and memory book writing**

The ET observed that property grabbing by deceased person's relatives is very common. In particular children and women are frequently victims of this practice. Their rights are being violated. In order to help families protect their property rights, this project in collaboration with National Association of People Living with HIV and AIDS in Malawi (NAPHAM) has trained 230 parents, including PLWAs to write wills and memory books. This is well short of the planned target. Major contributing factor to the shortfall was

limited financial resources due to inadequate funding. On the other hand, a lot of awareness raising sessions about the law and a family's statutory rights have also been conducted reaching over 4,500 people at village level.

### **Assessment of the extent to which the project has strengthened capacity of families and the community to cope with the impact of HIV and AIDS**

The ET has noted that with NORAD funding HACI Malawi implemented a number of interventions to build capacities of families and communities to cope with the impact of HIV and AIDS. HACI partners provided grants to local NGOs, CBOs and FBOs who implemented most of these sub projects described in this report. The project also conducted proposal development, financial management, project management, psychosocial support and home based care training as part of capacity building for community based groups. Through this training, the CBOs and FBOs have been equipped with skills to manage their affairs as organizations. The proposal development training equipped some CBOs and FBOs to write proposals to access funding from other organizations to complement NORAD funding. Kazomba FBO and Mbawemi FBOs in Mzimba got funding from DACC while Chiyanjano FBO in Chikwawa got funding from MASAF for a poultry initiative.

To improve the financial security of AIDS-affected households and OVC, the project provided business and vocational skills, agriculture and animal husbandry training. The project provided affected families and OVCs access to farm inputs, improved farming technologies and grant funds. One example of economic support at family level

occurred in Lilongwe. Care Malawi sub granted to a CBO (Kabungo Orphan Care) to run a revolving fund targeting



Piggery IGA at Kazomba FBO in Mzimba – 29/05/2008



Communal vegetable garden at Chowe FBO in Mangochi – 02/06/2008

OVC families. Initially 10 families benefited from grants ranging between US\$ 3.57 to US\$17.78 and were engaged in various petty cash business. As a result of the project women earnings increased from less than a dollar per day to about a US\$20 per day.

WVI supported 18 households at Katimbiri in Mangochi with training in livestock management and then given goats, pigs and chicken at household level. It also supported a women's group to do tailoring. Support included training in business management, in tailoring and provision 10 sawing machines, cloths and accessories. In Mzimba, PAC and Plan Malawi supported Kazomba FBO and YOCAFO, a youth CBO respectively with funds to undertake livestock management in piggery. Proceeds from the IGA initiatives are used to support families that are keeping orphans and OVCs. PLWAs and HBC patients have benefited a lot from this support. At Chowe FBO in Mangochi supported by PAC, HBC patients and CBCCs are supported with nutrition support from vegetables grown by the CBO and funds generated from the sell of the vegetables.

The ET also took note of a unique initiative that targeted men in some project sites with training in an initiative widely known as "Bambo wa Chitsanzo"<sup>4</sup>. This was so because men are seen to be key players in the care of orphans and OVCs and yet they are rarely targeted with initiatives to enhance their family management skills. Through this initiative, men were taken through a training programme that exposed them to parenting and marriage management skills intended to equip them to effectively manage their families. The initiative also facilitated formation of community groups of role model men who disseminated messages on effective family management. The initiative has brought stability to some families and a new wave of excitement among the menfolk to participate in the initiative. Fostina Kanyasko, a woman member of Kazomba FBO in Mzimba said,

*"Naona kuti visambizgo ivi vili makora ndipo vasintha nadi nthengwa yane. Lero panjinga tikundakabapanapo na panyumba tikuchezgera lumozza kuchitira vinthu pamoza. Na wana nawo wakuchezga nawo wakukondwa. Noti dada walutawaluta no kuwoneka panyumba"<sup>5</sup>.*

Anastanzia Gausi, another woman in the same group said

*"Wanyake wadada wakawelanga luwiro cha kumowa. Sono wanyake wali kuleka na mowa wuwo chifukwa cha masambiro agha. Ma bajeti nagho tikuchitira lumozza panyumba"<sup>6</sup>.*

Oscar Chirwa, another member of Kazomba CBO said,

*"Napokerapo kuphika kale nkhanirangathu. Lero na ntchito za panyumba nkchitako. Na kutchalitichi nkhamanyangako cha kweni sono nkhusopa"<sup>7</sup>.*

---

<sup>4</sup> Role model man, father or husband"

<sup>5</sup> Translated as: I have realized that this training is beneficial and it has really changed my family situation. Today we are able to travel together on the bicycle and at home we chat with my husband and do things together. Children also chat with their father unlike in the past and they are happier. He is no longer a husband who always disappeared from home and never seen at home.

<sup>6</sup> Translated as: Other men used never used to return on time from drinking sprees. Today, some have completely renounced alcohol because of this training. We also do budgeting together at home

The excitement generated by this initiative has led to continued formation of community groups of male role models outside the project period. Those involved claim the initiative is a source of pride to most men, coming as a result of noting the benefits their colleagues have realized from the initiative.

---

<sup>7</sup> These days I am able to help with cooking but in those days, I wouldn't accept. Today, I am able to take part in doing household chores. I am able to go to church and can even pray.

### **2.3 Project Efficiency**

Assessment of project efficiency refers to the extent to which: 1) project inputs were supplied and managed, 2) activities were organized in the most appropriate manner, 3) activities were done at the least cost to produce the expected outputs. The ET notes that while the project has made significant achievements, a lot more achievements would have been realized if its management was a bit more efficient.

#### **2.3.1 Management and supply of project inputs**

The ET noted that funding disbursement was generally slow from the donor agency. Delays of more than 4 months were experienced in all projects leading to late provision of services by partners. For example, Chiyanjano CBO in Chikwawa had to wait for 6 months in 2007 to pay fees for OVCs who were on NORAD scholarships due to delayed receipts from PAC. The students remained in school though because the school head had trust in the CBO emanating from previous engagement on the same. Other partners had to obtain funds from other projects to fill the funding gap that was created through delayed funding. At Mpemba CBO in Lilongwe, the CBO experienced low harvest in their farming IGA because inputs came quite late into the agricultural season. Delayed funding disbursement to the project was exacerbated by inadequate quantities of funds disbursed by the donor against expressed expectations of the partners and CBOs. The variance analysis section of the audit report (December 2007) confirms that the demand for services under some strategic objectives was higher than the budget could support. In 2007 for example, at Kazomba FBO in Mzimba, the number of students on scholarship was reduced from 25 to 6 due to limited funding that the FBO received. This was also the case in all CBOs visited, with each one experiencing more than 50 percent reduction in number of OVCs on scholarship.

On a positive note, the use of the 6 partners and CBOs to manage the project at community level reduced overhead costs as the partners were not on salaries and the CBOs implemented the project on voluntary basis. The set up also improved the speed of inputs delivery and monitoring support to beneficiaries which helped to address pressing issues on the ground. However, at partner coordination level, the lack of full time coordination capacity compromised the quality of secretariate support to partners including the effectiveness of monitoring and evaluation.

#### **2.3.2 Organization of project activities**

The ET noted that training was provided quite comprehensively to CBOs. Key capacity building interventions through training included financial management, leadership, business management, psychosocial support, livestock management, soap making, bakery management, behaviour change, life skills etc. Most of the training programmes were however organized outside the project sites, as a result, only a few members of the CBOs, benefited due to high costs. There is need for more site based training to ensure that more members of CBOs benefit. We also noted that the project did not have a clear and costed capacity development plan based on an elaborate training needs assessment. Without such a plan, it becomes difficult to measure the extent to which

the training programmes have achieved results and the extent to which the undertaking was cost effective or not.

The ET also noted that vocational skills training equipment was well organized for training purposes. Most of the equipment was placed in one place where OVCs patronized for training. Trainers were drawn from the community mostly working on voluntary basis. In some cases like at Chowe FBO in Mangochi, OVCs were put on attachment as part of training to work with artisans in tailoring, carpentry and tinsmithing which was a cost effective arrangement since the FBO spent less money than would have been normally the case. The major bottleneck in this activity was general lack of starter packs for graduate OVCs to enable them embark on their own enterprises. This has affected almost all project sites except where they got starter packs from other programmes outside NORAD funding. Without starter packs, most graduates are either just idling, doing piece work with existing artisans or have simply gone to South Africa to market their skills. Idling has created the risk of loss of learned skills while migration is a loss of human resources which would have benefited the affected communities.

### **2.3.3 Cost effectiveness of implementation of project activities**

The ET notes that generally, inputs towards project activities were thinly spread across ten districts which would have compromised impacts achievement. However, this was mitigated by the fact that the project used a grants approach, using CBOs to do project implementation more while partner organizations concentrated on provision of guidance and capacity building. With this approach, each project site became an impact area closely supported at community level by CBOs. A sum of the project sites generates significant impacts and achievements relative to project inputs.

We also noted that in a few cases, the budget lines were not adhered to due to procedural changes that took place at the coordinating agency. For example, the expenditure variance analysis of the project audit report under voluntary counseling and testing/ building awareness confirms that the cost of renovating rooms was higher than originally budgeted. This was because the project had planned to use local contractors from respective districts, but due to change in procurement procedures within the coordinating agency, this could not be done, as such pre-qualified contractors that were engaged were rather expensive.

## **2.4 Project Impact**

The long term goal of the HACI initiatives GAD MWI 1024 project was to improve the well being of children by increasing access to services and building the capacity of families, communities and other stakeholders to effectively participate in prevention, care and support to OVC and affected families. This section examines some of the impacts of the project especially on improving the well being of children within the framework of the project goal. Analysis in the section is limited to anecdotal information based on people's testimonies because the study only used qualitative study methods due to absence of a NORAD specific baseline.

Overall, the project has registered impacts related to addressing harmful cultural practices, improved nutrition status of orphans and OVCs attending CBCCs, OVCs developed livelihood systems, improved community response to child abuse cases, greater community organization, reduced cases of stigma and discrimination, more stable families, increased interest in farming by fishermen, school drop outs returning to school, CBOs sourcing funds from other sources, improved transparency in management of community support, increased yield, and reduced cases of migration of OVCs to estates.

### **2.4.1 Reduced cases of stigma and discrimination**

According to HIV and AIDS Related Stigma and Discrimination (2000), stigma and discrimination associated with HIV and AIDS causes people to develop secrecy about their HIV and AIDS status; develop denial of HIV status, individually, socially and nationally; delay to seek treatment, care and support; develop fear, anxiety, depression, apathy, anger up to suicidal attempts and revengeful behaviour; causes disruption of social integration process for PLWHAs; causes marginalisation and polarization of certain groups; causes social invisibility of the epidemic; leads to resurfacing of old prejudices; and, resentment towards the HIV positive family, household or community members. Reducing stigma and discrimination therefore empowers people (particularly PLWHAs) to recognize the benefit of the various services at their disposal and, therefore, be more willing to voluntarily seek HIV counseling and testing; care, treatment and support services; as well as disclose their sero-status. This ensures an extended parent child relationship.

The ET has noted that the project intervention has contributed significantly to reduction in stigma and discrimination in all beneficiary communities. This is evident in increasing cases of disclosure of HIV sero status throughout the project sites. Chiyanjano FBO in Chikwawa has 152 PLWAs on its register from less than 10 only 3 years ago. Chamama CBO in Kasungu has 100 PLWAs from a mere 5 in 2005. At Chiyanjano and 17 at Mpokonyola – 3 are male). PLWA support groups have been formed in all project sites with some sites forming 2-3 support groups. There is also evidence of increased willingness to go for VCT in the project sites. At Mpemba CBO in Lilongwe, MACRO is invited by the CBO to administer VCT services regularly but every time they come, they fail to test all patrons due to overwhelming attendance.

Mnyumbamwawana Bikausi, a member of the FGD group we interviewed said,

*“A MACRO amachita kuthawa anthu chifukwa cha kuchuluka kwa ofuna kuyezetsa. Ngakhale tsiku limodzi sanakwanitsepo kumaliza anthu. Mafumunso ndi amene amakhala patsogolo keyezetsa magari”<sup>8</sup>*

Elida Saladi, Chairlady of Tukamulane FBO in Mangochi said,

*“A MACRO amachita kuthawa okha kuti ii tatopa! Amachita kuyatsa nyali mdima ukayamba”<sup>9</sup>*

As a result of this, more people have been tested with some disclosing their sero status and joining PLWA support groups to access psychosocial support and other related services. With increasing numbers of PLWA support groups, more people infected with the virus are accessing ART. At Mtunthama in Kasungu, more than 50 percent of the members of the PLWA support group are on ARVs. About the 60 percent are on ARVs at Chiyanjano FBO in Chikwawa. Access to ARVs has improved the health of many PLWAs thereby helping them to enjoy the opportunity to live with their children much longer than would have been the case if they did not access treatment and cares services.

#### **2.4.2 Change or death of harmful cultural practices**

The ET recognizes that cultural practices have more than often played a negative role in perpetuating the spread of HIV and AIDS especially in rural communities. Cultural practices like wife inheritance, sexual cleansing, Fisi<sup>10</sup>, Nthena<sup>11</sup> and initiation ceremonies predispose young boys, girls and women to HIV infection. These practices have been particularly prevalent in Mzimba, Mangochi and Chikwawa districts which also have high HIV/AIDS prevalence rates at national level. Our visits have however confirmed that the project has in some way contributed to the change or death of some of these cultural practices. In Chikwawa we received reports that sexual cleansing has since been adapted and does not necessarily involve direct sex of the widow with a hired stranger but rather sex between a married couple which is usually closely related to the deceased widow. Similarly, wife inheritance practices are not common as a result of HIV and AIDS awareness.

---

<sup>8</sup> Translated as: MACRO officers literary run away as they are always overwhelmed by people wishing to be tested. There is not even a single day that I can recall when they tested everybody. Chiefs are especially taking the lead in getting tested.

<sup>9</sup> Macro officers literary run away and say we are tired. Sometimes they go to the extent of lighting lamps when darkness falls.

<sup>10</sup> Fisi is a practice where a man is hired secretly to perform sex with a married woman who is failing to conceive

<sup>11</sup> Nthena is a practice where a married man is honoured by being given a another wife who is usually a younger sister or relation to his wife as a token of appreciation for being a good husband

In Mangochi, it was reported that the project has contributed to change the way initiation ceremonies were normally conducted. The practice has changed in terms of scheduling, location of conducting the ceremonies and use of razor blades. At Tukumulane FBO in Mangochi, we were informed that the initiation ceremonies no longer take place during school times. The campaigns by the CBO have also led to change from conducting the ceremonies in unhygienic temporary camps away from homes for long spells of time (about a month). Instead, they now take place in the homes or at Mangochi District Hospital using modern facilities. This has reduced cases of child related diseases like malaria, diarrhea, pneumonia, etc, associated with risks of camp initiation. The FBO also reported that traditional counselors involved with initiation ceremonies were duly trained to use one razor blade to conduct circumcision on young boys to avoid HIV infection.

The campaigns were not without resistance though, especially from chiefs and local residents who insisted that the FBO was interfering with their cultural practices. Sheik Hussein Shuga, Vice Coordinator of Tukumulane FBO reported that he was threatened on many occasions because of what he was promoting.

*“Ineyo ndimakhala ngati ndikupanga chinthu chachilendo. Anthu amandiopseza kuti ndisiitsiranji chikhalidwe chomwe anachizolowera. Ngakhale panopa, mafumu ena moni sakundipatsa ngati tili pa chidani”<sup>12</sup>* reported Sheik Hussein Shuga

The initiation ceremony was especially risky because on the eve of the unveiling ceremony of the initiates held at the end of the initiation ceremony, a night long celebration used to be held where people danced and indulged in sexual orgies. This ceremony is no longer happening in the Mangochi project sites as a result of the project intervention.

### **2.4.3 Increased access to secondary school education for OVCs**

The ET has noted that the project intervention has contributed significantly to improving OVC access to secondary school education. Over three years and across the 10 districts, 716 OVCs (394 male, 322 female) were supported with secondary school fees. Thus ensuring that OVCs remain in school and has been one of the most important and successful interventions in this project. Most beneficiaries got tuition fees for one school calendar year and few for more than a year due to inadequate funding. There are a few cases of OVCs completing secondary school education and are now pursuing technical education. Mbawene FBO in Mzimba continues to support a student who has since gone to Livingstonia University in the northern region. Peer education sessions by youths have also led to some school drop outs, especially girls, to return to school. It was also reported that increased access to secondary school education has reduced the migration of OVCs to estates, especially in Lilongwe district.

---

<sup>12</sup> Translated as: It seemed like I was promoting a very strange thing. People used to threaten me asking why I was discouraging a cultural practice which was part of their way of life. Even today, some chiefs do not greet me as if we are enemies”

#### **2.4.4 OVCs developed livelihood systems**

Improved access to vocational skills training among OVCs has contributed towards enabling them acquire vocational skills necessary for developing livelihood systems. Hussein Mpondanguwo, a deaf and dumb graduate of the tailoring school is one such example at Chiyanjano FBO in Chikwawa. He has opened a tailoring shop at Nchalo trading centre and is earning income from his tailoring business. The other one is Charles Jimu of the same FBO who is running a carpentry shop also at Nchalo. Similarly, 8 OVCs (3 carpentry, 5 tailoring) are standing on their own in Lilongwe at Chinkhunda/Kaondo CBO supported by CARE Malawi. Improved access to income will ensure the wellbeing of OVCs.

#### **2.4.5 Increased enrolment to CBCCs**

According to a UNICEF commissioned study of CBCCs in Malawi (2006), CBCCs are service owned initiatives administered by a given community and parents for a comprehensive childcare and early childhood development programme. The guiding principle for offering such care is that the first years of life, starting from conception itself to about 8 years of age, are critical to the growth and development of a child. Early learning and nurturing the needs of children becomes crucial because it is during these formative years that the children develop the ability to think and speak, learn and reason thereby laying a foundation to their future lives as adults. Any impediment to the physical, social and psychological development can have far reaching consequences on the children's future. In addition to being a child's home, CBCCs offer a natural haven for early learning, growth and development and the well being of the child. CBCCs also provide a place in the community to support orphans and other vulnerable

children to address their psychosocial and physical needs. CBCCs especially offer a haven of support and care for OVCs, especially through nutrition support.



Not an ordinary mango tree, but one of the poor learning CBCC premises run by Tovwirane FBO in Mzimba which needs project support – 29/05/2008

The ET has noted that the CBCC initiative has been implemented in all project sites and has particularly supported OVCs with nutrition support and opportunities for early learning and development. The CBCC initiative has especially helped to integrate OVCs among other children to live a normal life. Enrolment in CBCCs has been on the increase since the project inception. CBCC care givers have

been trained in their job. At Mpokonyola CBO in Chikwawa, the CBCC has 304 children who are supported with learning and food in form of porridge for their nutrition needs. SCF is supporting 2 CBCCs at Lumbadzi CBO with enrolment of over

100 children. Through the CBCCs, children have been prepared for transition to primary school. At household level, parents have confirmed that the initiative has helped to create time for them to undertake other productive activities because of limited disturbance from children. Although the CBCC initiative has registered this impact, it had the potential to register greater impact if efforts were made to invest more in building more conducive structures for use by the CBCCs and if learning facilities were also adequately made available to the children.

#### **2.4.6 Improved community response to child abuse cases**

The ET noted that through the project intervention, CBOs have been equipped with knowledge and skills to educate on and deal with child abuse cases especially affecting orphans and OVCs. It was reported during the study that some parents snatched blankets donated to OVCs saying the OVCs could not use new blankets when their parents had worn out blankets. A case in point took place at Tukumulane FBO in Mangochi. During the FGD, a OVC narrated a familiar case,

*“Amayi anandifunsa kuti ufunda bwanji bulangete latsopano bambo ako akufunda lokutha. Ineyo anandilanda bulangete ndi kupatsa abambo. Koma a komiti atamva nkhanayi, anakadziwitsa amfumu ndipo makolo atafunsidwa ndi kuopsezewa kuti bulangete lilandidwa ngati silikupindulila mwana, iwo anandibwezera bulangete lija”<sup>13</sup>* said by one of the OVCs attending the assessment meeting at Tukumulane FBO

To mitigate these incidents, CBOs have put in place a system that educated parents not to take advantage of the OVCs’ status to deny them good facilities. The system also acted on reports of child abuse by approaching the perpetrators and disciplining them accordingly. As a result, many OVCs reported that they never faced any harassment from their guardians.

Chiyanjano FBO in Chikwawa reported an incident where they acted on a child abuse case involving a newly married couple. The husband had a daughter from his old wife from whom he had separated. The case involved severe beating of the daughter by her own father after the wife had reported that she had broken a bucket. When the FBO got wind of the issue, they reported the case to Police where the father, who was arrested, apologized. He was later released and the child is living in a much better environment after the CBO provided counseling services to the father. Because of this incident, members of the CBO said that their CBO is now well recognized as a player in dealing with child abuse cases.

---

<sup>13</sup> Translated as: My mother asked me why I was using a new blanket when my father was using a worn out one. She snatched away the blanket and gave it to my father. When the CBO leaders got wind of the issue, they informed the chief who later confronted the parents and disciplined them saying that if the blanket is not benefiting the child it would be taken away from the family. When this happened, they gave back my blanket.

#### **2.4.7 Improved community organization for HIV and AIDS management**

The ET has also noted that the project intervention has further improved community organization for management of HIV and AIDS in their societies. Evidence of community organization is inherent in formation of youth friendly clubs in all project sites, a highly committed HBC volunteer network, PLWA support group formation and all thematic sub groups. As a result of improved community organization, the CBOs are able to engage in resource mobilization to support OVC guardians, the elderly, HBC patients and PLWAs. Some of the community initiatives being undertaken as a result of achieving greater community organization include communal gardening using inputs from CBOs, IGAs like poultry farming, community contributions, care and support of the elderly and HBC patients, HIV and AIDS awareness etc. Through capacity building, the CBOs, are able to mobilize funding from other donors to support their activities. Community organization has contributed to improved transparency in management of community support towards development efforts. At Lumbadzi CBO, one member of the CBO said,

*“Amalawi ndife anthu ovuta. Timafuna kuti tigawire mbale wathu. Ndiye ife a CAC timalembetsa ma report okhudzana ndi odwala ndi ana ovutika kwa ma volunteer ndiye timagwiritsa ntchito ma ripoti amenewo potsimikizira kuti ayeneradi kupindula ku chithandizo cha chakudya ndi ndani”<sup>14</sup>*

The training of CBOs has been instrumental in cementing efforts that have resulted in most communities getting organized for action.

#### **2.4.8 Improved family stability**

The ET noted that the role model approach to behaviour change for men has contributed to improved stability of families. Through the initiative, men have been trained to take pride in being role models to their families and society as part of the HIV and AIDS management strategy. The initiative has led to improved marital relationships and more harmony at family level in some project sites. At Mpokonyola CBO, Jessie Suwedi, a member of the CBO said,

*“Azibambo masiku ano sakuchitanso manyazi. Akumapita kuchipatala ndi ana osangomusiila mzimayi ndipo amapitanso ku sikelo”<sup>15</sup> – Mpokonyola CBO*

Through the initiative, men have begun to perceive themselves more positively, making themselves available to their wives and children. They are also making themselves available to their communities, supporting community HIV and AIDS initiatives.

---

<sup>14</sup> Translated as: We Malawians are very difficult people. We always wish to favour our relatives. So as CAC we ask volunteers to compile reports on HBC patients and OVCs who qualify for support at each point in time. We then use those reports to confirm who really should benefit from food support.

<sup>15</sup> Translated as: Men these days are not shy. They go to the hospital with their children not always leaving the responsibility to women. They even patronize antenatal clinics

## 2.5 Sustainability

Based on the sustainability analysis framework<sup>16</sup>, we examined two questions during the study process to address the question of project sustainability. The first question was to assess the likelihood of continuation of the stream of benefits produced by the project after the period of external support ends in December 2007 and the second was to review the appropriateness of the key interventions of the project in the context of sustainability. We defined *sustainability* as either ‘interventions’ or ‘an organization’s capacity to continue its institutional structure and production of benefits for its intended client population after the cessation of donor technical, managerial and financial support’. Being a developmental project, it is our held view that the HACI GAD MWI 1024 project was framed with the intention that it achieves sustainability, especially among its beneficiary communities. We will assess sustainability from the organizational, institutional, financial and technological perspectives.

### 2.5.1 Institutional sustainability

#### Strengths

- Working with community volunteers (CBCC volunteers, HBC volunteers, youth volunteers etc) has the potential to build community level capacity for addressing issues affecting orphans and OVCs. Community volunteers are indigenous community structures with a commitment to serve their communities
- Efforts towards community organization have been very strong. At community level, the project was designed to work using a grants mechanism using CACs, VACs, CBOs and FBOs. These local institutions provide oversight to project implementation. The community organizations have organized themselves into thematic sub committees to undertake operations in areas like fund raising, HBC support, PLWA support, youth support and CBCC support. Effective community organization is key to successful project implementation.
- Capacity building efforts through training towards CACs, VACs, CBOs and FBOs has the potential to transfer skills that will enable them undertake different activities, some technical in nature, on their own. Proposal writing training has already shown that it has the potential

MPOKONYOLA CBO BI-ANNUAL ACTION PLAN		1	2	3	4	5	6
ADMINISTRATIVE COSTS			✓				
SOCIALIZATION MEETINGS TO LOCAL LEADERS			✓				
REGISTRATION OF CBO				✓			
BCI TRAINING					✓		
REFERRAL OF A GIRL CHILD TO SCHOOL TRAINING						✓	
HBC							✓
MATERIALS							✓
GENERAL ASSESSMENT AND REVIEW							

A plan for Mpokeonyola CBO in Chikwawa – 03/06/2008

<sup>16</sup> <sup>16</sup> OECD: Organization for Economic Co-operation and Development. DAC: Development Assistance Committee

to enable community structures to seek funding from other sources. Some CBOs are also able to do community action planning on their own as a result of the capacity building efforts.

### **Weaknesses**

- Weak linkages with other projects: Despite efforts to obtain support from other sources by the community organizations, it is evident that the project did not provide guidance to enable them create linkages with other organizations or projects. As a result, the community organizations were unable to cope with the growing community demands which could not be met through NORAD funding alone. We noted that there is very little that is known at project management level regarding strategic efforts to link CBOs and FBOs to other service providers to provide services towards the other community challenges beyond the capacity of NORAD funding. Projects of this nature (community based) can not be supported by one player hence the need for strategies to guide facilitation of the linkages to ensure sustainability.
- Related to the point above, the project has not developed strong linkages with DAs and its associated decentralization structures at community level. Decentralization structures have the advantage of being the channel for the District Development Planning System (DDPS), the official district level planning and financing mechanism that is recognized and supported by government fiscal resources and other donors. These structures are permanent hence will remain to implement the activities even after the project period. It is clear that where such involvement took place, little or no capacity building efforts targeted VDCs and DAs. The assumption that involvement of chiefs at CAC or VAC level equals linkage with ADC and VDC is clearly faulty because ADCs and VDC s are more than chiefs.

### **2.5.2 Organizational sustainability**

#### **Strengths**

- Active involvement of government extension workers and church leaders at implementation level has enhanced people's access to extension services in some project sites. Cases of involvement of Primary school Education Advisors (PEAs) and HSAs is evident across the project sites. The involvement of PEAs and HSAs has equipped them with knowledge on management of initiatives affecting orphans, OVCs, PLWAs and HBC patients. This knowledge has equipped them with skill to further support communities to deal with issues concerning vulnerable children.
- Communities, especially women, who are worst affected by disasters when they occur, participated well in the project. Willingness to participate in a project is an expression of commitment to contribute towards solving a pressing problem.
- We take note of intensive capacity building efforts by the project in some project sites, especially targeting beneficiaries of the project. It is pleasing to note that beneficiaries were trained before introducing them to new activities. Training programs included exposure to psychosocial training, business management, behaviour change, vocational skills, life skills, orphan and OVC care etc. This has contributed significantly to technology adoption and general project achievements.

- Formation of village level structures like committees and clubs is a positive step towards empowerment of local communities in dealing with orphans and OVC issues in the long term. The network of HBC volunteers, establishment of CBCC committees, formation of youth clubs and formation of PLWA support groups is a case in point.
- The funding arrangement involving proposal writing by CBOs ensured that priority needs of communities were addressed based on clear plans. The arrangement was also a good mechanism for monitoring resource utilization at community level. It also exposed CBOs to proposal writing skills which they are able to use to source support from other sources
- The pass on system, VS&L scheme and revolving fund mechanism for project delivery are critical to sustaining project support in the project sites. Through the two systems, CBOs have been able to reach out to more beneficiaries with small loans and livestock
- Use of strategic partnerships at community level has helped the project to scale up its activities in some project sites. For example, SWAAM supported Mpemba CBO was able to implement VCT initiatives through strategic partnerships with organizations like MACRO. The CBO has also opened a resource centre through partnering with NICE. It has also obtained fees for some OVCs and orphans through partnerships with the Social Welfare Office of the DA. WVI supported Chamama CBO has a strategic partnership with NAPHAM Kasungu especially for support towards PLWA support groups. These partnerships are key to project sustainability

### **Weaknesses**

- Inadequate and inconsistent project funding: Project funding has generally failed to meet demand as expressed through annual plans by partners and CBOs. Untimely and unstructured disbursements have been common, thereby hampering planned activities. Predictable funding arrangements contribute to smooth project implementation. The project should have considered arrangements like strict quarterly funding for effective project management.
- In the absence of a clear strategy, it is not clear how OVCs and orphans supported by the project to remain in school will achieve their education goals after closure of the project. The ET feels that support towards such initiatives should be made **wholesome** (at least up to end of secondary school or inclusive 2 year tertiary education at a given standard rate). We have noted that most CBOs are unable to provide support to OVCs that were on project support because they already have a burden of paying for a good number of students already. This is rather counterproductive and has the potential to traumatize OVCs if they are expelled from school.

### **2.5.3 Financial sustainability**

#### **Strengths**

- We have noted good capacity within communities in terms of planning for addressing issues affecting orphans and OVCs. These plans have been supported by the NORAD funds through the grants mechanism. We found this arrangement very

useful, but the resources failed to meet the demands expressed in the plans because they were generally inadequate and were disbursed very late in many cases.

- All HACI partners and CBOs in the project were already involved in activities related to orphan and OVC care either through earlier HACI initiatives or other projects with other donor agencies. This project is therefore building on a foundation of existing projects that have the potential to sustain its activities in the medium to long term. The NAC, MASAF and WFP initiatives are a case in point.
- We also noted that almost all communities have developed local fund raising initiatives to sustain their activities apart from relying on external funding. Monthly financial contributions among members of the groups is one such initiative. At Mpokonyola CBO in Chikwawa, the CBO has engaged a local village donor working in Zomba who is helping with construction of a CBCC with the support of the whole community. IGAs have also been widely adopted by most CBOs as a means for fundraising. The IGAs include poultry keeping, livestock husbandry, and communal gardening. In some instances, the use of local human resources on voluntary basis like vocational skills trainers has minimized costs implications for some CBOs.



A CBCC structure at Mpokonyola FBO in Chikwawa being supported by a local village donor – 03/06/2008

#### 2.5.4 Technological sustainability

##### Strengths

- There are strong indications of project sustainability inherent in the choice of project activities and processes. They include capacity building, communal gardening, IGAs, vocational skills etc. Vocational skills have enabled most OVCs to embark on livelihoods that earn them income after completion of training.
- Related to above, establishment of vocational skills training centres in almost all project sites has provided an opportunity to more OVCs to access vocational skills training. Major bottleneck in this initiative has been inadequacy of equipment and their lack of durability. For example, at Tukumulane FBO in Mangochi, 30 new students are undergoing tailoring training using 6 sewing machines. Frequent breakdown of the machines has also been rampant and we noted that most of the machines, especially sewing machines are counterfeit (not original types). Some bear names like Senger instead of the original Singer brand. For example, at Chiyanjano FBO in Chikwawa, we found that 7 out of 8 of the sewing machines they got from the project have gone for maintenance with only one still working

## Weaknesses

- Lack of starter pack for vocational skills graduates has been a serious setback to achievement of project goals. As a result, some graduates have lost their skills due to lack of application of the skills learnt.
- Limited irrigation initiatives, water & sanitation initiatives components in the project is a threat to attainment of the project goal of improving the welfare of children as these are critical components that contribute significantly to achievement of the goal. Child welfare can not be attained in the absence of water and sanitation initiatives. Similarly, food security without irrigation support would be a challenge to achieve because of the unreliability and inadequacy of rainfall in the country. Overall, we found one borehole that YOCAFO benefited in Mzimba from Plan Malawi.



Borehole – supported by YOCAFO in Mzimba under Plan support – 30/05/2008

- Some serious opportunities for



Maize mill project that has stayed since 2004 not being operated due to lack of electricity connection at Mpokonyola CBO – 30/05/2008

technological support which would have improved the financial capacity of some CBOs have not been adequately exploited. A case in point is a maize mill initiative for Mpokonyola CBO in Chikwawa. The CBO got assistance to build a maize mill to support its activities from MASAF in 2004. When the maize mill was completed, the project budget could not pay for additional costs of bringing electricity to the mill which cost about K2 million kwacha inclusive a transformer. As a result, MASAF closed the project file and the mill has remained non functional for 4 years and only acting as a stores room for the CBO. We feel that if the CBO were supported to connect power to their maize mill, the other project costs for the CBO could have been paid from proceeds emanating from the maize mill. This was a clear missed opportunity because the maize mill remains a white elephant even after closure of the HACI project.

## **2.6 Lessons learnt**

The most important lesson learnt in this project is that capacity building of CBOs, FBOs and local NGOs is critical for delivery of quality services, scale up and sustainability of HIV and AIDS programs. To do this, various approaches should be used, for example training, exchange visits and networking. Training should be properly planned and on going. Overall, timely disbursement of adequate project funds to partners and beneficiary is key to smooth project implementation. Detailed lessons learnt from the project are shown below:

### **2.6.1 Project management**

- The ET has noted that project implementation through existing structures at community level is key to sustainability and project acceptability. It is evident that most of the project sites are still running activities today because the structures used were already functional at the start of the project. Where a structure was developed as part of the project, the initiative is either too weak or dead. St Francis FBO in Mangochi is a case in point – a technical training FBO that was born with project funds and died with the closure of the project.
- Further to that, the point above shows that given the means and capacity, local people can perform wonders in project implementation. It is evident that the training investment towards CBOs in this project equipped them to manage their organizations and affairs with greater effectiveness.
- Diversified funding sources minimizes disruptions to project delivery. It is evident from the evaluation that partners with diverse funding sources were able to cope with funding delays from NORAD while others faced lengthy stoppages of their community initiatives. At community level, CBOs with diverse funding sources were able to fill operational gaps in their initiatives using money from other sources. A case in point is where Chiyanjano CBO in Chikwawa was able to provide sewing machines to their vocational skills training graduates from MASAF support.
- Without starter pack, vocational skills graduates are as good as wasted. It is important that initiatives like this one be properly planned and resourced to ensure that investment like vocational skills training is not put to waste.
- Staff retention is important to retain skills that have been developed as well as institutional memory. Coordinating capacity for the HACI consortium has been significantly affected by staff turn over with the office changing 3 officers in the project period. Considering that the project involved 6 different partners whose activities had to be coordinated, it becomes particularly important to retain secretariate staff to ensure limited disruptions to project implementation.

### **2.6.2 Extension Methods**

- Group and networking approaches to extension delivery promote cross-learning through sharing of information, improving people's access to technology, markets, extension services, credit and community cohesion. The Technical Exchange Network promoted exchange of information and learning among partners. At community level, CBOs promoted club approach to extension delivery which has also contributed to project achievements

- Household level inputs support has more chances of succeeding than communal level support of inputs where a community indulges in communal gardening to support OVC initiatives. Direct support to households ensures greater commitment to produce. We noted that support to households from communal gardening is usually in small quantities and irregular, sometimes 1 pail of maize given only once in a year to an orphan
- Productive activities like vocational skills training can be used as a “keep them busy” initiative for youths apart from sporting activities. Tukumulane FBO in Mangochi has extensively used the tailoring initiative to occupy secondary school students, particularly girls after classes to prevent them from indulging in risky practices.
- Community based support systems increase access to essential services like psychosocial support, HIV awareness, VCT awareness, VCT access, nutrition and early childhood development. Establishment of PLWA support groups, HBC volunteer networks, youth clubs and CBCCs has directly benefited the rural communities to access essential services.
- The capacity building approach to project delivery builds community capacity for action planning and project implementation. SCF has used the CB approach quite extensively in their sites in Lilongwe and the approach has resulted in empowerment of CACs and VACs to analyse issues and act upon them on their own.
- The pass on system, IGA, VSL and revolving fund strategies are critical to project sustainability at community level. They promote continued sharing and growth of investment.

### **2.6.3 Partnerships**

- Although partnership approach to project implementation may have its own challenges, its advantages far outweigh the challenges. It is evident from the evaluation that the partnership arrangement involving the 6 organizations has benefited in terms of scaling up services, complementarity and experience sharing.
- Close collaboration with the DA is a pre-requisite for successful project implementation at district and community level especially aimed to achieve sustainability. Not any single project can address all the needs of a community, therefore it is important to link up with DAs who can facilitate provision of services that one’s project cannot support.
- Community level partnerships are key to achieve the objective of scaling up services like VCT and OVC support at community level. Where CBOs engaged partners at local level, the project has benefited from the services provided by the other partners.
- Individuals, especially those linked to the communities being supported, can provide financial and material support towards community projects apart from NGOs. This only requires sensitization and organization efforts to mobilize them to take action on issues affecting their communities.

### **2.6.4 Education Focus**

- The ET has noted that education is a critical component of support for orphans and OVCs to ensure their future. Additionally, education investment for OVCs should

look beyond formal education to include early childhood education. As such, the project should give a strong focus to education especially in areas where literacy levels are very high.

### 3.0 RECOMMENDATIONS

The ET was deeply impressed by the achievements made to date in the project. We however note that much more of the anticipated achievements would have been made if the project received more quality (consistent and timely) and quantity financing and if it engaged in more systematic community needs assessment and more partnerships with key stakeholders especially at community level to support scaling up efforts. The following recommendations are proposed for any future similar projects.

1. **Project Management:** It is recommended that the project reviews its project coordination arrangements at national level to increase capacity for efficient and effective implementation. Proposed actions include:
  - a) Assign coordination role to a full time HACL secretariate to improve coordination and project monitoring capacity at national level. Whether the full time secretariate is housed in one of the partners or is independent is something that can be assessed separately based on past and present experience.
  - b) Streamline funding/disbursement arrangements for partners to make them more efficient to ensure timely delivery of project activities.
  - c) Revise the resource allocation criteria for partners to ensure equitable and transparent distribution of resources
  - d) Enhance local mobilization of resources for HACL in view of NAC funds that remain unutilized from global fund. This will support scale up efforts of the initiative at national level
  
2. **Capacity building:** We recommend that capacity building should be further strengthened for more sustainability. Proposed actions include:
  - a) Scale up vocational skills training for OVCs and orphans by providing more training equipment to ensure greater access to training skills
  - b) Develop a “starter pack” for graduate trainees so that they are provided with tools, materials and financial resources to embark on livelihood activities to improve their welfare
  - c) Provide governance and management training to community structures implementing the projects to make them more effective in project management as well as resource mobilization. As a follow up, facilitate their registration with the Registrar General to enhance their corporate image which is critical to access financial resources from donors
  - d) The capacity building approach using participatory learning methods to project planning and implementation remains an effective tool for community participation in addressing OVC issues. It should be integrated as an extension approach for project delivery at project level.
  - e) Scale up support towards education for OVCs and orphans by: 1) increasing the package for fees, uniform and learning materials, 2) increasing the package for construction of ECD centres and provision of learning and play facilities
  - f) Develop capacity of CBOs to undertake resource mobilization through: 1) writing proposals, 2) Developing strategic partnerships, 3) Initiating IGAs for fund raising. In the same vein, the project should make use of existing

opportunities like the Mpokonyola CBO in Chikwawa to empower CBOs for resource mobilization

- g) Scale up the “Bambo wa Chitsanzo” initiative to more districts based on lessons learnt from other project sites.
- h) Intensify awareness on HIV & AIDS, VCT, ART and build more capacity for psychosocial support by capacitating PLWA groups and training of more care givers
- i) Develop financial management capacity for CBOs by linking them to audit services like those provided by NAC to CBOs on an annual basis. Tukumulane FBO of Mangochi was subjected a similar audit which extended to NORAD funds

**3. Empowerment of the most-at-risk groups:** We recommend that the project develops a fully fledged economic empowerment within the OVC framework to be adopted by all partners based on lessons learnt from the project experience with a focus on economic empowerment of women as has been noted that women carry the burden of care for orphans, OVCs, HBC patients and PLWAs in almost all programme sites. Proposed actions include:

- a) Develop a strategy for economic empowerment, particularly of women in the project sites
- b) Explore a possibility of developing Village Savings and Loan Schemes for rural women as entry point to the economic empowerment initiative with lessons drawn from CARE Malawi

**4. Cross-learning, operational research and documentation:** We appreciate that there efforts to document and share lessons learnt, but we would like that these efforts be more systematic and linked to the monitoring and evaluation system. This is especially because of the many opportunities that are availing from the project in relation to implementation methods, successes and challenges. Proposed actions include:

- a) The project should intensify and systematise operations research and documenting of best practices at all levels (national coordination and partner) and link this to the monitoring and evaluation system. This function will also directly contribute to monitoring of the project as it will track and document impacts being created by the project.

**5. Sustainability:** It is recommended the project intensifies sustainability strategies and approaches within all partners and CBOs by integrating and prioritizing critical activities. Proposed actions include:

- a) Strengthen linkages and collaboration with DAs and related community structures in all impact areas through capacity building, joint planning and implementation and reporting systems.
- b) Intensify extension support and capacity building of CBOs, community committees and partners which places ownership and responsibilities of initiatives started on the community and its leadership

- c) Scale up initiatives that inherently contribute towards sustainability of project initiatives. These include but not limited to pass on system, revolving fund mechanisms, community contributions, training, use of local resources, communal gardening, community based planning etc,
- d) Provide guidance to CBOs on establishment of strategic partnerships with other stakeholders to access project support in form of finances, human resources, and material resources for project implementation.



**4.2 Annex 2: Programme for Partner Visits on Friday – 23/05/08**

<b>NAME OF PARTNER</b>	<b>TIME SUGGESTED</b>	<b>CONTACT PERSON</b>
PAC	8.30 am	Sophie Nthenda
CARE	10.00 am	Aliwena Mologo
SCF	11.00 am	Novice Bamusi
WVI	1.30 pm	Efinita Banda
SWAAM	2.30 pm	Gavelet Mzembe
PLAN	3.30 pm	Ronnie Hara

### 4.3 Annex 3: Programme for Site Visits – HACI Evaluation

<b>DATES</b>	<b>Activities</b>	<b>Partners</b>	<b>Schedule</b>
Friday - 23/05/08	Partner visits	All 6 partners	Whole day (8.30 am, 10.00 am, 11.00 am, 1.30 pm, 2.30 pm & 3.30 pm)
Saturday -24/05/08	LL site visit – 3 sites	PAC & PLAN	Plan – 2 sites (9-12 pm) PAC - 1 site (2 pm)
<b>SUNDAY</b>	<b>REST</b>		
Monday – 25/05/08	LL site visit – 4 sites	SWAAM & CARE	SWAAM – 2 sites (9-12 pm) CARE - 2 sites (2-5 pm)
Tuesday – 26/05/08	LL site visit – 4 sites	SCF & WVI	SCF – 2 sites (9-12 pm) WVI - 2 sites (2-5 pm)
Wednesday – 27/05/08	KU site visit – 2 sites	PLAN	PLAN – 2 sites (10-3 pm)
Thursday – 28/05/08	KU site visit – 3 sites	WVI	WVI – 2 sites (9-12 pm) WVI - 1 site (1-3 pm)
Friday – 29/05	Mzimba site visit – 3 sites	PLAN	PLAN – 2 sites (9-12 pm) PLAN - 1 sites (1-3 pm)
Saturday	Mzimba site visit – 2 sites	PAC	PAC – 2 sites (9-2 pm)
<b>SUNDAY</b>	<b>TRAVEL TO MANGOCHI</b>		
Monday	Mangochi site visit – 3 sites	WVI	WVI – 2 sites (9-12 pm) WVI - 1 site (2-4 pm)
Tuesday	Mangochi site visit – 2 sites	PAC	PAC – 2 sites (9-12 pm)
Wednesday	Chikwawa site visit – 2 sites	PAC	PAC – 2 sites (9-12 pm)
Thursday	Chikwawa site visit – 2 sites	PAC	PAC – 2 sites (9-12 pm)

#### **4.4 Annex 4: Data Collection Tools**

### **FOCUS GROUP CHECKLIST**

(With Children and OVCs)

1. Have you ever heard about HACI? How did you come to know about it?
2. Have you received any support from HACI project? What was the support you received?
3. Have you received support from any other sources? (Probe if it was not really from HACI)
4. Do you participate in OVC activities undertaken by CBOs or committees in your area? In what way did you participate?
5. Which project activity has been most helpful to you by HACI? Which one has been least helpful to you and why?
6. What are the main benefits or impacts you have experienced at your level as a result of the HACI activities?
7. What are the Strengths, Weaknesses, and Opportunities of HACI in your area?
8. What challenges have you experienced during HACI implementation? How did you deal with those challenges?
9. What lessons have you learnt from HACI implementation?
10. If HACI was to be re-implemented, what suggestions would you make to make it more beneficial to its beneficiaries?

## FOCUS GROUP CHECKLIST

(For Community Based Organizations)

1. Under each HACI objective, what activities have you implemented?
  - a. To increase access to HIV Voluntary Counselling and Testing services
  - b. To increase and strengthen OVC and PLWHA access to psychosocial support
  - c. To support families and communities in succession planning
  - d. To increase access to education, vocational training and life skills

How was each activity implemented?

2. Which activity do you think has been most helpful to beneficiaries? Which one has been least helpful to beneficiaries?
3. What are the main achievements/impacts that the project has made at:
  - e. Child level
  - f. Household level
  - g. Community level
4. How has the project worked with:
  - h. The District Assembly?
  - i. Line Ministries
  - j. With local Decentralization structures (ADC and VDC)
5. Why do you think HACI is important to the community, household and children?
6. Explain the project monitoring and evaluation system? What were its strengths and weaknesses?
7. What mechanisms were put in place to ensure project sustainability after expiry of external funding?
8. What are the Strengths, Weaknesses, Opportunities and Threats of HACI at your level?
9. What challenges have you experienced during HACI implementation? How did you deal with those challenges?
10. What lessons have you learnt from HACI implementation?
11. If HACI was to be re-implemented, what recommendations would you have made?

## FOCUS GROUP CHECKLIST

(With Plan and HAI Project Staff)

1. Under each HAI objective, what activities have you implemented?
  - k. To increase access to HIV Voluntary Counselling and Testing services
  - l. To increase and strengthen OVC and PLWHA access to psychosocial support
  - m. To support families and communities in succession planning
  - n. To increase access to education, vocational training and life skills

How was each activity implemented?

2. Which activity do you think has been most helpful to beneficiaries? Which one has been least helpful to beneficiaries?
3. What are the main achievements/impacts that the project has made at:
  - o. Child level
  - p. Household level
  - q. Community level
4. How has the project worked with:
  - r. The District Assembly?
  - s. Line Ministries
  - t. With local Decentralization structures (ADC and VDC)
5. Why do you think HAI is important to the community, household and children?
6. Explain the project monitoring and evaluation system? What were its strengths and weaknesses?
7. What mechanisms were put in place to ensure project sustainability after expiry of external funding?
8. What are the Strengths, Weaknesses, Opportunities and Threats of HAI at your level?
9. What challenges have you experienced during HAI implementation? How did you deal with those challenges?
10. What lessons have you learnt from HAI implementation?
11. If HAI was to be re-implemented, what recommendations would you have made?

12. How was HACI coordinated among its members? How was the partnership monitored?
13. What were the Strengths, Weaknesses, Opportunities and Threat of the partnership arrangement?
14. Are there any lessons you have learnt with regard to HACI partnership arrangements?

## OVERALL PROJECT PERFORMANCE ASSESSMENT FORM

(To be completed by each partner in the project – make it as detailed as possible)

**NAME OF PARTNER:** \_\_\_\_\_

**IMPLEMENTATION DISTRICTS:** \_\_\_\_\_

<b>HACI STRATEGIC OBJECTIVES</b>	<b>ACTIVITIES PLANNED/ IMPLEMENTED</b>	<b>PLANNED RESULTS</b>	<b>ACTUAL RESULTS</b>	<b>REASON FOR VARIATION (If any)</b>
1. Building awareness and reducing stigma				
2. Extending the partner-child relationship				
3. Preparing families for transition and				
4. Ensuring the future of the child				