UNICEF ANNUAL REPORT for Malawi

1 EXECUTIVE SUMMARY

Significant successes can be reported in 2010 in the strengthening of collaborative partnerships and leveraging of resources for the most vulnerable children. UNICEF supported a partnership effort that leveraged US$90 million from the Fast Track Initiative Catalytic Fund for education and successfully lobbied for 13 million euros from the German Government for the Social Cash Transfer Programme. An additional US$2 million was leveraged from the World Bank to improve the reach, quality and learning outcomes of Community-Based Childcare Centres, which are the centrepiece of Malawi’s early childhood development and learning programme.

After five years of intensive advocacy by UNICEF and other partners, the Childcare, Protection and Justice Bill was enacted by Parliament, paving the way for the creation of a national child protection system, including for the first time, a national birth registration system

Community-Led Total Sanitation (CLTS) scale-up efforts resulted in 321 villages starting activities, while 53 were declared Open Defecation Free (ODF). As a result, 25,000 new users have access to adequate sanitation facilities, increasing national coverage from 64% to 66%. Following the success of CLTS, the government is allocating resources to scale it up, in order to achieve Open Defecation Free Malawi by 2014.

Malawi continued to make progress towards the Millennium Development Goals in the area of HIV prevention and child health. As a lead partner in the prevention of mother-to-child transmission of HIV, UNICEF contributed to efforts that ensured that 74% of HIV-positive pregnant women received antiretroviral prophylaxis.

Through effective cash flow planning, bank optimisation and better management of Value Added Tax, the Office saved US$3.8 million during the year. The adoption of an effective procurement strategy and improvements to systems, including the formulation of Long-Term Agreements with vendors and suppliers, saved US$242,000. The full implementation of the UniTrack system increased logistics performance by 70%.

2 COUNTRY SITUATION AS AFFECTING CHILDREN AND WOMEN

Malawi is among the least developed countries in the world, ranked 153 out of 169 countries in the 2010 Human Development Report. Poverty is the major cause of vulnerabilities among children and women. According to the 2009 Welfare Monitoring Survey, 39% of Malawian households live on less than a dollar a day and the proportion of ultra-poor Malawians is estimated at 15%. Malawi’s development is constrained by a rapid population growth rate (estimated at 2.8%), a chronic deficit of capacity at all levels and a limited resource base.

An estimated 1.1 million children live in the bottom wealth quintile, in households with an income of less than $0.20 per day (22 Malawi Kwacha). Their lives are characterised by a daily struggle for food, water, clothing, and decent shelter. These children are often unable to eat more than one meal a day, live in deplorable conditions, face the risk of exploitation and are likely to have dropped out of school.

Whereas Malawi continues to make steady progress towards reducing HIV prevalence, with adult prevalence currently estimated at 12%, the reality is that 70,000 new HIV infections are reported every year, 88% of them attributed to heterosexual transmission. HIV contributes to at least one-third of all maternal deaths and 20% of all child deaths. Nearly 13% of the country’s 7.3 million children under the age of 18 have lost one or
both parents, half of them to HIV-related illnesses. Child-headed households, in which children as young as 11 are forced to take on adult responsibilities, now number close to 3,500.

Malawi’s education system is characterised by insufficient learning and teaching materials, inadequate classrooms, a high teacher-to-pupil ratio, weak school governance and management systems, and high repetition and drop-out rates. These inefficiencies mean that the country spends about 65% of its resources every year on children who are repeating grades or on those who drop out before completing the full primary schooling cycle. On average, it takes 23 student-years to produce one primary school graduate, compared to eight years in a perfectly efficient system.

Malnutrition, especially stunting, continues to pose serious challenges to Malawi’s development ambitions. Whereas the country has recorded successive maize surpluses since 2005, hunger continues to afflict the drought- and flood-prone southern region, and the abundance of maize alone cannot, and has not, necessarily translated into nutrition security.

Under President Bingu wa Mutharika, Malawi’s drive towards self-sufficiency in food production has received worldwide recognition; when he became chairperson of the African Union in January 2010, the president identified food and nutrition security as one of his key priorities. The African Union has adopted the African Food Basket Initiative, which aims at ensuring that Africa feeds itself. The inaugural Africa Food and Nutrition Security Day was launched in Lilongwe on 30 October 2010.

Malawi’s macro-economy has remained relatively stable; the IMF projects a real GDP growth of 6% in 2010. The country remains heavily reliant on agricultural exports. In 2010, tobacco accounted for US$369.8 million of the country’s projected exports of US$994 million.

One major development was the reduction in development aid to Malawi in 2010. Total revenues and grants from foreign sources declined from 35% in 2009 to 30% of in 2010.

3 CP ANALYSIS & RESULT

3.1 CP Analysis

3.1.1 CP Overview

The Country Programme (CP) has five programme areas: Health and Nutrition; Water, Sanitation and Hygiene Promotion; Basic Education and Youth Development; Orphans and Other Vulnerable Children and Child Protection; and Social Policy, Advocacy and Communication. The last two cut across all programmes, while the first three are sector-specific.

The CP is in line with the Malawi Growth and Development Strategy, through the United Nations Development Assistance Framework (UNDAF), and contributes to sustainable economic development and food security, social protection and disaster reduction and management, access to equitable basic social services, HIV and AIDS prevention, care and treatment, and good governance. In 2010 significant progress was made in supporting national efforts to progressively realise the rights of children and women through improved child survival, development, protection and participation. Each programme achieved robust results for the most vulnerable children.

The Health and Nutritional programme saw 74% of HIV-positive pregnant women receiving antiretroviral prophylaxis and a continued reduction in the under-five mortality rate. Nutrition led a significant process of change that saw a shift in focus from treatment for malnutrition to prevention, leading to the design of a national education
and communication strategy to reduce stunting. In the area of child protection, new laws came into force as a result of sustained advocacy and the provision of quality technical support.

Community-Led Total Sanitation extended national coverage of sanitation from 64 to 66% and played a decisive role in getting the government to allocate resources to take the programme to scale, in order to establish an Open Defecation Free Malawi by 2014. In Basic Education and Youth Development, HIV prevention reached 10% of school youth and achieved gender equality in primary education with the graduation of 110 primary school teachers. Social Policy mobilised the Government to provide family survival kits, procured by UNICEF, to 20,000 children in child-headed households. All programmes successfully leveraged resources, totalling over US$100 million, for the most vulnerable children.

3.1.2 Programme Strategy
3.1.2.1 Capacity Development

During the 2009 Mid-Term Review (MTR) UNICEF, in consultation with cooperating partners, determined that UNICEF Malawi, through its support to cooperating partners, did not make a deliberate effort to target and reach the poorest and most marginalised children in a holistic manner.

The MTR recommended that children should feature more prominently in the Malawi Growth and Development Strategy (MGDS) so that the Government would increase its investment in realising children’s rights. Such recognition at the national level subsequently enables district development and implementation plans to align behind the MGDS and reinforces the Government’s commitment to addressing children’s rights at all levels of implementation. Additionally, the MTR recommended that UNICEF intensify community mobilisation, child empowerment and child participation.

During the 2010 mid-year review (MYR), UNICEF sought to determine answers to the question: “Are we doing the right thing?” This was particularly relevant because, despite substantial and commendable progress in ensuring and upholding child rights, UNICEF has found it challenging to stem the challenges of poverty, HIV and AIDS, inadequate community care structures and high levels of abuse. UNICEF assessed how it could add value to efforts to address these challenges through enhanced and improved targeting of interventions that will effectively reach the poorest and most marginalised. The capacity of UNICEF staff was enhanced in many different areas to respond to issues arising from the 2009 MTR and the 2010 MYR.

Training sessions were held to create awareness and understanding on child poverty, social protection, vulnerability and equity, complemented by sessions on data and data analysis. These sessions were followed by a week-long training in Results-Based Management. In June, a week-long team-building retreat was organised to enhance team functionality and improve the operational standards required for UNICEF Malawi staff to work cohesively in the best interest of the poorest and most marginalised children.

3.1.2.2 Effective Advocacy

UNICEF’s key advocacy priority in 2010 was to ensure that children’s rights were more visibly addressed in the 2012-2016 Malawi Growth and Development Strategy. A policy paper was developed staking out the arguments and making an investment case for children. A logical framework was developed, in conjunction with the ministry responsible for children, and became the basis for UNICEF’s engagement in the sector-working groups that the Government had set up to develop the MGDS. Numerous meetings were held with government, UN and civil society partners and all members of Parliament were oriented on the child-focused MGDS approach.
The NGO coalition on child rights took a leading role in sensitising its members on child rights, and developed eight thematic papers on children that were submitted to the Government as part of the MGDS process. The coalition also actively participated in MGDS sector-working groups.

The Country Office took advantage of the UNICEF Executive Director’s visit to Malawi in October to reiterate the need for an equity-focused approach in his meetings with the Minister of Finance and the UN country team. UNICEF also used other opportunities, such as the mid-year review, to argue for the adoption of an equity focused approach. Thanks in large part to sustained advocacy efforts, early childhood development is slowly gaining recognition, as evidenced by the increase in budgetary allocations from 800,000 Malawi kwacha in 2009 to 25 million kwacha in 2010.

A key outcome of UNICEF’s advocacy efforts was the enactment by Parliament of the Child Care, Protection and Justice Bill, five years after the bill was first drafted. UNICEF supported the NGO coalition to undertake last-ditch advocacy efforts directed at members of Parliament, after they appeared to equivocate on certain clauses that were deemed to be at variance with local cultural norms.

UNICEF partnered with the Media Council of Malawi to train journalists on child rights; field trips were organised that resulted in numerous print and electronic media stories highlighting the challenges faced by poor and vulnerable children.

3.1.2.3 Strategic Partnerships

In 2010 UNICEF brought together members of the Global Movement for Children to support the formation of an NGO coalition on child rights. Save the Children, Care, Oxfam, World Vision, and PLAN Malawi signed onto the idea and the NGO Coalition on Child Rights in Malawi was born in May, with the objectives of: forging a common advocacy front for child rights, improving coordination among child rights NGOs, entrenching a culture of implementing child rights in a multi-sectoral and integrated approach, increasing collaboration and information-sharing on best practices and best approaches, and monitoring child rights. The coalition played a key role in advocating for the enactment of the Child Care, Protection and Justice Bill and for a child-centred MGDS.

UNICEF was an active member of the SWAps in health and education and continued to play a key role in the formation of the SWAp in water and sanitation. UNICEF staff were also key members of the development partners’ groups in the education sector and various technical working groups, in particular those related to the 2012-2016 Malawi Growth and Development Strategy. UNICEF also played a leading role in the formation of the National Social Mobilisation Committee, and became a member of the donor task force on Parliament, through which UNICEF will contribute financially and technically to strengthening Parliament’s oversight role, especially on budgets.

UNICEF continued to lead the UNDAF clusters in social protection, nutrition, education, and water and sanitation, as well as chairing the communications and human resources groups.

A mid-year review of the 2010 work plan was held in August, bringing together high-level Government partners, civil society, UN agencies and the private sector. UNICEF also supported the Government’s participation in the September session of the UNICEF Executive Board and provided key inputs into Malawi’s submission.

The First Lady agreed to partner with UNICEF and the Government as an Eminent Advocate for Children. Among the areas she agreed to focus on were early childhood development, adolescent girls and PMTCT.

3.1.2.4 Knowledge Management

In 2010 UNICEF supported the Ministry of Health to conduct a national assessment of Emergency Obstetric and Newborn Care (EmONC) in Malawi. The objective of the assessment was to determine the capacity of the health care delivery system to reduce
maternal mortality and for the results to guide policy, planning, and implementation so that gaps in the system could be addressed.

UNICEF also supported the Ministry of Health to undertake a District Health Expenditure Study to ascertain what resources were being spent on delivery of the Essential Health Package (EHP and non-EHP diseases and services). The study found that the public health sector was inadequately financed and more resources were being spent on non-EHP services than those contained in the EHP.

UNICEF supported the Office of the President and Cabinet and the Ministry of Health to undertake a vitamin A Stability Study to determine the conditions under which fortified sugar could be stored to maintain Vitamin A. The study's findings provided valuable information for regulatory bodies, such as the Malawi Bureau of Standards, to determine the appropriate amount of vitamin A needed to be added to sugar for it to have a positive nutritional impact.

UNICEF supported the Malawi Human Rights Commission to carry out a Situation Analysis of Child-Headed Households in Malawi. The objective was to understand the growing phenomenon of child-headed households in Malawi and to identify strategies to reduce their growth. The study recommended a scale-up of interventions that address the needs of child-headed households and a review and revision of the Plan of Action for Orphans and Other Vulnerable Children.

3.1.2.5 C4D Communication for Development

In 2010 UNICEF worked upstream to solicit high-level recognition of communication for development, which included inauguration of a National Social Mobilisation Committee coordination group, with the presence of cabinet ministers at strategic activities and the signing of Memoranda of Understanding with two leading radio stations to provide free airtime. UNICEF helped the Government to develop a Nutrition Education and Communication Strategy to address stunting, which affects 46% of young children. A community mapping exercise was conducted, providing data on girls dropping out of schools in 12 districts, and informed strategies for targeting 30,000 school-aged girls. Over 67% of all households accessed messages through radio and 4.5 million through television. About 176,000 pregnant women and 277,000 children were reached with messages on H1N1; communities were supported with over 90,000 IEC materials for Child Health Days; and a further 90,000 people were motivated to use insecticide-treated bed-nets through interactive drama in six highly malaria-endemic districts. ECD messages are on-going via nine community radio stations. Thirty front-line workers from seven districts were trained in participatory communication approaches to promote girls retention in schools. Some 368 religious leaders from 28 districts were oriented on community actions by the Malawi Interfaith Aids Association.

The 45-member Mobilisation Committee coordinates and monitors social mobilisation approaches of frontline ministries, civil society, UN agencies, the media, academia and faith-based organisations. The nutrition strategy aims to draw in the Ministry of Agriculture, the private sector, non-governmental and community-based structures. The engagement of the Ministry of Local Government and Rural Development, strategic to the government's policy of devolving power to district councils, made mobilisation of district authorities and traditional leaders a bit easier.

Qualitative evaluation of the typhoid communication intervention, a baseline study on child rights, mapping of Girls’ Education and a desk review of over 30 studies strengthened the C4D evidence base. In 2011 UNICEF will prioritise: behaviour and social norms in maternal and newborn care, the ‘1,000 Special Days’ nutrition campaign, the Girls’ Education ‘It’s Possible’ campaign, and polio mobilisation micro-plans linked with strategies that address disparities in sub-national routine coverage.
3.1.3 Normative Principles

3.1.3.1 Human Rights Based Approach to Cooperation

In 2010 UNICEF re-emphasised its commitment to the Human Rights Based Approach (HRBAP) through the Mid-Year Review (MYR), which re-affirmed the value of using the HRBAP to reach the poorest and most marginalised children. It is the most cost-effective and equitable approach to development.

Adoption of the equity-based approach allowed the Country Office to internally reflect on the challenges of mainstreaming HRBAP and to determine how best it could utilise the HRBAP to target and identify the poorest and most marginalised children.

To expand areas in which the HRBAP is the explicit basis of social and human development programming within Malawi, the Country Office worked with civil society and Government to further the debate in this area. Chiefly, a training of trainers workshop was held for civil society, Government counterparts and members of Parliament and a results-based management (RBM) training was conducted for UNICEF staff. A meeting with development partners took place to dialogue around equity and HRBAP and to further build and strengthen UNICEF’s partnerships and resource base for reaching the poorest and most marginalised children with a holistic integrated package of services to be implemented at the community level.

3.1.3.2 Gender Equality and Mainstreaming

UNICEF helped to enhance the capacity of the Ministry of Education in gender mainstreaming and gender budgeting. In addition, a joint program on adolescent girls was developed with other UN partners and resources were mobilised for its implementation. To address the high prevalence of HIV among young people, particularly girls, the sister-to-sister initiative was piloted, allowing for skills and information for negotiating safe sex and condom use to be imparted to adolescent girls. UNICEF also supported the Brothers-for-Life campaign, which mainly targets men.

UNICEF responded to addressing gender imbalances in water and sanitation in schools through the provision of separate sanitary facilities for boys and girls in 40 primary schools.

In addition, UNICEF contributed to securing a protective environment for children by strengthening the legal and policy framework, enhancing Government capacities, increasing access to preventive and responsive services, and improving information management systems. The number of Community Victim Support Units (CVSUs) rose from 115 to 215 reaching, 100% of traditional authorities in Malawi. One Stop Services Centres were also established with support from UNICEF. With the enactment of the Child Care, Protection and Justice Bill and the National Registration Bill, Malawi has made important advances toward improving child protection, especially for girls.

UNICEF supported the Ministry of Health to provide information on sexual and reproductive health to girls and women. This information not only assists them to make healthy sexual choices, but also offers tips on pertinent issues such as maternal and newborn care, PMTCT, nutrition and immunisation. A major challenge for gender analysis in Malawi is the absence of gender-disaggregated data in all sectors.

UNICEF is working towards attaining gender parity in recruitment. In 2010 the gender parity at General Service and International Professional levels was 50:50 but a gender gap of 12% still exists at the National Professional level.
3.2 Programme Components

Title: Health and Nutrition

Purpose
The Health and Nutrition programme aims to achieve key results for children in the areas of young child survival, health, and nutrition.

The programme has four components: Policy, Systems and Sector Reforms, Reproductive Health and HIV and AIDS, Nutrition, and Child Health. The programme supports the Government of Malawi to reduce maternal, neonatal and child mortality through the scale-up of cost-effective and high impact interventions. The programme promotes equitable access to basic social services, prevention and treatment of HIV and AIDS and a to the achievement of MDGs on poverty and hunger, maternal mortality, child mortality, and HIV and AIDS, malaria and tuberculosis. The programme functions within the framework of the sector-wide approach, which is fully aligned with the MGDS.

Through the Reproductive Health, HIV and AIDS component, UNICEF aims to have 80% of newborns monitored for life-threatening conditions during the first week of life; 80% of HIV-positive pregnant women identified through PMTCT services receiving ARV prophylaxis; and 80% of children born of HIV-positive mothers recruited into PMTCT programmes to access ART. Through the Nutrition component, UNICEF aims to have 80% of infants exclusively breastfed for six months or more and 98% of children aged between 6-59 months receiving one dose of Vitamin A every six months. UNICEF’s targets in child health are to fully immunise 95% of infants with all antigens and to have 60% of children under five years and pregnant women sleeping under insecticide-treated nets by 2012.

Resources Used
The approved budget for 2010 was US$18,028,489, out of which US$16,076,663 was mobilised and US$12,198,567 spent.

Results Achieved
In nutrition, one notable result was that nearly 100% of children aged 6-to-59 months were receiving vitamin A supplements and de-worming during the bi-annual Child Health Days. Mothers and caregivers received messages on exclusive breastfeeding, feeding a sick child, vitamin A-rich foods, deworming, hand-washing with soap, and use of ITNs. An estimated 93% of households now use adequately iodised salt.

UNICEF promoted exclusive breastfeeding through baby-friendly hospitals, community support groups and World Breastfeeding Week campaigns. The proportion of children exclusively breastfed now stands at 65%. UNICEF has supported the government and Illovo to conduct sugar fortification trials, assess consumer perceptions, and restructure Illovo’s factories and equipment. The expectation is that 60% of the population will have access to fortified sugar in 2011. UNICEF assisted the Government to develop a policy, plan and communication strategy on nutrition.

UNICEF scaled-up community-based management of acute malnutrition to 11 districts. The programme treated 25,000 severely malnourished children in nutrition rehabilitation units and community therapeutic centres, with an overall cure rate above 79%.
In child health, UNICEF scaled up community-based management of common illnesses in under-served and difficult-to-reach villages through village clinics. In the 10 initial districts, more than 100,000 under-five children were treated in the village clinics, 46% for suspected pneumonia, 38% for diarrhoea and 26% for malaria.

UNICEF provided technical and financial support to the Government to scale up the Reach Every District approach. Current figures show that 94% of under-five children are immunised against polio, 96% against measles, and 93% against diphtheria (DPT). In all, 96% of districts reported DPT3 coverage of over 80%.

In reproductive health and HIV, 67 midwives, 138 student-midwives and 83 nurse-midwives received hands-on training to conduct basic emergency obstetric and neonatal care, and UNICEF supported the pre-service training of 49 nurse-midwives.

**Future Workplan**

**Policy and Child Health**
- Cost the national health strategy using the marginal budgeting for bottlenecks tool
- Formulate a national health prevention and promotion policy and strategy and support implementation through community social mobilisation to create demand for services in maternal, newborn, and child health, nutrition, and HIV prevention, treatment and care
- Support implementation of the new essential health package through ACSD to ensure substantial coverage within districts, especially designed to reach poor and marginalised segments of the population
- Scale up community case management, including for neonatal sepsis, to all 4,000 difficult-to-reach villages in Malawi
- Strengthen community structures and district capacities to plan, monitor and evaluate their programmes as well as to improve management of their resources.

**Nutrition**
- Support the scale-up of community management of acute malnutrition and advocate for preventive programmes focused on reducing stunting
- Roll out the nutrition education and communication strategy
- Support implementation of sugar fortification along with Vitamin A supplementation through Child Health Days.

**Title: Orphans, Vulnerable Children and Child Protection**

**Purpose**
The Orphans and other Vulnerable Children and Child Protection Programme aims to strengthen the child protection system so that children can realise their rights to grow up in a loving, protective and nurturing environment, free from all forms of violence, abuse and exploitation and have access to child protection and other social services on an equal basis with other children.

The programme contributes to achieving the following MDG goals: Eradication of Extreme Poverty and Hunger, Achieve Universal Primary Education, Promoting Gender
Equality and Empowerment of Women, and Combating HIV/AIDS. It also contributes to the realisation of UNDAF outcomes for scaling-up the national response to HIV/AIDS by 2011 to achieve universal access to prevention, treatment, care and support, good governance, gender equality, and a rights-based approach to development.

**Resources Used**
The programme mobilised US$6,252,622 in 2010, of which US$933,495 was from Regular Resources and US$5,319,127 from Other Resources.

**Results Achieved**
About 300,000 orphans and other vulnerable children aged between three and five years were provided with care and support, early learning and stimulation, food and nutrition, safe hygiene and school preparation skills at Community Based Childcare Centres. The figure was higher than the 250,000 children reached in 2009, attributed to the establishment of 500 new centres.

UNICEF and the Government leveraged World Bank buy-in for the ECD programme, with an initial investment of US$2 million to improve the reach, quality and learning outcomes. Additional leveraging efforts led to the Government’s contribution to ECD increasing threefold.

An estimated 125,000 vulnerable children aged between six and 18 were provided with peer and psychosocial support through the expansion of ‘Children’s Corners’ from 2,000 to 2,500, representing an increase of 25% compared with 2009.

The on-going strategic partnership between UNICEF and USAID leveraged resources for institutional capacity-building of the main Government ministry responsible for children. These efforts are translating into better coordination of the national response to vulnerable children. Key results include the finalisation of the Extended National Action Plan for Orphans and Other Vulnerable Children and the development of a new curriculum for training of social workers at the diploma and degree levels, which will transform the current cadre of social welfare officers into professionals with the capacities required to better serve the most vulnerable children.

About 6,000 children in 103 orphanages are more likely to have their rights to protection and family and community integration realised as a result of the completion of a headcount of children in institutions and the institutions themselves using the *Indicators For Children in Formal Care*, as developed by the Better Care Network.

Legal protections for children significantly improved following the enactment of new child protection and justice legislation by Parliament. The new law makes birth registration mandatory. The 26% of children aged five-to-14 who are involved in exploitative child labour are more likely to be protected following the development of the National Action Plan on Child Labour and a publication of a list of hazardous work.

About 4,500 cases of family violence and neglect were attended to by UNICEF-supported Community Victim Support Units, which are community-level child protection centres. The number of Units increased from 115 to 215 in 2010 and the programme is on track to achieve full scale in 2011. About 550 women and child survivors of family and sexual violence were provided with services at three UNICEF-supported, hospital-based ‘One Stop Centres’ for survivors of violence and abuse. These centres provide a full range of psychosocial, medical and legal aid services.

Just over 1,600 women and children accessed child-friendly, gender-sensitive police services through the strengthening of 101 Police Victim Support Units, partly
contributing to an improvement in public perceptions of police and a 5% increase in the reporting of crime. In partnership with DfID, a new police crime database is progressively coming online, which will provide information for the first time on the number of reported cases of violence against women and children. Preliminary work to establish baselines on children and justice, based on the global *Indicators for Juvenile Justice*, suggests that increasing numbers of children are being detained with adults.

**Future Workplan**

- Fast track implementation of the Child Care, Protection and Justice Act and National Registration Act
- Increase efforts to reduce the number of children in custody and in orphanages
- Strengthen the quality of Community-Based Childcare Centres
- Test a national case management system
- Establish core baselines and undertake studies to map how to take key programmes to scale in the next Country Programme.

**Title: Basic Education and Youth Development**

**Purpose**

The programme has three sub-components. The Quality Primary Education component focuses on girls’ education, increasing equitable access, completion and achievement, relevance and quality. The Child-Friendly Schools approach is the primary strategy, as it envisions a quality primary education that is rights-based. The Adolescent Development, Participation and HIV/AIDS component is designed to contain the spread of HIV among in- and out-of-school youth. And the the Policy, Systems Development and Sector Reform component seeks to make the SWAp operational, harmonise education development, increase resource inflows, and develop institutional, organisational and personal capacity at all levels. The entire programme component is framed around national policy documents and international conventions to which Malawi is a signatory.

**Resources Used**

The programme’s approved budget for 2010 was US$6,930,900.00. A total of US$7,805,859 was mobilised, consisting of US$933,495.00 in Regular Resources and US$6,872,364 in Other Resources.

**Results Achieved**

An estimated 460,000 learners from 10 of 34 education districts directly benefited from a range of UNICEF interventions through the Child-Friendly Schools (CFS) approach, accounting for 15% of the total primary school student population in Malawi. CFS interventions included infrastructure development, provision of reference materials for planning, coordinating, implementing, and monitoring CFS, teacher training, and capacity development of school management structures.

About 10,700 learners from rural areas benefitted from the posting of 107 qualified female teachers to rural schools. These efforts resulted in achievement of overall gender parity at the primary level (2009 EMIS).

Lifeskills education was introduced for the first time in primary education in 2010.
About 60,000 out-of-school youth, representing 10% of Malawi’s total youth population, were reached with key messages on HIV and AIDS. About 650 boys and girls were provided with livelihood and vocational skills. Planning and decision-making systems were improved through the establishment of the youth management information system and strategic plan.

In addition, US$90 million was leveraged from the Fast Track Initiative Catalytic Fund, through effective sector-wide coordination of efforts between the Government and development partners. Two other milestones were the signing of the Joint Financing Arrangement and the Memorandum of Understanding that made the sector SWAp operational. All districts were provided with capacity to effectively respond to education in emergencies.

Capacity deficiencies across the entire education system continue to hinder performance.

**Future Workplan**

UNICEF’s main priority will continue to be to make the SWAp more effective at district and school levels. Efforts will be made to strengthen the capacity of district education officials and key stakeholders to use the District Education Management Information System and the Education Management Information System as planning and management tools. The CFS approach will be scaled up to other districts and community participation will be strengthened. Support will be given to the Government to coordinate interventions in school construction, teacher training and equity promotion. UNICEF will continue to focus on life skills, livelihood skills training, and complementary basic education. On-going initiatives will be scaled up.

**Title: Water, Sanitation and Hygiene Promotion**

**Purpose**

The programme contributes to the overall goals of the Country Programme by improving the quality and coverage of basic social services to reach all children and women. The programme is fully aligned with the UNDAF and harmonised with the Government’s priorities and policies.

The programme has two components. The Policy and sector reform component supports the SWAp and sector reforms, policy development, management information systems, monitoring and evaluation, and advocacy. The second component delivers sustainable rural water and sanitation services to communities and schools, operating in 14 districts, and supports planning and implementing of water supply systems, community participation, operations and maintenance, Community-Led Total Sanitation, hygiene promotion, Geographical Information Systems, monitoring and evaluation, emergency response, and capacity building.

The main planned targets for 2010 were to reach:
1. 155,000 people with access to safe water (and a functionality rate of over 80%)
2. 52,000 households with access to basic sanitation
3. 120 schools with the full water, sanitation and hygiene package
4. 104,000 households and 120 schools with hygiene promotion.

**Resources Used**

The total budget for 2010 was US$8,564,752. Of this amount, US$900,224.01 was from Regular Resources and US$7,664,528 from Other Resources.
Results Achieved

In policy and sector reforms, UNICEF contributed to the SWAp by strengthening the mechanism for sector dialogue. The Government agreed to UNICEF’s offer to support preparation of a Sector Performance Report for the 2011 Joint Sector Review. UNICEF supported the development of District Strategy and Investment Plans, and contributed to the Terms of Reference for preparing a Sector Investment Master Plan to be funded by the World Bank.

The operations and maintenance framework was finalised but is yet to be adopted by the Government.

UNICEF supported an assessment of water and sanitation in schools. The results show that 81% of schools in Malawi use protected water sources, 23% have acceptable sanitation, but only 4% offer hand-washing facilities with soap. UNICEF is proactively lobbying donors for support in this critical area.

The Government agreed to develop a strategy for scaling up CLTS together with UNICEF, Plan International and Engineers without Borders.

In community water supply, UNICEF provided safe drinking water to 166,250 people in 14 districts through the installation of 590 new hand-pumps and repair of 75 old ones, contributing to an increase in national coverage from 74.2% to 75%. The functionality rate of these boreholes is estimated at 95.5%, comparing favourably with the national average of 70%.

UNICEF supported operations and maintenance of water points by training village management committees and private mechanics, monitoring and evaluation, and supply chain management at the district level to improve the overall functionality rate. The mapping of water supply in these districts contributed to improved and more equitable planning.

In community sanitation, over 25,000 people gained access to adequate sanitation following the triggering of 321 villages through CLTS. Fifty-three villages were reported to be ODF. This amounts to increased national coverage from 64% in 2009 to 65.4% in 2010. UNICEF was instrumental in the scale-up of CLTS to 16 districts in which it does not work directly by streamlining and institutionalising procedures and forging strategic alliances.

Future Workplan

- Adopt a more sharply focused equity approach, particularly in planning new water and sanitation services.
- Implement sanitation marketing to complement CLTS
- Implement a strategy for scaling up CLTS in Traditional Areas by orienting and involving chiefs and other traditional leaders
- Mobilise resources for school sanitation
- Strengthen the SWAp though a Sector Performance Framework
- Support the national hand-washing campaign
- Develop proxy indicators for hygiene behaviour.
Title: Social Policy, Advocacy and Communication

Purpose
The Social Policy, Advocacy and Communication (SPAC) programme supports national efforts to achieve the Millennium Development Goals within the framework of the MGDS and the UNDAF.

The programme has four components. The social policy component ensures that children’s issues are well positioned and adequately resourced in national, decentralised and community plans, and that social protections are provided to the poorest and most marginalised children. The planning, monitoring and evaluation component supports the use of data in planning processes and promotes monitoring and evaluation. The communication and external relations component promotes public awareness of children’s rights through media coverage, supports UNICEF’s advocacy efforts, promotes partnerships with children, civil society and Parliament and supports UNICEF’s fundraising efforts. The communication for development (C4D) component is responsible for promoting behaviour and social change through interpersonal communication and the mass media at national and community levels.

Resources Used
In 2010, the programme mobilised US$6,909,220, of which US$2,401,567 was in Regular Resources and US$ 4,507,653 in Other Resources.

Results Achieved
In the social policy arena, 4,000 child-headed households received family support kits comprised of beddings, cooking utensils, chlorine, insecticide-treated nets, and plastic sheeting.

About 28,000 ultra-poor households in seven districts received cash grants that also benefited 68,000 children. UNICEF’s lobbying efforts led the Government to agree to increase its budgetary allocation to the programme from 50 million Malawi kwacha in 2010 to 250 million in 2011 (US $1.7 million). UNICEF leveraged 13 million euros from the German Government for the cash transfer programme and in 2011 the Government, UNICEF and the German bank KFW will use the funds to strengthen monitoring and evaluation and install an information management system.

UNICEF advocated for the needs and rights of children to be prominent in the 2012-2016 Malawi Growth and Development Strategy. Country-wide consultations were held with members of parliament, district commissioners, and civil society.

UNICEF provided funds for data collection for the Malawi Demographic and Health Survey (MDHS). The MDHS is a source of data for the MGDS, UNDAF and the 2012-2016 country programme. The MDHS final report is expected in mid-2011.

UNICEF supported the National Statistics Office to update MASEDA with Census 2008 data, to train staff in its use, and place it online.

UNICEF undertook a situation analysis of children in Malawi; the results will be used in planning the next Country Programme and the UNDAF.

UNICEF sponsored training on child rights for 20 journalists and a field trip to Mzimba and Nkhata Bay for 13 journalists, which resulted in 31 news stories and one television documentary on sanitation.
UNICEF played a leading role in the formation of the NGO Coalition on Child Rights. The coalition coordinated civil society inputs into the MGDS and spoke out on violence against children. UNICEF continued to be represented on the donor task force for Parliament, and will contribute to strengthening Parliament’s oversight function in 2011.

International media hosted in 2010 include CNN, which covered the cash transfer programme, Asahi Shimbun from Japan, MSNBC from the United States, and television reporters from Norway and Sweden.

UNICEF facilitated the formation of a National Social Mobilisation Committee, signed Memoranda of Understanding with two leading public and private radio stations, and supported the Department of Nutrition to develop a Nutrition Education and Communication Strategy.

Over 67% of households were reached with messages through radio and 4.5 million through television. About 176,000 pregnant women and 277,000 children were reached during the H1N1 campaign; communities were given 90,000 IEC materials during the Child Health Days. About 90,000 people in six highly endemic malaria districts were persuaded to use bed-nets through interactive drama. ECD messages are on-going on nine community radio stations, and are integrated into 60 radio listeners clubs.

**Future Workplan**

- Support a policy and institutional framework for social protection and advocate for increased funding through the national budget
- Support multi-sectoral coordination and information management systems for the cash transfer programme
- Strengthen the Government’s capacity in overall programme implementation, including procurement, human resources and financial management
- Complete the situation analysis
- Strengthen implementation, monitoring and evaluation of country programmes and the UNDAF
- Support selected district assemblies in the use of data for planning, monitoring and evaluation
- Establish a MASEDA Corner in Parliament to strengthen the use of data by Members of Parliament
- Support the National Statistical Office to write and disseminate the MDHS 2010 reports and to update MASEDA with MDHS data
- Improve information flow and reporting on key results for children to key stakeholders and development partners through an e-bulletin.
- Consolidate the NGO coalition and enhance its capacity to advocate for children’s rights
- Support Parliament in its oversight function and institutionalise the Youth Parliament
- Launch the ‘1,000 Special Days’ (nutrition) and ‘It’s Possible’ campaigns on girls’ education.
- Support the preparation of social mobilisation micro-plans for polio and measles immunisation
- Focus on behaviour and social change to address underlying causes of maternal mortality and newborn care practices
- Roll-out Facts for Life.
4 OPERATIONS & MANAGEMENT

4.1 Governance & Systems

4.1.1 Governance Structure

The 2010 Annual Management Plan (AMP) clearly reflected key priorities/results that are critical to the achievement of the CP planned results/outcomes. Management priorities included enhanced work planning, improved performance management and strengthened co-ordination. All the statutory office governance committees such as the Country Management Team and Emergency Management Team continued to function efficiently. The CMT's terms of reference were revised and endorsed.

The CMT monitored on a quarterly basis progress towards AMP priorities. Through periodic reviews of the management indicators, programme implementation reports, evaluations, and reviews of programme results, the CMT was able to track progress towards CO targets and performance standards and make informed decisions on courses of action, procedures, structures and resource allocations. The CMT discussed HACT issues and provided guidance to strengthen monitoring activities and financial spot-checks of implementing partners.

To deepen relationships with donors, a fundraising strategy was developed and reviewed by the CMT; fundraising status was reviewed regularly. The Country Office was audited during February-March 2010. Overall Office risk management practices were rated as partially satisfactory; governance and programme management were rated as partially satisfactory and operations support was rated as satisfactory. The audit's recommendations are reviewed regularly by the CMT and discussed in programme management meetings.

The Malawi Country Office has an Emergency Preparedness and Response Plan (EPRP) that was prepared by the Emergency Management Team and approved by the CMT. Office preparedness capacity was strengthened through a staff training session, after which the EPRP was reviewed to incorporate the revised core commitments for children and address weaknesses identified during the training. Standing capacity for initial response to an emergency in the country is maintained to meet the basic requirements of at least 15,000 persons (3,000 families) for 6-8 weeks. It includes 3,000 survival kits, cholera supplies for 800 cases, water purification tablets for 15,000 persons and learning materials for 27,000 children.

4.1.2 Strategic Risk Management

The Office has procedures for periodic assessments of business processes and for response to changes in the internal and external environments. These include adequately delegated staff roles and responsibilities, mid-year and annual sector reviews, which are opportunities to assess inherent risks in the Country Programme. The February-March 2010 audit focused on risk identification, management and mitigation. The audit identified 22 risks (none classified as high), and effective controls have since been put in place in areas such as donor reporting process, fundraising, and civil society collaboration.

The Business Continuity Plan (BCP) and Information Communications Technology (ICT) Disaster Recovery Plan are in place and up-to-date. The BCP provided policy guidance to ensure that the Office has capabilities to continue critical processes and operational services in the face of a broad range of risks, such as acts of nature, critical infrastructure failure, and loss of key stakeholders. The BCP incorporates material from the UNICEF Malawi Emergency Preparedness and Response Plan (EPRP) and the UN Malawi Security Plan. It also has detailed emergency preparedness plans and procedures and, following its successful testing on 7th December, has provided the required assurance that it will enable the continuity of essential operations in the event of an emergency. During the development of the BCP, the Office identified risks that could, if they came to fruition, disrupt its operations. The Office is further pursuing the strengthening of risk management through development of the UNICEF Malawi Risk
Profile and Matrix, mapping major risks, their likelihood and impact on the country programme and mitigation measures. Through quarterly spot-checks of implementing partners, reviews and/or reconciliation exercises in various areas (such as management of and assignment of rights as set out in the Table of Authorities), execution of bank reconciliation, and verification of the banking details of implementing partners, the Office sustains a structured approach for regularly assessing the effectiveness of controls to mitigate risks. The management of expendable property is also reviewed, and identified risks are communicated to management for implementation of corrective actions.

4.1.3 Evaluation
UNICEF Malawi maintains an up-to-date IMEP and actively follows up on all of the evaluation/survey activities listed in the IMEP. Progress on IMEP activities is recorded in the IMEP implementation status report, which is updated every quarter. To ensure that evaluations are objective, fair and impartial, the Country Office involves partners in IMEP implementation.

In 2010, the Country Office along with other partners and the Government, supported the Malawi Demographic and Health Survey (MDHS) and The Mapping of Child Care Institutions in Malawi. The MDHS preliminary report was expected at the end of 2010 and will serve as a strategic source of data for the MGDS II, UNDAF and the new UNICEF Country Programme. The MDHS will also be used to measure progress since the last national survey, the Multiple Indicator Cluster Survey of 2006. UNICEF also supported the Government to map all child care institutions in the country. The data is expected to show the number of children in institutions of care, such as orphanages, in Malawi and the level and quality of care provided. The report was due at the end of 2010.

UNICEF supported and actively participated in a number of evaluations in nutrition, HIV and AIDS, and reproductive health. The Ministry of Health conducted an assessment of Emergency Obstetric and Newborn Care (EmONC) to determine the capacity of the health care system to reduce maternal mortality and to propose an action plan. UNICEF also supported the Government to undertake a study of health expenditures at the district level. The study found that financial resources in the public health system were inadequate and more resources were being spent on services not included in the Essential Health Package. All completed evaluations and survey reports were widely circulated. Dissemination workshops were held and a management response to the evaluations was submitted. UNICEF constantly seeks new data to use for in planning, monitoring and evaluation of programmes.

4.1.4 Information Technology and Communication
To help UNICEF influence policies and actions in favour of children’s and women’s rights, UNICEF supported the rapid SMS initiative to collect nutrition data for analysis. UNICEF also convinced local mobile phone service providers to donate toll free numbers through which the data was transmitted via SMS by health surveillance assistants to a local server at no cost. The server then presented the collected data in web pages that could be viewed by all stakeholders.

The UN ICT workgroup in Malawi was formally established in 2010. A joint mission comprising four UN agencies visited Mozambique to learn from their experiences in delivering common ICT services. All resident UN agencies are also working together to entrench fibre optic to UN common ICT services. Though Malawi is already connected to the under-sea fibreoptic cable, the technology is still in its infancy evidenced by frequent breakdowns. Hopefully, the technology will stabilize in 2011 and can be used to bring down the cost of communications.
To provide remote access to the network, critical operations staff were issued a Blackberry phone that can also be used as an IP modem to connect to the internet via a laptop. In this way, the staff can access the office LAN via Citrix. The Office reduced the number of printers by introducing high-end network printers and discontinued the use of small printers. Network printers are configured to print both sides to reduce on paper consumption. Staff are encouraged to use their laptops in meetings instead of printing out documents they need. The Office also procured locally refilled toners, after verifying that they were of good quality. The Office also successfully tested its BCP, after VSAT-carrying corporate data malfunctioned, by rerouting it to a second VSAT carrying internet traffic. The office is MOSS compliant for phase 0 and is prepared for security phase 1. All field-going vehicles are equipped with HF and VHF radios and the Office has two BGANs and three Thuraya Handsets.

4.2 Fin Res & Stewardship

4.2.1 Fund-raising & Donor Relations

The Country Office has demonstrated a commitment to donor relations and fundraising through a range of key strategies. By consistently monitoring funding from Other Resources (OR), UNICEF was able to maintain a zero tolerance on late reports and has met deadlines 100% of the time. The reports follow quality standards based on UNDG formats and the PARMO standardised quality checklist. Moreover, a regional Quality Assurance Exercise placed Malawi in the ‘exceptional’ category when it came to quality of donor reports for the past two years.

Internally, the Office sought to proactively enhance the capacity of staff to deliver quality, on-time reports through a staff training in October 2010. The most concrete achievement was an intensive office-wide review and subsequent modification of the workflow process for donor reports to improve the review and submission process.

Generally when it comes to fundraising, UNICEF has been successful and has one of the highest OR funding levels from National Committees in the Eastern and Southern Africa Region. Recognising the challenging funding environment over the next few years, UNICEF has taken some concrete steps to proactively raise funds by developing a resource mobilisation strategy and a management advisory group comprising all section heads. Other strategies implemented include a tool to collect information on fundraising initiatives in the pipeline. Key fundraising documents were developed and shared with donors, which resulted in funding for the Office. While still in the initial stages, it is expected that this strategy will address some key funding gaps in 2011 and for the subsequent Country Programme.

4.2.2 Management of Financial and Other Assets

The Country Office received a ‘satisfactory’ internal audit rating in relation to operations support. The CMT regularly reviews financial contributions and budget utilisation, liquidation of direct cash transfers, and donor reporting. The close monitoring has led to good performances on key indicators: expenditure on Regular Resources were projected at 90% as of December 2010, 95% of PBAs were used within their original duration, 100% of OR were used within their original life, and 0.68% of DCT were outstanding for over nine months.

The CMT made a concerted effort to strengthen systems, procedures and staff capacity in order to improve the risk control environment and efficient use of UNICEF’s financial resources and monitoring of results. The monitoring of Direct Cash Transfers was strengthened within the overall HACT, through regular field visits and financial spot-checks, of which 11 were undertaken in 2010. These were aimed at lessening irregularities and poor financial discipline among implementing partners and providing acceptable levels of assurance to UNICEF.
Through effective cash flow planning, bank optimisation and regular follow-up with the Malawi Revenue Authority on the VAT refund, UNICEF managed to recover about US$3.8 million in 2010. The Country Office implemented an asset identification system using bar codes, thereby automating all of its inventory. The system has improved the efficiency and effectiveness of inventory verification and management. As part of UN common services, UNICEF took the lead in negotiating long-term agreements with hotels identified as suitable for hosting UN-sponsored workshops. Twelve LTAs involving 20 hotels were signed by the UN Resident Co-ordinator's Office. Initial assessments indicate that with this arrangement, the UN will save up to 17% on conferencing facilities and a further 24% on accommodation. UNICEF actively participated in all UN common service initiatives aimed at improving efficiency, reducing transaction costs and ensuring timely availability of high quality supplies and services.

4.2.3 Supply
Through the adoption of an effective procurement strategy and system improvement and expansion of existing LTAs, UNICEF was able to save US$242,000. Full implementation of the UniTrack system increased logistics performance by 70%. Whether procurement was offshore, regional or local, quality and timeliness of supply inputs and regular local market assessments were key to the procurement strategy implemented in 2010. Systematic assessments of the local market made possible the local purchasing of RUTF and LLINs with less lead time than the off-shore average of four-to-six months.

UNICEF procures different types of supplies, with an average value of US$12m a year. To guarantee its ability to provide humanitarian supplies within 48 hours, UNICEF replenished its emergency supplies. An estimated 85% of all orders arrived in Malawi within the Target Arrival Date, just short of the targeted benchmark of 90%. UNICEF continued to monitor supplies in the field to ensure their proper use. These monitoring exercises yielded helpful insights that will be used to improve future management of supplies.

UNICEF procured all HIV anti-retroviral, malaria and tuberculosis supplies financed by the Global Fund on behalf of the Government, amounting to US$45m. UNICEF also supported capacity-building of partners: two employees each from the Ministry of Health, the Central Medical Stores, the Ministry of Education, and the Department of Disaster Management Affairs (DoDMA), and four UNICEF staff were trained in warehouse management. To foster local capacity in warehousing, UNICEF supported the renovation of the DoDMA warehouse in Ntcheu, and an MoU with DoDMA was being finalised in December 2010 to enable UNICEF to transfer emergency supplies to the DoDMA warehouse, providing a potential lesson on how to transfer programme stock management to the Government. UN agencies conducted a feasibility analysis for the establishment of a UN procurement hub in Malawi.

4.3 Human Resource Capacity
The human resources (HR) function in 2010 focused on aligning HR management to Country Programme requirements for 2010-2011. Existing skills gaps were filled through training and competency-based recruitment. UNICEF chairs the UN HR Taskforce, which is currently developing a common roster of consultants in areas where demand for specialised expertise is greatest.

During the year, 17 local and international positions were filled; the recruitment process followed the Competency-Based Interviewing approach. The Country Office continues to give due consideration to gender and diversity in its recruitment process and managed to attain a 50:50 gender ratio at both the General Service and International Professional levels. The CO also attaches great importance to staff development and successfully implemented 72% of the training plan in 2010. A key activity in 2010 was the training of 19 staff members on Emergency Preparedness and Response.

By the end of February 2010, 98% of 2009 Performance Evaluation Reports (PERs) were completed and 70% of individual work plans and training needs were completed by end-March. During the year, UNICEF participated in the roll-out of E-PAS. A three-day staff retreat was held that included participatory activities to reinforce team building, staff awareness of organisational values, inter-cultural communication, and internal cohesiveness.

An office-wide training on stress management was conducted in which 56 staff members participated. Forty-six per cent of staff participated in the global pilot project to cover 100% of all HIV-related care for staff on MIP, including a wellness package that covers HIV testing.

4.4 Other Issues

4.4.1 Management Areas Requiring Improvement

Following UNICEF's office relocation, savings were made in security, cleaning and telecommunication costs. As part of the Office's green initiative, printers were reduced in number from 65 to 22, representing a 19% reduction in costs. UNICEF has started using refilled toners, which will lead to at least a 25% reduction in toner costs. The LTAs for programme supplies resulted in an overall saving of US$242,000. Through LTAs with major hotels, up to 17% of conferencing and accommodation costs will be saved.

4.4.2 Changes in AMP

In conjunction with the planning of the new Country Programme due to start in 2012, the country office will conduct skills and competence gap analysis after the structure of the country programme is determined. The analysis will ensure that the office structure and staffing reflect the technical, managerial and leadership skills required to achieve country programme goals. The country office will also revisit the programme results structure in order to comply with the new UNICEF revised programme structure (Programme Component Results/Intermediate Results).

5 STUDIES, SURVEYS, EVALUATIONS & PUBLICATIONS

5.1 List of Studies, Surveys & Evaluations

1. Hygiene Promotion through Community Based Childcare Centres (CBCC) and Antenatal Care Systems in Salima and Blantyre
2. National Emergency Obstetrics and Neonatal Care (EMONC) Assessment
3. Situation Analysis of Child-Headed Households in Malawi
4. Child Poverty and Disparities Study
5. Girls mapping in 7 districts
6. Gender responsive budgeting in Malawi
7. Impact of the integration of water treatment and hand washing incentives with antenatal services on hygiene practices of pregnant women in Malawi.
8. District Expenditure Study on Essential Health Package
9. Stability of Vitamin A in Fortified Sugar
10. Study on post primary transition to secondary education
5.2 List of Other Publications

1. A Year of Progress
2. Changing Lives: A Portrait of Children in Malawi

6. Innovation & Lessons Learned

Title: The Family Support Kit Initiative

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Abstract
Through the Family Support Initiative, UNICEF provided family support kits to 4,000 child-headed households that rank high among Malawi’s most vulnerable and neglected children. The kits consisted of bedding, cooking utensils, insecticide-treated mosquito nets, plastic sheeting, and chlorine. While it has always been known that child-headed households exist in Malawi, nobody knew exactly how many there were. Through the initiative, a headcount of child-headed households was carried out; a follow-up survey identified some of the problems and challenges the children face. The initiative raised national awareness of the rights of these children and was a key plank in UNICEF’s advocacy for scaling up the Social Cash Transfer Programme, to benefit these children and others.

Innovation or Lessons Learned
By working with the private sector from the outset, Family Support Kits were distributed free nationwide, through a partnership with Farmers’ World, a farm-input distribution company. Farmer’s World agreed to distribute the kits at no cost and its vast network of depots and warehouses ensured that the kits reached the children quickly. Due to UNICEF’s partnership with the First Lady, the initiative received widespread media coverage and became a useful advocacy tool for the scaling-up of the Social Cash Transfer Programme to all 28 districts in Malawi by 2015.

Potential Application
The initiative could be used in other country programmes as an entry point for identifying child-headed households and linking them to social protection interventions.

Issue/Background
Nearly 900,000 children in Malawi have lost one or both parents. Due to the lack of an officially established alternative care system, over 20,000 of these children are living on their own. Children growing up in such circumstances often lack access to adequate shelter, clothing and food. Older children in the family, sometimes no more than ten years old, bear the responsibility of caring for their younger siblings. To survive, these children often pursue means of income generation that increase their vulnerability to abuse and exploitation.

Strategy and Implementation
UNICEF partnered with the First Lady and Farmer’s World and established the Family Support Kit Initiative. The initiative involved the procurement and distribution of 5,000 kits comprising essential items such as mattresses, mosquito nets and cooking items. Prior to implementation, US$75,000 was allocated for the training of district-level government officials to assist in identifying and registering child-headed households. A television documentary was also produced, prior to the kick-off of the campaign by the First Lady.

Progress and Results
A major result of the innovation was that following the identification process, all child-headed households were placed on the Social Cash Transfer Scheme, in addition to receiving a Family Support Kit. A main factor leading to this result was the constant media coverage of the situation.

**Next Steps**

UNICEF will support the Government of Malawi to scale up the Social Cash Transfer Scheme so that by 2015, all ultra-poor and labour-constrained households, which include child-headed households, will benefit from the scheme. A key factor contributing to this decision was improvements made in payment, monitoring and evaluation modalities and investment in an Information Management System that makes the scheme more attractive to donors.