

# Norwegian Church Aid Malawi Strategy

**2016-2020**



**NORWEGIAN CHURCH AID**  
actalliance

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## List of abbreviations

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ACT	Action by Churches Together
AIDS	Acquired Immunodeficiency Syndrome
ART	Antiretroviral Therapy
ANC	Antenatal Care
ARV	Antiretroviral
BEmONC	Basic Emergency Obstetric Neonatal Care
CEDAW	Convention for the Elimination of all forms of Discrimination Against Women
CARD	Churches Action in Relief and Development
CBCC	Community Based Child Care Centre
CHAM	Christian Health Association of Malawi
CRC	Convention on the Rights of the child
CSOs	Civil Society organisations
DOMDA	Disaster Management Affairs
ECD	Early Childhood Care and Development
ECM	Episcopal Conference of Malawi
EHP	Essential Health Package
EID	Early Infant Diagnoses
EITI	Extractive Industries Transparency Initiative
FP	Family Planning
GBV	Gender Based Violence
HBB	Helping Mothers Breathe
HDI	Human Development Index
HIV	Human Immunodeficiency Virus
HRH	Human Resource for Health
HSSP	Health Sector Strategic Plan
HTC	HIV testing and Counselling
HTI	Health Training Institutions
HTP	Harmful Traditional Practises
ICT	HIV Testing and Counselling
ICDP	International Child Development Programme
IGAs	Income generating activities
KMC	Kangaroo Mother Care
LUANAR	Lilongwe University of Agriculture and Natural Resources
M&E	Monitoring and Evaluation
MCC	Malawi Council of Churches

MCCI	Malawi Chamber of Commerce and Industry
MDG	Millennium Development Goal
MEPC	Malawi Export Promotion Council
MGDS	Malawi Growth and Development Strategy
MICS	Multiple Indicator Cluster Survey
MMR	Maternal Mortality Ratio
MNH	Maternal and Neonatal Health
MOH	Ministry of Health
MP	Member of Parliament
MPRSP	Malawi Poverty Reduction Strategy Paper
NCA	Norwegian Church Aid
NMR	Neonatal Mortality Rate
NSO	National Statistical Office
PMTCT	Prevention of Mother to Child Transmission
PLHIV	People living with HIV
PTA	Parent Teacher Association
PWD	People with disabilities
RNE	Royal Norwegian Embassy
SMEs	Small and medium Enterprises
SRH	Sexual and Reproductive Health
SRHR	Sexual and Reproductive Health and Rights
STI	Sexually Transmitted Infections
TEVETA	Technical, Entrepreneurial, Vocational, Educational and Training Authority
TIP	Trafficking in Persons Act
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
WASH	Water, Sanitation and Health
WHO	World Health Organisation
YFSH	Youth Friendly Health Services

## Executive summary

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This strategy is a descendant to the NCA Malawi (2011-2015) country strategy. It is an embodiment of our ambitions to influence sustainable changes beneficial to primary rights holders. NCA has been present in Malawi for more than ten years implementing a range of humanitarian and long term development programmes. Through the years, a number of lessons have been learnt to facilitate sustainable changes for rights holders.

Reflecting our experience and achievements, we are strongly focused on change as a process and what it leads to. Our country goal is "Together for a Just and Healthy Society with Sustainable Livelihoods". We acknowledge that NCA together with partners can contribute to changing the situation for poor and marginalized communities through this goal. In togetherness, our programme work in Reproductive health, Gender Based Violence (GBV), Economic empowerment and Natural resources governance, will directly and indirectly influence changes necessary to achieve the country goal through four specific programme goals, namely: a society where quality reproductive health is secured and sustained, reduction in GBV in targeted communities in Malawi, entrepreneurial opportunities and sustainable employment for the youth and women and accountable governance of public resources for equitable distribution of wealth and sustainable development.

NCA Malawi will contribute to programmatic changes at national, district and community levels in 10 districts, in Southern, Northern and Central Regions. As the plan evolves, we will explore possible geographical complementarities with ACT Forum sister organisations.

Consistent with the need to strategically focus and maintain manageable portfolio of partners, we have initially chosen 8 core partners. The chosen partners reflect combination of rootedness and ability to deliver with accountability, as well as programmatic diversity in service delivery and advocacy and capacity to influence rights holders and duty bearers. Keeping in view that most of our core partners are members of Malawi ACT Forum, we will strengthen cooperation through the forum as well as among selected members of the forum deemed appropriate according to geography, mandates and capacity and competence. Realizing that our core partners are not necessarily specialized in skills sets, cooperation with resource organisations and networks will be encouraged and supported to strengthen them. Resource partners will be identified according to specific needs and skills relevant to pursuing our country and programme goals. We will also work with the media as part of our innovative approaches, exploring and working beyond traditional media particularly in areas that link rights holders to better services in reproductive health and GBV programming.

Through reproductive health, NCA and partners will support systems strengthening of CHAM for effective health service delivery as well as strengthening community-based organisations to mobilize primary rights holders to access conventional health services. As well, our work in reproductive health will contribute towards creation of a culture where conventional health services are preferred over harmful traditional ones. We will strengthen the civil society so rights holders are empowered to demand quality health facilities and services. While strengthen our faith-based partners in the reduction of GBV in communities, the Trafficking in Persons Act and other anti-GBV laws will be utilized in the awareness and sensitizations of faith-based and civil society partners to promote gender positive social norms that uphold the dignity and rights of girls and women. Economic empowerment is relatively a new programming area and while some partners may have previously implemented similar programmes, a needs-based strengthening of our partners will be required in this area. The aim of the programme is to promote Entrepreneurial Opportunities and Sustainable Employment for youth and women. We will achieve our programme goal

through contributing to the rights holders' possibilities to establish small and medium enterprises (SMEs), and for youth and women to gain and maintain employment or self-employment. NCA will support efforts by right holders organized in groups to develop own livelihood and gain access to local or domestic markets. Right holders will be facilitated to gain knowledge and skills of how to establish and run a business. Poor governance in the extractive industries is depriving Malawi of resources needed for social and economic development of the poor and marginalized. Through the Resource Governance programme NCA and partners will advocate for improvement of policies and legal frame works governing extractive industries. Focus will also be empowerment and capacity development of mining affected communities to know and claim their rights, for example the right to free, prior and informed consent, and right to land compensation, etc.

From predominantly responding through Malawi ACT Forum, we will prepare and respond to emergencies through our two core partners CARD and CHAM, the Malawi ACT Forum, as well as direct implementation if necessary.

NCA Malawi's programmes are aligned with the Norwegian Government's priorities for development cooperation. Income generation and job creation will be a focus, which is affiliated with the Norwegian Government's White Paper "Working together: Private sector development in Norwegian development cooperation (Meld. St. 35 (2014–2015))". Furthermore, Norwegian development policy in general, e.g. the white paper mentioned above, supports initiatives related to fair distribution of economic growth as covered by NCA Malawi's Resource Governance programme. The GBV programme is associated with the Norwegian Government Action Plan for Women's Rights and Gender Equality in Development Cooperation 2007-2015, which has four thematic focus areas, including violence against women. In Malawi we have also aligned our strategy with the Norwegian Government's country specific priorities on health care.

In terms finance and funding, NCA Malawi has seen significant growth in funding from various government and private donors such as GIZ, Tilitonse, Aids Fond, KFW/PSI and the Royal Norwegian Embassy (RNE). The funding outlook shows that NCA will continue getting a high percentage of funding from the RNE, around 65% of NCA Malawi's total estimated budget for 2016-2020, and that there will be an increase in funding from other donors. To strengthen our funding position, we will diversify our funding base, improve grant management capacities in partners, and achieve programme delivery-based efficiency gains, build funding sustainability and promote stronger collaboration with ACT partners. To respond to increased volume and level of activities, local partners need strengthening in financial management and results management to improve their accountability and sustainability, as well as their attractiveness to alternative sources of development support. Moreover, NCA will build capacity of own staff and core partners in new areas of the strategy, particularly Economic Empowerment.

## 1. Context analysis

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### a) Socioeconomic Factors

Malawi is one of the world's poorest countries, ranked 174 out of 187, while life expectancy is 54.6 years. Nearly fifty-one percent of people in Malawi are poor while 25% are ultra poor (NSO, 2012<sup>1</sup>). Poverty considerably varies across regions with Southern region having largest poverty rate (63%), seconded by Northern region (60%) while Central region has the lowest (49%). 17% of population in urban areas is living in poverty compared to 57% of the rural poor population. Main causes of poverty in Malawi are environmental degradation from effects of climate change, limited access to land, high adult illiteracy rates, poor health status, limited off-farm employment opportunities, rapid population growth and limited access to credit. Access to basic resources such as education, health and food is limited, particularly among the poor and marginalized because such services are either too distant, unavailable or of low quality. While policy environment for providing basic services is generally conducive, poor implementation and low investments and capacity and systems constraints remain major barriers to quality service delivery.

Urban and rural poverty have different dimensions. Although people in rural areas have some access to productive resources such as land, inadequate capital limits extent to which these resources can be turned into goods and services. Urban poverty has recently increased as evident from deteriorating living conditions in urban slums, due in part, to rural-urban migration. In Malawi, poverty difference between urban and rural population in terms of access to information and communication has recently been narrowing due to improved access to cheaper mobile handsets, road infrastructure and solar energy. Nevertheless, rural areas generally remain constrained in terms access to social services such as health and education.

Alternative economic opportunities are explored through extractive industries. A recent national geological survey revealed that Malawi has significant potentials for different mining ventures. Legal and economic frameworks are however not in place to secure that potential output and revenue will boost the national economy or support the development of affected local communities.

High level of poverty has a major negative impact on the health situation and wellbeing of children and women who face a number of additional vulnerabilities. The high level of maternal and child mortality, as well as illiteracy, contributes to this situation. In Malawi there is still resistance from various corners, including faith based institutions, to promote zero tolerance to all forms of gender based violence and to accept women's sexual reproductive health rights. Traditions, customs, norms, values, beliefs, attitudes and practices upholding gender inequalities and GBV still play a significant role in the Malawian communities and influence interpersonal relationships between and among the members. Gender inequalities are prevalent also in public sector. Figures of 2008 show that the disparity of women participation in the public sector is still evident, e.g. of 22 judges, only 2 or 9.1% were women, of 17 District Commissioners, only 3 or 17.6% were women, illustrating that in all critical decision making positions, women are grossly under-represented.

Human trafficking, affecting boys and girls, is increasing, but still largely underreported. Media reports shows an increase in human trafficking cases in most of the Southern and Eastern districts of Malawi, while GBV (domestic Violence) has been reported more from

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<sup>1</sup> Third Integrated Households Survey (IHS3)

the central districts of Malawi According to the 2015 US report on trafficking, Malawi government identified 242 trafficking victims, which was an increase from the 119 reported in 2014. Malawi is a source country for traffickers to recruitment of women, girls and boys who become subjected to forced labour and sex slavery. Malawi is also a transit country to other countries in Southern Africa. Most trafficking victims are exploited within the country and transported from the southern part of the country to the central and northern regions. According to the 2015 Trafficking report, the Government is not fully complying with the minimum standards to reduce human trafficking, despite the adoption of the Trafficking in Person Act (TIP).

Corruption in Malawi deprives the country of resources for social development. Besides recent plunder of public resources named "Cash Gate", corruption is to some extent institutionalized, particularly in the police, immigration and road traffic directorate, where bribes are demanded for services that are supposed to be free.

Malawi is one of the countries in the sub-Saharan region with poorest health indicators, especially on maternal health, child health and HIV. Currently the maternal mortality ratio (MMR) stands at 574 per 100,000 live births while neonatal mortality rate (NMR) is estimated at 33 deaths per 1,000 live births (MoH, 2015). Major causes of maternal mortality are illegal or incomplete abortion, sepsis and hemorrhage. Other causes include poor decision making at household level, adolescent pregnancies due to early and forced marriage and lack of knowledge on danger signs of pregnancy<sup>2</sup>. Shortage of health workers has also contributed to high mortality rates, as recruitment and retention of skilled health workers have been a challenge especially in rural areas. According to Human Resources for Health, staffing levels especially for nurses per 100,000 populations is at 25.5<sup>3</sup>. Rapid population growth continues to put pressure on public services as resource investments fail to match-up. Unless economic growth picks up to levels sufficient for significant national poverty reduction, the condition is likely to worsen, particularly given that the projection that the national population is expected to double to 30 million by 2030 (NSO, 2010).

In Malawi, people are either included or excluded from social and economic development based on political patronage, gender, disability, age, educational qualification, ethnicity or nationality, faith and health status. Significantly, women, adolescents and youth, people living with HIV and people with disabilities are among the excluded population.

### **b) State Institutional Capacity**

Malawi has implemented various poverty-reduction policies and strategies such as Malawi Poverty Reduction Strategy Paper (MPRSP I and II) and Malawi Growth and Development Strategy (MGDS I and II). Implementation of the policies has had limited impact on poverty reduction (GoM, 2011), partly due to the capacity of Malawi Government. The capacity of the Government to deliver public goods and services is heavily contingent on external donor support, and the recent suspension of donor support following plunder of public resources in "Cash Gate" has significantly reduced the capacity further. In addition, the capacity is constrained by ineffective governance structures, corruption, and mismanagement of public resources, inadequate political will and resources, and poor enforcement of policies. Private and civil society sectors currently contribute to fill the gap by providing public goods and services. For instance, Christian Health Association of Malawi (CHAM)

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<sup>2</sup> Malawi Health Sector Strategic Plan 2011-2016

<sup>3</sup> MSH/MSC- Emergency Human Resource Plan



provides 39% of health care services in the country, private-for-profit health sector provides 1%, while government through Ministry of Health provides 60% (MoH, 2015). In some cases, services from non-government sources are available for a fee and service delivery does not meet minimum standards.

Public governance in Malawi involves three arms of government (Executive, Legislature and Judiciary) and embraces organised civil society and citizen actions. Public governance modalities are articulated in relevant legal instruments and parliamentary Acts. Public governance is constrained by political interference, inadequate political will and inadequate resource allocation. At decentralised levels, limited capacity, dysfunctional structures and systems, weak civil society and illiterate and uninformed citizenry are key weaknesses. In addition, the Executive branch tends to politically influence some structures, such as the Anti-Corruption Bureau, to unfairly pursue those considered political foes and not pursuing lawbreakers on grounds of sustaining patronage networks. Illiterate and uninformed citizens are hardly able to challenge governance structures, even in face of obvious impunity.

The Government of Malawi, with support from development partners, has been responding to natural disasters such as floods, drought and earthquake in disaster prone areas in Lower Shire, low lying areas along Lake Shore and Karonga and Phalombe plains. Malawi has a Disaster Preparedness and Relief Act (1991), which provides legal and institutional framework for disaster management and a National Disaster Risk Management Policy. However, government's capacity to respond to natural disasters is constrained by limited planning, poor coordination and inadequate resources. Resistance from chiefs and communities to relocate away from disaster prone areas has also compromised the country's response to natural disasters. Occasionally, development partner support approach in this area has been questioned by government to be too ad-hoc and not investing in long term preparedness.

### **c) Power Analysis**

Most powerful political actors in Malawi are the president, executive, judiciary and legislature, ruling parties, presidential advisors, development partners, media, traditional leaders, civil society and rights holders. These derive their formal power from the Constitution and specific policy and legal instruments. However, in reality, the country is informally captured by patronage networks where distribution of resources and corruption of office take precedence over formal functions of the state, severely limiting ability of public officials to develop policies in public good (Booth, et.al, 2006<sup>4</sup>) and lending a blind eye to corruption perpetrated by clients in political patronage networks. In addition, Malawians are generally known to be passive and rarely exercise their rights to hold those in power accountable. In general, this is exacerbated by weak political opposition and high adult illiteracy levels. Despite comprising a diversity of actors, the influence of civil society in Malawi has been compromised by poor coordination and actions taken based on partisan interests.

Unequal gender power relations have resulted in higher level of poverty being among the women (67%) than men (33%). While Malawi has acceded to the Convention for the Elimination of All forms of Discrimination Against Women (CEDAW), rural women in Malawi are marginalised in decision making processes in private life, and in the political and economic spheres. Harmful cultural traditions and practices, and child marriages are upholding GBV and are among the major factors that lead to women's social and economic exclusion.

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<sup>4</sup> Booth D, Cammack D, Harrigan J, Mataure M and Ngwira N (2006) Drivers of Change and Development in Malawi

Other factors include prohibitive laws, policies and practices that are biased against women, and the HIV/AIDS curse that further burdens women and debilitates them from participating in decision making arenas. Finally, the majority of women are constrained from exercising their rights to economic activity at the same level as men do.

Distinctively, faith based actors and faith community have contributed positively to shape the political and social system in Malawi. It was the faith community that wrote a Pastoral Letter<sup>5</sup> challenging one-party rule and culture of silence under Kamuzu Banda. Since then, faith-based actors continue to play key roles. Faith based actors are regarded as the voice of the voiceless and monitor duty bearers on good political and economic governance. Faith Based actors promote national building and peaceful coexistence regardless of tribe and faith. Nonetheless, some faith-based actors have recently been seen to pursue partisan interests through the civil society podium. In addition, incidences of financial mismanagement have left them wrongly footed to check government excesses.

The private sector pays taxes, creates employment and produces commercial goods and services for local and export markets, hence contributing to foreign exchange earnings. The business environment in Malawi is generally seen as unfriendly, partly due to bureaucratic business registration processes and high tax regimes. Overall, the relationship between government and private sector, including multinationals, in Malawi is cordial except occasional concerns over high tax rates and suspected unfair marketing prices in the tobacco sector.

Traditional leaders in Malawi are an embodiment of tradition, are custodians for the people and have great influence over their communities. Traditional leaders play important roles in community social and economic development. However, recent trends show political influence on the operation and behavior of traditional leaders. Often, traditional leaders discharge their duties, on the pretext of serving government of the day. Cases of traditional leaders being dethroned for seemingly not serving the government of the day are prevalent in Malawi.

Recent political events that provide windows of opportunity include vibrant political opposition and election of counsellors, which is expected to strengthen local governance and community development. In addition, public sector reforms by government are an opportunity to improve efficiency of civil service in delivery of public services. Civil society actors are increasingly influential through their advocacy efforts on local, district and national levels. The use of media in the advocacy efforts has strengthened their impact.

#### **d) Role of Civil Society Organizations**

Civil society organizations in Malawi hold state institutions accountable and transparent, are generally pro-poor, and mobilize vulnerable and disadvantaged people against social injustices. They provide space where ideas can be discussed, they provide knowledge and skills on specific issues and rights, engage in service delivery, resource mobilisation and community empowerment, they promote networking for markets and advocate for policy change.

Largely, most people in Malawi have more trust in civil society and faith-based actors than state institutions. In a country where development is politicized, civil society is generally trusted for being non-political and responding to community development needs faster than state institutions. Cases of MPs from government and opposition requesting NCA and

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<sup>5</sup> Titled "Living our Faith"

partners for specific development support in their constituencies are well documented (NCA, 2015<sup>6</sup>). However, trust of some segments of civil society has recently been compromised by some civil society leaders who have used the civil society podium to launch their political careers, including taking up political and public service appointments seen as appeasement from the ruling elites to silence them. Besides trust issues, poor coordination, self-interest, lack of clearly defined constituency and programmatic area, limited capacity, founder syndrome, inadequate resource for core functions and activities and tendency to pursue external agendas remain key weaknesses of the civil society in Malawi.

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<sup>6</sup> NCA 4 Year Documentation (2010-2014)

## 2. Lessons learned

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Since the establishment of NCA Malawi in 2002, the programme has grown in scale of programming and partnerships, funding and staffing. From this growth, the organization has become an increasingly learning organization. Broadly, the lessons range from programme delivery approaches, collaboration and networking, partnership and partner capacity strengthening and programmatic sustainability.

NCA core partners in Malawi present unique opportunities and challenges. In our learning, we are finding an equitable balance between working with church mother bodies through their national structures and their organizational entities directly responsible for programming. Both are vitally important for our work and should be given the opportunity to play their rightful roles. As well, working with traditional core partners remains NCA's priority. However, due to capacity challenges of core faith based partners, NCA has learnt that moving out of the traditional setup of supporting FBOs only becomes necessary for achievement of our goals and objectives.

Until 2013, NCA never seriously considered baseline assessments as part of minimum standards to our programming work. However, after learning from the difficulties of trying to conduct comprehensive programme impact assessments without solid baseline benchmarks, baseline assessments have become standard in our programming. In our quest for sustainability, we have learnt that longer-term development approaches are necessary for contributing to sustainable programmatic changes for rights holders. Working with recognized community structures, recognizing the power of traditional, religious and political leaders, and respecting their values are important approaches. Cultures and traditional values can be hard to change, but without ownership to the changes by the key actors, change will not happen.

NCA has undergone two major external evaluations of our Improved Health Training program; one Mid-term review<sup>7</sup> in 2008 and one End-review<sup>8</sup> in 2013. Lessons learned from these are that the NCA programme transformed the CHAM nursing colleges into viable training institutions with adequate infrastructure and enhanced quality training for the students and better working and learning environment for students and tutors. However, the end-review shows that NCA with its active role in the project could have benefitted from establishing tighter links with key actors in the health sector.

NCA has gradually been strengthening its engagement with government, participating in national processes, and influencing national policies, systems and standards. The 2012 MOU with the Ministry of Health on behalf of the government has opened new avenues with major players in health and other sectors.

NCA has had both positive and negative lessons learnt on its gender based violence programme. By promoting gender equality, an increase in awareness amongst women and girls about their rights in communities and in their families can be observed, however it has not always been translated into changes. Raising awareness with boys and men and engaging them to take a stand against GBV is also needed. The sensitization is leading to change, although slowly. The faith leaders have recently started promoting actions against gender based violence. Examples are the preaching against human trafficking by the Catholics in Malawi, the "End It Now Campaign" by the women ministries of the Adventist church. Lessons learned from the trafficking program has been that we need to strengthen

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<sup>7</sup> Mid-Term Review 2008, Norad Collected Reviews 29/2008

<sup>8</sup> End Review 2013, Nordic Consulting Group

the collaboration between various stakeholders, such as CSOs, police, judiciary, etc., in order to protect victims and identify and prosecute perpetrators.

Cognizant of the changing nature of partnerships and capacity needs of partners, NCA considers partnership capacity assessments as on-going. Regular assessment of partnership relations and partner monitoring and evaluation (M&E) capacity to deliver on planned outcomes are needed. While significant progress has been made working with partners, the lesson learnt is that close follow up and cautious patience are required as they overcome internal and external constraints and experience that change processes pay dividends.

Best practice workshops and exchange visits among NCA partners have shown to be critical learning and programme improvement avenues. Formal project cooperation through community structures greatly enhances programme transparency and ownership. Effective influence of change requires that choices have to be made. Impact requires depth and concentration. This calls for careful consideration of number and quality of partnerships as well as geographical focus. The reduction of number of partners and geographical focus in this strategic plan reflects this key lesson.

Some projects and innovations have largely been based upon recommendations of evaluations. For instance, the anti-human trafficking project, phase II, and the health training programme, phase III, were to a great extent informed by the evaluation recommendations.

NCA Malawi makes effort to keep track of lessons learnt. They are reflected in projects periodic and annual reports, since the format includes section on lessons learnt. NCA Malawi has also published the best practices booklets which collects success stories from NCA partner projects. NCA Malawi conducts systematic periodic project reviews with stakeholders and partners, with a particular focus on what is working well and what is not. Adjustments are made accordingly. NCA Malawi is currently developing and reviewing a database for keeping track of lessons learned.

NCA Malawi has significant potential for improving how lessons learnt are used, but examples include a systematic process of improving work relationship with relevant Government bodies, improving systems of accountability with frequent monitoring visits to partners and systematically reviewing reports.

### 3. Geographic focus

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Drawing our inspiration from the issues identified in the contextual analysis like poor health indicators, gender inequalities, poverty issues and youth unemployment and in reference to the global strategy thematic areas, our programmes will have a dual national and district focus contingent on the scale of changes we plan to influence. Some of our partners are national in nature, and partnering with them will involve working nationwide. This will particularly be relevant in advocacy oriented work through Malawi Council of Churches (MCC), Episcopal Conference of Malawi (ECM), Quadria Moslem association and emergency response through Churches Action in Relief and Development (CARD). In reproductive health, CHAM is a major actor throughout the country. While NCA will concentrate its main work in certain regions and districts, institutional cooperation with CHAM will be dynamic and logically go beyond these geographical areas.

Programmatic changes that NCA will plan to influence at district and community levels will be implemented in 10 districts. In the Southern Region, NCA will focus on five districts: Balaka, Mangochi, Mulanje, Mwanza and Phalombe. Southern Region has the highest poverty rate in the country (63%) as well as the highest population density. This region has historically been a major geographical area for NCA engagement and will continue to be so. NCA partners are present and active, and there is a potential synergy effects of a number of programmes being implemented by one partner is possible when operating in districts in the south.

In the Northern Region, NCA will focus on two districts, Mzimba and Karonga, because poverty rate in the region is almost as high as in Southern Region, although population density is lower. NCA has long-term engagement also in the north, and partner presence makes it possible to develop synergies. Although poverty rate is lowest in Central Region, rural poverty is serious in a number of districts. NCA will therefore focus on three districts: Lilongwe, Mchinji and Ntchisi. As the plan evolves, NCA will explore possible complementarities with ACT Forum sister organizations. NCA has also looked at balancing the allocation of districts in the regions to uphold the Do No Harm principles and to avoid concerns that NCA is only implementing in one region.

#### **Main target groups**

In the identified districts, NCA will primarily target poor and marginalised people and communities. More specifically the reproductive health programme will target young women, mothers and children in order to reduce child mortality, as well as men to reduce cultural barriers to access antenatal care services. Female and male adolescents will be reached in relation to sexual reproductive health, people vulnerable to non-communicable diseases, and nursing and midwife students who will be better qualified to serve rural health services. Women and girls are key target groups for the gender based violence programme, while children and youth vulnerable to trafficking are also important target groups. Gender based violence cannot be overcome without committed participation by men and opinion-formers. The programme will also target law enforcement institution staff, employers in sectors related to child labour, the government and providers of support services to trafficking victims and GBV survivors. Women and youth, both girls and boys, without secondary school background are the main target group for the economic empowerment programme, as well as private sector and the government. Communities affected by extractive industries, investors and government institutions on different levels are targets for the natural resource governance programme.

NCA will influence the changes through integrated area based programming in our chosen four thematic areas. NCA will horizontally and vertically link our programme work, ensuring to draw lessons and practices at community level to influence national level policy and advocacy work. In the attached country strategy, see annex 2 for more information on partners and annex 1 for the geographical areas in the strategy to be targeted.

#### 4. Theory of Change for NCA Malawi

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The NCA Malawi vision "**Together for a Just and Healthy Society with Sustainable Livelihoods**" has been chosen as a reflection of NCA experiences and achievements in Malawi and as an expression of future ambitions.

The **overall goal** of the NCA Malawi country programme is "A society in which women, men and children control their healthy reproductive lives; institutions and individuals respect and nonviolently promote dignity and equal rights irrespective of gender; vulnerable communities and people can live safely without threats of abuse through exploitation of human and natural resources; and women and youth are secured sustainable livelihoods through entrepreneurial opportunities and employment". To contribute towards the vision and to achieve the overall goal NCA's programme in Malawi have developed a theory of change at **country programme level**, as well as 4 pathways of change (i) Reproductive Health, (ii) Gender Based Violence (GBV) (iii) Economic Empowerment and (iv) Resources Governance described below.

##### **Theory of Change for 2016-2020 Malawi Country Strategy**

**If** youth, women and men are empowered and actively participate in decision making and to claim their rights and they take responsibility towards fulfilment of their rights, and **if** capacities are strengthened to strive towards jointly owned goals of securing and sustaining quality reproductive health, reducing gender based violence, increasing entrepreneurial opportunities and sustainable employment for youth and women and holding governance accountable for equitable distribution of wealth from and sustainable development of extractive industries, and **if** local capacities for emergency preparedness and response are strengthened, **then** NCA and partners have contributed to the vision of a "Just and Healthy Society with Sustainable Livelihoods". This is **because** civil society actors have created a strong unity of purpose and voice for dynamic social and economic development of Malawi, and **because** governance authorities and structures have become responsible duty bearers seeking to be responsive to citizen's rights and fulfill national and international obligations through implementation of and adherence to adopted policies and legal frameworks.

##### **Pathway 1: Reproductive Health**

Overall goal for the programme is "A society where quality reproductive health is secured and sustained".

**If** there is an increase of equitable access to maternal and child related health services and skilled human resources, and **if** women, men and youth have increased knowledge on sexual reproductive health as well as on prevention of communicable and non-communicable diseases with specific emphasis on HIV and reproductive cancers, and **if** women, men and youth have addressed root causes of adolescent pregnancies, and **if** government policies within reproductive health securing access to and the quality of health services are enabled, **then** there will be significant increase in births attended by skilled assistance resulting in reduction in maternal and child mortality, increase in communities awareness of and taking responsibility for own health as well as reduction of adolescent birth rates. This is **because** there will be long term changes in women's, men's and youth's trust and therefore utilization of conventional reproductive health services, as well as increased knowledge of sexual reproductive health related issues embedded at community level securing more informed decisions by women, men and youth as to HIV and reproductive cancers. Furthermore, **because** a change in cultural norms and traditions to protect young girls from being misused and violated and support girls to decide themselves if, when and



who to marry, as well as a more proactive and responsive government seeking to implement and resource national policies. NCA **assumes** that church and resource partners will engage positively in all aspects of the program and that the program will align to and be guided by government policies and legal frameworks.

### **Pathway 2: Gender Based Violence**

The overall goal of the programme is to see that "women and girls can live free from GBV and to contribute to a reduction of GBV in in project areas".

**If** girls, boys and women are capacitated on their right to live a life free from violence, and **if** traditional and community leaders and faith actors contribute to change dominant social norms upholding GBV and promote protection of girls and women from trafficking and other forms of GBV, and **if** civil society and faith actors, and law enforcement institutions are capacitated on policies and legal frameworks against human trafficking and GBV as well as advocate for the implementation of these, and **if** state and non-state actors collaborate to strengthen safe access to legal systems and support services for GBV survivors and trafficking victims, **then** there will be reduction in GBV, increased legal and social support for GBV survivors and trafficking victims, improved reintegration of GBV survivors and trafficking victims into communities, as well as decreased impunity for perpetrators in targeted program areas. This is **because** girls, boys and women will have knowledge to claim their rights and responsibilities as well as protect themselves against trafficking and other forms of GBV and **because** change has occurred in social norms so that communities and community leaders and faith actors are promoting human dignity irrespective of gender and protecting girls, boys and women from all forms of GBV, and there will be increased popular resistance against all forms of GBV and human trafficking. Furthermore, **because** a strengthened civil society joint platform has pressured government commitment to implementation of policies and legal frameworks protecting against and prosecuting perpetrators of GBV. NCA **assumes** that traditional and community leaders, faith based actors and government stakeholders are willing to change and comply with their commitments.

### **Pathway 3; Economic Justice**

NCA's Economic Empowerment programme in Malawi will contribute to the overall goal to "secure entrepreneurial opportunities and sustainable employment for Malawian youth and women".

**If** youth and women have increased access to vocational education institutions, internships and apprenticeships, and **if** capacity and knowledge of rights holders to establish micro or small enterprises is strengthened, and **if** national policies on entrepreneurship and investment become more conducive towards needs of women and youth, and **if** rights holders are enabled to gain access to local or domestic markets, **then** unemployment of women and youth will be reduced as they will have more sustainable job opportunities and created more viable incomes and business ventures . This is **because** women and youth will have accessed more knowledge opportunities, be more linked into networks in the labour market, be more eligible for loans and investments from credit facilities and experience less bottlenecks from government policies and legal frameworks towards establishing businesses and self-employment. NCA **assumes** that women and youth rights holders will have an interest in accessing knowledge based formal and informal trainings and that employers as well as government stakeholders have interest in facilitating initiatives directed towards development of a more qualified labour force and that government will be responsive towards improving frameworks for access for youth and women into the market.

#### **Pathway 4: Resource Governance**

NCA's Resource Governance programme will contribute to the overall goal of "Accountable Governance of Public Resources for Equitable Distribution of Wealth and Sustainable Development" in Malawi.

**If:** civil society actors, including faith-based actors, are empowered to advocate for improved policies and legal frameworks governing the extractive industries, and **if** women and men of mining communities are empowered to hold duty bearers accountable to communities' rights, and **if** duty bearers are pressured by civil society, including faith-based actors, to demonstrate transparency of public resources derived from extractive industries, **then** there will be more equitable distribution of income from and sustainable development within the extractive industries benefitting the nation at large. This is **because** women and men in local communities will have increased knowledge of their rights and when linked with civil society organizations, especially faith-based actors, they together will be a credible, legitimate and strong voice, and **because** the evidence based advocacy work will influence public debate and increase public pressure on the government to improve legislation and meet the demands of mining affected communities. NCA **assumes** that civil society actors, especially faith-based actors will be able and willing to create linkages and joint advocacy platforms with women and men mining communities and that the government will be responsive to sufficient public demand for responsible governance.

## 5. Strengthening civil society

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### a) Working Strategically with Civil Society

As indicated in the context analysis, civil society in Malawi is diverse, ranging from media to sports, labour movements, faith communities and a range of more or less sectarian interests. Experience from Malawi and other countries show that strengthening constructive civil society actors contributes to social and economic development in dynamic relationship with government. Actors with broad support and legitimacy can, with great credibility influence developments on different levels. NCA intends to support civil society organisations that have significant constituencies and make efforts to engage with their environments, including the networks, key stakeholders, sister organisations that are involved in the three chosen programme areas. NCA will also encourage civil society organizations to constructively apply a strategy with combination of challenging (advocacy/lobbying) and cooperating with the authorities. Therefore NCA will team up with core partners that represent combination of rootedness (with significant constituencies and with clear and change oriented mandates) and ability to deliver with accountability. As well, partners that reflect programmatic diversity in service delivery and advocacy and capacity to influence rights holders and duty bearers will be necessary for direct programme implementation, providing quality technical expertise and resource mobilisation. Keeping in view challenges of directly implementing community programmes through mother body secretariats, NCA will effectively engage with them through tripartite arrangements similar to the NCA-CHAM Secretariat-CHAM institutions model from which we have learned valuable lessons. While the ecumenical umbrella bodies remain NCA's core partners, implementation will typically be made through their member bodies: the churches, health and social institutions belonging to churches, etc.

Collaboration and networking will be vital to NCA's programming. Most of our core partners are members of Malawi ACT Forum. We intend to strengthen cooperation through the forum as well as among selected members of the forum as deemed appropriate according to geography, mandates and capacity and competence. Realizing that our core partners are not necessarily specialized in their skills sets, NCA will cooperate with, and linking core partners with, specialized resource organisations and networks that have focused mandates and competencies in the needed skill-sets. Resource partners will be identified according to specific needs and skills relevant to pursuing NCA country and programme goals. Since NCA is emphasizing the importance of working within the overall development plans for Malawi, resource partners will of necessity be a mix of governmental, semi-governmental and civil society organisations. Examples include Ministry of Health, universities, Nurses and Midwives Council of Malawi, National Organisation of Nurses and Midwives in Malawi, and UN bodies (UNICEF, UNFPA, WHO) within the Reproductive Health programme. Furthermore, in the Gender Based Violence programme NCA will cooperate with the Ministries of Home Affairs and Internal Security, Labour Justice, Gender, Children, Disability and Social Welfare, Energy and Mining, Catholic Commission on Justice and Peace, Women Judges Association of Malawi and Malawi Law Society and UN Women. NCA will also seek to partner with women rights and child rights organisations (MHRC, WOLREC, etc) directly for programme implementation. In the past, NCA has worked with the women's and child right organisations both through networking and as resource partners. In the Economic Empowerment programme NCA will work with Ministry of Trade and Industry, The Technical, Entrepreneurial and Vocational Education and Training Authority (TEVETA), Malawi Federation of Commerce, Malawi Federation of Trade Unions, Technical Colleges as well as individual private companies. Finally, in the Resource Governance programme NCA will cooperate

with Ministry of Energy and Mining, Catholic Commission for Justice and Peace and also target, and go into dialogue with specifically extractive industries.

Communications are important part of programming and therefore, working with media is important. However, as part of developing innovative approaches for communication, we will explore and work beyond traditional media, e.g. social media, direct messaging and SMS-messaging, particularly in areas that link rights holders to better services in reproductive health and GBV programming.

#### **b) Contributing to Strengthening Civil Society through Programme Work**

NCA partnership policy takes as point of departure that partnership is important part of strengthening civil society. Partnerships can be maintained even if no defined programme/project resources are channelled from NCA to partner. Partnership is a value in and of itself, reflecting mutuality and exchange of experience and learning. This understanding is fundamental for NCA's relationship with its partners. Compared to the previous strategic period core partners are more clearly defined and within a manageable number. The potential core partners have been NCA partners in the past, but NCA will in this strategic period deepen the partnership with some partners, not least supporting and strengthening core partners.

Through reproductive health, NCA will support systems strengthening CHAM (and institutions like Nursing Colleges, Health centres and Teaching Hospitals) for effective health service delivery as well as strengthening community-based organisations to mobilise primary rights holders to access conventional health services. NCA will strengthen the civil society so that right holders are empowered to demand quality health facilities and services. Since partners will work towards improved implementation of laws e.g. Marriage, Family Relations and Divorce and Trafficking in Persons Law, Child Care Protection and justice ACT, policies, plans and budgets to end Gender Based Violence they need necessary skills and capacity. NCA will work closely with the partners for them to build relevant competence and capacity. Economic Empowerment is relatively a new programming area and while some partners may have previously implemented similar programmes, a needs-based strengthening of our partners will be required in this area. It will be important that right holders have gained access to local or domestic markets, and civil society organisations can be pivotal in these efforts.

#### **c) Capacitating Partners as Accountable and Sustainable Civil Society Actors**

NCA current partner portfolio includes local and international specialised and experienced as well as emerging, promising and predominantly local actors. Local partners need strengthening in financial management and results management, and to improve their accountability and sustainability, to become more attractive alternative sources of development support. Further needs based capacity development support of partners will be considered on a continuous basis.

## 6. Programmes

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### 6.1. Global Programme: Reproductive Health

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#### **a) Problem and Need Analysis**

Malawi is one of the countries in the sub-Saharan region with the poorest health indicators, especially on maternal health, child health and HIV. Currently the maternal mortality ratio stands at 574 per 100,000 live births, while neonatal mortality rate is estimated at 33 deaths per 1,000 live births (Ministry of Health (MoH), 2015). Teenage pregnancies are highly prevalent and contribute to maternal and newborn deaths. In Malawi one of three adolescent girls (15-19 years) has begun childbearing, while one in four already has had a child. Malawi ranks high when it comes to early and forced marriage. Early and forced marriage commonly denies girls their childhood and condemns them to a life of ill health and poverty. Complications from pregnancy and child birth are the leading cause of death among girls aged 15 to 19 in the developing world. Other causes of Maternal and neonatal deaths include critical shortages of human resources, such as nurses and midwives, who can adequately respond to Malawi's disease burden. Moreover, there is low motivation for health workers and training institutions are not producing adequate numbers of graduates to meet Malawi's needs. The Health Sector Strategic Plan 2011-2016 has noted challenges of Information Communication and Technology (ICT) in most health facilities, as well as inadequate funding for construction and maintenance of infrastructure and equipment.

Currently 74% of health facilities satisfy the requirements for delivering the full Essential Health Package (EHP), based on the availability of services, equipment and staffing levels. The EHP has been expanded after taking into account the increasing burden of disease arising from non-communicable diseases, such as mental health, hypertension, diabetes, cancers and other lifestyle diseases.

HIV/AIDS has been a challenge in Malawi as the prevalence is still at 10.6% among the age group (15-49) and contributes to the high rate of maternal and neonatal deaths. The implementation of the new antiretroviral therapy (ART) regime known as Option B+ has resulted in increased numbers of pregnant women screened for HIV and less babies born HIV positive. However some challenges still exist which include untimely delivery of Early Infant Diagnosis results, loss to follow up, and low ART compliance among mother-infant pairs enrolled in the Elimination of Mother to Child Transmission programmes (Government of Malawi (GoM), 2014). HIV/AIDS has led to an increase in the number of orphans, who face a number of challenges including traumatic experiences.

Malawi has made national standards on Youth Friendly Health Services (YFHS) but studies show that negative attitudes of service providers is the single most important barrier to young people in accessing reproductive health services. So far the reports say that only 13% of youth have used the YFHS. It is a concern that vulnerable groups like people with disability, HIV positive and rural youth are not assessing these services.

Traditions, customs, norms, values, beliefs, attitudes and practices upholding gender inequalities are prevalent, and affect the health of young women especially negatively. There is still reluctance from traditional and religious leaders to discourage harmful traditional practices in Malawi.

#### **b) Theory of Change and Partners' Role**

Overall goal for the programme is "A society where quality reproductive health is secured and sustained". This will be reached through the following pathways:

**Pathway to outcome 1: Maternal and Child Mortality is reduced:** **If** integrated health services are provided for the mother and child where maternal and neonatal infrastructure is readily available, and **if** vulnerable children in the targeted areas are provided with psychosocial care and support and **if** men are sensitized on issues related to mother and child health, **then** more women will access ANC services and the country can make significant steps in reducing maternal and child mortality. This is because poor quality of care affects the health of the mother and child, and **because** men will approve of women accessing ANC services and make responsible decisions about reproductive health issues when they have knowledge related to it. NCA **assumes** that improved maternal health infrastructure and the involvement of men in reproductive health decisions have a great role to play in more women accessing ANC services.

**Pathway to outcome 2: Adolescent pregnancies reduced:** **If** adolescents aged between 10-19 years, have increased knowledge about issues related to sexual reproductive health rights, and **if** communities, traditional and religious leaders have been empowered to increasingly support girls to decide themselves if, when and who to marry, and not involving themselves in sexual relationships at an early age, **then** adolescent pregnancies will be reduced and Malawi will also see a reduction in girls infected with HIV and AIDS. This is so **because** most adolescent pregnancies are related to early marriages or due to consensual or non-consensual sexual relationships with men in their 30s or older, placing the adolescents at greater risk of HIV infection. NCA **assumes** that providing comprehensive sexuality education to girls and engaging duty bearers (religious and community leaders, parents and guardians) and policy makers at community level would empower girls to make informed decisions about their sexual reproductive health rights.

**Pathway to outcome 3; Communities take responsibility to prevent communicable and non-communicable diseases (HIV and Reproductive Cancers):** **If** communities are knowledgeable of reproductive cancers, and **if** there is improved adherence to treatment for people living with HIV, **then** the prevalence of HIV and AIDS and incidences of reproductive cancers would decrease, because the communities themselves would practice healthy life styles to lower the risk of reproductive cancers and the spread of HIV, and **because** less people would develop resistance to ART as a result of lack of adherence. NCA **assumes** that awareness to communities, organized screening and early treatment programmes for reproductive cancer would make a significant difference in reducing the knowledge gap that exists in the communities. NCA also assumes that prompt follow up of people on ART will significantly reduce the loss to follow up which results into drug resistance.

**Pathway to outcome 4: Quality Health facilities and Services are available and used by the communities:** **If** new nursing colleges are constructed, **then** more health personnel who are professionals and skilled will provide quality health care services in the health facilities, **because** the country will be able to produce an adequate number of nurses and midwives in nursing training institutions and as such increase the number of trained nurses and midwives in CHAM health facilities. NCA **assumes** that that lack of quality health professional staff and infrastructure is affecting the delivery of quality health services in Malawi.

### **c) Programme description**

The RH programme will provide integrated health services for the mother and child, construction and support to institutions like nursing colleges, health centres and teaching hospitals for effective health service delivery, in-service training of health workers, health care services for infants, community dialogue sessions with community and religious leaders to encourage men to participate in ante natal care, support to relevant ministries and participate in technical working groups, conduct comprehensive sexual and reproductive health (SRH) education among adolescents, provision of HIV testing and counselling to adolescents, lobby for implementation of the marriage, family relations and divorce bill, advocate for inclusion of other non-communicable diseases in the essential health package campaigns on communicable and non-communicable diseases, conduct campaigns against harmful cultural practices and beliefs that promote teenage pregnancies and early marriages, campaigns on communicable and non-communicable diseases, HIV testing and counselling and campaigns on access to quality health services.

#### *6.2. Global Programme: Gender Based Violence*

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##### **a) Problem and Needs Analysis**

In Malawi, many forms of GBV are prevalent, including human trafficking. The vast majority affected by various forms of GBV are women and girls due to gender discrimination and social norms upholding GBV.

Malawi is both a source and transit country for forced labour and sex trafficking in Southern Africa. Within the country, children are subjected to sex slavery and forced labour in domestic servitude, goat and cattle herding, agriculture (tobacco, tea, coffee, and sugar plantations), begging, small businesses, and are coerced to commit crimes, including home robberies. Malawi has just passed the Trafficking in Persons Law. However, the law has not been implemented and the government has so far not allocated any resources for the implementation of the law. Limited compliance by employers to anti-GBV laws, including the Trafficking in Persons Law is a barrier to implementation. Lack of coordination between various stakeholders, such as police, law enforcement, service providers and Ministries is another obstacle to protect against GBV.

GBV is culturally entrenched and thrives on harmful practices that undervalue the position of girls and women. It is also fuelled by poverty, illiteracy, lack of economic empowerment opportunities and misinterpretation of scriptures (Holy Bible or Quran). Malawi has reportedly experienced increasing cases of GBV of girls, boys, women and people with albinism for reasons of extracting body parts and organs for some culture and ritual practices. While there has been some progress addressing GBV in Malawi, further progress is limited by a culture of silence (taboo) to talk about and report GBV. Unequal power relations between men and women in the family contribute to social norms upholding GBV. Reporting is not done due to customary practices and tradition, fear of marriage break up, fear of losing financial support and jobs, fear of being ridiculed and bringing shame to the family and the need to maintain respect in the community. In addition perpetrators face impunity. GBV is fuelled by a lack of prosecution for offenders, partly caused by resource constraints, inadequate or dysfunctional structures (law enforcers and community structures) and systems to effectively respond to gender based violence. Also important is the lack of awareness

and knowledge among rights holders of their rights, and also lack of knowledge within the law enforcement sector on how to handle trafficking and GBV cases. There is also limited provision of adequate and appropriate support services to trafficking victims and GBV survivors, both due to lack of knowledge of the service provider on how to support the victims and survivors, and lack of adequately equipped service centres.

The traditional gate keepers and leaders at all levels of the community (traditional authorities, chiefs, village headmen, initiators) all play an important role in changing the social norms existing in communities in Malawi. As custodians of culture, these actors are strategically placed to initiate a cultural shift especially in changing customs that perpetuate various forms of GBV and to be key actors to ending all forms of GBV. The church has a long history of working with the communities to address barriers to development including GBV. Communities trust their church leaders and pastors, and they seek counselling and help from church leaders. Church leadership in Malawi is known to have been key for changing the political arena and bringing a voice for the voiceless. Yet in spite of this belief and trust, the culture of patriarchy and masculinity is also embedded in the church leaders and the Christian community.

### **b) Theory of Change**

The overall aim of the programme is to see that women and girls can live free from GBV and to contribute to a reduction of GBV in in project areas. To achieve this goal, the programme will follow three key pathways of change:

#### **Pathway to Outcome 1: Dominant social norms protect girls and women from GBV**

**If** faith actors and community leaders, girls and boys, parents and guardians, male and female church leaders, teachers and health staff are capacitated on trafficking and other forms of GBV, including protection strategies, and **if** faith actors and community leaders are mobilized and demonstrate social action against trafficking and other forms of GBV **then** we will see a reduction in violence against women and children including reduced number of trafficking cases. This is **because** the faith and community leaders have used their potentials to change the perceptions and behavior to reduce GBV, and there will be a change in dominant social norms from upholding GBV to protects women, girls and boys from GBV. In addition girls, boys and women will be better equipped to protect themselves against trafficking and other forms of GBV.

#### **Pathway to Outcome 2: Laws, policies and budgets to end GBV are improved and implemented**

**If** the international and national laws and protocols on trafficking and other forms of GBV are disseminated and **if** reliable information of violations of these at community level are obtained through shadow reporting, and **if** NCA and partners advocate for increased budget allocation to and an action plan for implementation of the Trafficking in Persons (TIP) law, and **if** NCA and partners lobby towards relevant private sector actors for compliance to existing laws protecting girls, boys and girls against violence **then** Malawi will see improved implementation of anti GBV legal frameworks including TIP law, leading to increased prosecution and consequently reduced cases of gender based violence and human trafficking in Malawi **because** increased advocacy will create pressure towards the government and relevant private sector commitment to implementation of TIP law and other anti-trafficking laws, and there will also exist a budget for carrying out the implementation.



### **Pathway to Outcome 3: GBV survivors have safely accessed adequate and appropriate support services.**

**If** Norwegian church Aid join hands and collaborate with the state and non-state actors to strengthen the legal systems and support services for the survivors, and **if** paralegals, social workers and councilors are capacitated to handle survivors of GBV and trafficking victims, traditional justice systems have been capacitated with knowledge about existing laws on the rights of women and children, such as CRC, CEDAW, anti GBV law and TIP law and **if** the referral systems (one stop centers) for victims and survivors of trafficking are equipped to give judicial and medical support, **then** victims of trafficking and other GBV survivors will have access to adequate and appropriate support services, such as legal, medical, psychosocial, and livelihood support services, and more of the trafficking victims and survivors of GBV have been reintegrated into their communities. This is because more victims of trafficking of GBV survivors will be referred to adequate and appropriate services, where the providers of these services have the knowledge about and know how to handle cases of trafficking and other forms of GBV.

#### **c) Main activities and intervention strategies**

NCA and its partners will act upon GBV through capacity building of girls, boys, community leaders, faith leaders, police, and judiciary and immigration officers., involvement of community and faith actors to change social norms that uphold GBV, through supporting review and implementation of laws and policies against human trafficking and other anti-GBV laws, and through provision of care, safety and support to survivors of GBV

### *6.3. Global Programme: Economic Empowerment*

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#### **a) Problem and Needs Analysis**

Malawi suffers from rising school dropout rates and rising unemployment, due to the limited number of job opportunities and lack of relevant qualifications by job applicants. The fastest growing group of unemployed includes women and those without secondary school education, especially youth. Even though the economy of Malawi is principally agro-based with limited off-farm livelihood alternatives, the agricultural sector and its agri-business is not likely to be able to accommodate everyone in the fast growing youth population. The growing population of youth however has little knowledge on entrepreneurship and is primarily aligned to traditional skill development which includes carpentry, tinsmith and brick-laying. This has resulted in youth having acquired traditional skills that are not coherent with labour market demands and are thus still struggling to find employment or generate sufficient income. Another challenge in Malawi is that women and youth lack substantial capital to independently operate their own small scale businesses. This is due to youth often lacking the knowledge and skills on how to establish and run a business, but also due to a lack of money lending institutions that are specifically established to assist youth with soft loans. However, the few existing money lending institutions have high interest rates and demand collateral, making it impossible for youth to access loans. The country lacks a well stipulated entrepreneurship policy that deliberately support youth in accessing loans at a reasonable interest rate and support youth development to enhance entrepreneurship skills.

The rural market centres, also known as trading centres, have poor infrastructure that makes it difficult to operate businesses. Lack of good infrastructures in the trading centres including electricity, limits most traders to operate bigger investments that require among other things, electrification and space for welding. Lack of market information, including product demands and opportunities as well as pricing, also stands as a challenge for youth to engage into a profitable business in their locality. Youth continue engaging into the same business despite few profits because information on other markets areas and goods is not available.

## **b) Theory of Change for the Economic Empowerment programme**

NCA's Economic Empowerment programme in Malawi will contribute to the overall goal to "secure entrepreneurial Opportunities and Sustainable Employment for Malawian Youth and Women. To achieve this goal, the programme will follow three key pathways of change:

**Pathway 1: Youth and women have gained and maintained employment:** **If** vocational education institutions are strengthened and the curriculums revised in collaboration with potential employers, then graduates will acquire vocational and work life skills that are in demand in the local labour market, and **if** NCA and partners facilitate opportunities for internships and apprenticeships with potential employers, **then** youth and women will be able to gain and maintain employment, **because** they have a better network in the labour market and through the internship or apprenticeship will be given an opportunity to demonstrate their knowledge and skills. NCA **assumes** that both the government and potential employers will take an interest in improving vocational education institutions and curriculum to have more qualified labour.

**Pathway 2: Right holders have established micro or small enterprises:** **If** rights holders gain relevant business knowledge and skills, **if** they are assisted in developing viable business plans and new opportunities for accessing credit to invest in micro and small business are facilitated, then they will be able to establish and run profitable enterprises, **because** having professional knowledge and skills together with viable business plans will make rights holder eligible for loans or investments from external credit facilities. NCA **assumes** that right holders will have the interest to join save and loan groups because of the joint training, experience sharing and the start up credit opportunities they present.

**If** a national policy on entrepreneurship focusing on supporting the youth in improving their access to capital for investing in businesses, **then** this would create a more enabling environment for establishing own businesses, **because** it will remove some of the key bottlenecks for youth and women to formalize their own businesses and secure self-employment.

**If** rights holders have established profitable businesses and bottlenecks for women and youth entrepreneurs are removed, **then** unemployment would decrease and more right holders would be self-sustained and able to pay for family health and education expenses, **because** of their increased income. NCA **assumes** that when rights holders have a better income, especially women, they would prioritise more spending on health and education expenses for the family.

**Pathway to outcome 3: Right holders have gained access to local or domestic markets:** **If** NCA and partners conduct market analysis in targeted areas and distribute

the key findings and information to rights holders, **then** rights holders are able to identify new market opportunities for their goods and services and develop a more profitable business, **because** they will have new and updated information about market opportunities in their areas.

If NCA partners advocate for improvements in physical infrastructure of market spaces for small traders in terms of electricity, transport, security arrangements, sanitary facilities and access to telecommunication, **then** rights holders will have a more enabling environment for trading and promoting their products, **because** they get access to new and upgraded physical market spaces for small traders. NCA **assumes** that local government will be susceptible to partners' advocacy campaigns and take an interest in upgrading or establishing physical market spaces.

### **c) Main activities and interventions strategies**

Main activities for the EE programme will be to conduct research on skills appropriate and marketable for the target group, and identification and strengthening of existing service providers or need for development of new initiatives of vocational training, support in development of a skills and vocational education curriculum and training of tutors in areas that are identified as strategic and can be provided by partners, collaboration and networking with private sector to improve quality of vocational education and to facilitate internships apprenticeship for graduates, facilitate training in business management and entrepreneurship, networking with other civil society organisations (CSOs) to advocate for development of a national policy on entrepreneurship that includes women and youth without secondary school, facilitate linkages with private sector and specialised institutions to help scale up small enterprises, assist small businesses in developing viable business plans that can help scale up their business and access credit, facilitate links to and new opportunities with external credit, conduct market analysis and provide rights holders with updated information on new and existing market opportunities, advocacy for removing key market barriers, in particular for improving physical market spaces for small traders

The primary rights holders of the economic empowerment programme are women, vulnerable and unemployed youth (including school dropouts and young people living with HIV). The primary duty bearers are Ministry of Labour and Man power, Ministry of Industry, Trade and Commerce, Ministry of Gender and Disability.

## 6.4. Contextual Programme: Natural resource Governance

### **a) Problem and Needs Analysis**

In Malawi, the extractive industry is an increasingly economic alternative to the country's dependence on tobacco. Malawi produced minerals worth MK21.9 billion in 2010 and MK23.7 billion in 2011. Despite such revenue, the government collects little revenue from the industry because of a poor taxation framework and a lack of bargaining power towards the investors. Moreover, poor taxation policies, tax invasion and corruption greatly affect revenue collection from the mining sector. Mining affected communities benefit minimally

from the mining operations and are often left with the costs when losing land and livelihoods, because the existing legal framework on mining does not sufficiently reflect communities' rights.

Several Acts regulate the minerals sector in Malawi, including the Mines and Minerals Act 1981, the Petroleum (Exploration and Production) Act 1983, and the Explosives Act 1968. Environmental management issues related to mining are also covered under the National Environmental Act and Policy (1996), which together with the Mines and Minerals Act contains sections that specifically deal with the protection and management of the environment in mining activities. However, the existing Mines and Minerals Act does not clearly stipulate issues of environmental rehabilitation. Environmental exploitation and lack of compensation on land are some of the main challenges that the mining affected communities face. In many cases, the companies contribute to environmental degradation due to failure to rehabilitate land after the extraction of minerals and take advantage of the lack of policies. Poor handling of waste disposal from mining activities does not only degrade the environment, but is a health hazard to the communities.

The president makes decisions on the provision of licenses and contracts to mining investors. The community and district councils are unable to negotiate with mining investors during the process, even when their rights are heavily infringed. The Mines and Mineral Act provides for minimal compensation for land belonging to the communities. There is a lack of transparency around how compensation is calculated, eligibility criteria are often unclear and sometimes compensation does not reach intended recipients. Taking advantage of the outdated mining legislation of 1981, mining companies have not sufficiently compensated communities who have lost their land and livelihoods to mining operations.

The right to free, prior and informed consent is in reality non-existing for communities in Malawi. Mining affected communities currently lack the capacity to negotiate with duty bearers and mining companies to claim and have their rights recognised. Challenges of limited revenue generation and lack of community rights are exacerbated by poor public access to mining information and inadequate capacity to understand mining policies and governance. Because the rights holders in impacted areas also do not know their rights in relation to mining, government and mining investors take advantage of their lack of knowledge by deliberately continuing delaying or denying them the right information and make poor decisions that heavily affect the communities.

Legal framework and policies are debated and written in English, which for many Malawian communities is a foreign language and is understood only by the elite. Therefore, knowledge and information on mining governance has not been effectively accessible to the communities where mining is taking place. Because the communities lack information on mining governance, their voices and rights are easily ignored by both mining investors and government. There is a need to make the legal policies on mining governance available to communities in the language they can best understand. Lack of transparency both at national and local level when it comes to revenue collection is also part of the core problem.

#### **b) Theory of Change and Partners' Role**

NCA's Resource Governance programme will contribute to the overall goal of "Accountable Governance of Public Resources for Equitable Distribution of Wealth and Sustainable Development" in Malawi. To achieve this goal, the programme will follow three key pathways of change:

### **Pathway 1: Rights holders have contributed to improved policies and legal frameworks governing the extractive industries**

**If** civil society are organized in advocacy coalitions and **if** they together advocate for a revision of extractive industry policy and legal framework, based on inputs and documented challenges from mining affected communities, **then** the government will revise and implement improved policies and legal frameworks governing the extractive industry, **because** the evidence based advocacy work will influence public debate and increase public pressure on the government. NCA **assumes** that working through coalitions enable civil society to speak with a joint voice, coordinate and collaborate in their advocacy efforts. NCA also **assumes** that civil society organizations working together open new doors for influencing the government.

### **Pathway 2: Rights holders have held duty bearers accountable to communities' rights in extractive industry**

**If** women and men in mining affected communities have access to a simplified version of the mines and mineral act in their mother tongue, then they will be able to advocate towards local government and mining companies and claim their rights, such as rights to compensation for loss of land and livelihood and rehabilitation of the environment. Communities will be able to hold duty bearers accountable to their rights **because** they have the knowledge and understanding of their rights in relation to mining operations and will have legal backing to claim it.

**If** NCA and partners assist communities in their advocacy efforts for revenue sharing schemes **then** the communities will benefit from the revenue generated, **because** some of the revenues will be transferred back to communities.

### **Pathway to outcome 3: Duty bearers demonstrate increased transparency of public resources**

**If** partners are provided with training in order to develop skills and competence so that partners are able to document key information gaps and bring forth the societal effects of revenue transparency, contract transparency and Right to Information Act based on e.g. national and international expert advice and the experience from other countries, **then** this will create a public demand for increased transparency **because** this will result in more pressure on the government and authorities to demonstrate transparency.

**If** they then engage Parliamentarians and government in dialogue, **then** the government will be pushed to implement EITI, publicize mining contracts and make improvements in draft Right to Information Act and to ensure that it is passed in Parliament, **because** of the public demand to demonstrate increased transparency.

**NCA assumes** that partners will be willing to engage available spaces to demand increased transparency from the government. NCA assumes that sufficient public demand for increased transparency will act as a deterrent against corruption.

**NCA also assumes** that by engaging parliamentarians and making them aware of key transparency gaps and needs, the parliamentarians will contribute to putting pressure on the government.

## **c) Main activities and intervention strategies**

The rights holders in the project will include affected communities, community based mining associations and local mining artisans, while duty bearers include mining investors, local government, parliamentarians, traditional and faith leaders, and state actors (Ministry of Natural resource, Energy and Environment; Ministry of Lands and Ministries of Justice and Finance).

Main activities will include lobbying for the passing of the new revised mining act, advocate for policies and concrete arrangements that guarantee redistribution of government funds derived from mining back to communities directly affected by the mining activities, support translation and simplification of the mining act into local languages, support advocacy by CSOs for the government to implement the law and to publish public earnings from mining activities and to adopt the Extractive Industries Transparency Initiative (EITI), monitor developments at potential mining sites, provide legal support to communities to avoid land grabbing to claim compensations according to laws and officially approved provisions, formation of mining stakeholder structures on local and district levels to support community initiatives on corporate social responsibility, facilitate the building of alliances with other CSOs and empower the community to claim their rights for compensation and according to land act, support advocacy efforts by CSOs to pass the "Right to Information Law", advocate for publication of periodic reports on how revenue collected from mining is spent for district and community services and development, advocate for the government to publish "what you earn" in public earnings from mining activities, strengthening alliances between civil society actors and the civil society platform, and using media to influence public agenda and reach out broadly.

## 7. Emergency preparedness and response

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### a) Strengthening disaster response capacity

Malawi is exposed to recurrent emergencies caused by natural disasters. In the past recent years there has been an increase in the frequency and severity of natural disasters, specifically droughts and floods, but also earth quakes and cyclones, with serious repercussions on crop production and peoples' livelihoods. The effects of these mostly natural disasters have been exacerbated by the effects of climate change and poverty. Flooding is likely to occur, especially in the low lying areas of the country with a particular focus on Lower Shire Valley. Dry spells is especially critical for most of the impact areas where the Malawi ACT partners have development programmes, like Nsanje, Chikhwawa, Balaka and Karonga. Political and social tensions are currently limited, and there are no serious threats of man-made complex emergencies.

### b) Humanitarian coordination

NCA Malawi is a strong member of Malawi ACT Forum with 11 members where NCA has been a key player in emergency preparedness and response. The Forum has an emergency response mechanisms and a contingency plan. NCA Malawi has competent and dedicated programme and administrative staff. Available infrastructure include: functional office, communications equipment, small speedboat, off-road vehicles, appropriate warehouse - currently containing WASH equipment for approx. 5 000 people and about 400 family tents.

NCA Malawi emergency preparedness and response approaches will be three-fold:

a. Respond through Malawi ACT Forum. ACT Forum has a full time coordinator who is based with CHAM. Five of the members are international FBOs, while eight are local churches and FBOs. Jointly ACT Forum members cover much of the country, and particularly in the emergency prone districts.

b. Work bilaterally through and with ACT core partners (CARD and CHAM). CARD has experience in emergency preparedness and response, including WASH. CHAM is particularly relevant within health and sanitation. NCA will contribute to the core budget for the two organisations to secure an appropriate level of capacity and competence. NCA's approach will be to strengthen local ACT members prior to, but also during emergency, to improve their response capacity. Specialized capacity building within WASH will be offered for ACT Forum members, with emphasis on CARD and CHAM.

c. Responding to emergencies directly if needed. Emphasis will be made on WASH and camp management, as far as possible in close cooperation with core partners.

NCA human resources and infrastructure will be made available to Malawi ACT Forum members as appropriate in order to strengthen their response capacity in emergencies. NCA emergency response teams may be called upon to strengthen the ACT implementation capacity. NCA professionals from the NCA international rapid response teams will work with local partners to ensure skills capacity development of local partners, so that in a long-term perspective the resources can be found locally. NCA disaster preparedness and response will primarily focus on meeting Water, Sanitation and Health (WASH), camp management and food security needs. NCA Malawi, together with ACT partners, will be prepared to respond to both smaller and major emergencies that are envisaged in the national context.

To support coordinated emergency preparedness and response at ACT forum and national level, NCA will support strengthening of Malawi ACT Forum humanitarian sub-forums, participate in national emergency processes (clusters) and strengthened interface with Department of Disaster Management Affairs (DODMA). It is envisaged that improved engagement in national emergency preparedness and response processes will improve NCA's early warning for emergencies in Malawi. The above principles and main directions will be further developed in NCA Malawi's Emergency Preparedness and Response Plan.



## 8. Finance and funding

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### a) Funding situation

In addition to funding from Norad and NCA own funds, NCA Malawi has seen significant growth in funding from various donors such as GIZ, Tilitonse, Aids Fond, KFW/PSI and the Royal Norwegian Embassy (RNE). The increase in funding volume is closely linked to heavy programme emphasis on infrastructure. Given the developmental challenges facing Malawi, most institutional donors have a strong presence and interest in the country. Even though the country is considered a stable democracy, it still faces developmental challenges and donors are still interested in service delivery interventions. Consequently, the country is among top recipients of foreign aid globally. The amount of funding received demonstrates the confidence donors have in NCA, but also demands huge emphasis on ensuring delivery of results and quality. Looking ahead, we are faced with a favourable funding environment that presents opportunities for diversification and challenges of over stretching partners' capacity if unmanaged. Currently, NCA receives on average about 70% of our funding from RNE. Notably, inadequate long term funding has limited NCA and partners' ability to influence sustainable changes, having learnt that long term programmes have better chance of contributing to long-term changes. Due to the foregoing, most of our programmes have largely been short-term and not to desired scale.

### b) Analysis of donor market

Given the multifaceted development challenges that Malawi faces, donors continue to focus on service delivery of basic social services. However, they prefer working with consortia and partnerships that involve local faith based players and pooled funding mechanisms for scaling up interventions. The donors also focus on building strong civil society, good governance, gender and human rights. Notably, funding for HIV and AIDS has reduced significantly with shift towards reproductive health issues. Decreased budget support to government, due to the Cash Gate Scandal, has implied increasing preference for funding NGOs. Among the donors making significant investments in Malawi include, Norwegian Government, USAID and Irish Aid, EU, German Government and various foundations.

NCA will pay attention to improving grant management capacities in partners, programme delivery-based efficiency gains, building funding sustainability and promoting stronger collaboration with ACT partners as well as tapping into non-traditional funding sources, such as private sector and the UN. The funding outlook is that we will continue getting a high percentage of funding from the RNE around 65% and that there will be increases in funding from other donors.

### c) Forecasted income

Table 1: Country Strategy Funding Estimates (2016-2020)

PROGRAMME		MILLION NOK					
		2016	2017	2018	2019	2020	Total
Programmes	Reproductive Health	427	32.3	32.3	17.3	17.3	141.9
	Gender Based Violence	6.887	7.3	7.3	7.3	7.3	36.10
	Economic Empowerment	6.5	12.3	12.3	10.3	10.3	50.7
Contextual Programme	Extractive Industries	2.2	2.2	2.2	4.2	4.2	15
<b>Grand Total</b>		<b>58.3</b>	<b>57.1</b>	<b>54.1</b>	<b>39.1</b>	<b>39.1</b>	<b>243.6</b>

We envisage that extractive industries will be phased out after three years, but that other urgent concerns may emerge during that period. Emergency disaster responses will most probably be called for during the strategy period, and funding will have to be called for on a case-by-case basis.

## 9. Monitoring and evaluation

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### **a) Monitoring principles and practices**

NCA Malawi will apply NCA's Monitoring & Evaluation system, described in the global Routines & Guidelines and NCA's Evaluation Policy. The past carries lessons that the effectiveness of achieving planned goals, to a large extent depends on partners' capacity and ability to monitor, measure and evaluate the impact of the programme interventions for rights holders in the targeted communities. The main purposes of NCA's monitoring will therefore be two-fold i.e. to support partners' PME capacity; and to have continued surveillance of programme and project performance with the aim to identify change stories as well as challenges during implementation of projects. Joint monitoring will be preferable when possible. Monitoring findings will be used for learning between partners, programmes and NCA staff; consequently adjusting interventions in case it is needed.

The results frameworks (see annexes) shall guide NCA and partners to jointly monitor the activities and outputs to ensure that they make significant contributions towards the desired change of the programme. The M&E officer will coordinate the efforts in cooperation with programme coordinators and finance staff capable of conducting elements of M&E, including joint monitoring visits. Dedicated M&E budget allocation will be secured.

Efforts to strengthen the capacity of our partners will be continuously pursued through joint monitoring visits, giving feedback to reports, review sessions as well as baseline surveys and evaluations and other planned regular M&E processes. Annual partners and finance meetings will be continued. Partners will be assisted in improving their monitoring tools to enhance effective monitoring, and be supported in identifying reliable and efficient audit firm to improve timeliness of submission of audit reports.

The reproductive health programme produces a great amount of data, quantitative in particular. To ease monitoring and reporting, NCA Malawi has developed a web-based database to store health related programme and project data.

The monitoring standard is minimum two field visits per project per year and will be undertaken by the responsible NCA programme officers, preferably jointly with partner staff, to assess project performance against approved proposals, result frameworks and budgets. To the extent possible, principles for monitoring and data collection will be standardized across programs and projects. This will include the principle of Sex and Age Disaggregated Data (SADD).

### **b) Evaluations**

Informed by NCA's global evaluation policy and donors' requirements, the NCA will conduct various evaluations or reviews. For 2018, an internal programme review or external evaluation is scheduled and an external final evaluation will be undertaken in 2019-20 to assess the overall impact of the Country Strategy. In addition, various specific project evaluations will be carried out when necessary during the strategic period. To ensure learning from evaluations NCA will always develop a management response to the recommendations from the evaluation report, as well as an action plan for improvement of the issues raised.

## 10. Organisational prerequisites

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### **a) Competence development**

For NCA Malawi to implement the strategy there is need for competence and skills in relevant thematic areas, of Reproductive health, Gender Based Violence and Economic Empowerment. In addition competence in partnership development, project management, financial management, procurement systems and monitoring and evaluation will be needed. An effective administration function to support program delivery is crucial.

### **b) Human resource needs**

The current staff portfolio of NCA Malawi is consisting of nine program staff with specific knowledge and experience in the fields of health, engineering, gender, governance, project management and M&E. The assumption is that NCA without extensive turnover in staff can deliver on the goals set out in this strategy with this human resource pool. Adjustments of specific professional/thematic skills will be considered prior to the strategic period and on an ongoing basis. This is particularly relevant for the Economic Empowerment programme. NCA Malawi will have to recruit new or capacitate current staff members to effectively implement the projects within Economic Empowerment. The country programme will continue to rely on NCA-Oslo's support for technical backstopping and finalization and submission of funding proposals.

### **c) Cost efficiency considerations**

NCA Malawi has a multitude of donors, and with combined utilization of physical and human resources the overall efficiency will be enhanced. Geographical concentration with relatively few partners will reduce fragmentation of resource input and anticipate greater outputs. With fewer partners than in the past, more focus can be given to capacity building of partners for more efficient financial and administrative procedures. NCA Malawi has well-functioning administration support systems with sufficient and qualified members of staff that contributes to more cost-effective and efficient operations.

## 11. Risk management

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1. **Shrinking space for civil society:** Currently, the political opposition in Malawi is reasonably holding the Executive branch to account. However, recent trends of MPs from the Opposition aligning with the Executive could diminish the opposition's ability to hold government accountable. As government grapples with service delivery on a shoestring budget, service delivery could be seriously undermined causing civil unrest. All these could lead to government cramping on citizens resulting in shrinking space for advocacy on human rights issues, questions that may challenge government and space for implementing programmes. In addition, shrinking space may negatively affect negotiations between MoH and CHAM on a new Memorandum of Understanding and implementation of Service Level Agreements.

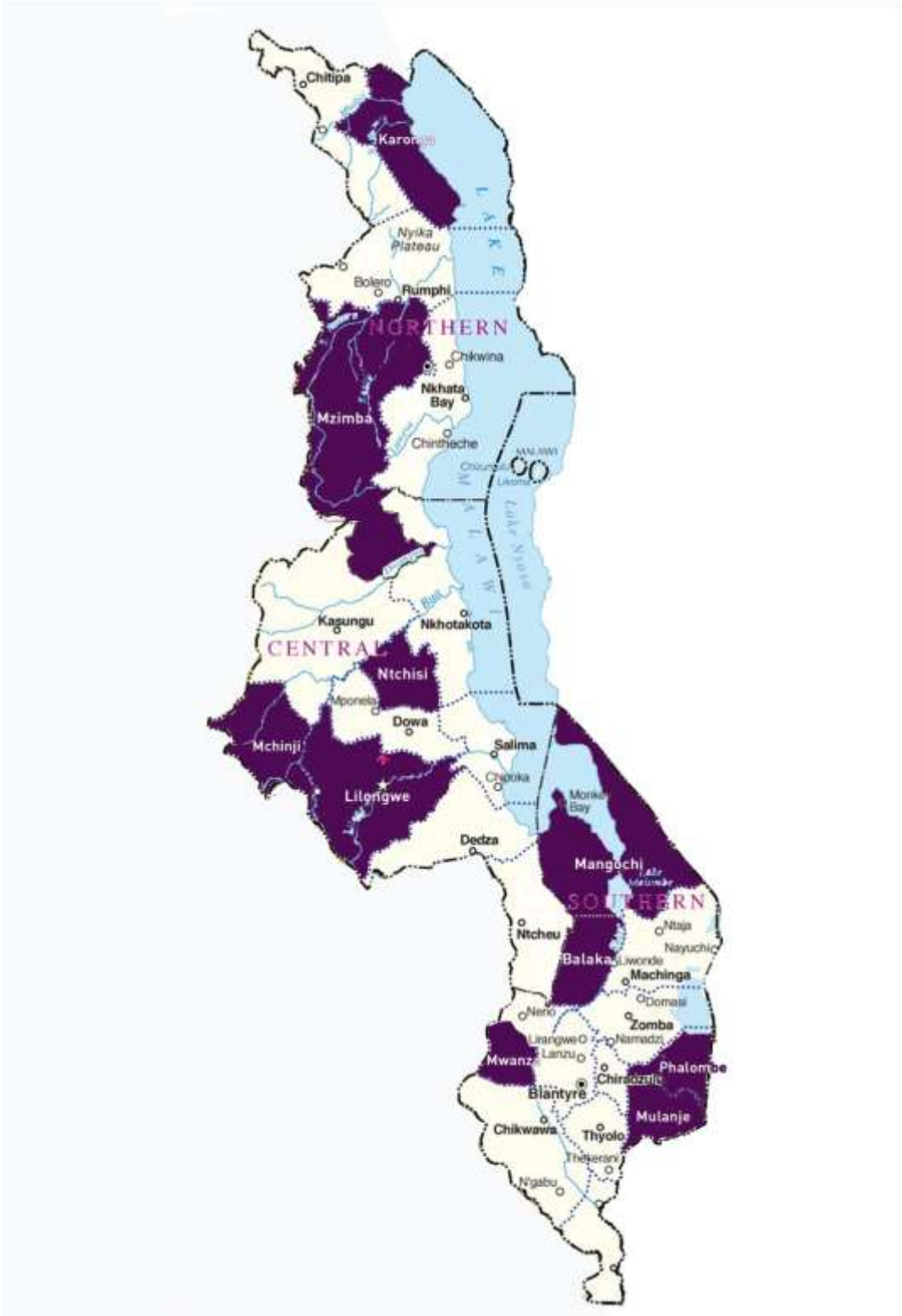
The likelihood of occurrence is medium and likely impact on programme is low. NCA will manage this risk through networking and lobbying, quality programme delivery, improved visibility and empowering rights holders to hold government accountable.

2. **Corruption:** public sector corruption affects public service delivery and can result in donors withdrawing their funding support to the country. The likelihood of this occurring is high and its likely impact is high. We will empower rights holders to hold their government accountable and we will advocate for good economic governance.
3. The likelihood of **occurrence of natural disasters in Malawi** is low but likely impact on the programme is high. When natural disasters occur, rights holders become more interested in relief support to meet immediate needs, thus affect their interest (albeit temporarily) in development long-term programmes. Buildings constructed as part of project infrastructure support may collapse in face of natural disasters. Better preparedness planning will help us manage related risks.
4. **Unstable and unpredictable Norwegian Kroner (NOK) and Malawi Kwacha (MK)** will result in variances between budgeted and disbursed funding. While positive variance will imply "surplus", negative variance will imply budget deficits with likely consequences being scaling down planned activities. The likelihood of this occurring and impact of the occurrence are high. Scaling down activities implies that rights holders pay the price. To manage this risk, we will negotiate with our donors for some flexibility if variations go beyond certain percentage both ways and we will have to repay if the variations go above a certain level in our favour.
5. **There is high risk of inadequate funding undermining achievement of our planned country strategy results.** We anticipate some funding gaps in some thematic areas, especially Economic Empowerment, which is also a new thematic area. If this occurs, the impact will be medium. However, we will aggressively develop proposals as well as responding to donor requests for proposals and fully utilise the services of Funding Officer in Oslo. Realising the potential fluidity of the situation, we will undertake periodic funding reviews to establish gaps and respond accordingly.
6. **NCA Malawi is heavily dependent on Norwegian Government for funding.** Any change in the Norwegian Government global development assistance policy has implications on this strategy. Locally, change of government, cabinet reshuffling and changing priorities tends to slow down progress since new staff usually need re-orientation and time for buy-in. The likelihood is medium but likely impact is high. Quality programme delivery, networking and lobbying with donors and donor diversification will be our key strategies to manage this risk. As well, measures to

mitigate against change Norwegian Government global development assistance policy will be developed and implemented at NCA Oslo level.

7. **Low financial management and accountability among core partners due to inadequately qualified accounting** staff could affect our efforts to account for funding received. The likelihood of occurrence is medium but likely impact on the strategy is high. We will manage this risk through capacity building of partners' accounting staff (short term courses, in-service training, mentoring), internal follow-up and negotiate with partners on prioritising remuneration of qualified accounting staff in core-budget support. In 2014, NCA initiated mentorship programme for partner accounting staff. Initial signs show that capacity of accounting staff in some partners was strengthened through the mentorship programme. We plan to continue this programme during the CS planning period.
8. **Staff turnover in NCA and partners:** staff in NCA and partners may leave to pursue other interests. The likelihood of occurrence is medium and likely impact on programmes is high. We will manage this risk through competitive staff motivation, capacity building and enabling work environment.
9. **Partners' lack of capacity and diligence to implement project activities:** We work through partners and their capacity to implement is crucial to achievement of strategic country goal and programme outcomes. Economic empowerment is new area for NCA Malawi and partners. There is risk that the learning period may be longer than anticipated. The likelihood of occurrence is low but likely impact is high. However, this risk will be managed through judicious choice of partners, capacity building of partners, learning from other countries where NCA has an office where they implement the same programme and strengthened M&E.
10. **Resistance against changing social norms on Gender based Violence:** Malawi is majorly a patriarchal community. Social norms are deeply entrenched in culture and tradition. The passage of traditional rites that are harmful and that uphold GBV (e.g. real men must provide for their families, they do not cry, women should maintain family harmony and accept violence as the social norm) is prevalent. Resistance to change or slow uptake of change is therefore one of the risks to changing social norms upholding gender based violence in the wake of male masculinities. With so dominant masculinities there is therefore the risk of generalising programmes that have to deal with male involvement without understanding them and that different types of men would take up the programmes differently.

Annex 1: Map



## Annex 2: Partner information

NAME	LEGAL STATUS	SHORT DESCRIPTION OF PARTNER (size, # of employees, no. of members)	DE-OF STRUCTURE	MANAGEMENT	YEAR ESTABLISHED	YEAR PARTNERSHIP STARTED	FINANCIAL FOUNDATION	TECHNICAL EXPERTISE	MEMBERSHIP NETWORKS	COOPERATION WITH LOCAL GOVERNMENT)
Malawi Council of Churches	MCC is a foundation with corporate status and is duly incorporated under the Trustees Incorporation Act of the Laws of Malawi	<p>MCC is a fellowship of 25 member churches and 18 church related organisation. Its membership is open to all churches with duly constituted order and ministry who believe in the one Triune God: Father, Son and Holy spirit.</p> <p>Its main objective is to promote a holistic development and foster unity, peace, justice and love in order to transform the human race using its theological and biblical teachings.</p> <p>Currently MCC has <b>7 employees</b> at its secretariat namely General Secretary; Programmes Manager; Programme Officer; Executive Secretary; Public relation Officer; Accounts Assistant and Office Assistant/Driver</p>		<p>MCC is managed by the Executive board comprising elected officials from its member churches. The board oversees the operations of the secretariat responsible for running day to day affairs of the organisation. The Secretariate is headed by the General secretary who is assisted by the manager in running different department such as Finance and administration; Justice, Peace and reconciliation; Mission and Ministry; Relief, Emergency and Food security; Gender; and HIV/AIDS. The Accountant heads Finance and Administration while Programme Officers manage different programmes</p>	<p>First established on 16th February 1942 as the Consultative Board of Federation Missions. It was later changed to the Malawi Council of Churches (MCC) and is registered under the trustees Incorporation Rules, with the Registrar's office from 7th June 1990.</p>	2002	<p>MCC's financial foundation is based on four major sources of income such as:</p> <ul style="list-style-type: none"> <li>• Annual contributions in form of fees from member churches</li> <li>• Funds from rentals from fixed assets</li> <li>• Students contributions from grant aided schools</li> <li>• Funding from international donors and other funding agencies</li> </ul>	<p>Technical expertise of the employees at MCC secretariat include:</p> <ul style="list-style-type: none"> <li>• Ministry</li> <li>• Counselling</li> <li>• Teaching</li> <li>• Planning</li> <li>• Data Management</li> <li>• Management</li> <li>• Facilitation</li> <li>• Presentation</li> <li>• Budgeting</li> <li>• Proposal writing</li> <li>• Report writing</li> <li>• Monitoring and evaluation</li> <li>• Advocacy</li> <li>• Project management</li> <li>• Mining governance advocacy</li> <li>• Mineral exploration</li> <li>• Financial Management</li> <li>• Internal Control Management</li> <li>• Project Financial Management</li> </ul>	<p>MCC is a member of different networks such as: Economic Justice Network (EJN), Fellowship of Christian Churches In Southern Africa (FOCCISA); Non Governmental Organisation Gender Coordination Network (NGOGCN); Natural Resources Justice Network (NRJN); Council for Non Governmental Organisations in Malawi (CONGOMA); Malawi Electrol support Network (MESN); Malawi Economic Justice Network (MEJN); World Council of Churches (WCC); All Africa Council of Churches (AACC); Actalliance</p>	<p>MCC work with government in a number of areas and at different levels. This cooperation is seen through a number of interventions in the areas of health, education, human rights, governance, and justice.</p> <p>In the areas of Education and Health MCC together with ECM cooperate with government in provision of education and health services through ACEM and CHAM respectively. Through Public Affairs Committee (PAC) MCC and other mother bodies work with government in promotion of human rights and good governance</p> <p>Cooperation with government is also seen with MCC's inclusion as a member in differ-</p>



							<ul style="list-style-type: none"> <li>• Community mobilisation</li> <li>• Reasearch</li> <li>• Publishing</li> <li>• Designing Photography</li> </ul>		<p>ent boards of parastatals and government departments e.g. Malawi National Examinations Board <b>(MANEB)</b>; Malawi Institute of Education <b>(MIE)</b>; Law Commission; Pharmacy, Medicines and Poisons Board; Technical Entrepreneurial and Vocational Education and training <b>(TE-VET)</b>; Airport Development Limited <b>(ADL)</b>; and National Food Reserve Agency <b>(NFRA)</b></p> <p>MCC's cooperation with government is also visible in its role in provision of civic education and monitoring of election as well as organising events of national interest such as national prayers.</p> <p>MCC in its programmes also works with Traditional Chiefs and District Assemblies.</p>
Episcopal Conference of Malawi	ECM is registered under the Trustees Incorporation Act as a Faith Based Organisation. It was registered on 3 July 1970. Registration	The Episcopal Conference of Malawi is the permanent institution of the Bishops of Malawi that promotes the greater good that the Catholic Church	The ECM Catholic Secretariat is the national administrative, facilitative and coordinative arm through which the ECM implements	1961	2002	ECM depends on donor funding to implement its community programs. Long term partners include: Cordaid, Tilitonse	<ul style="list-style-type: none"> <li>• Education</li> <li>• Service delivery i.e. early childhood development, primary</li> </ul>	Catholic Health Care Association of Southern Africa – an association of catholic health desks in the	National Offices collaborate with line ministries and government departments

<p>number R.G. 20754/IM/5.2005</p>	<p>offers humankind, through forms and programmes that are fittingly adapted to circumstances of the time and place. It is an assembly of eight (8) Catholic Dioceses of Blantyre, Chikwawa, Dedza, Karonga, Lilongwe, Mangochi, Mzuzu and Zomba. The ECM Catholic Secretariat is the national administrative, facilitative and coordinative arm through which the ECM implements and co-ordinates various social and pastoral programs at the national level. The Catholic Secretariat has the following directorates: Finance, Investment and Administration, Pastoral and Social Development. The Social Development Directorate implements its programs through the following arms: Catholic Health Commission (CHC), Catholic Commission for Justice and Peace, Catholic Development Commission, Catholic Education Commission and Communications Commission.</p>	<p>and co-ordinates various social and pastoral programs at the national level. The Catholic Secretariat has the following directorates: Finance, Investment and Administration, Pastoral and Social Development. The Social Development Directorate implements its programs through the following arms: Catholic Health Commission (CHC), Catholic Commission for Justice and Peace, Catholic Development Commission, Catholic Education Commission and Communications Commission. At national level, each commission is headed by a National Secretary who reports to the Director of Social Development.</p>			<p>Fund, National AIDS Commission, Norwegian Church AID, Trocaire, Catholic Relief Services, Caritas Australia, Caritas Internationalis, World Food Programme, food and Agricultural Organisation. ECM sources some funding from rentals.</p>	<p>education, secondary education and tertiary education</p> <ul style="list-style-type: none"> <li>• Promotion of social accountability in the governance of education sector</li> <li>• Health</li> <li>• Service delivery through</li> <li>• Policy lobbying and advocacy on issues of governance in health sector</li> <li>• Finance tracking in health sector</li> <li>• Governance</li> <li>• Mainstreaming human rights based approach to development</li> <li>• Enhancing social accountability in social economic and political sectors</li> <li>• Monitoring and documentation of human rights abuses</li> <li>• Mainstreaming gender and HIV and AIDS</li> <li>• Building formal and informal</li> </ul>	<p>southern africa region whose secretariat is South Africa</p>	<p>Diocesan Offices collaborate with district councils and assemblies At community level we work with VDCs and ADCs</p>
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		The Secretariat has 51 members of staff. The Catholic Health Commission's mandate is to coordinate the health services and (training) programmes implemented by the Church. CHC has 95 health facilities and 5 training colleges. The Commission also implements community based health programs.					<ul style="list-style-type: none"> <li>coalitions for citizens voices at community, district and national levels.</li> <li>• Development</li> <li>• Promotion of sustainable livelihoods and food security interventions</li> <li>•</li> </ul>		
Evangelical Association of Malawi	EAM is registered with the Malawi Government under the trustee incorporation Act; Registration # 81787/2M/10.84	<p><b>Size and Membership:</b> 108 members (58 Church denominations and 50 Christian Organizations) spread throughout the country, with a total of 65,000 congregations representing a population of approximately 5.4 million out of the 16.83 million<sup>9</sup> people in Malawi.</p> <p><b>Staff :</b> EAM has 62 full time employees</p>	<p><b>Governance Structure:</b> comprises the Board of Trustees, National Executive Board, Regional Committees and District Committees.</p> <p><b>Management Structure:</b> In terms of day to day program delivery, the General Secretary is the overall in-charge of the organization and the Head of Programs is responsible for all programming. Line program managers are responsible for Finance and Administration; Advocacy</p>	Established in 1962	2003	<p>2015 Annual Budget of MWK 913,937,570.00 (US\$2,030,972.00 ) with an unqualified audited accounts for the past 10 years.</p> <p>Other donors: Irish Aid, Tear fund, Dan Church Aid</p>	Health, HIV and AIDS; Advocacy, Peace and Justice; Church Mobilisation; Emergency Response; Food Security and Disaster Risk Reduction; Education ; Environment and Climate Change	<p><b>International:</b> A member of the Association of Evangelicals for Africa (AEA) and World Evangelical Alliance (WEA); MICAH Challenge and an Affiliate of ACT Alliance.</p> <p><b>National:</b> A member of Council for Non-Governmental Organisations (CONGOMA); Public Affairs Committee (PAC); Civil Society Agriculture Network</p>	Working with MoH <sup>10</sup> in HIV and AIDS, SRH issues; MoA <sup>11</sup> in Food Security through Small Scale Irrigation; DoDMA <sup>12</sup> in issues of climate change and disaster risk management; Ministry of Natural Resources, Energy and Mining – mining issues.

<sup>9</sup> Government of Malawi (2012) 2012 Global AIDS Response Progress Report: Malawi Country Report for 2010 and 2011. Lilongwe: Malawi National AIDS Commission.

<sup>10</sup> Ministry of Health

<sup>11</sup> Ministry of Agriculture and Food Security

<sup>12</sup> Department of Disaster Management Affairs

			and Church Mobilization; Health, HIV and AIDS; and Food Security, Climate Change and Disaster risk Reduction Departments working together with various program officers in their respective departments in collaboration with regional and district committees.					(CISANET); Civil Society Coalition for Quality Education (CSCQBE), Civil Society Network on Environment and Climate Change (CISONECC) and Malawi Electoral Support Network (MESN).	
Quadria Muslim Association of Malawi (QMAM)	Legally registered in October 1999 under the Trustees Act	QMAM is a non-profit making national Islamic faith-based organization (FBO/NGO). QMAM's mission is to contribute towards holistic development of the people of Malawi regardless of their religious faith and political affiliations through empowerment, education, gender equity, participation and advocacy within an Islamic perspective while its vision is to have a healthy and empowered Malawian society and believes in and upholds the values of integrity and professionalism.	The Muslim community is QMAM's primary constituency. Qadria Muslims comprises about 80 per cent of the country's Muslim population and are located in southern and central regions especially along the Lake Malawi and northern part of Shire Rive and the Shire Highlands respectively. There are over 2,500-2,800 Masjids(mosques) belonging to the Qadria Muslim Association of Malawi of which about 55% of the Mosques lie in Nkhotakota, Salima, Mangochi, Balaka, Machinga, and Zomba.	1992	2005	Norwegian Church Aid (NCA), Tiltonse Fund through NCA, GIZ through NCA, KfW through NCA; National Aids Commission (NAC), Dan Church Aid (DCA), DFID through the British High Commission (BHC), GTZ Forum for Democracy, Management Sciences for Health , Futures Group, Local Contributions	Programme Management and Administration, HIV and AIDS Monitoring and Evaluation Sexual and Reproductive Health (SRH) TOT Results Based Monitoring and Evaluation Communication/ Journalism Accounting and Finance Leadership Human Rights and Democracy Advocacy HBC	Council for Non-Government Organizations in Malawi (CONGOMA), Public Affairs Committee, Malawi Electoral Support Networks, and Malawi Interfaith Aids Association (MIAA); National Ruyatul Hilal Committee (NRHC)	QMAM cooperates with the local government councils at the district level in all the districts where it implements its programmes and activities.

							HIV and AIDS Programming  Resource Mobilization and Fundraising / Proposal Development  Interfaith Relations		
Christian Health Association of Malawi	Registered on 1 December 1966 as Private Hospital Association of Malawi (PHAM) under the Trustees Incorporation Act. In order to reflect the Christian identity as well as the holistic focus on health, the name was changed from PHAM to CHAM on 28th February 1992. On 29 May 2005 CHAM was also registered as a non-governmental organisation under the NGO Board of Malawi.	Christian Health Association of Malawi (CHAM) is an ecumenical, not for profit non-governmental umbrella organization of Christian owned health facilities in Malawi. It was established in 1966 following recommendations by stakeholders in 1965 who observed that the Churches were doing a commendable job in healthcare delivery but that their efforts were uncoordinated and disjointed. It is presented nationwide.	CHAM is a key partner to the Government of Malawi through the Ministry of Health in implementing the Health Sector Strategic Plan, including delivery of the Essential Health Package and training of human resources for health, and in other sector-wide initiatives. The CHAM Secretariat has 3 departments namely; Finance, Human Resources and Administration and Health Programmes. The CHAM secretariat has around 32 employees and the current total number of employees in CHAM units is about 8,850. Executive Director Head of Health PROGRAMMES	1966	2002	CDC, USAID, KfW, DCA, EU, UN-Population International Agency	CHAM has expertise in the following; 1. Health service delivery through its member health facilities, CHAM is able to carry out a lot of biomedical interventions through this network.  2. Human resource for health training through its networking of training colleges which trains nurse professionals, laboratory professionals, psychiatry professional and paramedical clinical medicine professionals.  3. Projects implementation ranging from health, water and sanitation, nutrition,	ACT ALLIANCE,	CHAM is a key partner to the Government of Malawi through the Ministry of Health in implementing the Health Sector Strategic Plan, including delivery of the Essential Health Package and training of human resources for health, and in other sector-wide initiatives.

			Head of Human Resource and Administration Head of Finance Training Manager				HIV/AIDS, Maternal and Child health, capacity building, finance management, Physical Assets management and Infrastructure through the coordination of the CHAM secretariat which has a lot of staff with diverse areas of expertise and a network of partnerships. 4. Drugs and pharmaceutical supplies through the Drugs Revolving fund at the secretariat and the Drug Supply organization which is currently under development		
Churches Action in Relief and Development	Faith based NGO registered under the Trustees Act	CARD Is a membership organisation with 20 member churches. Programs are being implemented in 7 districts of Dowa, Kasungu, Mchinji, Thyolo, Mulanje, Chiradzulu And Nsanje. CARD has a total of 79 members of staff, 12 from administration department and the rest programme staff.	Comprised of churches executive board followed by Executive Director, as head of institution and 3 departments namely: Finance, Programmes And Human Resource And Administration	1995	2002	Donor-funded mainly, and income generating activities in form of houses and offices rented out.	Agriculturists, Social Scientists Accountants Administrators	ACT ALLIANCE, EAA, CISANET, CISONTECC, CURE	At field level, CARD Head Office cooperates with ministries affiliated to CARD operations. agriculture, labour, energy, disasters, relief and development , health, water and irrigation

CCAP - Nkhoma Synod	The department was registered under the Trustees Act	Established to promote democracy, good governance, and gender equality. Church and Society operates in the whole Central Region and part of Mangochi district of the Southern Region of Malawi. It has 12 staff members and works with over 200 Community Based Educators (CBEs)	A Department of CCAP Nkhoma Synod, overseen by a Board of Trustees, and headed by a Director. A Programme Manager, Accountant and Project Managers come under the Director.	2004	2008	Donor based with about 8% Synod support.	Has expertise in advocacy, training, mediation, networking, empowerment and civic education using the expertise of the Programme Manager, 2 Project Managers and 2 Project Officers.	Malawi Health Equity Network (MHEN), Malawi Human Rights Consultative Committee (MHRCC)	In districts where the department is running projects, it is a member of the District Executive Committee where projects implementation technicalities are discussed. Most district based projects are implemented together with relevant district stakeholders
CCAP-Synod of Livingstonia	Registered with Malawi Government under The Trustees Incorporation Ordinance (CAP.47). Reg. # 20754/M/5.2005	Church and Society is an advocacy and Human Rights desk of the CCAP Synod of Livingstonia. The Synod appoints the Board which comprises of 16 members including 5 ex-officials. Church and Society has 42 staff members of which 26 are based at the Secretariat and 16 in the Field Offices in Mzimba, Chitipa, Karonga and Rumphi.	Church and Society Management is headed by the Executive Director who has two Deputies, one responsible for Programmes and the other responsible for Finance & Administration. Each Project is run by a Project Manager who reports to Deputy Director for Programmes. Each Project also has a Project Accountant who reports to Deputy Director responsible for Finance & Administration	Established in 1999	2008	Largely dependent on donors through projects for operations and project implementation. The Synod provided the department with offices both for the Secretariat and Field (own office under construction at the Secretariat.) The department also has own motor vehicles, motorcycles, computers, printers, copiers, digital cameras etc in addition to those on projects and owned by donors.	Church and Society has well qualified and experienced staff in both programme and Finance & administration. Specifically there is one PHD holder, 5 with Masters Degrees and 10 Bachelors Degree holders. All these are well experienced in project implementation and proposal development	At national level CSP is a member of Civic and Political Space Platform, a network of Civil Society Organisations implementing projects funded by DanChurchAid. CSP is also a member of Malawi Electoral Support Network (MESN) which is a network of organisations implementing election related projects. MEJN is another network in which CSP is a member. MEJN is a network of organisations advocating for	CSP works with decentralised government structures like VDCs, ADCs and DEC in all districts in the north. In fact CSP is a member of the DECs (District Executive Committee) in all the districts in the north. All projects have a component of District Interface meetings where community members from the impact areas take issues to duty bearers at District level for redress.

								<p>issues of economic governance.</p> <p>At international level CSP is a member of SADC Civil Rights Organisations.</p>	
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### **Annex 3: Cross-cutting issues and strengthening civil society**

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Refer to Excel Sheet 3

## **Annex 4: Programme results frameworks**

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Refer to Excel Sheets 4.1, 4.2, 4.3, 4.4

## Annex 5: Funding strategy and targets

### a) Donor analysis

Donor	Mandate/ Areas of interest relevant to NCA
Euro paid	<ul style="list-style-type: none"> <li>EU development assistance to Malawi focuses on two sectors: food security and agriculture in the context of national development. Beyond that, the EU supports development cooperation programmes in Malawi in the areas of general budget support (notably health, education and public finance management), governance, regional integration (investment and trade), HIV/AIDS and institutional capacity-building</li> </ul>
USAID	<ul style="list-style-type: none"> <li>One of the 3 development objectives of USAID is to improve social services which includes health (Maternal and Child Health, Family Planning and Reproductive Health), education and agriculture Governance, democracy and human rights</li> <li>Governance, democracy and human rights</li> </ul>
Tilitonse	<ul style="list-style-type: none"> <li>Capacity of Civil Society Organizations to enable citizens, particularly poor and excluded groups to claim their rights increased;</li> <li>Access to information on rights, entitlements and responsibilities increased particularly of poor and excluded citizens;</li> <li>Monitoring by Malawian organizations of policy and budget commitments, service delivery and public resource management is strengthened;</li> <li>The engagement of Malawian organizations in influencing policies, strategies and resource allocations at local and national levels improved.</li> </ul>
UN Agencies	<ul style="list-style-type: none"> <li>UNICEF, UN Women, UNFPA whose mandate is aligned to NCA i.e. Gender based violence, rights of women and children</li> </ul>
GIZ	<ul style="list-style-type: none"> <li>Health systems strengthening with a focus on reproductive health</li> <li>Strengthening public financial and economic management</li> </ul>

### b) Strengths, Weaknesses, Opportunities and Threats (SWOT)

<p><b>Strengths</b></p> <ul style="list-style-type: none"> <li>Long term relationships with partners ensuring sustainability</li> <li>Grassroots presence through our partners</li> <li>Relevance of country context needs and priorities</li> <li>Strong network of faith and secular partners</li> <li>Skilled and competent expertise locally and internationally within NCA</li> <li>Proven track record in acquiring funding from institutional donors</li> <li>Good systems and structures in place to aid implementation and delivery of results</li> <li>Good reputation among donors</li> </ul>	<p><b>Weakness</b></p> <ul style="list-style-type: none"> <li>Monitoring constraints due to large coverage and large number of partners</li> <li>Large partner portfolio affecting monitoring</li> <li>High staff turnover in faith based partner organisations</li> <li>High dependence on NCA by some faith based partners</li> <li>Limited capacity in financial management and compliance issues among partners</li> <li>Phasing out strategy for partners not clear</li> <li>New program focus where NCA Malawi has no previous experience</li> </ul>
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<p><b>Opportunities</b></p> <ul style="list-style-type: none"> <li>Strong ACT Forum in country</li> <li>Political stability and vibrant Civil society</li> <li>Strong government commitment in working with CSOs to address development issues</li> <li>Long term commitment from donors in funding development work</li> <li>Increasing preference in funding CSO and NGOs by donors</li> <li>Opportunities on working in consortia</li> <li>Supportive policies from Government demonstrating commitment to development</li> </ul>	<p><b>Threats</b></p> <ul style="list-style-type: none"> <li>Increased competition for funding among NGOs</li> <li>Political instability especially during election periods</li> <li>Changes in donor priorities</li> <li>Economic downturn affecting funding and implementation</li> <li>Cash gate scandal or financial mismanagement affecting donor perceptions on Malawi</li> </ul>
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### c) Funding investments

Area	Investment needed
Grant management and compliance	Continued mentoring and capacity building of staff and partners Strengthen M and E systems within partners
Innovation	Private sector engagement Programme approaches Documentation of best practices and change stories
Fundraising	Explore possibilities for consortia Training and support in proposal development for partners (fundraising capacity building)
Donor engagement and relationship building	Development of marketing or communication materials Support partner visibility Strengthen relationships with key donors such as Norwegian Embassy, GIZ and KFW.

#### d) Expected budget

Year	2016		2017		2018		2019		2020	
Funding Type	No Norwegian	Non-Norwegian	No Norwegian	Non-Norwegian	No Norwegian	Non-Norwegian	No Norwegian	Non-Norwegian	No Norwegian	Non-Norwegian
Sexual Reproductive Health	34.525 m NOK	182.8 m NOK	24.225 m NOK	107.8 m NOK	24.225 m NOK	108.8 m NOK	11.245 m NOK	55.6 m NOK	11.245 m NOK	55.6 m NOK
Programme Economic Empowerment	6.525 m NOK	2.2 m NOK	12.3 m NOK	2.2 m NOK	12.3 m NOK	2.2 m NOK	10.3 m NOK	4.2 m NOK	10.3 m NOK	4.2 m NOK
Gender	5.387 m NOK	1.5 m NOK	5.8 m NOK	1.5 m NOK	5.8 m NOK	1.5 m NOK	5.8 m NOK	1.5 m NOK	5.8 m NOK	1.5 m NOK
Sub-Total	46.438 m NOK	182.8 m NOK	42.325 m NOK	117.8 m NOK	42.325 m NOK	117.8 m NOK	27.345 m NOK	175.5 m NOK	27.345 m NOK	175.5 m NOK
Percentage of total funding	79.1%	2.1%	78.1%	2.2%	78.23%	2.2%	69.1%	3.1%	69.1%	3.1%
Amount secured of total	12.438 m NOK	168.9 m NOK	9.9 m NOK	112.2 m NOK	9.9 m NOK	112.2 m NOK	9.9 m NOK	100 m NOK	9.9 m NOK	100 m NOK
Grand Total	58.319 m NOK		54.1 m NOK Total budget decrease from previous year: 7%		54.1 m NOK Total budget increase from previous year: 0%		39.1 m NOK Total budget increase from previous year: 28%		39.1 m NOK Total budget increase from previous year: 0%	

## **Annex 6: Planned evaluations**

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Reference is made to the annex in excel, sheet named "6 Evaluations"

## **Annex 7: Risk analysis and management**

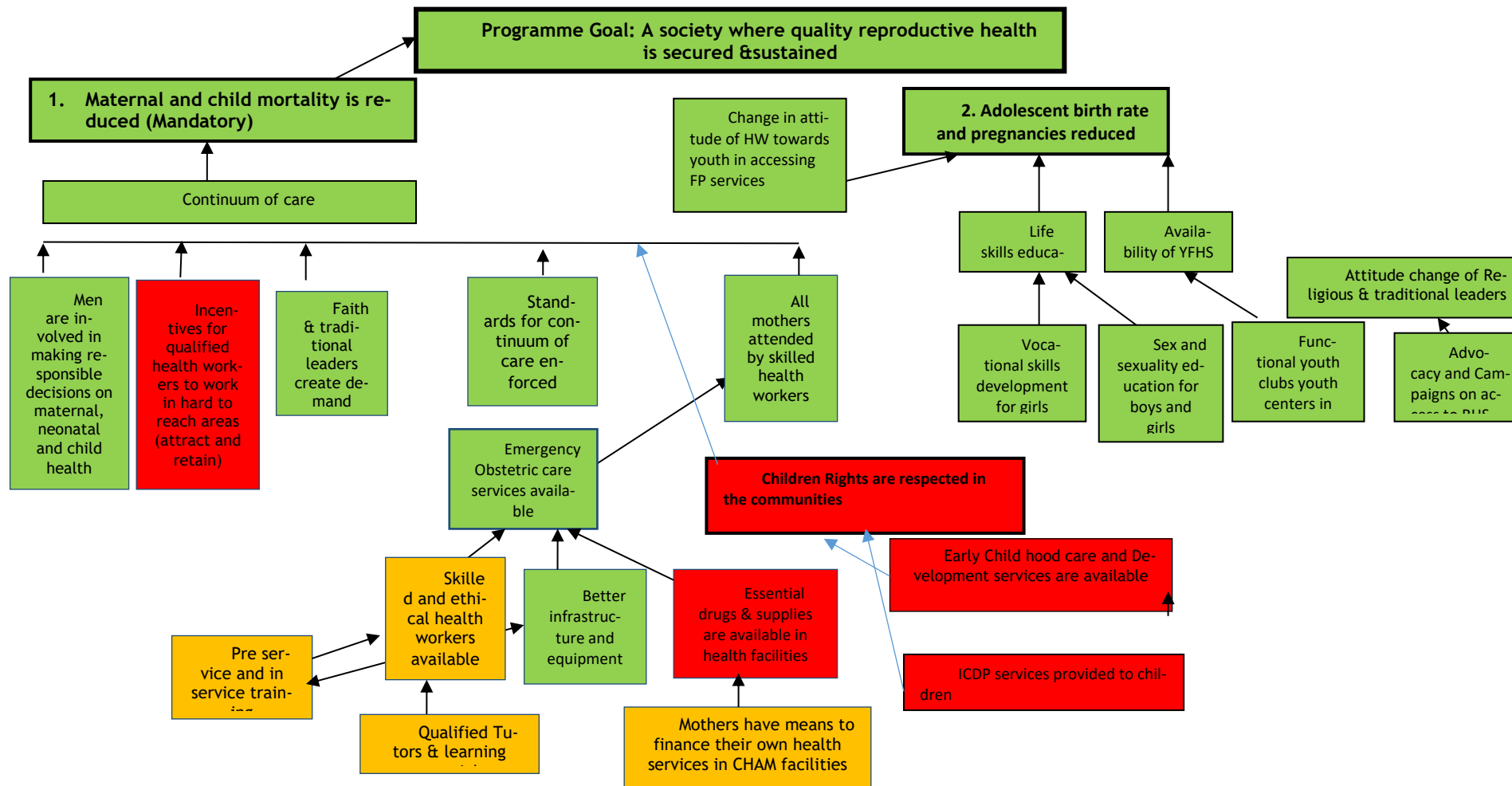
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Reference is made to the annex in excel, sheet named "7 Risks management".

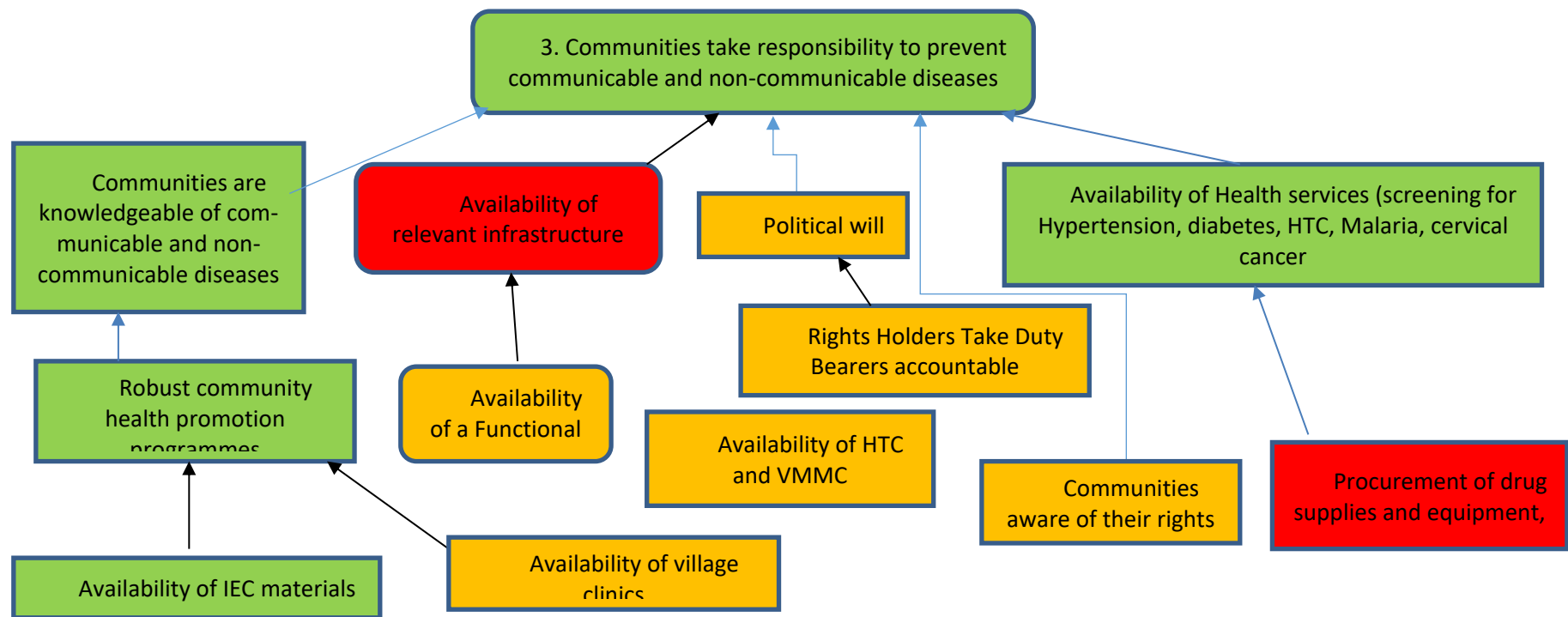
**Annex 8: Theory of Change Pathways**

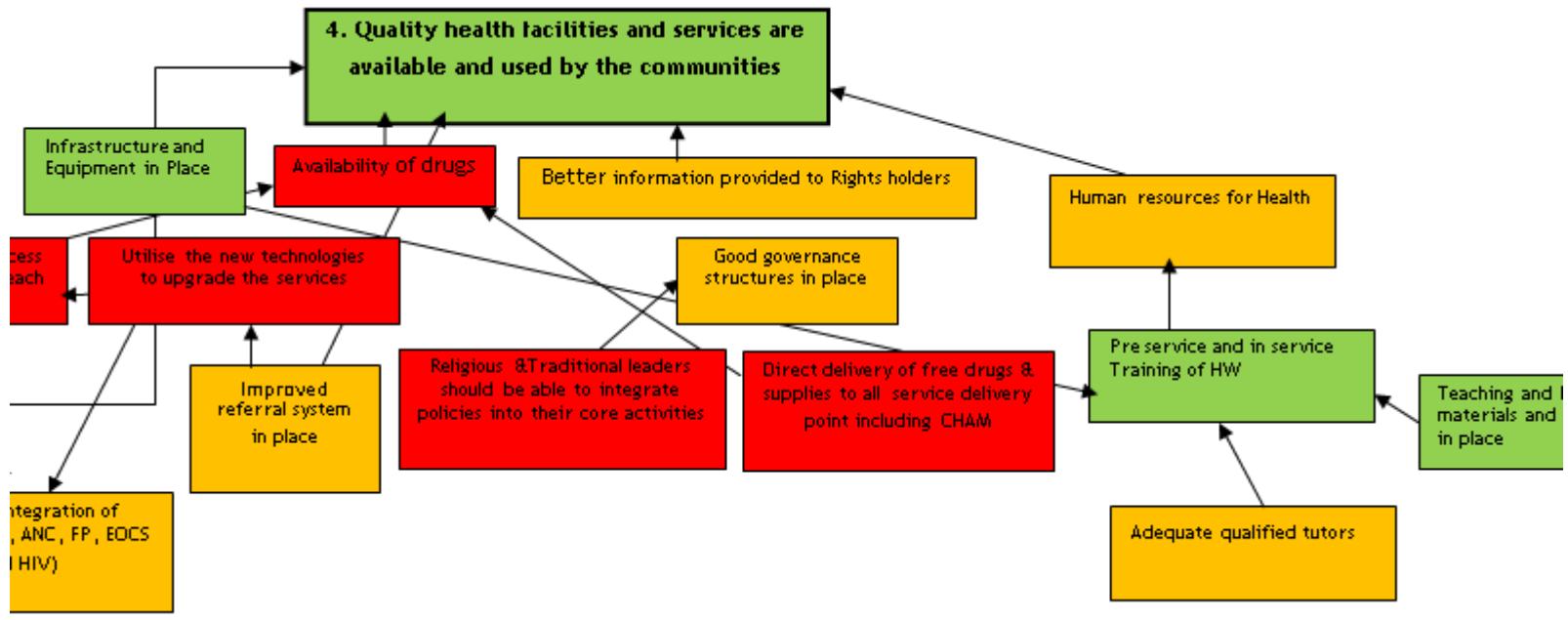


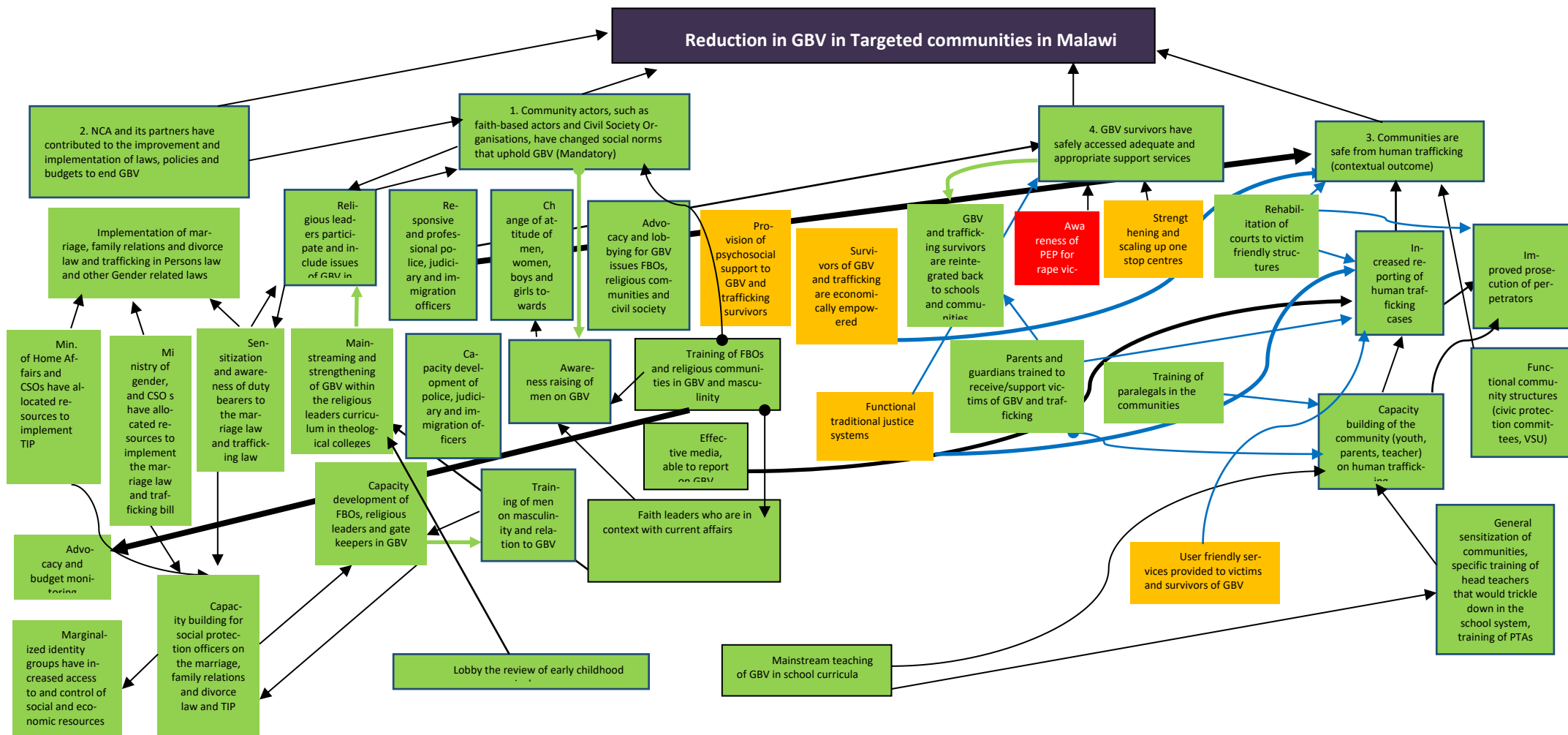
## Reproductive Health



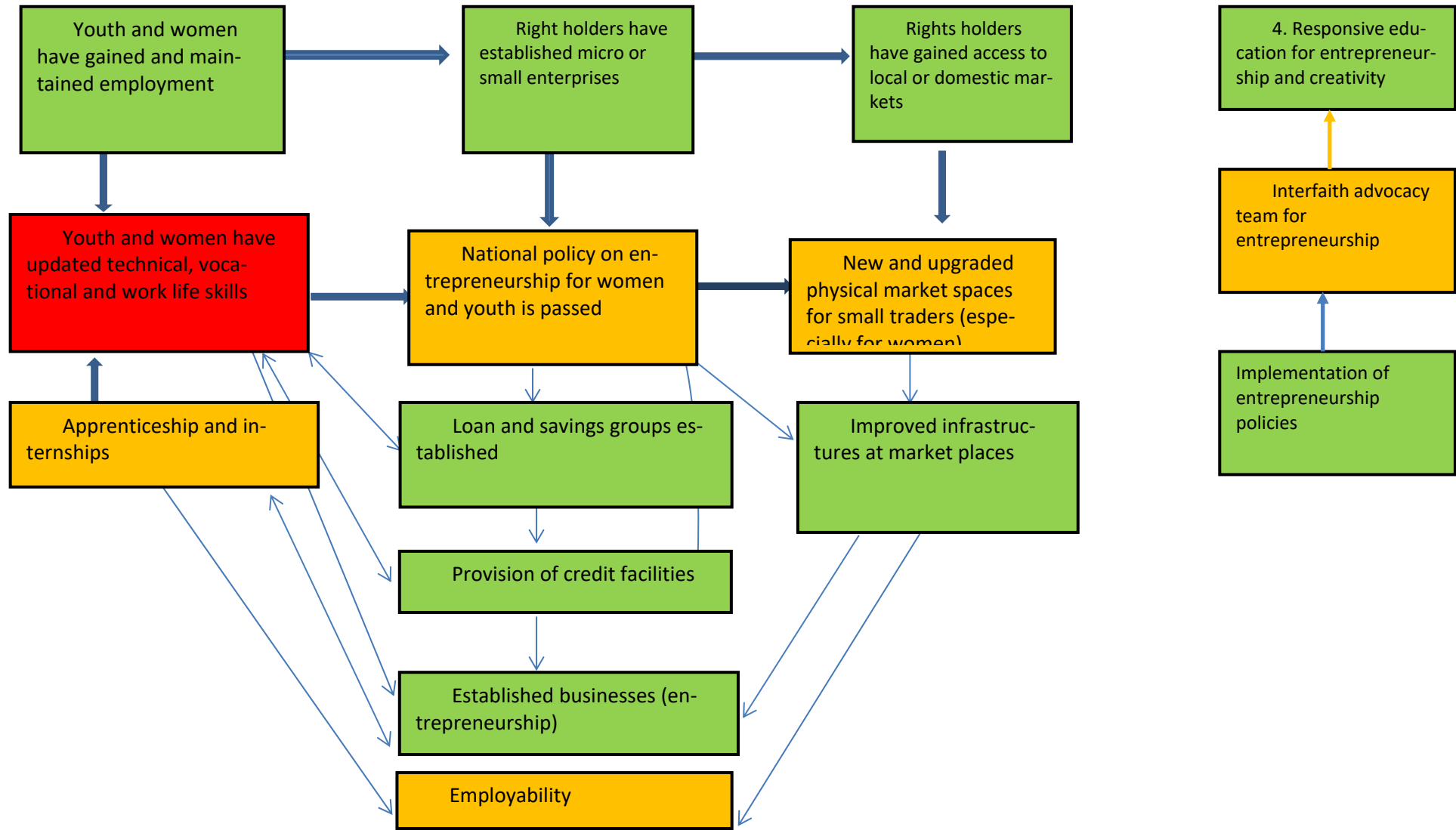








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