

# Malawi Violence Against Women and Girls Prevention and Response Programme

Tithetse Nkhanza Programme's Economic Empowerment model 'Moyo Olemekezeka'

Overview

December 2020

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# 1. Background

Global evidence has found that cash transfers, compounded with social components or combined economic and social empowerment interventions, are the types of economic interventions yielding the most results in terms of reducing violence against women and girls (VAWG) and more specifically intimate partner violence (IPV).

The Tithetse Nkhanza (TN) programme independent baseline report and formative research found that the key challenges to women's economic empowerment were: men's/ husband's controlling behaviour, leading to restrictions on women's movement and the length of time that they are allowed to spend on economic activities; as well as the husbands' control

over the family income. These challenges need to be addressed to enable women to become economically empowered. A core element of economic empowerment is the focus on women's decision-making power on how to earn, use and save income. If a woman has control of her own financial resources, she may then be better able to leave a violent relationship, if she chooses to do so. Therefore, any economic empowerment model implemented needs to specifically address gender inequitable attitudes and behaviours in the household, particularly as they relate to the control over financial resources, whilst also providing a platform to increase the woman's/ household's income.

"Working women who make decisions about household income and expenditure jointly with their husbands / partners are less likely to experience IPV'.

Tithetse Nkhanza Independent Baseline Survey report, 2020

Based on the analysis of the district-level context in addition to global evidence, the TN programme has chosen to adapt the Zindagii Shoista model used in Tajikistan, which was then adapted for Nepal and funded as part of the Foreign, Commonwealth and Development Office's (FCDO) *What Works* programme. This has shown to reduce IPV and improve both women's and men's social and economic status and reduce VAWG. This model used a family-based social empowerment as well as economic empowerment curriculum in addition to income generating activities (IGAs).

## 2. Adaptation Process

Between July and December 2020, the TN programme engaged with Dr Nwabisa Shai from the South African Medical Research Council. In line with best practice, Dr Shai was engaged as she previously worked on the design, adaption and implementation of the South African Stepping Stones and Creating Futures model for Tajikistan, known as Zindagii Shoista (ZS), and then supported its adaptation and evaluation in Nepal. Due to COVID-19, Dr. Shai was unable to travel from South Africa to Malawi to conduct a face-to-face adaptation workshop with key TN team members; instead, she conducted the workshop through a series of virtual meetings. Strong engagement with staff and partners from all three target districts over an extended time period has not only enabled to secure buy-in to the adaptation process from the start, ensuring ownership of the approach, but has also allowed the curriculum to be tailored to the different contextual realities of the districts where it will be implemented.

Six members of the TN programme team participated in 12 online sessions (VAWG Lead, District Coordinators, Grants Officer and Research and Learning Officer), with Technical Adviser Alice Kerr-Wilson who joined for some of the sessions. In addition, staff members from all three of the selected partner organisations also participated in the sessions, including staff from Focus in Karonga, Malawi Human Rights for Women and Girls in Development (MHRWGD) in Lilongwe, and RAC in Mangochi.

The workshop sessions covered the following three areas:

• Initial familiarisation with the Malawian social and economic context and definition of the problem/s needing to be addressed through the adaptation. Discussions were held around a variety of issues, including: differences between the matrilineal and patrilineal family structures; social practices and expectations; patriarchy and its

<sup>&</sup>lt;sup>1</sup> Karonga is Patrilineal, Lilongwe is mixed and Mangochi is matrilineal

influence on violence experienced by women in these contexts; polygamy; child marriage; and the nature of women's economic empowerment.

- Theory of Action (TOA) process. The TOA has an overall goal of reducing IPV by current intimate partners of young
  women in rural areas in Karonga and Mangochi, and peri-urban communities of Lilongwe. ZS sessions that were
  appropriate to achieve this goal were identified.
- **Intervention revision**, which entailed a process of considering each session, adapting for the context and obtaining feedback from TN team and partners. This was an iterative process of reviewing the appropriateness of each session and how it ties in with the objectives listed in the TOA. For example, one session was found to be inappropriate to the Malawian context and was deleted. In addition, the *SASA!* Together session on Power was adapted and integrated into the social empowerment manual, strengthening the coordination between *SASA!* Together and Moyo Olemekezeka, which will be layered through co-location.

### 3. Modules and Content

The new adaptation of Zindagii Shoista ('Living with Dignity') will be known as *Moyo Olemekezeka* ('Living with Dignity' in Chichewa) and consists of **ten sessions** on **social empowerment**, **four sessions** on **economic empowerment** and **eight sessions** on **income generating activities**, for a total of 22 sessions. Each session takes approximately three hours to deliver with each group of participants. Details of each of the sessions are provided below.

Table 1: Overview of Moyo Olemekezeka's sessions

Manual	Sessions	Content	
Manual 1	Social Empowerment	Let's communicate	
	-	<ol><li>Men and women – social expectations versus reality</li></ol>	
		3. Relationships	
		4. Peer group meeting 1	
		5. Family health focused on healthy pregnancy, infertility	
		6. Violence in relationships	
		7. Supporting women experiencing violence in relationships	
		8. Changing behaviours	
		Being assertive and showing appreciation	
		10. Peer group meeting 2	
Manual 2	I 2 Economic Empowerment and Income Generating Activities (IGAs)		
	Module 1: Household focus	Understanding our household inputs and income	
		<ol><li>Our household budget and how we spend money</li></ol>	
		How we can save money and ensure our future	
		Peer group meeting	
	Module 2: IGA focus	Opportunities for IGAs	
		How to initiate IGAs	
		Assessing the markets for IGAs	
		Planning and budgeting IGAs	
		5. Costing and pricing	
		Planning and budgeting IGAs game	
		7. Finalising IGA plans	
		Bookkeeping and marketing	

# 4. Delivery process

#### Overall Timeline for 2021 and 2022

The table below outlines the overall timeline for the delivery of activities as part of the *Moyo Olemekezeka* Programme over 2021 and 2022.

Table 2: Delivery timeline of MO activities

Activities	Timelines
Translation, design and publication of manuals. Training of trainers and selection	January 2021
of 60 families to participate in the programme.	
Roll out of the training for Facilitators and baseline cohort study.	February 2021
Launch of MO pilot with five families.	February-March 2021
22 sessions with the 60 selected families are run over a period of five months,	March to July & April to August
with one session per week. The sessions will be phased in different districts to	2021
allow for lessons learning and sharing of information and experiences from the	
other sessions.	
Post-curriculum cohort study (midline).	August 2021
IGAs are implemented by the selected families over a period of nine months.	August 2021 to April 2022 &
	September 2021 to May 2022
Endline cohort study.	June-July 2022

#### Finalisation of the manuals

The manuals are currently undergoing a final review by TN Technical Advisers responsible for disability inclusion to ensure they reflect the programme's key GESI commitments. Although the programme has engaged a specific partner with expertise on disability inclusion (MHRWGD) and their staff have participated in the adaptation process from the start, this is a new approach for them, so additional expertise was required. Following FCDO's approval of the approach, the manuals – once finalised in English – will be translated into Chichewa, then designed and printed in January 2021.

#### **Training of Trainers**

In January 2021, depending on travel restrictions related to COVID-19, Dr. Shai will travel to Lilongwe to conduct a three-to four-day Training of Trainers which will involve the three partner organisations and TN intervention planning team at a location to be determined by TN programme. The training will be attended by an estimated total of 23 participants, including: six staff members from partner organisations (two from each); five TN team members (VAWG Lead, MEL Officer, three District Coordinators); and, 12 facilitators, who will be recruited by the three partners (four facilitators for each district) with support from the TN team, will also join for some of the sessions.

Through the training, they will be equipped with the knowledge and skills needed to train facilitators and support them through the delivery of the two manuals within the communities. If Dr. Shai is unable to travel due to COVID-19 restrictions, then the VAWG Lead and the Karonga District Coordinator will lead the training with remote support from Dr. Shai and the International VAWG Advisor. To maximise the benefits of Dr. Shai being in Malawi, some of the facilitators may also join part the ToT training, although this will depend on whether the facilitators can be recruited in time and how their levels of understanding and knowledge compare with the staff from partner organisations and TN team members, who have already been involved in the adaptation process.

The intervention in Tajikistan and Nepal also employed business assistants, in addition to the facilitators, to deliver specific sessions on the IGAs, support families to choose and set up IGAs and then monitor outcomes and provide additional support. For the Moyo Olemekezeka intervention, ideally the 12 facilitators will be recruited to have relevant business skills, so that additional business assistants will not be necessary. This will be determined by TN staff and partner organisations in early 2021.

#### **Facilitator training**

Once trained, the 11 TN and partner organisation staff who participated in the training will conduct a two-week training workshop for the 12 facilitators in February 2021. Two facilitators from each partner organisation will be equipped with the facilitation skills and knowledge on topics covered in the manual. These include VAWG prevention and support, communication, economic empowerment and income generating activities. The facilitators will go through the manuals as participants in order to experience the intervention first-hand and enable them to experience how it will be delivered to the families in the communities.

#### **Pilot Phase**

After the training, the 12 facilitators will test their skills among a small group of families (at least five) to develop the experience of conducting the training in a real-life setting. Participants' characteristics must be similar to those of families to be enrolled on the MO programme. Any revisions or adjustments necessary after the training will be incorporated into the manuals.

#### Selection of families

A total of 60 families, 20 from each of the target areas (TAs) in the three districts (Mwakaboko in Karonga; Chinsapo in Lilongwe and Makanjira in Mangochi) will be selected in collaboration with the local partner organisations, TN programme staff based in the districts, e.g. District Coordinators, as well as local authorities. The selection process will be agreed in early January and will be based on specific selection criteria, including some of the poorest families and families where a woman and her intimate partner<sup>2</sup> is able and committed to attend the majority of the sessions. Individuals with a disability will also be prioritised for inclusion. Profiles of the families will be collected to understand the extent to which the intervention will add value. The selection criteria will also consider localities where families live close to one another, to ensure ease of access to workshop venues and convenient support during the IGA implementation.

Previous experience of IPV will not form part of the selection criteria, as this would not be ethical, particularly when there is potential financial gain from participating and also as not many women report experiencing violence. However, it can be assumed that, given the close relationships between poverty and IPV, there are likely to be high levels of violence in some of these households. To ease the process of selecting participating families, the purpose of the intervention will be explained to the selection committee and/ or local authorities in each TA.

Each TA will already be involved in *SASA!* Together community conversations, and the economic empowerment component will be layered on top of *SASA!* Together in the three TAs, ensuring that community norms surrounding the households engaged in MO are also shifting, and supporting household changes in attitudes and behaviour. In Mangochi, we will be working in the target area of Makanjira, where PROSPER is also implementing livelihoods activities, but not their social empowerment model 'Zikomo'. The TN and PROSPER teams have agreed that different households will be targeted in this TA. PROSPER's focus is likely to include single headed households, whereas TN will be working with households containing spouses. TN and PROSPER will share and coordinate workplans and timeframes so that targeted households can also benefit from community-level activities (i.e. *SASA!* Together) run by each other's programmes. TN and PROSPER are also working to collaborate on the Monitoring and Evaluation framework to measure outcomes from the co-location of the programmes.

#### Implementation: Workshops and IGAs

Once the families are selected, the trainers trained and the cohort study baseline research undertaken, it is anticipated that the workshop sessions will run between March and August 2021, and that families will start their IGAs in August and September 2021, running until April and May 2022 respectively. Implementation will be staggered and will commence with 10 families in the first week of March and the next 10 families in the third week of March to ensure that facilitators gain a good footing in delivering the intervention and any teething problems are addressed.

The 12 facilitators will then run weekly sessions of 2.5-3 hours each with the 60 selected families, supported by TN and staff from their respective Implementing Partner NGOs. After the social empowerment and economic empowerment sessions (a total of 14 sessions), the couples will be supported to select IGAs and receive a package of resources relevant to their chosen IGA (e.g. if they chose goat rearing, then they would receive two goats, etc). The IGAs will then continue for around nine months and will be monitored and supported by partner NGOs and TN staff.

<sup>&</sup>lt;sup>2</sup> Husband or partner

### 5. Outcomes

15 months after the end of the project in Tajikstan and 30 months after its commencement, VAWG levels within the families included in the intervention had dropped by 50%, and relationship and gender equality indicators had improved. Significant positive changes were seen for all socioeconomic status indicators as well as significant positive changes for all health measures, including depression scale and suicidality.<sup>3</sup>

It is hoped that similar changes will be recorded in Malawi after the end of this project. In addition to a reduction in the levels of different forms of VAWG, the anticipated results relate to more equitable gender attitudes and reduced controlling behaviours demonstrated by both men and women participating in the intervention, including more supportive attitudes of men towards women's economic activities and women being able to make more informed decisions about economic activities as well as increased earnings and savings by the participating families.

# 6. Monitoring and Evaluation

A cohort study of the families engaged in the Moyo Olemekezeka programme will be conducted, with baseline data collected immediately following the selection of the families to be included in the delivery of the intervention.

The purpose of this study is to understand whether and how the lives of the beneficiaries have changed as a result of the MO intervention; the study will therefore focus on key expected changes in attitudes and practices anticipated in the MO curriculum, and also provide space to explore unexpected changes, both positive and negative. The study will also explore any differences between MO beneficiaries that have and have not directly been targeted by SASA! Deeper Discussions.

The study will adopt a longitudinal cohort qualitative approach with repeated interviews with men and women partners in the 60 families targeted by the MO economic empowerment programme across the three target TAs. Data will be collected: (i) At baseline before the MO EE curriculum starts; (ii) Directly after the completion of the MO Economic Empowerment curriculum; and (iii) 12 months after the end of the intervention. Both members of each couple will be interviewed separately at each interval using a common set of questions.

In addition, regular interviews will be undertaken with MO trainers and field staff and SASA! Together community activists and field staff. This will help gain their perspectives on how the interventions are working individually and in combination, and provide additional insights into implementation experiences that may provide further valuable information on the dynamics of change processes.

### 7. Risks and Limitations

Key risks and/ or limitations related to the roll out of the *Moyo Olemekezeka* Programme are presented below, along with key mitigation strategies put in place to address and/ or reduce the impact of the risks and limitations identified.

Table 3: Key risks or limitations

Risks or limitations	Mitigation Strategy
COVID-19 and the risk of the infection spreading in the	To address this risk, the number of families participating in
target communities.	the training at the same time has been reduced. There will
	be 20 families in each district engaged in the intervention,
	who will be split into two rounds, with 10 families each.
	Additionally, guidance and instructions on physical

<sup>&</sup>lt;sup>3</sup> Mastonshoeva, S et al, 2020, Evaluation of Zindagii Shoista (Living with Dignity), an intervention to prevent violence against women in Tajikistan: impact after 30 months International Alert

	distancing and other COVID-19 related regulations will be provided and observed during the sessions.
Increased tensions/ backlash from families excluded from the programme.	TN and partners will ensure that detailed selection criteria for the participating families are shared and endorsed/bought into from relevant government departments and community leadership.
IGAs that are dependent on farming could be impacted by climate change such as drought during the period of implementation.	TN and partners will conduct a market assessment on IGAs and select those identified as low risk activities, but sustainable in consideration of the implementation period.
Non-commitment of couples to the whole training programme due to long or sporadic/ late working hours, e.g. if they are employed as domestic workers, as waiters in restaurants, cleaners in offices, etc.	At the start of the workshop, TN and partners will make clear the level of commitment needed, monitor any absenteeism and raise it with participants where possible. Further, participants will have to wait until the end of the workshop sessions for the IGAs to start, which may incentivise participation.