

### 2. Diversification and modification of diets

Dietary diversification is very poor in Malawi. The diet is monotonous, predominantly with *nsima* made from maize with vegetables. This lack of diversification is reinforced by inadequate awareness of nutrition issues among policy makers and the general public. There is need to change peoples attitude towards making *nsima* from one type of cereal as it could be made from different starchy foods. Therefore it is important for to diversify diets using other locally available foods.

This will be achieved through community awareness campaigns on nutrition, food and security and nutritional policy, together with campaigns on HIV/AIDS and nutrition. Further, Government will organise short courses for various workers in all districts on the prevention and control of malnutrition, will train senior personnel on food and nutrition, and will review the curricula of extension agents, primary and secondary school teachers in order to incorporate nutrition issues.

### 3. Strengthen institutional capacity

Effective implementation of nutrition interventions requires well co-ordinated efforts from different stakeholders. Currently nutrition activities and research are uncoordinated and have resulted in little impact. In order to address this problem, Government will create a Food and Nutrition Council as a technical machinery to spearhead the implementation and coordination of nutrition activities and research. In particular, it will coordinate relevant research on food and nutrition, monitoring of fortified foods, evaluation of food nutrition programs and establishing sentinel nutrition surveillance system.

## **4.3 Improving the Quality of Life of the Most Vulnerable**

The proposed broad-based growth in Pillar 1 and the inclusive human capital development in Pillar 2 will go a long way in reducing the numbers of the poor. However, it is recognised that there are still going to be some sections of the population that are not going to benefit and will need direct assistance for them to improve their living standards. The overall goal of the third pillar is, therefore, to ensure that the quality of life of the most vulnerable is improved and maintained at an acceptable level by providing moderate support to the transient poor and substantial transfers to the chronically poor.

Malawi has sought to improve the quality of life of the poor in the past in a number of ways. Firstly, Government sought to protect the poor by the use of market-based policies including price controls, price subsidies and minimum wages. Secondly, Government and other development partners, especially NGOs, have also used administered safety nets programmes like nutrition supplements, free food distribution, free input distribution, food or inputs for work and public works programmes to assist the vulnerable and the poor in general. Thirdly Government provided direct assistance and social welfare transfers through the Department of Social Welfare, the Malawi Council for the Handicapped (MACOHA) and the Department of Disaster Preparedness, Relief and Rehabilitation (DDPRR). Finally, the poor have traditionally relied on informal safety nets, such as the extended family.

However, these efforts have faced many problems. Most of the market-based policies were inefficient, fiscally unsustainable and mostly benefited the non-poor and missed the core poor. Consequently, all the market based protection policies, with the exception of minimum wages, were abolished under the economic reforms. The administered programmes were fragmented, uncoordinated and were poorly targeted, suffering from both inclusion and exclusion errors. Direct assistance and social welfare transfers have been small in size and limited in coverage, largely due to financial constraints. The informal safety nets, likewise, have become over stretched and vulnerable to shocks due to increased poverty and the HIV/AIDS scourge. Poverty-stricken extended families and communities are increasingly being put under unbearable pressure, as they take care of HIV-infected chronically sick and AIDS-related orphans.

To deal with these problems, a multi-faceted approach is required. The most vulnerable are broadly defined to include individuals or households affected by disasters; households headed by orphaned children, elderly and single-parents (especially female headed); persons with disabilities; under-five children, lactating and pregnant mothers; orphans in streets, orphanages, foster homes and extended family member households, the unemployed and underemployed in urban areas; the land constrained in rural areas; and technology-constrained small-scale farmers. It is noted, however, that this general categorisation does not mean that all people or households falling under these categories are the most vulnerable. The determining factor is their ability to meet their basic needs. Figure 4.4.1 below presents the safety nets programme on the basis of poverty characteristics.

Figure 4.4.1: Conceptual Framework for Safety Nets

| Characteristics  | Target Group  | Intervention       | Type                     | Outcome               |                     |
|--|---|--------------------|--------------------------|-----------------------|---------------------|
| <p>Chronically (“core”) poor.<br/>No Capacity to generate income</p> <p>↕</p> <p>Transient (“marginal”) poor.<br/>Ability to move out of poverty</p> | Chronically ill<br>Elderly<br>Persons with critical disabilities* | Welfare Transfers  | Welfare Support          | Livelihood Provision  | Poverty Alleviation |
|  | Malnourished under-5s<br>Vulnerable pregnant/lactating mothers    | Targeted Nutrition |                          | Livelihood Protection |                     |
|  | Rural poor with labour<br>Urban poor                              | Public Works       | Productivity Enhancement | Livelihood Promotion  | Poverty Reduction   |
|  | Rural poor with land  | Targeted Inputs    |                          |                       |                     |

\* The group “persons with critical disabilities” includes those persons with disabilities that are unable to create their own income.

In general, the poor with some resources like land and labour require productivity enhancing interventions like targeted inputs and public works as indicated in the bottom half of the figure. Meanwhile, the capacity or resource-constrained poor require welfare support in the form of interventions like targeted nutrition and welfare transfers, as indicated in the top half of the figure. The productivity enhancing interventions generally reduce poverty while the consumption support interventions alleviate poverty.

### 4.3.1 Safety Nets

The overall goal of this pillar is to ensure that the quality of life of the most vulnerable is improved and maintained at an acceptable level by providing social safety nets. These safety nets will consist of productivity enhancing interventions for the transient poor (those within the poorest 30 percent of the population who are capable of moving out of poverty) and substantial welfare transfers to the chronically poor (the poorest 5 to 10 percent of the population).

For each of these types of safety nets, there are common challenges. In particular, the programmes must be designed to ensure good targeting, distribution, co-ordination and management. These challenges are addressed below for each type of safety net:

#### 4.3.1.1 *Productivity Enhancing Interventions*

As highlighted in Pillar 1, low incomes and inaccessibility of input credit have prevented small-holder farmers from increasing their productivity and therefore their incomes. Similarly, the IHS has shown that 81 percent of the poorest 10 percent of households have landholdings of less than 0.5 hectare and most of their cash income is generated from non-agricultural, mainly piecework (*ganyu*). There are therefore two types of productivity enhancing interventions: targeted distribution of inputs for the capital-constrained poor, and public works programmes for the land-constrained poor<sup>29</sup>.

The Targeted Input Programme (TIP) will therefore provide a pack containing open pollinated maize and legume seeds and two types of inorganic fertilizers for a period of three years to identified poor small-holder farmers. This pack is expected to be applied to 0.25 hectare of land. Each targeted household is expected to graduate after three years. The programme will target 340,000 beneficiaries.

Public Works Programmes (PWP) will play a major role in providing alternative sources of income and food for the poorest segments of the population apart from providing long-term benefits to communities through the created socio-economic infrastructure. In essence PWP give a chance to the participants to develop themselves, and be self reliant instead of depending on handouts; especially if the wage income is invested in income-generating activities.

Beneficiary and impact assessments have shown that most of these programmes had positive welfare effects. Some participants of the cash-for-work PWPs have managed to use the cash received under PWP to start up micro-businesses. It has also been established that half-day work schedule give time to labour-constrained households to work in their fields while participating in PWP. Major problems of PWPs are their short-term nature and timing

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<sup>29</sup> The categories “land constrained” and “capital constrained” are not mutually exclusive. Certain households may qualify and benefit from both programmes.

mismatches. The average engagement is 60 days yet most of the core poor who are supposed to benefit from these remain vulnerable for at least half of the year. Secondly, these programmes are not available when they are needed ; that is in the months of December to April.

1. Distribute free inputs to capital constrained poor farmers

Unlike the previous targeted inputs programmes, the packs will be distributed through major retail outlets. For areas not covered by the participating retail chains, non-governmental organizations will be asked to tender for the delivery of the packs. The selected NGOs and the retail chains will be responsible for the procurement and delivery of the packs. The selected beneficiaries will be issued with vouchers that will be exchanged with the packs at the participating retail shops.

The office of the Minister of State Responsible for Poverty Alleviation Programme (MSPAP) will have the overall coordination and management of the programme. Among other responsibilities, MSPAP will design the programme, manage the tendering, and reimburse retailers on the basis of vouchers exchanged at their outlets. District Assemblies are to assist in geographical and beneficiary selection. Communities are to be responsible for the selection of beneficiaries. The Ministry of Agriculture and Irrigation is to work with MSPAP in designing the programme as well as recommending the pack composition and mounting agricultural extension campaigns specific to the recommended pack.

The beneficiaries will be selected using a two-stage selection process. The first is geographical targeting, selecting areas on the basis of food insecurity and vulnerability. The second stage will involve selecting the beneficiary household, using community-based beneficiary selection committees. In designing the guidelines for the selection of beneficiaries, priority will be given to households taking care of orphans, the elderly, chronically sick and dependent persons with disabilities. Finally, public awareness campaigns will be conducted, involving the training of communities, supervisors and field staff, designing and mounting public awareness–building campaigns, and discussing with retailers and NGOs.

## 2. Implement Public Works Programmes for Land-Constrained and Urban Poor

The works to be undertaken include rehabilitation of earth roads, construction of small earth dams and other rainwater harvesting structures, storm water drainage channels, flood protection structures, afforestation and road maintenance. Some of these PWPs will run all year round to provide a continuous source of livelihood for the beneficiaries. The rehabilitation of earth roads works will take advantage of existing designs and capacities of District Roads Improvement and Maintenance Programme (DRIMP). In some cases, small-scale contractors used will be encouraged to employ women as is the case under Community Roads Improvement Maintenance Programme (CRIMP).

The Public Works Programme will generate employment for as many as 250,000 participants<sup>30</sup>. Targeting will be done in two stages. The first stage is geographic areas selection using Vulnerability Assessment and Mapping (VAM) verified by the District Assemblies using TA-level food production assessment. The second level is beneficiary selection, using wages as a self-selection mechanism combined with traditional leaders, project committees and rotational targeting. Public awareness campaigns will also be conducted at community level to encourage voluntary participation, especially amongst women.

Cash is the form of transfer for most of the PWPs. However, others adopt payments-in-kind (mostly maize) and vouchers to maximise food security. Food vouchers will give households freedom to choose when to get their rations since they allow beneficiaries to acquire the food when they need it.

The public works will be carried out by small-scale contractors using labour employed from communities. The selection of the small-scale contractors will be done jointly by MSPAP, District Assemblies and the Community Development Committee. The Community Development Committee will be responsible for the selection of the beneficiaries and the communities are to be responsible for the election of the committee and selection of the public works. National coordination of PWPs will be managed by MSPAP, whilst District

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<sup>30</sup> It should be noted, however, that the proposed PWP is not a guaranteed employment scheme because such a system would require a lot of resources (human and financial). Further, guaranteed employment scheme would require continuous availability of public works through the year and in all parts of the country where the poor are.

Assemblies will be responsible at district level. The role of sectoral ministries and departments will be to assist in the development of the common standards by providing technical specifications and assist in the supervision of the relevant works. All public works projects will be required to implement training and capacity building components to enable the District Assemblies to implement the sub-projects efficiently and effectively.

#### *4.3.1.2 Welfare Support Interventions*

There are two types of welfare transfers: targeted nutrition interventions for malnourished children and vulnerable pregnant and lactating mothers, and direct welfare transfers for the poor who cannot be supported by any of the other three programmes. These include groups like the chronically ill, the elderly and orphans. Persons with disabilities falling in the category of the poor will be considered alongside the other poor depending on their poverty status and capabilities. However, as a group, persons with disabilities will continue to work with institutions like MACOHA that are specifically set up to deal with their needs.

Malnutrition is a key cause of the high infant, child and maternal mortality rates depicted in Chapter 2. Further, nutrition status in a child's early years (from conception to five years) determines in part the child's future potential. This malnutrition is largely attributable to poverty and lack of appropriate diets for children and pregnant and lactating mothers. The provision of nutritious food to these vulnerable groups would assist reduce malnutrition and illnesses and deaths of infants, children and pregnant mothers.

As outlined in Figure 4.4.1, there is a group of people who are unable to fend for themselves and have to rely on others. This group will not be able to take advantage of the other three types of safety nets either because they are unable to work or have no resources. Further, some households and communities are affected by drought and floods, undermining their ability to provide for themselves. Finally, as a result of over-stretched informal safety nets, some individuals (especially orphans) are forced to move to urban centres to beg and live in unhealthy conditions.

1. Implementation of targeted nutrition programmes to malnourished vulnerable groups

The programme will provide nutrition packs<sup>31</sup> to moderately malnourished children and vulnerable pregnant and lactating women and administer therapeutic feeding in nutrition rehabilitation centres to severely malnourished children. Beneficiaries are expected to graduate after five months. In addition, the pilot phase will include the provision of training in basic nutritional behaviour, cultivation of the contents of the pack better weaning practices, and cooking demonstrations.

The nutrition packs, just like inputs packs, will be stocked by retailers and exchanged with the vouchers. For remote areas where retail coverage is inadequate, the procurement and delivery will be tendered out to NGOs or commercial companies for delivery direct to health facilities. Households that qualify for this programme will automatically be assessed for inclusion in the other safety nets programmes.

The children will be selected on the basis of their age and weight. The mothers will be selected on the basis of clinical examination. Key factors in the examination include signs of malnutrition, anaemia, multiplicity of births (twins or triplets) and age (less than 15 years and older than 35 years). Apart from providing food transfers, the programme will also admit severely malnourished children for medical treatment and therapeutic feeding.

2. Provision of direct welfare transfers to the core poor and disaster affected households.

The Targeted Welfare Transfer programme will involve the direct transfer of cash or a cash proxy (retail voucher). Since the programme has not been carried out extensively in Malawi, its implementation will be done on a pilot basis. The programme will be implemented alongside TIP, utilising the community based targeted approach and alongside the Targeted Nutrition Programme. The programme will also use specific support groups such as those for the elderly, orphaned and the chronically ill.

After beneficiaries are identified, cash transfers will be made through District Assemblies. In some cases, the programme will use value-based welfare retail vouchers (flexi-vouchers). To reduce security risk, the vouchers will be both beneficiary and date specific. The value of

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<sup>31</sup> Mothers will be given vouchers that can be exchanged for a pack containing a 10-kg bag of *Likuni Phala*, 10-kg bag of Mgaiwa (unrefined maize flour), 3-kg packet of legume seed, and a packet of vegetable seeds.



transfer will be determined by resource availability and factors such as household monthly food requirements and minimum wage levels<sup>32</sup>.

One of the key institutions for this programme is the District Assemblies. However, implementation will be done by a number of stakeholders. The MSPAP will be responsible for the overall program design, coordination of the piloting, policy support, as well as monitoring and evaluation. District Assemblies are to take over the management of financial resources. In addition, the District Assemblies will assist in the beneficiary selection exercises, delivery of cash/vouchers as well as the redemption of vouchers. The Department of Disaster Preparedness and Rehabilitation will also be strengthened and linked accordingly with its stakeholders. The civil society and other specific support groups will be responsible for distribution of vouchers.

### 3. Improve capacities of support groups

As already seen, the informal safety nets are under strain. However, it is recognised that these safety nets are the best mechanisms for taking care of orphans, the elderly and people with disabilities. Government and other stakeholders will therefore work to strengthen the capacity of families and communities to provide support and protection to orphaned children, the aged and persons with disabilities. Further, the problems faced by the extended family system caring for these vulnerable groups have led to the growth of community-based support groups. The work of these support groups has been recognised as important hence their use under the direct welfare transfers. It is, however, recognised that the capacity of these support groups needs to be strengthened. This will involve training of foster care parents, volunteer counsellors, and home-based carers and committees, and establishing community-based childcare centres.

#### ***4.3.2 Improving Disaster Management***

Malawi is frequently affected by natural disasters and calamities. The Lower Shire has been declared a disaster area a number of times due to floods, which occur almost annually. Other areas, in particular lakeshore areas, are also prone to floods during years of heavy rains as was the case in 2001 when 15 out of the 27 districts were hit by floods. The MPRS therefore recognises the impact of such weather-related calamities on the poor and the need to put in place adequate disaster management measures.

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<sup>32</sup> The value of the transfer is expected to be about US\$83 per beneficiary per annum

Natural disasters like floods and hailstorms destroy crops, livestock, and other infrastructure thereby reducing the poor's productivity and removing their sources of livelihoods. The MPRS recognises that different categories of the poor are affected differently according to their specific production potentials affected by the disaster. It also recognises that for the poor not to be annual victims, disaster management must go further than emergency response. The MPRSP will regard disaster management in a continuum that addresses problems of preparedness, prevention, mitigation, reduction of impact, relief (emergency response), as well as rehabilitation and reconstruction.

### 1. Disaster Preparedness

The strategies under disaster management include the full use of established early warning systems like the Famine Early Warning System (FEWS) and the National Early Warning System (NEWS). This will be done in close collaboration with the Ministry of Agriculture and Irrigation as well as the Meteorological Department. At a regional level disaster preparedness will take advantage of SADC Disaster Management Unit in forecasting weather related calamities, and therefore institute necessary impact mitigation tools. This will also ensure foresight in assessing risks and hazards and coming up with solutions ahead of calamities, as well as identifying the vulnerable groups using VAM.

### 2. Disaster Relief

Disaster victims will also be covered under relief programmes. The DDPRR will continue to prepare Emergency Operation Programmes, which run for 90 days to ensure that disaster victims maintain sustenance while they reconstruct their shelter. On the other hand seed will be provided for *dimba*<sup>33</sup> planting to produce a replacement crop. Alternatively seed will be provided for the next crop production season. Basic necessities of non-food items will also be distributed.

### 3. Rehabilitation and Reconstruction

Disaster victims will also benefit from rehabilitation and reconstruction of destroyed amenities such as boreholes as well as infrastructure such as roads, schools, clinics, and police units. In certain disaster situations, the DDPRR will cooperate with the World Food Programme (WFP) and NGOs to introduce income generating activities as a post-disaster

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<sup>33</sup> A dimba is a small vegetable garden

activity. Other small-scale programmes such as replacement of small livestock like goats, and the Food for Work (FFW) programmes will target poor communities to ensure food security.

Except for disaster preparedness, the strategies under disaster management are in concert with the four main strategies in Pillar 3. Therefore an assessment of the impact of disaster on the livelihoods of the affected individuals, households and areas will be done in terms of the best response. Depending on the assessment, any or a combination of the four safety nets types will be implemented. For example, food distribution will be implemented if food production is affected. Likewise if the disaster requires some rehabilitation of the affected area or if income-generating capacities are reduced, public works programmes will be implemented.

#### **4.4 Good Governance**

Even with the best strategies for pro-poor growth, human capital and safety nets, poverty will not be reduced unless there is development-oriented governance. Good governance in this sense consists of three elements: political will and mindset, security and justice, and responsive and effective public institutions. For example, the technical design of the MPRS will be irrelevant unless there is the political, bureaucratic and popular will to implement it. The poor must also be protected from crime, violence, arbitrary state power and injustice. Finally, public institutions must be transparent and held accountable (including through checks and balances) so that they are responsive to the needs of the poor and effective in the implementation of the strategies outlined in this paper. The overall objective of Pillar 4 is therefore to ensure that public institutions and systems protect and benefit the poor.

##### ***4.4.1 Political Will and Mindset***

A recurring theme of the MPRS process and other recent consultations has been the problems caused by a lack of political will and wrong mindset. In particular, a consensus is emerging that poverty reduction cannot be achieved without a change in mindset and strong political will. This recognition is in itself a major step forward, since there has in the past been a culture of denial of such problems.

However, the issues of political will and mindset cannot be addressed by bemoaning the decline of work ethics or the dominance of short-term individualism over medium to long-