1. G	General project information		
1.1	Project reference Number	MAL/18/02 – WA	
1.2	Name of organisation	WaterAid	
1.3	Lead partner(s) organisation	WaterAid	
1.4	Project title	Deliver Life to Mothers, Girls and Children in the Southern Region of Malawi	
1.5	Reporting period	From: 01/04/2019 To: 31/03/2020	
1.6	Reporting year	Year 2	
1.7	Project start date	01/10/2018	
1.8	Project end date	31/03/2023	
1.9	Total project budget*	£2,301,368	
1.10	Total funding from Scottish Government*	£1,012,500	
1.11	Provide a brief description of the project's aims, highlighting which of the Sustainable Development Goals (SDGs) your project is working towards? (200 words)	The project seeks to contribute to improved health outcomes for women, adolescent girls and underfive children living in the low income rural and periurban areas of Malawi. This will be achieved through increased access to sustainable water, sanitation and hygiene (WASH) in communities, health care facilities (HCF) and early childhood development centres (ECDC). The project will contribute to achievement of SDG 3 on good health and well-being, SDG 4 on quality education and SDG 6 on availability and sustainable management of water and sanitation for all.	
2 Proi	act progress and result	The 5-year project is being implemented in five Traditional Authorities (TAs); two in Zomba District (Chikowi and Mwambo) and three in Machinga District (Chikwewo, Nyambi and Kawinga) reaching out to 141,000 women, girls and children in Machinga and Zomba Districts.	

2. Project progress and results

Please use this section to give an update on the progress the project has made during this reporting period.

2.1 Provide an update on the progress your project has made over the past 12 months. Use this space to update us on what has gone well and any challenges you have experienced, detailing how you have overcome these. (Max 500 words)

The project continued to make great progress during its second year, with specific successes including:

899 men, 1,106women, 861 boys, 992 girls and 773 under-five children gained access to safe water from 12 boreholes constructed in 12 villages. The project also constructed reticulated water supply systems in 2 health care facilities (HCFs) serving a catchment population of 66,045.

Capacity of 94 female and 68 male members of 14 waterpoint committees (WPCs) has been developed to troubleshoot and perform minor maintenance of water points for sustainability-.

- **18 child friendly sanitation facilities have been constructed in** three early childhood development centers (ECDCs). These will give 279 learners and 49 caregivers access to improved sanitation and a clean and safe learning environment
- **2,270** women and **2,095** men have access to improved sanitation through construction of 837 latrines and **1,735** handwashing facilities following sanitation and hygiene promotion conducted by 40 trained Hygiene Promoters. Additionally, 12 villages await Open Defecation Free (ODF) verification and certification
- **16 female and 27 male healthcare workers** are implementing facility improvement plans at Kawinga and Nyambi health centers having undergone an infection prevention and control (IPC) training.
- **5,641** women and adolescent girls were reached with messages on WASH and maternal neonatal and child health (MNCH) rights. Using skills and knowledge gained, 9 women's action groups (WAGs) engaged duty bearers through interface meetings in 9 village development committees (VDCs) consequently influencing the construction of 13 new and rehabilitation of 24 nonfunctional boreholes in the area by government
- 40 members from departments of Social Welfare, Planning, Health, Members of Parliament, Ward Councillors and Area Development Committees were oriented on WASH, Early Childhood Development (ECD) and MNCH policy frameworks and their roles in their implementation. Following the training they conducted four community interface meetings where they committed to constructing water points, ECDCs and bridges.

A WASH module has been included in the draft national ECD caregivers basic training manual after sharing recommendations from the Appreciative Inquiry study of WASH status in ECDCs with government and ECD Coalition Network.

The project also supported the development and dissemination of a policy brief on sanitation which highlights areas to be prioritized in the National Sanitation Policy review.

The project faced the following challenges during the period under report:

- Absence of specialist positions at WaterAid (Hygiene Behaviour Change (HBC) and Technical Specialists) and departure and death of NICE partner staff delayed implementation of HBC, construction and citizen empowerments activities. The HBC specialist is now in post and is facilitating the HBC package development and hygiene promotion processes. NICE has recruited for one vacant position. The Technical Specialist Position is yet to be filled. An engineering firm has been outsourced to support in the interim.
- Post-elections protests and uncertainty following the disputed May 21
 presidential elections affected availability of government officers to
 support activities under outputs 4 and 5. Continued political uncertainty
 may cause further delays in Year 3.
- Emergence of COVID-19 pandemic led to suspension of pre-testing of the HBC intervention package, policy assessment study findings validation workshop, World Water Day commemoration and project review and reflection.
- Has the focus or plans for delivery changed significantly during the last year? Please highlight what issues or challenges prompted this change and how you anticipate any changes in focus will impact on the previously agreed outcomes (Max 500 words)

During the period under report, the following changes were made to the project plan:

- The project planned to construct sanitation facilities in 2 ECDCs and 2 HCFs. However, with the anticipated potential currency exchange losses resulting from fluctuations of the donor currency within the year, it was decided to defer some construction works to later in the grant life when the cost of delivering the works would be within the planned budget. The project only constructed facilities in 3 ECDCs and none in HCFs. Construction of sanitation facilities for 2 HCFs has been rescheduled to FY2020/2021. Consequently, the project only reached 4,365 people against the planned 5,000 for outcome indicator 1.2.
- Delivery of HBC promotion activities focused on Machinga district only without Zomba as was initially planned. This is because for Machinga, the project scaled up interventions from a previous project targeting HCFs and communities while a new package needed to be developed for ECDCs and surrounding communities in Zomba. This was delayed by:

- Absence of the HBC specialist from January to September 2019. This meant there was no technical guidance to move the process forward. The position had to be advertised twice because WaterAid was unable to identify a suitable person with the right mix of skills during the first round of applications hence the position was readvertised. It should be noted that social behaviour change (SBC) experts are now on high demand as there is a shift in development work to focus on behaviour change as a way of ensuring sustainability. Unfortunately, there are few SBC experts who have been involved in HBC as past hygiene interventions focused on hygiene education.
- Post-election protests led to postponement of the creative workshop on several occasions because the creative team could not travel, and government officers were not available to support HBC intervention development processes. The package was developed however, pretesting coincided with the Covid-19 crisis and will only be done after restrictions are lifted.
- 2.3 Taking into consideration what you have achieved during the last 12 months, along with any challenges you have experienced, please highlight to us what lessons you have learned, and how these will be applied in the project in the *future*. (Max 500 words)

In the process of implementing the outlined activities, the following key lessons have been learnt:

- a. There are several lessons from the emergency of the Covid-19 pandemic:
- Through the Covid-19 crisis, we have traditional approaches for community engagement are no longer possible. Activities are suspended because physical meetings are restricted, and it is unclear how soon it will be possible to resume. As a crisis of this nature is unprecedented, there is the need to explore alternative methods of engagement to ensure project continuity and to structure these within project designs for swift adaptation.
- Before the pandemic, our IPC work has focused on capacity building of healthcare workers to ensure infection prevention and control in health facility settings, however with the pandemic IPC interventions must also target the communities and be integrated with hygiene behaviour change interventions to have greater impact. For instance, now that the public is also using personal protective equipment such as masks, there is need to raise awareness on proper and hygienic usage as well as disposal of the same; and the project must also ensure activities consider all preventive measures to avoid exposing the beneficiaries to harmful conditions.
- Some healthcare workers do not follow the IPC guidelines and adhere to procedures regardless of undergoing the IPC trainings. This is due to weak accountability mechanisms as there are no consequences for not complying. This demonstrates a disconnect between policy and practice. However, through collaboration with Ministry of Health on citizen empowerment efforts, this issue could be addressed.

- The health sector has organized and effective professional and regulatory bodies such as association of nurses and midwives, association of medical doctors, Nurses council and the medical council which if engaged would be strategic allies to this project's advocacy agenda on improving WASH status for HCFs across the country.
 - b. Beyond being an entry point to communities and supporting sustainability of interventions, Ward Councillors and Members of Parliament (MP) have facilitated achievement of wider geographic reach in the districts. This is of value in a resource constrained setting where demand for development assistance is also high. Councillors and MPs have used their experience in the project to serve other areas. For example, the MP of Machinga East constituency has influenced the district council to allocate funding for the construction and rehabilitation of community boreholes in villages across her constituency. This further demonstrates the importance of complementing WASH service delivery with a system strengthening approach to achieve scale.
 - c. Involvement of the Ministry of Finance, Economic Planning and Development is key in monitoring non-governmental organizations and ensuring accountability of grant holders to the Malawian Public. However, there is need to appraise officials from the department on the scope of the project to ensure they can conduct comprehensive performance assessment and provide constructive feedback on the areas for improvements to ensure that projects are having the desired impact on targeted beneficiaries.

3. Partnerships and collaboration

This section allows you to discuss how partnership working is progressing on the project, as well as wider collaboration and sharing of learning.

3.1 Provide an update on how partnership working has gone in the past 12 months. Let us know about any highlights, challenges or changes to roles and responsibilities. (Max 350 words)

There have been good partnerships during the period under report.

WaterAid continues to have positive relations with AMREF and NICE in the delivery of project interventions and to identify and address bottlenecks. Both partners were put on a six-month performance improvement plan due to the following challenges:

- inadequate strategic support to field staff by oversight functions within the partner organizations;
- unavailability of specialist staff to support construction works;
- poor quality and untimely submission of reports.

Implementation of performance improvement plans yielded significant improvements on the quality of reports and pace of implementation by both partners. This has reduced transactions costs and enabled WaterAid staff to have manageable workloads as they focus on technical support and quality assurance.

The collaboration between WaterAid and Mary's Meals progressed well.

The two organizations supported a joint planning meeting and joint monitoring of project activities. Through this collaboration, the project supported modification of kitchens designs to include hygiene facilities that will enable good hygiene practices in handling and preparing food. Implementing partners in the district now have a WhatsApp group for sharing projects updates. Additionally, NICE is complementing efforts of Youth for Development and Productivity (YODEP), Mary's Meals' partner by targeting same groups of teen mothers which it established with WASH and MNCH rights messaging.

The project continues to work closely with Government at the national and district levels who provide policy and technical guidance on implementation of project activities although challenges were experienced during times of political unrest and the Covid-19 pandemic. The department of ECD and Ministry of Health and Population facilitated the trainings on WASH, Health and ECD policy frameworks targeting district council officials and participated in creative process for HBC promotion package for ECDCs.

WaterAid has been collaborating with the Malawi Scotland Partnership (MaSP) in that it co-chairs the WASH thematic strand. Over the past year, WaterAid participated in the annual symposium and has been attending meetings for the central region where members share project progress updates and explore opportunities for collaboration. It also hosted delegates from Ministry of Economic Planning and Development for a project monitoring.

Have any Scotland-based staff visited the project in the past 12 months? Give details including key activities and outputs of these visits.

This financial year, the Scotland-based staff did not visit the project. However, a member of staff from WaterAid's London office accompanied a representative from Scottish Water, which is co-funding the project. The purpose for the visit was to gather communications content which was to be used to promote the Munro Challenge. This is a fundraising initiative by Scottish Water.

Additionally, two project staff from Malawi visited Scotland with the aim of building donor relationships and participating in fundraising activities for the project's match fund. Among other things, the team participated in the following activities: Round table meeting with International Development Minister, made a presentation on project progress at Malawi Cross Party Group in Scottish Parliament with Scotland Malawi Partnership, feedback session with Scottish

Government grant coordination team and filming the second part for WaterAid Munro Challenge promo video as the first part of the video was filmed in Malawi. Through the various engagements in Scotland

- WaterAid team got to know the donor better and clarity on expectations in the delivery of the grant
- WaterAid also established networks with other grants recipients such as The MALDENT Project "oral health for all" being implemented by University of Glasgow and Malawi College of Medicine, which led to WaterAid's involvement in the oral health policy working group meetings as the country is in the process of developing an Oral Health Policy.

A Malawi communications specialist also visited Scotland on WaterAid sponsored trip. During this visit, among other things the member of staff participated in sending appreciation messages to participants in the Munro Challenge and lobbied more people from Scotland to participate in future activities organized under the challenge which is a fundraising event and this year it was in support of this project.

Date of visit Key achievements / outputs of visit Follow-up actions				
Date of VISIT	Rey acmevements / outputs or visit	ronow-up actions		
21 to 27 September 2019	 project has had. Pre-project intervention documentation of existing challenges on WASH in ECDCs and HCFs was compiled for fundraising efforts 	There was a recommendation to work together with the communities to put in place measures to ensure proper management of the WASH facilities provided through this project.		
	launched.			
re pr	ning throughout this ive learning across the re used both internally to far, and how this			
The project generated new knowledge and lear and compiled the findings into learning and advas policy brief- on sanitation "From Commitment to government to prioritize on areas like sector coording ongoing sanitation policy review process and study shared with key stakeholders as printed document national radio and television stations. One notable a WASH module in the national ECD caregiver's manufactured to the state of the state		ocacy documents such Action" which calls nation and leadership in the reports. These were and programmes aired on esult has been inclusion of		

separate Ministry of Water Development which was among the asks in the policy brief.

The studies included:

- i. An appreciative inquiry into the integration of Water Sanitation and Hygiene (WASH) in Early Childhood Development (ECD) including "vulnerability mapping".
- ii. Life cycle cost analysis (LCCA) for WASH infrastructure
- iii. An analysis of the National Budget with focus on allocations for ECD and WASH;
- iv. Consultation process to identify gaps in the outdated National Sanitation Policy of 2008 under review.

Malawi Government is developing Infection Prevention and Control (IPC) and Water, Sanitation and Hygiene (WASH) standards and guidelines for health care facilities with financial and technical support from WaterAid. The prominence of WASH in the IPC WASH standards and guidelines that are being developed is in part a result of WaterAid's influencing through sharing lessons from implementation of WASH interventions in HCFs including interventions under this grant.

To enhance learning among implementing partners, WaterAid conducted two project review meetings targeting all project staff and district council officials. The review sessions offer great opportunity to discuss and share knowledge from studies as well as from implementing partners on any new learning they come across during implementation. A WhatsApp group was also set-up for monitoring, coordination of learning and encouraging good project performance among staff. Through this platform, project staff discuss emerging issues that impact the project and collectively identify solutions without waiting for a special meeting. At community level, partners have been conducting review meetings with the community groups and volunteers to identify areas for improvement in the implementation of the project.

WaterAid is a member of several thematic and technical working groups (TWGs) within the WASH, Health and ECD sectors and is therefore able to utilize TWG meetings to share lessons and experiences from the project and learn from others. Among others, WaterAid Chairs the National Policy and Advocacy TWG under WESNET; is key resource on WASH in HCFs for the Quality Management and Antimicrobial Resistance TWGs; is a member of the National ECD TWG under the MoGCDSW.

WaterAid has a robust programme performance review process which aims at encouraging learning for improved delivery of projects. Three internal quarterly review meetings were conducted where recommendations were generated and have been integrated to improve project implementation. One technical regional meeting for Southern Africa was also conducted to review and share experiences on integration of equity and inclusion and life cycle cost analysis for sustainability with a focus on WASH in HCFs.

	Following the regional meeting, the project provided support to the Mozambique country programme which was in the initial stages of rolling out a WASH in HCFs programme.
3.4 Has the project completed a mid-term project evaluation in the past 12 months (or is one planned for the next 12 months)? Please provide de of the outcome of the evaluation. (Max 500 words)	
	The project did not conduct a mid-term evaluation in the past twelve months. A mid-term evaluation is planned within the next twelve months.
3.5	Please highlight how you are maintaining an awareness of others working in this region, giving details of collaboration, joint working or partnerships with others. (Max 500 words)
	WaterAid entered into strategic collaborations with the Civil Society Education Coalition (CSEC), the Malawi Health Equity Network (MHEN) and WESNET primarily on policy and budget advocacy work. Through this collaboration, WaterAid has contributed to the following achievements:
	Establishment of a separate Ministry for Irrigation and Water Development in line with one of the key asks in a policy brief which WaterAid supported WESNET to develop and disseminate.
	Inclusion of a WASH module in the revised ECD caregivers Basic Training Manual and involvement of WaterAid in the review of the same by MoGCDSW.
	WaterAid is also collaborating with Mary's Meals through co-targeting of ECDCs with WASH and School Feeding Programme. As part of the cotargeting efforts, the two entities have constructed kitchens in ECDCs which have hygiene facilities included for safe and hygienic preparation and handling of food for the learners. Mary's Meals paid for the cost of constructing the kitchens and WaterAid paid the cost of improving the kitchens to include water storage for handwashing facilities, dishwashing and drying areas. This arrangement has helped to maximize usage of the available space, ensure value for money and is more convenient for users.
	WaterAid is collaborating with WASHTED of the University of Malawi's Polytechnic. Following a learning visit to Chikwawa districts where WASHTED is implementing operational research on hygiene family and a learning workshop where WASHTED shared findings from a study on "integration of nutrition and food hygiene", WaterAid has integrated lessons on food handling practices and environmental cleanliness for the play area as part of HBC package that is under development for ECDCs.

WaterAid maintains an awareness of other Scottish Government grantees working in this region through membership in the Malawi Scotland Partnership (MaSP) obtained in April 2018. It participated in MaSP WASH strand meetings where it is the strand led in collaboration with MaSP secretariat. The purpose of the strand meetings is to strengthen coordination of WASH actors within the partnership as this is a new strand. It also attended the Annual Symposium through displaying pavilions and led the WASH strand breakaway session. WaterAid also participated in the 6th Climate Justice Fund II's Project Stakeholders Annual Review Conference and continues to follow progress on water points mapping and making use of the mWater platform. 4. Safeguarding and fraud Please ensure you complete questions 4.1 and 4.2 even if you have no incidents to report. 4.1 Have there been **any** safeguarding incidents, either relating to staff/volunteers or beneficiaries of the Grant or the Project, in the last 12 months? There were no safeguarding incidents witnessed or reported during the last 12 months. 4.2 Have these incidents reported at 4.1 been reported to relevant authorities, and if so, to whom? N/A 4.3 Describe what action has been taken, and highlight any lessons learned. N/A Have there been any incidents in the last 12 months of financial 4.4 mismanagement, theft, fraud etc, either relating to the Grant or the Project or which affects the organisation? One laptop for Machinga District [Redacted] was stolen when robbers broke into his house during the night. The second incident of theft happened at [Redacted] in the same district where a submersible water pump for the solar powered water supply system was stolen at night before the construction works were completed. 4.5 Have these incidents reported at 4.1 been reported to relevant authorities, and if so, to whom? The incidents were reported to Machinga police station for investigation as well as to WaterAid. Describe what action has been taken, and highlight any lessons learned. 4.6

The laptop was insured; therefore, the partner sourced a police report which has been used to make a claim from the insurance company after which a replacement laptop will be procured. While for the water pump, since the contractor had not handed over the infrastructure as completed works, he was still liable to replace the stolen pump and the replacement was done. To avoid a repeat, the security features on the designs have been enhanced and the health centre management committee together with the community was assisted to come up with strategies for ensuring security of the infrastructure.

5. Risk assessment

Have any issues materialised during this reporting period? If so, how were they addressed?

Please refer to risk assessment provided at application stage.

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Assumption	Risk	Action taken	Was this included in the Risk Assessment Table in your application?	
Staff turnover at WaterAid, partners and Government levels remain relatively stable	Project may be affected by disruptions in implementation due to staff turnover or transfers	With the specialists (Hygiene and Technical) transitioning out of the organisation, WaterAid took the following actions: Utilised available expertise within the organization to finalise the formative research on hygiene in readiness for the follow-on activities. Requested support from the Regional Technical Advisor to review the initial designs for sanitation infrastructure and outsourced services of a draftsman who revised the sanitation technical designs for HCFs and ECDCs. Some of the activities were rescheduled to the second half of the year to allow time for the recruitment process for the HBC and Technical Specialists	Yes	
The water aquifer recharge in the	The project may not be able to	The project was unable to drill a borehole at Masenjere	Yes	
targeted	reach the	ECDC due to unavailability of		

communities is adequate for borehole installation and reticulation	delivery may be high	ground water. The following action was taken: Action taken was in consultation with the district council and the concerned community and a decision was made to explore other ECDCs in need where water could be found. The borehole was in the end reallocated to Tiyanjane ECDC where the borehole has been constructed. For all borehole construction, WaterAid holds contractors liable for hydrological surveys. This helps to manage costs and ensure that contractors conduct rigorous hydrogeological surveys before drilling exercises.	
The political environment remains stable	not be able to implement	Political unrest following disputed May 21 presidential elections led to unavailability of government staff to support planned activities, restrictions on staff movement due to safety concerns which delayed activity implementation and led to rescheduling of planned activities. Activities rescheduled include: 4.3 Establishment/ strengthening of feedback mechanisms; 4.5 Conduct periodic reviews of WASH district strategic investment plan; and 5.5 Engagement with budget formulation and review WaterAid will continue to monitor the situation and remain apolitical in its approaches to delivering its work.	Yes

Inflation and currency remain stable	Project may not be able to absorb funds adequately if inflation goes down or project funds may not be adequate to deliver outputs if inflation is higher	As reported at midyear, WaterAid experienced exchange losses because of donor currency fluctuations which- led to higher than planned cost of delivering project activities with an anticipated greater impact on construction works. Considering that the loss was projected before commencement of the construction works, some works were deferred to next financial year with an anticipation that the currency will stabilize and cost of delivering the works would be	Yes
		within the allocated budget.	
Government of Malawi is able to contain/ manage the spread of the corona virus	Travel and gathering restrictions may be applied and may affect delivery of some project activities	WaterAid intends to -develop an acceleration plan to help	No

	on once there is on the situation.	

6. Inclusion & accountability

Thinking specifically about the past 12 months, please use this section to tell us how you are mainstreaming through your project, ensuring that you are aware of and actively working to reach vulnerable and marginalised groups.

Is the project still relevant for the beneficiaries you are working with?

Please highlight how you ensure accountability on the project, ensuring beneficiaries have the opportunity to feedback on the project and influence its development? (max 350 words)

The project is addressing the needs that were identified at project designing stage through a consultative process as follows:

- The project is addressing critical water shortage in targeted communities. This is evidenced by the number of people using the 12 waterpoints constructed this year i.e. 3,819 against the planned 3000 people. This means each borehole is serving more than the recommended standard of 250 people per borehole.
- The project is promoting quality health care for women, children and adolescent girls with their communities accessing essential health services in targeted HCFs. The facilities ensure that health care workers and clients, particularly women in antenatal and postnatal care have privacy, dignity and are not exposed to risky conditions which are a health hazard to them and their babies.
- HBC promotion and infrastructure provision in HCFs and communities is responding to the urgent need for improved WASH services which is critical in the COVID-19 preparedness and response effort. The project is promoting handwashing with soap and infection prevention and control among other behaviours.
- Using rights-based approaches, the project is raising awareness on rights to water, sanitation, health and other related rights, provides spaces to interface with duty-bearers and promotes involvement of citizens in decision making processes on issues that affect them.
- The project is aligned to national and district development priorities on WASH, ECD and MNCH as stipulated in strategic and investment plans. It is also enhancing the capacity of government departments to provide technical guidance and oversight in the implementation of development projects through trainings and organizing regular sector and thematic working group coordination meetings as well as supervision of project activities.
- To ensure accountability to its beneficiaries, the project conducts:

- Spot checks and interactive meetings with community members as part of output verification
- Structured community feedback sessions which allow beneficiaries to rate project performance and their satisfaction with type, quality and approaches used in delivering interventions
- Transparent process for water quality testing and dissemination of results. This inspires confidence in community members and enables them to take part in mitigation measures where required.
- Do you have an awareness of particularly vulnerable or marginalised groups within the community in which your project is working? Please give details on how you are disaggregating data to recognise these groups across the project. (Max 350 words)

The project design integrated vulnerability analysis, awareness raising and implementation of action plans to reduce the vulnerabilities. At baseline the project conducted a Vulnerability Mapping study followed by community-based participatory WASH vulnerabilities analysis by the community members themselves with support from selected volunteers who were trained on how to use participatory vulnerability analysis approach. From both exercises the following vulnerable groups were identified: people with disabilities, the elderly, children (boys and girls), women, people living with HIV and teen mothers. These vulnerable groups are already included in the project's priority target of women, adolescent girls, teen mothers, children and those with disabilities.

Reporting data is disaggregated by women, adolescent girls, men, under-five children and people with disabilities. The deliberate involvement of women, adolescent girls and teen mothers is one sure way of promoting equity and inclusion in the implementation of the project in a male-dominant environment.

How is your project working to actively meet the needs of these vulnerable and marginalised groups, ensuring they are benefiting from the project? Please outline any mechanisms you are using. (Max 350 words)

The main categories of vulnerable groups we are working with are women, adolescent girls, teen mothers, children and people with disabilities. These groups of people have been deliberately targeted with rights messages and mobilized into women action groups (WAGs) to empower them for active participation and amplified voice in social-political life. There is increased active engagement with elected duty bearers on WASH and MNCH issues in the project impact areas. With efforts from WAGs there is improvement in the reception of patients/clients when accessing medical services. The WAGs are also working with teen mothers who dropped out of school to return and still pursue their right to education.

The project is also targeting under five children by ensuring access to critical WASH services which contributes to their development.

The project has ensured involvement and participation of women, adolescent girls and people with disabilities in decision making processes by providing guidance on inclusivity when selecting committees and volunteers that will facilitate community level project activities. This has led to women taking up leadership positions in WPCs, CFs and as hygiene promoters.

The project has developed inclusive designs for WASH infrastructure which have facilities to cater for needs of targeted vulnerable groups i.e. menstrual hygiene management for women and adolescent girls; disability and child friendly latrines, handwashing facilities and waterpoints. The facilities are also constructed in sites that are easily accessible and ensure privacy.

WaterAid is also providing financial and technical support to a network of women in water professional. This is a structure that was established to empower female professionals in a male dominated WASH sector. The project is supporting mentorship and coaching for the leadership for the network to ably manage the membership and drive the advocacy agenda for the network.

Taking into consideration some of the challenges of mainstreaming, please describe any challenges you have faced in reaching vulnerable and marginalised groups, how you have overcome these or plans you have developed to support inclusion on the project. (Max 350 words)

The project is implemented in communities characterised by cultural and religious beliefs that limit participation of women in decision making on issues that affect them, thereby affecting their capacity to speak out for themselves and meaningfully engage in civic spaces; high poverty levels which disproportionately affect women; a culture of silence due to a political history which leads to power imbalances with those in positions of authority; and high illiteracy levels.

Additionally, at professional level, the WASH sector is male dominated. In some instances, the community groups fail to protect rights of the vulnerable and hold those who are infringing those rights accountable due to conflicting cultural norms and stereotypes. For instance, older women can blame girls for being sexually abused by men on account of their dressing, while girls accessing youth friendly reproductive health services are considered promiscuous. Consequently, there are more teen pregnancies and girls dropping out of school. The project is supporting capacity building of these women's groups on rights through coaching, mentorship and exposure so that they understand the rights issues and how to provide the necessary support to the adolescent girls.

Since the project encourages involvement of men as champions of safe motherhood, the project is targeting men in other existing community level local governance structures at and community groups as well as leadership positions such as Village Development Committees, Area Development Committees and Citizen Forums and traditional leaders; orienting them on MNCH issues that affect women and encouraging them to take up the role of champions whilst in their groups.

Through the engagement with Women in Water network, it was realized that most of the leadership have accepted the status quo. As a result, they are unable to drive the agenda for the network. The project is supporting the network leadership to establish alliances and partnerships with other women organizations that have advanced to motivate and mentor each other. The aim is to build confidence in the leadership so that they can ably lead the network.

7. Financial information

This section will be reviewed alongside your budget report, which should be included alongside your narrative and logframe. Please ensure this spreadsheet is completed with both a detailed breakdown of expenditure for this financial year, along with your projected spend for the next financial year.

Please note carry-over of funds to the next financial year should have been agreed with the Scottish Government by January 31st of the current financial year.

7.1 With reference to your budget spreadsheet, please give a detailed explanation of any variances between planned and actual expenditure, including reasons for the variances and whether these are because of timing issues, price achieved, quantity etc. If these are temporary variances, please outline plans for expenditure. (Max 500 words)

The annual budget for 19/20 was £245, 510, total expenditure was £190,371.

The project has a total underspend of £55,139 of which £47,172 is delayed underspend and £7,967 is true underspend. The true underspend is for activities that were completed in the second half of the year therefore, anticipation of underspend in January was not possible

The project overspent on three activities with a value of £3,815, which was caused by exchange rate losses for activity 2.1, 3.6 and activity 3.11 where more participants than budgeted took part in the learning visit. This was because the project is working with more community groups in Zomba district and wanted to ensure gender balance of each group. As reported at midyear, an over expenditure was anticipated on activity 2.1 as a result of increased cost of delivering the consultancy work caused by exchange losses.

Running Costs:

No over or underspend to report.

Travel and Subsistence:

£4,090 spent against £6,741. This is delayed spend as most activities requiring staff to travel were cancelled due to post-election protests. The project is requesting to carryover £2,621 to use on the same activities in Year 3.

Output 1:

No activities planned for output 1 during Year 2.

Output 2

£48,761 spent against £64,069 budget. £43 is a true underspend on activity 2.2 due do the fact that the project saved on accommodation costs for the workshop.

£15,265 is delayed underspend as follows:

- Activity 2.3 there is a pending final payment to creative experts. This
 creative process was stopped due to current COVID-19 restrictions.
- Activities 2.4, 2.5 & 2.6 allocated funds were not fully used because the
 project focused its efforts in Machinga District against the initial plan of
 both target districts, as the project was unable to develop and launch the
 hygiene behaviour change package for Zomba district as explained above
 in 2.2.

Output 3

£41,899 spent against £55,073. £1,120 is true underspend on activities 3.1 and 3.7 due to lower cost of consultancy service for activity 3.1. There was cost saving for activity 3.7 as community volunteers facilitated the community-based vulnerability analysis did not incur costs on transportation and meals for the villages they live in.

£12,054 is delayed underspend on **Activities 3.4, 3.5, 3.9 and 3.10** which were partly implemented due to disruptions during the political unrest and protests. We request to carry over delayed spend to continue implementing these activities in Year 3.

Output 4

£5,128 spent against £13,911. £3,199 is a true underspend on activities 4.2 and 4.4. True underspend on activity 4.2 was a cost saving on accommodation as participants from Zomba district travelled to the venue on the same day the workshop started. For activity 4.4 duty bearers engaged during the interface meetings used their own funds to cover transport costs.

£5,584 is delayed underspend on activity 4.5, which was partly implemented due to unavailability of stakeholders to conduct the activity caused by political unrest. Activity 4.3 was not implemented due to the political tensions which slowed government operations. The project is requesting to reschedule the completion of both activities to Year 3

Output 5

£18,337 spent against £30,796. £2,524 is true underspend on activities 5.3, 5.8 and 5.9 as the actual cost of activities was lower than planned.

£9,935 is delayed underspend as follows:

 Activities 5.2 and 5.5 which were not implemented due to disruptions caused by political instability. We requested to reschedule activity 5.2 at

- mid-year reporting and would like to carry over the delayed spend to use on the same activities in Year 3.
- Activities 5.4, 5.6, and 5.7 spend was less than planned because policy review processes stalled and national commemorative events for World Water Day and World Toilet Day were cancelled. The project is requesting to carryover the funds for the same activities in Year 3, as the project plans to continue its engagement in policy review processes as well as participate in more commemoration days to use as platforms for advocating WASH prioritization for ECDCs, HCFs and need to integrate with nutrition among others.

Output 6:

No activities planned under output 6 for Year 2.

Monitoring, Evaluation and Learning

£6,311 spent against £8,081 budget, leaving £1,770 underspend of which £1,713 is delayed spend and £57 is true underspend. Delayed spend is due to cancelled project review meetings and documentation trips due to security reasons during political unrest. The true underspend is a saving on project baseline and vulnerability mapping study as the consultancy fee was less than budgeted amount.

Dissemination:

Dissemination costs were £0 against a budget of £809. This is because the project integrated a community briefing and updating on project progress with other community activities implemented in the year.

Travel and subsistence

True underspend of £30 due to a lower price of airfare.

Staff Costs

True **underspend of £185** as the claimable time spent on the project for Head of Programmes was slightly lower than initially planned.

The project requests approval for the following:

- to carryover the delayed spend amounting to £47,172 for implementation of the same activities in Year 3.
- to ringfence true underspend amounting to £7,967 which may be used to offset future currency exchange losses.
- 7.2 Please give details of any capital expenditure in this reporting period. (Max 350 words)

The grant is not supporting any capital costs in the project.

Please explain how you have worked to ensure cost effectiveness on the project in the past 12 months, whilst maintaining the quality of delivery. (Max 350 words)

The following measures were taken to ensure cost effectiveness:

- The project used a competitive process to procure good and services which ensure quality and value for money.
- Where possible, community-based trainings were conducted in clusters This reduced logistical costs for the facilitators and ensured value for money.
- The project conducted a comprehensive technical assessment of WASH infrastructure in the HCFs and ECDCs. This informed the scope and level of investment basing on the needs identified at each site.
- NICE has a pool of volunteers who are based at community level. The
 project has been working with them from onset of the project. This approach
 is effective for wider outreach with minimal resources as NICE encourages
 the spirit of volunteerism at community level.
- The project invested in strengthening and capacity building of community-based structures through trainings and orientation on project objectives at an early stage. Citizen Forums, Women Action Groups (WAGs), Health Advisory Committees (HACs) and Village Development Committees (VDCs) are supporting project implementation and replicate- what they were trained on across their communities. This ensures that project activities including monitoring of construction works do not only rely on project officers for continued implementation and/or supervision. The community structures the project has supported can monitor construction works and conduct community awareness meetings on citizens' rights to WASH and MNCH.
- Cooperation with other key players at district and national levels also helped in implementing project activities in a cost-effective manner through utilizing expertise within strategically positioned networks at national and district levels. The project managed to obtain support from relevant ministries and government departments at no or low cost while ensuring that activities such as trainings were meeting required standards.
- WaterAid also works in collaboration with the WASH media forum to profile
 the work being done under this project in their programmes and normal
 reporting for those in print media. As a result, no costs were incurred for
 airing project content on their radio and television stations.

8. Any other information

Use this section to tell us any other relevant information regarding your project. (Max 500 words)

The COVID 19 pandemic is anticipated to negatively impact the project. The Malawi government and WaterAid have both put in place restrictions as a way of preventing the spread of the pandemic and protecting project staff and beneficiaries. Among others, there are travel restrictions and a ban on gatherings. This means implementation of most project activities cannot proceed as designed and consequently, project milestones will not be achieved as planned. The activities mostly affected are outputs 1, 3, 4 and 5. A detailed analysis is submitted with this report.

While COVID 19 is a threat to project performance, it also presents an opportunity. Good hygiene practices especially handwashing with soap is a critical preventive measure to the spread of the pandemic. The project is implementing hygiene behaviour change interventions which can be adapted to include messaging on the pandemic. However, we will need to continually monitor the way the project is implemented over the next quarter, especially for activities that involve large groups of people or those requiring close contact. We will discuss with Scottish Government any changes that we think would be needed to accommodate continued implementation of project activities. If a redesign is needed to accommodate these changes, it can be done as part of the finalisation of the package for ECDCs and communities in Zomba.

In Malawi, the government is focusing on community engagements as a way of combating the pandemic because of the inadequate capacity of the health care system to accommodate and ably treat high number of infections. The project can also support the aspect of community involvement considering that it is working with community volunteers that are empowered and are able to ensure community members also exercise responsibility over the rights that they have. This will be done by integrating the government's community engagement processes in existing project activities.

The project is also supporting WASH intervention in HCFs which include infection prevention and control (IPC). During this pandemic there are calls to ensure that IPC procedures and protocols are adhered to as well as to have strong monitoring system to ensure adherence to IPC guidelines. The project plan also includes support to the Ministry of Health and collaboration with the Association on IPC to enforce the use of IPC guidelines. This is work that is already part of the current project design.