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About this paper

This paper presents a synthesis of existing evidence on gender equality, social inclusion and resilience in Malawi, including persisting issues, trends and changes; knowledge and evidence gaps; and policy implementation and capacity gaps. It aims to identify key themes and lessons, as well as potential areas for further research, policy and programming, recognising the need to build intersectional approaches to build resilience to a range of shocks and stresses. The paper aims to inform a wide audience of policy-makers, development practitioners, civil society organisations, think tanks and researchers. The paper has been developed as part of the Building Resilience and Adapting to Climate Change (BRACC) Programme, for which gender equality, social inclusion and intersectionality are core themes. Within the BRACC Programme, the Promoting Sustainable Partnerships for Empowered Resilience (PROSPER) consortium have developed a gender equality and social inclusion analysis report1 and strategy,2 which this paper aims to complement.
EXECUTIVE SUMMARY

Increasing resilience and addressing gender equality and social inclusion (GESI) are central priorities for development in Malawi.

Gender equality is enshrined in the Constitution, which prohibits any discrimination on the basis of ‘race, colour, sex, language, religion, political or other opinion, nationality, ethnic or social origin, disability, property, birth or other status’. Key resilience initiatives in Malawi, including the National Resilience Strategy, recognise the importance of GESI, and the need to consider the vulnerabilities and capacities of disadvantaged groups when designing and implementing programmes. Yet, despite the large volume of acts, policies and plans to promote GESI, and awareness of its importance in resilience, Malawi suffers from considerable gaps in their implementation.

Structural inequalities are deep-rooted and persistent in Malawi and remain a key obstacle to progress on women’s equality and social inclusion.

- Malawi is a highly patriarchal society and gender inequalities are deeply entrenched. This is reflected in women’s engagement in low-income activities and unpaid care, limited ability to engage in decision-making, limited access to resources and assets, higher illiteracy rates, inadequate access to systems and services (including education and healthcare) and high rates of gender-based violence. Polygamy can exacerbate inequalities, while widowhood, divorce, and separation are associated with lower social inclusion.
- People who identify as lesbian, gay, bisexual, transgender, queer or intersex (LGBTQI) face routine violence and discrimination; homosexuality is illegal.
- Children and adolescents’ wellbeing and rights are affected due to lack of education, child labour, initiation rituals, child marriage and adolescent pregnancy.
Older people may lose status, or become more vulnerable due to declining health or mobility, and may be accused of witchcraft, despite traditional respect for elders.¹

People with disabilities (10% of the population) are often viewed through the ‘charity model’, in which they are seen to be given resources, rather than participating in programmes which enable them to work and participate actively in society.⁹, ²

People with albinism (0.8% of the population) experience discrimination fuelled by beliefs that their bones contain magic or gold; and are often targeted for ritual killings or accused of witchcraft.⁹, ¹⁰, ¹¹

People living with HIV still face discrimination, despite significant progress in access to and use of antiretroviral treatment.¹

Knowledge and evidence gaps, with recommendations for policy-makers and development practitioners

There are several knowledge and evidence gaps in relation to GESI and resilience in Malawi, which require further attention. This includes lack of understanding of the different needs, priorities, vulnerabilities and capacities of different groups to manage a range of shocks and stresses, and a lack of progress in addressing and unpacking the root causes of vulnerability and inequality within society.

Greater recognition is required in resilience policy and programming of how intersecting dimensions of social identity influence people's vulnerability and capacity in the face of exposure to a range of shocks and stresses in Malawi. There is a need for greater understanding of how social identities (such as sex, age, economic status, religion, ethnicity, (dis)ability and geography) intersect and influence people's wellbeing, needs and capacities to manage risks related to a range of shocks and stresses. Policies and programmes can take an intersectional approach by assessing how these many factors shape people's needs for systems and services and their ability to contribute to resilient solutions.

Meaningful inclusion of people with disabilities and older people will require moving away from charity-based models that treat people purely as beneficiaries. Policy-makers and development practitioners need to advocate for the inclusion of people with disabilities and older people in the design and delivery of resilience-building policies and programmes.

Greater learning is required on the barriers that prevent women's economic empowerment and the entry points for change. Policy-makers and development practitioners need to expand the livelihood options and income-generating activities available to women and disadvantaged groups. This includes addressing the additional barriers women face due to unpaid care work and limited access to productive resources.

Policy implementation and capacity gaps, with recommendations for policy-makers and development practitioners

There are numerous policies, programmes and plans which aim to enhance GESI and resilience in Malawi, however, implementation of these policies varies considerably. This is due to limited domestic gender-responsive budgets, policy incoherence and lack of coordination across sectors and scales, as well as a lack of understanding of gender and how to integrate GESI effectively into resilience policies and programming. The policy implementation gap reflects the challenges of mainstreaming a cross-cutting issue across multiple sectors, and implementing it through the vertical governance structures to district level and beyond.
Harmful socio-cultural practices and discriminatory social norms continue to disadvantage women and marginalised groups and are critical barriers to achieving inclusive adaptation and resilience policy and programming. There is good knowledge of culturally-sensitive approaches to address harmful social norms in Malawi that policy-makers and development practitioners can leverage within resilience and adaptation policy and programming. Religious/traditional leaders are key to challenging harmful and negative norms. Working with GESI champions and engaging men, boys, girls and religious/traditional leaders are essential for ensuring equal opportunities for the participation of women and disadvantaged groups in resilience interventions.

Despite efforts to increase the participation of women and disadvantaged groups in decision-making and leadership roles, progress has been limited. Continuing to challenge the overt bias and gender stereotypes embedded within Malawi’s patriarchal society is crucial. Policy-makers and development practitioners should aim to promote social cohesion and solidarity, build women’s confidence and involve women in the planning, design and implementation of programmes, alongside sensitisation programmes with men and boys, to help accelerate progress.

Malawi has numerous policies in place which aim to enhance GESI, however implementation of these policies is limited. While improving data collection, gender analysis and awareness of intersecting inequalities are all critical, there is also the need for policy-makers and development practitioners to enhance gender-responsive budgeting, coordination and accountability across sectors and scales.
INTRODUCTION

Achieving GESI are critical components for building a resilient society, and are central priorities for development in Malawi. There are numerous policies and programmes which aim to strengthen GESI and resilience to shocks and stresses. However, implementation remains limited and the potential of women, girls and other marginalised groups in Malawi has not yet been realised.\textsuperscript{12}

Persistent harmful socio-cultural beliefs and practices and discriminatory social norms continue to be strong obstacles to progress on women’s equality and social inclusion. While the need to support escapes from poverty and enhance gender equality are highlighted in numerous policies and programmes, there is limited understanding about the vulnerabilities and capacities of different groups to shocks and stresses, as well as lack of capacity to take an intersectional approach in the design and delivery of resilience policies and programmes.

Malawi faces high levels of gender inequality (ranking 115 out of 156 countries in the 2021 Global Gender Gap Index), which highlights the relative attainment of women and men across a range of health, education, economy and political participation measures.\textsuperscript{13} Recent demographic data from the 2018 Population and Housing Census are provided in Box 1.
Many households in Malawi live in poverty, or are at risk of falling into poverty due to ‘low household incomes, food insecurity related to seasonal patterns of production that are rainfall dependent, and low ownership of productive assets’. Analysis from Malawi’s fourth Integrated Household Survey 2016/17 (IHS4) reveals that ‘the incidence of moderate poverty using the national poverty line has barely changed between 2010/11 and 2016/17 (50.7% to 51.5%), while ultra-poverty, as measured using a food poverty line, has declined from 24.5% to 20.1% over the same period (NSO and World Bank 2018)’. Data from 2010–13 (Figure 1) show that urban areas have more non-poor households and are less chronically poor than rural areas, while rural areas saw more escapes from poverty.

**Figure 1: Poverty trajectories in rural and urban areas (2010-2013)**

<table>
<thead>
<tr>
<th></th>
<th>Non-poor</th>
<th>Escapes</th>
<th>Descents</th>
<th>Chronic poor</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Urban</strong></td>
<td>100%</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td><strong>Rural</strong></td>
<td>90%</td>
<td>10%</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>

Source: Analysis of Malawi IHPS (N=1,720 households)

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A As measured using the Cost of Basic Needs approach.
This discussion paper considers gender equality, social inclusion and resilience in Malawi:

- **Section 2** provides a summary of the relevant policies on GESI and resilience in Malawi.
- **Section 3** looks at persisting issues, trends and changes around GESI and resilience in Malawi, which includes gendered norms, roles and responsibilities; access to systems and services; access to livelihood options and income generating activities; participation in decision-making; and what inequality means for resilience to shocks and stresses.
- **Section 4** looks at knowledge and evidence gaps around GESI and resilience in Malawi, which includes understanding intersecting inequalities in Malawi and how these influence vulnerability, capacity and exposure to a range of shocks and stresses; the need to promote the inclusion of people with disabilities and older people in resilience-building policies and programmes; and addressing the barriers and identifying entry points for advancing women’s economic empowerment.
- **Section 5** considers the policy implementation and capacity gaps for GESI in adaptation and resilience policy and programming, which includes persistent discriminatory socio-cultural beliefs and practices which prevent GESI progress; limited participation of women and disadvantaged groups in decision-making and community planning; lack of disaggregated data and systematic monitoring and evaluation; lack of clearly articulated roles, responsibilities and coordination mechanisms; the need for socially inclusive and gender-responsive budgeting; and lack of integration of GESI in resilience policies and programmes.
- **Section 6** concludes and provides recommendations, particularly for policy makers, development practitioners and researchers to advance GESI in resilience policy and programming in Malawi.
Gender equality is included as one of the fundamental principles of national policies in the Constitution of the Republic of Malawi (Section 13a) which is:

“To obtain equality for women through (a) full participation in all spheres of Malawian society on the basis of equality; (b) the implementation of the principles of non-discrimination and such other measures as may be required; and (c) the implementation of policies to address social issues such as domestic violence, security of the person, lack of maternity benefits, economic exploitation, and rights to property”.

Section 24 of the Constitution prohibits any discrimination on the basis of ‘race, colour, sex, language, religion, political or other opinion, nationality, ethnic or social origin, disability, property, birth or other status’. In 2013, the Gender Equality Act was passed to ‘promote gender equality, equal integration, influence, empowerment, dignity and opportunities, for men and women in all functions of society, to prohibit and provide redress for sex discrimination, harmful practices and sexual harassment, to provide for public awareness on promotion of gender equality and to provide for connected matters’. Similarly, the National Gender Policy (2015) aims to reduce gender inequality and enhance ‘participation of women, men, girls and boys in socio economic and political development’.
The policy has the following seven objectives:

1. ‘To advocate for increased access, retention and completion to quality education for girls and boys;
2. To ensure women, men, boys and girls sexual and reproductive health rights, and HIV AIDS status are improved;
3. To strengthen gender mainstreaming in all sectors of the economy;
4. To reduce poverty among women and other vulnerable groups (orphans, widows, PLHA [people living with HIV and AIDS], persons with disabilities, the elderly) through economic empowerment;
5. To promote women’s participation in decision-making positions in both politics and public life;
6. To reduce gender-based violence;
7. To strengthen the capacity of the National Gender Machinery’.17

The Gender Policy aims to provide ‘guidelines for mainstreaming gender in various sectors of the economy’ and to ‘strengthen gender mainstreaming and women empowerment at all levels in order to facilitate attainment of gender equality and equity in Malawi’17; as such there is an expectation for other ministries to promote gender equality within their sectoral policies and plans. There are numerous acts, policies and plans which aim to promote GESI; Malawi is also a signatory to multiple related international accords. These are listed in Table 1.

Table 1: Acts, Policies, Plans, Strategies and International Agreements Relevant to GESI in Malawi

<table>
<thead>
<tr>
<th>ACTS</th>
<th>POLICIES</th>
<th>PLANS AND STRATEGIES</th>
<th>INTERNATIONAL AGREEMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Witchcraft Act (1911)</td>
<td></td>
<td>National Youth Policy (2013)</td>
<td></td>
</tr>
</tbody>
</table>

Reducing inequality and building resilience are also central components of the 2030 Agenda for Sustainable Development, to ensure that no one is left behind (Box 2). The associated frameworks are of key relevance to the delivery of Malawi’s policies and programmes that aim to promote GESI and to build a resilient nation.
BOX 2 Reducing inequality and building resilience in the 2030 Agenda for Sustainable Development

The Sustainable Development Goals (SDGs), the Paris Agreement to the United Nations Framework Convention on Climate Change and the Sendai Framework for Disaster Risk Reduction (2015-2030) “recognise the need for participatory approaches that consider different social, economic, political and environmental contexts to help promote ‘relevant socioeconomic and environmental policies and actions’. Nevertheless, continued pressure is required to ensure follow-through and adequate resourcing, and, without more coherence between those agencies working with different groups and within different frameworks, there is a risk that marginalised groups will continue to be left behind. Holistic, cross-sectoral approaches are required, informed by awareness of the interconnectedness and intersectionality of issues and groups”.

MALAWI’S NATIONAL RESILIENCE STRATEGY

Malawi’s National Resilience Strategy (2018–2030) categorises households on a poverty spectrum: Hanging In, Stepping Up, and Stepping Out. The National Resilience Strategy recognises that these poverty groups are ‘not mutually exclusive as households or individuals’ and that ‘intra-household inequities still exist within households with regards to access to food, nutrition, education, and poverty status, even as households accumulate assets and wealth’. Nevertheless, within the poverty spectrum and definitions of these groups, there is no specific reference to different marginalised/disadvantaged groups, or their needs, priorities, vulnerabilities or capacities. The strategy is committed to breaking the cycle of food insecurity in Malawi, poverty reduction and inclusive resilient growth for all. It has four key pillars:

1. resilient agricultural growth;
2. risk reduction, flood control and early warning and response systems;
3. human capacity, livelihoods and social protection; and
4. catchment protection and management. Gender and strengthening women’s empowerment are seen as cross-cutting issues and ‘integral to all pillars’.

The strategy also includes a section on ‘Equity and inclusiveness’ which states that implementation of the National Resilience Strategy

‘shall ensure that all people, irrespective of their geographic location, sex, age, religion, political or other opinion, ethnicity or social origin, disability or other status are resilient to economic and environmental shocks that affect their lives and livelihoods. To be effective, resilience interventions will address age and gender specific needs, vulnerabilities and deprivations, and socio-economic inequities of affected people, and be reflected in their design, implementation, monitoring and reporting. The NRS [National Resilience Strategy] will promote gender equality, including through targeted agricultural interventions for women and vulnerable groups’.

Four key development plans, programmes and policies for which strong coordination and accountability will be required in relation to GESI and resilience are outlined below. (NB These are not exclusive, as GESI should be cross-cutting across all sectors/ministries.)
Vision 2063. Transforming our nation: The Vision 2063 long-term development plan is an opportunity to ensure that a more gender-responsive and inclusive approach is taken across all sectors to support the delivery of Malawi’s ambitious policies around GESI and its commitments to the SDGs. It states that gender inequalities shall

‘be addressed to improve the socio-economic status of people in Malawi by accelerating the pace of inclusive wealth creation. Fundamentally, gender equality will be advanced at all levels through multi-sectoral approaches and the in-depth multi-disciplinary analysis of issues at the household, community and national level … Way before 2063, Malawi shall have eliminated all gender-based discrimination and harmful practices, including gender-based violence and child marriages’.21

‘Enabler 5: Human Capital Development’ of Vision 2063 states that gender transformative approaches will be promoted to ‘reduce gender power imbalances which hinder the economic empowerment of women’ and the delivery of social services and programmes will be enhanced to better ‘target different categories of the poor, marginalized and vulnerable’.21 The plan recognises that people experience ‘compounded and recurring shocks such as natural [hazard-related] disasters, economic crises and pandemics’, and states that

‘the shock sensitivity of the social protection system for the poor, marginalized and vulnerable groups [will be improved to enhance] … their ability to prepare for, cope with and adapt to shocks. This will be done in a manner that protects their well-being; provides sustainable graduation pathways out of extreme poverty; and enhances their economic and social well-being through better earnings, resilient livelihoods and improved schooling outcomes’.21

Unfortunately, Vision 2063 lacks any mention of the Ministry of Gender, Children, Disability and Social Welfare, although it does state that ‘Policies such as the National Gender Policy and laws such as the Gender Equality Act, Marriage, Divorce and Family Relations Act, Deceased Estates (the Wills, Inheritance and Protection) Act, amongst others, as well as relevant and applicable international instruments, shall be implemented and enforced at all levels’.21
**Malawi Growth and Development Strategy (MGDS) III (2017 to 2022):** MGDS III is the ‘medium-term strategy designed to contribute to Malawi’s long-term development aspirations’; the objective of the strategy is to move Malawi to a ‘productive, competitive and resilient nation’.\(^{22}\) MGDS III recognises that progress has been slow around gender equality and the empowerment of women in Malawi: that all the goals from MGDS I and II that were ‘not achieved relate to gender equality’ and that ‘Different sectors need to work together to mainstream issues of gender and inclusiveness and ensure that these goals are attained’.\(^{22}\) MGDS III includes numerous cross-cutting themes for its successful implementation, including ‘gender balance; youth development; empowerment of persons with disability; management of HIV and AIDS and nutrition; environmental management; disaster risk reduction and resilience building; peace, security and good governance’.\(^{22}\)

Two of the goals in MGDS III are to ‘Reduce vulnerability and enhance the resilience of the population to disasters and socio-economic shocks’ and ‘To build an equitable society where opportunity is not defined by sex, age, disability and other vulnerabilities’.\(^{22}\) Both outline medium-term expected outcomes, strategies, actions/activities and the relevant coordinating institutions for delivering these. The latter includes the following expected outcomes: ‘Gender mainstreamed in all sector plans, policies, programmes and development frameworks’; ‘Increased Women and youth representation in all decision structures’; and ‘Effective delivery of social welfare services’, amongst others.\(^{22}\)

**Malawi National Social Support Programme II (MNSSP II):** The National Resilience Strategy has been developed in alignment with MNSSP II (2018 to 2023). The MNSSP II’s mission is to ‘provide and promote productivity-enhancing interventions and welfare support for the poor and vulnerable thereby facilitating the movement of people out of poverty and reducing the vulnerability of those in danger of falling into poverty’.\(^{14}\) It includes many inclusive guiding principles, including a focus on understanding people’s needs from youth to old age; ensuring beneficiaries involvement in programme design and implementation; tackling social exclusion and marginalisation; addressing social, economic and natural vulnerabilities for those exposed to disaster risks; promoting the realisation of human rights and ensuring beneficiaries are targeted in a fair and equitable way.\(^{14}\)

The MNSSP II accounts for multi-dimensional poverty. It also considers different levels of vulnerability (including agricultural, economic, social, health related, demographic and lifecycle vulnerability), which those responsible for implementing the National Resilience Strategy should take into account.

**National Climate Change Management Policy:** Gender, population dynamics and HIV and AIDS are included as cross-cutting issues of the policy, which states it will:

1. ‘mainstream gender and issues affecting the disadvantaged groups into all climate change strategies, plans and programmes.
2. integrate population issues into climate change management in the development agenda through an integrated approach which would reduce poverty, protect natural resources and reduce inequality.
3. incorporate HIV and AIDS as well as gender considerations in all climate change interventions including adaptation, mitigation, capacity building and technology development and transfer’.\(^{23}\)

Similarly, the Implementation, Monitoring and Evaluation Strategy for National Climate Change Management Policy\(^{24}\) outlines a number of priority areas for promoting cross-cutting issues around gender and disadvantaged groups, alongside who is responsible for implementing different objectives and the timeframes for doing so.
3 PERSISTING ISSUES, TRENDS AND CHANGES IN GENDER EQUALITY, SOCIAL INCLUSION AND RESILIENCE

As highlighted above, Malawi is good at differentiating on the basis of poverty and while the country has a lot of gender equality and poverty reduction commitments, there appears to be lack of understanding or recognition of the structural inequalities that exist within society. This means that certain population groups are more likely to find themselves living in poverty and vulnerable to shocks and stresses than others.

This section highlights several areas which are emerging as critical issues in the context of reducing vulnerability and building the resilience of all of society. It starts with a summary of some of the data and trends available for specific marginalised groups.

Gender: Gender inequalities are ‘deeply entrenched within Malawian society, economy and labour market, including agriculture, contributing to keeping people in extreme poverty and rendering them vulnerable to climate-change related shocks, such as periodic floods and droughts’.2 Power inequalities which exist in society impact gender differences in terms of women and men’s expected roles and responsibilities, control over assets and resources, consumption patterns, decision-making power, access to information, systems and services, political participation and ability to engage in income-generating activities.4, 25
These structural inequalities influence people’s experiences and capacity to manage different shocks and stresses, including those influenced by climate change and natural hazards.\(^{19}\)

AfDB highlight how there is lack of awareness by women in Malawi about their ‘social and economic rights, which diminishes their potential to become effective agents for change at the personal, household, and community levels’.\(^4\) Simultaneously, the patriarchal nature of Malawian culture creates power imbalances, and influences the opportunities and options that women and girls have.\(^4\) This can lead to women’s ‘internalised bias’ (or self-doubt) due to the discriminatory environment in which they live,\(^26\) which in turn can affect their self-determination, ambition, practices and behaviours.\(^4\)

In terms of poverty, 57\% of female-headed households are poor compared to 43\% of male-headed households, due to their engagement in low-income activities and unpaid care, limited ability to engage in decision-making, limited access to resources and assets, higher illiteracy rates, and inadequate access to systems and services including education and healthcare.\(^4\) These structural inequalities within society affect women’s development outcomes and their capacity to manage different shocks and stresses. The Afrobarometer survey found that despite widespread support for gender equality, 22\% of Malawian women reported experiencing gender-based discrimination during the previous year – more than twice the proportion of men (9\%).\(^27\) Gendered norms, roles and responsibilities are discussed in more detail in the section below.

**BOX 3 GESI Analysis from the PROSPER Programme in Malawi**

‘Women are 70\% of the agricultural labour force, and produce as much as 80\% of the agricultural produce for consumption and sale, and yet are less likely to be food secure, more likely to be classified as poor or ultra-poor than men, are less likely to own land or have control over household resources, and have few opportunities to access credit. Limited access to land, labour, inputs and credit makes women more likely to engage in low-productivity subsistence agriculture and income generating activities with low returns … Women’s lack of access to and control over assets and resources, as well as their low influence over decision making and their limited agency, make them vulnerable to gender-based violence, including economic violence.’\(^1\)

The Afrobarometer study found that a strong majority of Malawians said ‘women should have the same rights as men to own and inherit land (80\%), to get a job (68\%), and to be elected to political office (72\%)’.\(^27\) However, while support for women’s rights and opportunities is strong among both men and women, in rural as well as urban areas in Malawi, ‘one in three citizens – say gender equality is not yet a reality when it comes to getting a job or owning land, and gender-based discrimination still affects a substantial number of women’.\(^27\)

**LGBTQI**: Homosexuality is illegal in Malawi and consensual same-sex conduct is liable to arrests and prosecutions, with up to 14 years in prison.\(^5\) Sections 153 and 156 of Malawi’s Criminal Code include ‘unnatural offenses’ and ‘indecent practices between males’; which was also extended to women in 2011.\(^6\) People who identify as LGBTQI face

‘routine violence and discrimination [on the basis of their sexual orientation] in almost all aspects of their daily lives. Police often physically assault, arbitrarily arrest and detain them, sometimes without due process or a legal basis, at other times as punishment for simply exercising basic rights, including seeking treatment in health institutions’.\(^6\)
There have been various attempts to decriminalise same-sex relations and to overturn Malawi’s discriminatory laws. However, these have met with resistance and there is still lack of clarity over the legality of arrests and prosecutions of LGBTQI people. This leads to self-censoring behaviour and discrimination, stigma and high-levels of violence and violations of human rights.

**Children and adolescents:** The Child Care, Protection and Justice Act of 2010 defines a ‘child’ as a person below the age of sixteen years. Lack of education, child labour, initiation rituals, child marriage and adolescent pregnancy are some of the key factors affecting children and adolescent’s wellbeing and rights in Malawi, as discussed below:

**Education / adolescent labour:** Malawi’s 2018 Population and Housing Census shows that 81% of those over the age of 5 have attended school. The survey showed that 41% of children between 6–17 years old were not attending school: this includes 24.5% of children of primary school age (6–13 years old) and 82.2% of children of secondary school age (14–17 years old). Family responsibilities, early marriage, adolescent pregnancy and poverty are major reasons for school dropout, and studies have shown that when parents are sick or need additional help, children often have to work to support them. Once married, the rates of adolescent labour increase substantially: in 2015–16, 61% of married women aged 15–19 were employed, compared to 98% of married men.

**Initiation rituals:** The national average for girls taking part in traditional initiation rituals (seen as the transition into adulthood or ‘rites of passage’) is 39%, although the figures vary by region: 65% in the Southern Region, 19% in the Central Region, and 18% in the Northern Region. The national average for boys engaging in initiation rituals is 25%. Some of these practices are highlighted in Box 5 on page 22.

**Child marriage:** In 2015, Malawi had the 9th highest rate of child marriage in the world. While the 2015 Marriage, Divorce and Family Relations Law increased the minimum age of marriage from 15 to 18, the Constitution contains a legal loophole that allows children as young as 15 to marry with parental consent. On average, women get married at the age of 18 while men get married at the age of 23; 47% of women in Malawi marry before they are 18, compared to only 8% of men. Makwemba et al. found that rates of child marriage differ by group, and are higher in rural areas and in matrilineal societies. The reported reasons to marry early include pregnancy, poverty/financial reasons (including the payment of a dowry as an incentive), lack of education/jobs and the desire to become independent.
Adolescent pregnancy. In 2015/16, 29% of women aged 15–19 began childbearing (compared to 26% in 2010 and 35% in 1992). As Table 2 shows, adolescent pregnancy was more common in rural areas and in the Northern and Southern Region; figures increase with age and decrease with levels of education and by wealth quintile. HRW (2014) found that although there is a re-admission policy, young women who have had a child tend not to ‘return to school because of lack of money to pay secondary school fees, lack of child care and the need for them to perform household chores’.

Table 2: Percentage of girls aged 15–19 who have begun childbearing, 2016/17

<table>
<thead>
<tr>
<th>Age</th>
<th>Education</th>
<th>Region</th>
<th>Residence</th>
<th>Wealth quintile</th>
</tr>
</thead>
<tbody>
<tr>
<td>15–17</td>
<td>13.6%</td>
<td>Northern</td>
<td>Urban</td>
<td>Lowest</td>
</tr>
<tr>
<td>18</td>
<td>45.6%</td>
<td>Central</td>
<td>Rural</td>
<td>Second</td>
</tr>
<tr>
<td>19</td>
<td>59.2%</td>
<td>Southern</td>
<td>Middle</td>
<td>Third</td>
</tr>
</tbody>
</table>

Older people – According to Malawi’s 2018 Population and Housing Census, 4% of the population are 65 years or older. One in ten women aged 45–49 is widowed, compared to one in fifty men. While there is an element of traditional respect for elders, this does not always translate into their active engagement or participation in decision-making processes. Molloy highlights how in Malawi older people ‘who may have previously held influence or control may lose those privileges, lose status, and come to be more vulnerable due to declining strength, health, or mobility’. For older people in Malawi, there is a risk of being accused of witchcraft, which may limit their confidence to raise concerns or voice requests in community forums.

People with disabilities – People with disabilities include those who have ‘sensory, physical, psychosocial, intellectual or other impairments that, in interaction with various barriers, prevent them from participating in, or having access to … programmes, services or protection’. Malawi’s 2018 Population and Housing Census results show that in 2018 about 10.4% of the population aged 5 years and older had at least one type of disability, with prevalence slightly higher in women, as indicated in Table 3. Difficulty seeing was the most common disability, followed by difficulty walking/climbing, difficulty hearing, and difficulty speaking. Of those with disabilities, 16% had intellectual difficulties and 8.5% had problems with safe care. In 2015/16, 29% of children aged 2–9 were reported to have at least one ‘functioning problem or disability’. Molloy highlights how in Malawi, people with disabilities are often viewed through the ‘charity model’, in which they are given resources, rather than participating in programmes that require them to work and participate actively in society.

Table 3: Share of Malawians with disabilities

<table>
<thead>
<tr>
<th>Total share of Malawians aged 5 or older with at least one disability</th>
<th>10.4%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men</td>
<td>10%</td>
</tr>
<tr>
<td>Women</td>
<td>11%</td>
</tr>
</tbody>
</table>

Of those with at least one disability, share reporting

- Difficulty seeing 49%
- Difficulty walking/climbing 27%
- Difficulty hearing 24%
- Difficulty speaking 9%

C “Teenage Pregnancy: all pregnancies before the age of 20”
D Persons with disabilities were defined as having difficulties or problems in one or all of the following areas: seeing, hearing, walking/climbing, speaking, intellectual, self-care and other difficulties.
Albinism: In Malawi, people with albinism ‘experience serious and dangerous discrimination which is fuelled in large part by beliefs that their bones contain magic or gold. They are targeted for ritual killings or to sell their bones for ritual practices’,¹⁰ and have also been accused of witchcraft.¹¹ Albinism in Malawi’s 2018 Population and Housing Census came under ‘disability’: the survey found people with albinism made up 0.8% of the population.²⁸

People living with HIV: In 2015–16, 8.8% of people aged 15–49 were infected with HIV (10.8% of women, 6.4% of men). Between the ages of 15–24, the rates were 4.9% of young women and 1% of young men. HIV prevalence is higher in urban areas (14.6%) than in rural areas (7.4%); and there is higher prevalence in the Southern Region (12.8%) than the Northern (5.1%) and Central (5.6%) regions.⁹ There has been significant progress in access and use of antiretroviral treatment, which has changed the perception of HIV/AIDS from terminal to a chronic illness.¹ Nineteen percent of women and 14% of men still have discriminatory attitudes towards people living with HIV. For example, ‘9% of women and 6% of men thought that children living with HIV should not be able to attend school with children who are HIV negative … [and] 16% of women and 12% of men would not buy fresh vegetables from a shopkeeper who has HIV’.⁹

GENDERED NORMS, ROLES AND RESPONSIBILITIES

Malawi has both matrilineal and patrilineal descent systems (see Box 4),⁸ yet it is a highly patriarchal society which includes strong gendered roles and responsibilities, and significant socio-economic, cultural and political inequalities between sexes.¹ Although some experiences vary between regions, women tend to score ‘poorly on development indicators across all sectors and women’s rights are poorly enforced’.¹ Most households in the Southern and Central Region are matrilineal, whilst patrilineal systems are more prevalent in the north and some parts of the south.⁶ In matrilineal societies in Malawi, while women are more likely to be consulted and involved in decision-making, this tends to be around purchases of food and clothing, as opposed to use of assets and natural resources.¹

Due to the patriarchal nature of Malawian society, women are excluded from land ownership, although they are more likely to be consulted on decisions relating to land in matrilineal societies (see pages 24–25).¹ While matrilineal inheritance is common in some areas (including in the north), the 2011 Wills and Inheritance Act is often ‘overridden by social norms and customs’.¹ In order to reduce the risk of livestock and assets being seized from a woman if her husband was to die, a will or informal agreement is required.¹

**BOX 4** Matrilineal and patrilineal descent systems in Malawi

In Malawi, under patrilineal descent systems, land is inherited by male heirs, and women obtain access to land through marriage. Matrilineal systems are the opposite – land is inherited by female heirs, and accessed by men through marriage. However, the fact that women own land under matrilineal systems does not mean that they control decisions about land use; these decisions are often made by their husbands or a maternal uncle. In addition, in some matrilineal communities, the couple may go to live in the husband’s village, due to custom or circumstance. In general, matrilineal systems in which married couples live in the village of the wife’s family – ‘xorilocal’ traditions – provide the strongest land rights for women.³¹
In a study on traditional practices in Malawi, Makwemba et al. found that 60% of marriages are customary (more common in matrilineal than patrilineal societies), 25% are religious, 13% are by reputation/cohabitation and 2% are civil marriages. Customary marriages are relatively less common for more educated and wealthier Malawians, and more prevalent in lower income and less educated groups. In terms of gendered roles and responsibilities, in customary marriages, it is perceived that ‘men are expected to construct houses and provide money and food, while women care for children, prepare meals, wash clothes, and are responsible for sourcing water and firewood. These delineated gender roles are highly policed, with men at risk of being mocked or facing accusations of being “bewitched” if they engage in any activity considered to be ‘women’s work’.

In 2015–16, 30.6% of households were female-headed (see Table 4), an increase from 28% in 2010. Diwakar found that ‘Widowhood, divorce, and separation were associated with lower social inclusion outcomes’ in Malawi due to ‘lower intra-household negotiating power, inequalities and patriarchal norms, and weaker psychological resources’.

Polygamy in some cultures of Malawi exacerbates gender inequalities and can lead to high rates of cultural dominance by men, including sexual violence and threats of divorce or abandonment. This can force women into accepting a submissive position in their homes and communities, limiting their choice, agency and control over assets, resources and decision-making, and their ability to access and claim their human rights. In 2015–16, polygamy was more common in rural areas, among older women, among women with less education, and in lower-earning households (see Table 5); it was most common in the Northern Region, and least common in the Southern Region. Molloy recognises how targeting households and not individuals in resilience programming may disadvantage polygamous households, as the second/third wives are often viewed as being in ‘male-headed’ households, even though in reality they receive little support from their husband; yet they do not qualify for the same support as a single-headed/female-headed household.

Table 4: Household headship in Malawi

<table>
<thead>
<tr>
<th>RESIDENCE</th>
<th>Characteristic</th>
<th>Urban</th>
<th>Rural</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Household headship</td>
<td>Male</td>
<td>75.8%</td>
<td>68.2%</td>
<td>69.4%</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>24.2%</td>
<td>31.8%</td>
<td>30.6%</td>
</tr>
</tbody>
</table>

Table 5: Share of married women reporting having co-wives

<table>
<thead>
<tr>
<th>Age</th>
<th>Education</th>
<th>Region</th>
<th>Residence</th>
<th>Wealth quintile</th>
</tr>
</thead>
<tbody>
<tr>
<td>15–34</td>
<td>No education</td>
<td>Northern</td>
<td>Urban</td>
<td>Lowest</td>
</tr>
<tr>
<td>34–49</td>
<td>Primary</td>
<td>Central</td>
<td>Rural</td>
<td>Second</td>
</tr>
<tr>
<td></td>
<td>Secondary</td>
<td>Southern</td>
<td>Middle</td>
<td></td>
</tr>
<tr>
<td></td>
<td>More than Secondary</td>
<td></td>
<td>Fourth</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Highest</td>
<td></td>
</tr>
</tbody>
</table>
Gender-based violence (GBV) is a ‘serious, prevalent, and deeply entrenched problem in Malawi’ with 41% of all women reporting that they have experienced some form of GBV ‘at least once in their lives’ (Government of Malawi 2014). The 2015/16 Demographic and Health Survey found that 34% of Malawian women (aged 15 and over) have experienced physical violence and 20% have experienced sexual violence. There appears to be a high tolerance for GBV, which is often seen as something that women especially ‘must accept in order to preserve their marriages and the status quo’ (Trocaira, 2017).

Sixteen percent of women and 13% of men believe that a husband is justified in beating his wife for at least one of five specified circumstances (See Figure 2). This rate is higher for women and men in rural areas (18% vs. 14%), than in urban areas (11% vs 9%), and in the Northern Region (25% vs 21%) compared with other regions (where it is less than 17%). AfDB highlights a number of constraints to progress in terms of GBV in Malawi, including limited knowledge of related laws, weak enforcement capacity, poor economic status of women, poor access to justice for survivors of GBV; lack of proper reporting mechanisms, and low female literacy levels.

Figure 2: Attitudes towards wife beating in Malawi

Cultural and traditional practices are strong obstacles to progress on women’s equality and social inclusion, and Malawi has numerous social norms that ‘underpin extreme gender disparities in all aspects of life’. PROSPER’s GESI analysis highlights how harmful traditional practices are common across all districts in Malawi: some of these practices are highlighted in Box 5. Molloy stresses how culture is the primary influence on gender roles and norms, and how addressing these harmful practices is complex and challenging because of the risk of driving these practices further underground (DfID Tithetse Nkhanza, 2020).

Traditional beliefs around witchcraft are still very strong (as discussed above). Accusations around witchcraft, vampirism and witch-hunts (often targeted at children or older women) are common and have resulted in arrests, kidnapping, ostracisation, violence and death.
**Access to Systems and Services**

There are numerous services and systems that are central to a person’s wellbeing, including health, nutrition, water, sanitation, hygiene and education, all of which influence a person’s development outcomes and their capacity to manage a range of shocks and stresses. This section briefly summarizes some of the trends for health and education.

**Health** – Women are ‘more vulnerable to HIV/AIDS and tend to have little control over their reproductive choices, while maternal mortality rates remain high’ (UNICEF, 2014). This is despite great advancements: between 1990–2019, Malawi’s life expectancy at birth increased by 18.2 years; in 2019, the maternal mortality rate was 349 women for 100,000 live births.

The 2015/16 Malawi Demographic and Health Survey found the following:

- **Accessing health-services:** seven out of 10 women reported at least one problem accessing healthcare services (76% of women in rural areas, 56% in urban areas). The most commonly reported problems included “distance to the health facility (56%) … obtaining money to pay for treatment (53%) … not wanting to go alone (30%) or needing to obtain permission to go for treatment (16%)”.

- **Vaccinations:** 76% of children aged 12–23 months had received all basic vaccinations and only 70% had received the basic vaccinations by the age of 12 months.

- **Child nutrition:** 37% of children under age 5 are stunted (short for their age); 3% are wasted (thin for their height); 12% are underweight (thin for their age) and 5% are overweight (heavy for their height). Feeding practices of only 8% of children aged 6–23 months meet the minimum acceptable dietary standards … [63%] of children age 6–59 months and 33% of women aged 15–49 are anaemic … 21% of women aged 15–49 are overweight or obese.
Education – ‘Despite gender parity in enrolment in primary schools, disparities remain at secondary level, girls have poorer educational outcomes than boys, and women have higher rates of illiteracy than men’ (34.1% illiteracy compared to 28.4% respectively) which limits their access to social and financial services. Between the years of 1990–2019, ‘mean years of schooling increased by 2.3 years and expected years of schooling increased by 5.8 years’. In 2019, expected years of schooling were: 11.2 (female) and 11.3 (male); 17.6% of adult women, compared to 26.1% of adult men that had reached at least a secondary level of education.

ACCESS TO LIVELIHOOD OPTIONS AND INCOME-GENERATING ACTIVITIES

Malawi’s Population and Housing Census highlighted that in 2018, 81.5% of the population were employed. In 2015/16, the Afrobarometer survey showed that a strong majority of Malawians said that women and men have an equal chance of getting a paid job (66%), earning an income (62%), and owning or inheriting land (62%). The survey found that more than ‘two-thirds of Malawians support equal rights for women when it comes to getting employment’, with men (31%) and rural residents (31%) ‘slightly more likely to prioritize men in employment than … women (27%) and urban residents (24%)’; those with secondary or post-secondary education showed the highest support for equality. However, Molloy found there are misconceptions in Malawi that ‘women can only gain resources/income through sexual relationships with men. This causes women involved in business to be perceived as promiscuous and subject to gossip, if a woman earns money independently, it is assumed that she has received it from a man in exchange for sex. Additionally, a woman who earns more than her husband is seen to emasculate him. This creates additional barriers to women’s involvement in economic activities’.

A report from 2015 estimates that the gender gap in agricultural productivity in Malawi is $100 million. The difference in agricultural productivity in Malawi – or the ‘unconditional gender gap’ – between male and female farmers, according to the report, constitutes 28% in Malawi. Women continue to have ‘unequal access to key agricultural inputs such as land, labour, knowledge, fertilizer, [crop choice] and improved seeds’. Women are also more likely to grow less valuable staple crops, such as maize and beans, while men tend to grow cash and export-oriented crops, which they control the earnings from. While women and men may work together to grow crops, ‘once the fruits of their labours are sold, women tend to have minimal influence over the resulting cash’; which may dissuade them from engaging in the ‘production of cash crops, as women may not believe that they will see any benefit from their efforts’.

Nevertheless, promoting climate smart agriculture programmes which target women and help to close the gender gap in agricultural productivity – alongside further measures such as enhancing access to land and other resources, and confronting negative social norms in agriculture – have been suggested to help enhance gender equality, improve intergenerational nutrition, education and health outcomes and help lift people out of poverty. Figure 3 outlines the positive changes that could occur by eliminating the 28% unconditional gender gap in agricultural productivity in Malawi (as outlined above).
The estimated positive changes from closing this gender gap

7.3% increase in crop production

$90 million increase in agricultural GDP

$100 million increase in total GDP

238,000 people lifted out of poverty

Unpaid care work – Women’s perceived roles and responsibilities within the home, including reproductive and unpaid domestic activities (such as cooking, cleaning, collecting water and fuel, and caring for dependents including children, people with disabilities and older persons) are time-consuming, rarely valued and severely limit the amount of time women are able to engage in income-earning activities. Surprisingly, in 2019, women’s participation in the labour market was only 8.5% less than men (72.6% of women: 81.1% of men). However, much of this may be unpaid, for instance in 2015/16, 59% of employed married women reported that they were not paid for their work (an increase from 42% in 2010) compared to 26% of men in 2015/16. The Malawi Demographic and Health Survey found that ‘Women age 15–19 and, to lesser extent, women age 45–59 are more likely to not be paid for their work compared with women of other ages’.

Access and ownership over land, natural resources and assets – In Malawi, men tend to take household decisions. Even in matrilineal societies, women are expected to ‘defer to their husbands’ for decisions around land, natural resources and household assets. In 2015/16, the Malawi Demographic and Health Survey found that ‘women have some control over their own cash earnings, with 76% either individually or jointly deciding how their earnings are used [compared to 58% in 2010]. It is most common (47%) for women to decide jointly with their husbands while smaller proportions of women report sole decision making power (28%) or that their husbands control such decisions (24%) [compared to 40% in 2010] … Younger women, women without higher than secondary school education, and women in the lower wealth quintiles are least likely to have control over their earnings. For these women, husbands are more likely to be the sole decision maker’.
The Afrobarometer survey found that eight out of 10 respondents thought ‘women should have the same rights as men to own and inherit land’, (81% of men, 79% of women) although the response was ‘weaker in the Northern Region (72%) than in the Central (83%) and Southern (80%) regions.27 However, in reality, Molloy points out that

‘Limited access to land, labour, inputs and credit limits women’s opportunities to engage in more profitable income-generating activities, resulting in their involvement in low-productivity subsistence agriculture and seasonal labour (‘ganyu’) to make ends meet. Despite providing 70% of the agricultural workforce, traditional attitudes and norms about gender roles in the household restrict women’s household-level decision-making power on the use of cash income. Where women do manage to engage in business and are successful, their husbands usually take control of that business and income. Farming households led by women tend to have lower levels of productivity than farms led by men, due to lower access to quality inputs and agricultural extension support and information, and it is estimated that closing this gap in agricultural productivity could raise 238,000 people out of poverty’.1

In terms of access to village savings and loans, women tend to act as proxies for their husbands, with husbands deciding when to take the loans and how to spend them.1 Moreover, village savings and loans schemes tend not to be guided by baseline and poverty profiles, and coverage ‘remains low, meaning that most deserving women, including those with disabilities may not be fully benefiting’.29

In terms of access to markets, Molloy highlights how

‘women have less ability to travel to markets to buy or sell goods … The barriers that women face are physical; being less likely to own a bicycle, or have money for transportation, or having greater responsibility for caring for children at home, or cultural; as women who travel for business often experience community disapproval and may be perceived as promiscuous’.1
PARTICIPATION IN DECISION-MAKING

Malawi’s patriarchal society means that women remain under-represented in household, community and political decision-making processes. In 2015/16, the Malawi Demographic and Health Survey found that more women participate in making decisions to visit their family or relatives than in making decisions about their own health care or around major household purchases. Women living in urban areas are more likely to participate in decision-making; education and wealth level are also associated with greater decision-making power (see Table 6).

Table 6: Share of women reporting involvement in key decisions

<table>
<thead>
<tr>
<th></th>
<th>Own health care</th>
<th>Major household purchases</th>
<th>Visits to her family or relatives</th>
<th>All three</th>
<th>None</th>
</tr>
</thead>
<tbody>
<tr>
<td>All percent of women reporting decisions are made mainly by the wife, or by the wife and husband jointly</td>
<td>68%</td>
<td>55%</td>
<td>78%</td>
<td>47%</td>
<td>15%</td>
</tr>
<tr>
<td>Residence</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Urban</td>
<td>76.3%</td>
<td>64.6%</td>
<td>85.7%</td>
<td>55.7%</td>
<td>7.7%</td>
</tr>
<tr>
<td>Rural</td>
<td>65.9%</td>
<td>53.6%</td>
<td>76.5%</td>
<td>45.3%</td>
<td>16.6%</td>
</tr>
<tr>
<td>Education</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No education</td>
<td>64.2%</td>
<td>50.8%</td>
<td>73.3%</td>
<td>44%</td>
<td>20%</td>
</tr>
<tr>
<td>Primary</td>
<td>65.2%</td>
<td>52.9%</td>
<td>76.4%</td>
<td>44.1%</td>
<td>16.4%</td>
</tr>
<tr>
<td>Secondary</td>
<td>75.2%</td>
<td>63.5%</td>
<td>85.2%</td>
<td>54.9%</td>
<td>8.7%</td>
</tr>
<tr>
<td>More than secondary</td>
<td>90.8%</td>
<td>83.2%</td>
<td>92.1%</td>
<td>77.2%</td>
<td>3.6%</td>
</tr>
<tr>
<td>Wealth quintile</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lowest</td>
<td>64.5%</td>
<td>51.1%</td>
<td>73.9%</td>
<td>43.9%</td>
<td>19.5%</td>
</tr>
<tr>
<td>Second</td>
<td>64.3%</td>
<td>51.1%</td>
<td>75.6%</td>
<td>43.1%</td>
<td>17.2%</td>
</tr>
<tr>
<td>Middle</td>
<td>66.5%</td>
<td>54.7%</td>
<td>77.1%</td>
<td>45.8%</td>
<td>15.4%</td>
</tr>
<tr>
<td>Fourth</td>
<td>66.1%</td>
<td>55.3%</td>
<td>77.6%</td>
<td>45.1%</td>
<td>15.1%</td>
</tr>
<tr>
<td>Highest</td>
<td>76.1%</td>
<td>64%</td>
<td>85.2%</td>
<td>56.3%</td>
<td>9%</td>
</tr>
</tbody>
</table>

In Malawi, the number of female MPs increased from ‘5.2% in 1994 to 22.3% in 2009’; however, in the 2014 parliamentary elections, the number dropped to 16.7%. Malawi has a target of between 40–60% of women’s representation in parliament (since the 2013 Gender Equality Act), however, in the 2019 elections, only 22.9% of seats in parliament were held by women. Since then, following the 2020 re-election, Malawi’s President Chakwera has appointed ‘women to a record 12 of 31 cabinet positions’, and women now hold 38.7% of the ministerial/deputy ministerial roles in the cabinet. However, there has been strong criticism that women mostly hold deputy roles. Chakwera has said he will aim to ‘increase the number of women who are full ministers’.
In the 2019/20 Afrobarometer survey, 72% of Malawians ‘agree’ or ‘agree very strongly’ that ‘women should have the same chance as men of being elected to public office. This is 11% higher than the results from Afrobarometer’s 2014 survey (61%), although it remains lower than in 2012 (78%). Twenty-five percent of respondents said ‘men make better leaders and should be elected instead of women’. Surprisingly, rural residents were significantly more likely to express support for women’s political leadership than urban residents (74% vs. 59%). The survey results found that ‘Malawian women are less likely than their male counterparts to engage in political activities, such as discussing politics (39% of women vs. 56% of men who do so at least “occasionally”), joining others to raise an issue (23% vs. 28% in the past year), attending a campaign rally (49% vs. 63%), and contacting an MP (5% vs. 15%).’

There are numerous barriers to women’s engagement in decision-making and leadership roles (which tend to be seen as masculine roles due to the patriarchal nature of Malawian society). Kamlongera found that ‘Malawian female politicians believe that women are generally sensitive and emotional; therefore, they lack the capability to evaluate political issues by themselves. Politics is often associated with strength, deceit, and fighting; all associated with men’. The female politicians interviewed for Kamlongera’s study stated ‘how women are considered less capable than men. This view stems from the general observation that most women lack an education’. Another barrier to gender equality in decision-making is the lack of mutual support and what has been termed as the ‘pull-her down syndrome’ among Malawian women (Mkamanga 2000 in Kamlongera). However, it is also important to acknowledge the role that Malawi’s patriarchal society has in encouraging women to compete with each other rather than work together. Kamlongera’s research found that

‘Women were constantly trying to outdo and out-manoeuvre each other instead of working together … [one participant stated] “Culturally, women are like that. They don’t want to facilitate another woman’s advancement. Women are jealous – they feel they would rather be under a man than another woman. Even the women in senior positions have a critical attitude. They always want to see what it is you are doing wrong, rather than right”.’

**BOX 6 PROSPER’s analysis of gender norms in community leadership and decision-making**

‘Although the numbers of women in traditional leadership positions have increased, many chieftaincies still formally or informally exclude women, and decisions made by traditional leaders are often rooted in traditional inequitable gender norms and fail to reflect national legislation on gender equality. While efforts have been made to increase women’s representation in district, TA [Traditional Authorities], and community level governance in recent years, male leadership remains the norm in all districts. Discussions in decision-making are dominated by men, and ideas suggested by women tend to only be taken on board after being reinforced or supported by men. When asked about women in leadership, community members can frequently identify a specific strong woman in their community who sits on various committees. This runs of the risk of moral licensing, whereby the existence of a single ‘exceptional’ woman in a position of influence, may result in women in general being excluded from decision-making (“We have proven that women are not excluded so don’t need to include any other women”), and hints towards a need for gender quotas in district and community level decision making bodies to ensure committees are representative of the communities which they serve.”
WHAT INEQUALITY MEANS FOR RESILIENCE TO SHOCKS AND STRESSES

People who are excluded or marginalised on the basis of their gender, age, ability, race, ethnicity, religion, sexuality, poverty, health status or other factors, tend to be disproportionately affected by shocks and stresses including natural hazards, climate change, pandemics, such as Covid-19, geo-political volatility and financial/economic instability. This is due to the structural inequalities which exist in society, and the different social, economic, cultural, political and environmental contexts in which they live. Those who are marginalised may live in areas highly exposed to natural hazards, in unsafe or informal houses, with limited access to the systems, services, information, assets and resources needed to support their wellbeing and capacity to prepare for, cope with and respond to shocks and stresses. Not only are there gender differences in disaster and climate change impacts in Malawi (for instance 56% of those displaced by the 2015 floods and 59% of those displaced by Cyclone Idai in 2019 were women), but disasters can also exacerbate vulnerabilities and social inequalities that exist within society.

It is essential that different people’s vulnerabilities and capacities are taken into account in the design and implementation of resilience building policies and programmes, to ensure they are inclusive, help to build people’s capacity to manage risks related to a range of different shocks and stresses and do not leave the most marginalised and disadvantaged behind.
4 KNOWLEDGE AND EVIDENCE GAPS

There are several knowledge and evidence gaps in relation to GESI and resilience in Malawi, which require further attention.

As we have seen from the section above, there remains substantial knowledge and evidence gaps around the different needs, priorities, vulnerabilities and capacities of different groups, and a lack of progress in addressing and unpacking the root causes of vulnerability and inequality within society. As such, the three knowledge and evidence gaps addressed in this section cover the need to:

1. understand intersecting inequalities and how these influence vulnerability, capacity and exposure to a range of shocks and stresses;
2. understand and promote the inclusion of people with disabilities and older people in resilience-building policies and programmes;
3. address the barriers and identify entry points for advancing women’s economic empowerment.

The gaps identified and the recommendations made in this section are targeted at policy-makers, development practitioners and, in some cases, researchers.

UNDERSTANDING INTERSECTING INEQUALITIES AND HOW THESE
INFLUENCE VULNERABILITY, CAPACITY AND EXPOSURE TO A RANGE OF SHOCKS AND STRESSES

Supporting escapes from poverty and gender equality are highlighted in numerous policies and programmes, however an intersectional and human rights-based approach to the design and delivery of policies and programmes on resilience and adaptation is lacking. It is important to understand how the underlying vulnerability, exposure and capacity contexts of different groups (on the basis of gender, age, ability, socio-economic status, religion, ethnicity and geography) interact with shocks and stresses.\(^{43}\) While there appears to be information around persisting issues, trends and changes in regards to gender inequality and poverty dynamics, there is much less focus on other marginalised groups or on the intersection of different social identities. Moreover, there is limited information about how tribal, ethnic or language factors influence people’s vulnerability and capacity to respond to shocks and stresses, or to manage the risks they face.

Intersectionality can be defined as: ‘the interaction between gender, race, and other categories of social difference in individual lives, social practices, institutional arrangements, and cultural ideologies and the outcomes of these interactions in terms of power’.\(^{46}\) Intersectional approaches take historical, cultural, social and political contexts into account, recognising that vulnerable and marginalised groups are not homogenous or static, and that different factors will influence people’s ability to prepare for, cope with and respond to shocks and stresses.\(^{47}, 43\) Taking a people-centred and intersectional approach in policy and programming will enable policy-makers and development practitioners to move beyond a ‘one-size-fits-all’ approach, and to understand the trends and dynamics of people living in Malawi in relation to a range of shocks and stresses.\(^{43}\) It will enable these actors to understand how different groups are affected by shocks and during lean seasons,\(^{2}\) based on their social identities and geography, as well as what their self-identified needs, priorities and capacities are in order cope with, respond to and recover from these events. It will also ensure a more nuanced picture of the multiple facets of people’s identities and how differences in vulnerability and ‘adaptive capacities come about, how they are sustained, and what the implications of these are for resilience’.\(^{48}\)

Policy-makers, development practitioners and researchers need to map and track over time what data is available and has been used to capture intersecting factors (such as sex, age, economic status, religion, ethnicity, (dis)ability and geography) and how these shape vulnerabilities, capacities, exposure and influence people’s needs, wellbeing and longer-term development outcomes in Malawi.\(^{43}, 32\) This includes looking at poverty, wellbeing, vulnerability and capacity dynamics and drivers in Malawi, along gendered, age, disability, religious, ethnicity and marginalised group lines, and how these change over time within a multi-hazard context. Such analysis would help provide policy-makers and development practitioners with a better understanding of how different people are affected by shocks and stresses, how they perceive and manage risks, as well as what is needed to build intersectional approaches to reduce vulnerability and build inclusive resilience in Malawi in the immediate to longer-term.

UNDERSTANDING AND PROMOTING THE INCLUSION OF PEOPLE WITH
DISABILITIES AND OLDER PEOPLE IN RESILIENCE-BUILDING POLICIES AND PROGRAMMES

There is limited understanding of the physical, emotional and psycho-social needs, vulnerabilities and capacities of different people with disabilities (including those with chronic health conditions, such as HIV/AIDS) and older people in relation to shocks and stresses in Malawi. As such, there is also limited knowledge among government agencies and development partners about what a package of specific resilience-building interventions for people with disabilities or elderly people could be. Molloy highlights how people with disabilities and older people in Malawi are perceived to be ‘unable to work, and in need of ‘charity’, as opposed to ‘adapting income generating activities to ensure that older people and people with disabilities can meaningfully contribute to their households and communities [which] will build their status as well as their resilience’.2 It is unclear to what extent the Government of Malawi considers the needs and capacities of older people and people with disabilities in the design and implementation of adaptation and resilience policies and programmes, and to what extent they work with and through Older Persons Associations and Organisations for People with Disabilities.

Policy-makers and development practitioners must promote the meaningful inclusion and participation of people who have different impairments, including sensory, physical, psychosocial, intellectual or other, those with chronic health conditions, and older people in resilience-building policies and programmes. The IASC Guidelines on Inclusion of Persons with Disabilities in Humanitarian Action was published in November 2019. There is an opportunity for development partners, Older Persons Associations, Organisations for People with Disabilities and the Government of Malawi to action these guidelines (amongst other relevant humanitarian standards, principles and guidelinesF), and to advocate for positive change around the inclusion of people with disabilities and older people in the design and delivery of resilience-building policies and programmes. Such an approach would help promote principles of equality, participation and non-discrimination, and would help policy-makers and development practitioners ensure that resilience interventions avoid creating new risks for people with disabilities and older people, and that they respond to their needs and priorities within the given context.44

ADDRESSING THE BARRIERS AND IDENTIFYING ENTRY POINTS FOR ADVANCING WOMEN’S ECONOMIC EMPOWERMENT

The National Resilience Strategy recognises that ‘Women’s empowerment and improvements in gender relations have proven impacts on productivity, income generation, diversification, and improved decision making on the use of income and resources to meet household consumption and nutritional needs’.20 Nevertheless, traditional socio-cultural norms in Malawi prevent progress in this area.33 Malawi’s patriarchal culture encourages women to undermine each other and work in competition of each other, as opposed to working in solidarity. Economic empowerment initiatives tend not to take an intersectional approach, and women with disabilities and older women tend to be left behind.39 In order to promote gender equality, the overt bias that ‘women are not sufficiently smart or robust or reliable to take on significant responsibilities’ needs to be challenged and progress made to correct ‘biases about women’s

abilities, goals and needs’. These biases are embedded within a patriarchal society, and limit women and girls’ choices and ambitions, thereby enforcing defined binary gendered roles.

There is a vast literature outlining the factors that constrain women’s economic empowerment in Malawi, which include lack of access and control over natural resources and assets, lack of access to the market and the ‘double’ shift of unpaid work, amongst other (as outlined in section 3). We know that involving men and women in policies and programmes which aim to strengthen women’s economic empowerment can help promote ‘intra-household consensus on changes in household financial management and budgeting’, which can ultimately support women’s engagement in decision-making processes and ownership over those decisions/assets etc. However, there is a lack of systematically documented evidence of how to design programmes that address these barriers and harness opportunities/entry points for positive change.

Women leaders need to ‘work together, and support and inspire other women to move into key positions of power’. Understanding from existing best practice what is needed to promote social cohesion and build women’s confidence to engage in decision-making processes is critical. Researchers and development practitioners could learn from existing programmes and initiatives about how women have been able to meaningfully participate in the planning, design and implementation of women’s economic empowerment programmes, and how best to sensitise men and boys to create positive and long-lasting change in resilience policy and programming.

Many NGOs have carried out women’s empowerment programmes in Malawi. Researchers could consolidate and synthesise the evaluations and learning from these to yield insights into the extent to which they have been successful, in the short, medium and long term, and how this varies between different groups (on the basis of sex, age, ethnicity, religion, disability, socio-economic status, etc). This would be useful to identify what the key entry points or enablers are which could support policymakers and development practitioners to promote pivotal, positive change by identifying what the challenges and constraints have been, and what is required to ensure these changes do no harm and are sustainable. It would also be useful to understand what tools have been used to measure women’s economic empowerment in Malawi, such as the Women’s Empowerment in Agriculture Index, and to what extent these are able to accurately capture the elements of empowerment, as well as obstacles and constraints to achieving progress in this area.
POLICY IMPLEMENTATION AND CAPACITY GAPS

While there is clearly a wide range of policies and plans in place that promote gender equality and resilience in Malawi, the country suffers from considerable gaps in their implementation.1, 49

Policy incoherence and lack of coordination across sectors and scales is a major gap. The sheer number of policies, across different ministries, highlights the challenge of coordination, and there are limited accountability mechanisms in place to support effective and inclusive implementation of resilience policies and programmes. The policy implementation gap reflects the challenges of mainstreaming a cross-cutting issue across multiple sectors, and implementing through the vertical governance structures to district level and beyond.

In the Afrobarometer survey, the majority of Malawians felt that the Government was doing well or fairly well in promoting opportunities and equality for women, however only 50% of respondents felt they had seen any ‘real progress on these issues in recent years’.27 While some policies that aim to promote GESI have more institutional buy-in than others, gender discrimination is deeply rooted within society. There are also ‘misconceptions and misunderstanding’ around the meaning of gender, as highlighted in the 2015 Gender Policy.17 The term is often limited to binary categories and used mistakenly to refer to people of male or female sex, or used to discuss women, as opposed to recognising the different gender identities that exist.28 Research is required to understand why increased knowledge on the nature of gender inequality has not led to more progress on gender equality, and what is needed to
ensure progress is achieved at different scales in resilience policy and programming. Improving gender analysis and awareness of intersecting inequalities and how these influence people’s vulnerability, capacity and exposure to shocks and stresses is critical for resilience policies and programmes. Yet, there is also a need to promote gender-responsive policies, budgeting and accountability across sectors and scales, and concerted and coordinated effort is required to mainstream GESI considerations across ministries to ensure that all policies and interventions don’t just pay lip-service to equality, but that they are gender-responsive and socially inclusive.

There are numerous reasons why advancements in GESI in adaptation and resilience policy and programming have not been realised in Malawi, as outlined in the remainder of this section. These include:

1. persistent discriminatory socio-cultural beliefs and practices which prevent progress on women’s equality and social inclusion;
2. limited participation of women and disadvantaged groups in decision-making and community planning;
3. lack of disaggregated data and systematic monitoring and evaluation;
4. lack of clearly articulated roles, responsibilities and coordination mechanisms;
5. the need for socially inclusive and gender-responsive budgeting;
6. lack of integration of GESI in resilience policies and programmes.

The gaps and the recommendations made in the sections are targeted at policy-makers, development practitioners and in some cases researchers.

PERSISTENT DISCRIMINATORY SOCIO-CULTURAL BELIEFS AND PRACTICES WHICH PREVENT PROGRESS ON WOMEN’S EQUALITY AND SOCIAL INCLUSION

As Section 3 outlined, Malawi has many persistent harmful socio-cultural beliefs and practices and discriminatory social norms which continue to be strong obstacles to progress on GESI, and even the ‘most progressive gender laws are not usually enforced’. This is due to limited capacity and finances, and ‘inadequate dissemination of laws, leading to limited knowledge’ and enforcement of these policies at different scales. More needs to be done to build the capacity of policy-makers and development practitioners to understand and tackle discriminatory socio-cultural beliefs and practices which prevent progress on GESI in resilience policy and programming.

Tackling harmful gender and social norms and removing often intangible socio-cultural barriers to GESI is critical for inclusive resilience policies and programming. Policy-makers and development practitioners must ensure attempts to tackle harmful norms are done in a culturally sensitive way, so as not to exacerbate discriminatory behaviours or push harmful practices further underground (DFID Tithetse Nkhanza, 2020).

‘Processes of norm change are highly context-specific, complex and non-linear. Key drivers include changes in economic well-being; social and political collective mobilisation, including community dialogue; changes in support for groups traditionally holding power; increased access to media and communications challenging discriminatory norms; legal change; education; role models; and broader changes such as urbanisation and demographic or economic change’ (Marcus and Harper, 2014).
Development practitioners could engage men, adolescent boys and girls and religious/traditional leaders in interventions and strategies to help challenge and ‘break entrenched and discriminatory social norms passed down between generations’, and help enhance the voice, choice and agency of women and disadvantaged groups in all aspects of society. Development practitioners should work hard to ensure that ‘women and men in households are sensitised on the processes and possible consequences of any proposed intervention’ and its benefits in terms of taking a GESI approach. This could help enhance understanding about these negative practices and generate a supportive environment for women’s engagement and meaningful participation within resilience-building interventions.

Action research programmes in Malawi could focus on the underlying gender dynamics and traditional practices which influence negative behaviours in Malawi and identify areas where positive change may have previously emerged. It is important to recognise that there are various ongoing NGO/government/UN/donor efforts in Malawi that aim to address discriminatory norms, and there are also several traditional leaders who are championing gender equality and attempting to challenge negative socio-cultural traditions. Development practitioners should work with these GESI champions, including traditional and religious leaders who are key to challenging harmful/negative norms, to learn more about what they are doing, what is working and to what extent development partners may be able to support these initiatives. This could include organising exchange visits and linking up with appropriate district offers to promote good practice and longer-term and inclusive resilience interventions.

Development partners should also work with the media to ensure they are not perpetuating discrimination against women/marginalised groups or exacerbating gender stereotyping/prejudices. Training and guidelines to support journalists to report in a more gender-responsive, representative and socially inclusive way is crucial. This could help to reduce discrimination, enhance equal representation and support behavioural change around GESI.

LIMITED PARTICIPATION OF WOMEN AND DISADVANTAGED GROUPS IN DECISION-MAKING AND COMMUNITY PLANNING

As section 3 highlighted, the participation of women and disadvantaged groups in decision-making, community planning and leadership roles is low. While efforts have been made to increase women’s representation in decision-making at the District, Traditional Authority and community level governance in recent years, ‘male leadership remains the norm in all districts’. The 50:50 Campaign was a move towards achieving equal representation of women and men in parliament; however, the country has seen limited success in this area due to cultural traditions and limited capacity.

There appears to be good understanding of the nature of women’s disadvantage. However, despite numerous policies and acts in place to promote GESI, Malawi’s patriarchal society continues to limit women’s participation in decision-making processes and leadership roles. AfDB’s recent Malawi Gender Profile Report found that currently

‘civil society seems the most viable option for speeding up women’s participation in the political process and the legal sphere. Through it, women can push for legal changes, provide legal literacy to women, address constraints to women’s participation in the cultural arena through civic education, and work closely together within and outside the formal political process’.
Nevertheless, meaningful and sustainable progress requires changes to be made at different levels of government and better coordination between civil society and government ministries is needed.

Action research/applied research programmes in Malawi could analyse intersectional barriers and pathways to influence decision-making in Malawi and make recommendations for how to promote disadvantaged groups in community leadership and decision-making processes. Molloy identifies a number of ways this could be strengthened, including: promoting women’s representation in community committees,

‘having quotas for women’s representation, which will give women the mandate to put themselves forward for such positions ... supporting women’s ‘political apprenticeship’ by building their skills in public speaking, negotiation, leadership etc. on less influential committees (e.g. VSLs [village saving and loans], irrigation committees) before supporting them to take positions on more influential committees (e.g. VCPC [Village Civil Protection Committee], VDC [Village Development Committee]); building supportive women-only spaces where women can build a community to support them as they transgress traditional gender norms; and changing the narrative around ‘active women’ in communities through messaging and role modelling’.1

Policy-makers and development partners need to have structured communication with marginalised groups in order to facilitate their direct, collaborative, non-discriminatory participation in resilience policy and programming. Promoting meaningful participation of disadvantaged groups in decision-making and implementation will require harnessing the expertise and capacities of people with different social identities (on the basis of gender, age, ability, ethnicity, religion, socio-economic status, geography and so on), to ensure the process is inclusive and representative.

**LACK OF DISAGGREGATED DATA AND SYSTEMATIC MONITORING AND EVALUATION**

While many of the policy documents highlight the need to take into account different disadvantaged groups, there is limited information about how they aim to understand the different needs, priorities, vulnerabilities and capacities of different people, and how these change over time.43, 47 This is a critical gap in implementing inclusive resilience policies and programmes, and will likely mean that the information, communication, technology, wellbeing and resource needs of the most marginalised are not met.

Programmes tend to collect data at the household level, which means they tend not to account for ‘intra-household dynamics, where men may be supporting more than one “household”, where it is a ‘female- or child-headed household, [the] presence of a person with a disability/chronic illness, [or the] presence of orphans in the household etc.’.1 Another challenge is that data tends to be collected by organisations, many of whom do not have strong links with decision-makers. As a result, data tends not to be available, shared or used by government or other agencies at the local/District level.

The Gender Policy outlines that the Government ‘commits to develop and implement a national Gender monitoring and evaluation system for implementation of the National Gender Policy’ through its Planning and Research Department, and that a ‘Gender Monitoring and Evaluation Report will be published annually with data that is gender and sex disaggregated’.17 It states that all agencies implementing programmes related to the policy will provide periodic reports; however, it has not been possible to source this annual report or information in the preparation of this paper.
In most cases, information is limited in terms of what data is collected, disaggregated and at what scale within government policies and programmes and disaggregation of data remains limited due to poor levels of policy implementation. Both the National Resilience Strategy and 2015 Gender Policy state that data collection will be disaggregated by gender and age. However, there is no mention of disaggregation by other factors such as disability, religion, ethnicity, political or other, sexuality, etc. The Ministry of Gender, Children, Disability and Social Welfare does not currently appear to collect data on people with disabilities. This will inevitably mean that their policies and programmes are not fit for purpose, as they will fail to include the different needs and requirements of people with different types of impairments within policies and in the delivery of systems and services which support them.

Policy-makers and development practitioners should ensure quality data collection and analysis, disaggregated by sex, age, disability, socio-economic status, religion, ethnicity and geography (as a minimum) to advance inclusive adaptation and resilience policies and programming in Malawi. There is also a clear need to ‘strengthen collective efforts’ which promote the collection, analysis, integration and use of disaggregated data as standard practice. This will help decision-makers understand the differences between groups and how these social identities overlap to create different needs, vulnerabilities and capacities, which in turn will help them develop appropriate and inclusive resilience policies and programmes. Moreover, policy-makers and development practitioners should incorporate the Washington Group Short Set of Disability Questions in censuses, surveys and data collection processes to help enhance understanding and raise awareness of the different needs of people with different impairments in Malawi.

LACK OF CLEARLY ARTICULATED ROLES, RESPONSIBILITIES AND COORDINATION MECHANISMS

Policy-making typically operates in sectoral silos. In order to take an inclusive people-centred approach in building resilience to shocks and stresses, there is a need for strengthened vertical and horizontal coordination on GESI across all sectors and scales. In Malawi’s policy documents, there is limited information about the roles and responsibilities of the different line ministries regarding implementing GESI across sectors and scales, and what budget and coordination mechanisms are in place. Due to lack of analysis of the needs and requirements of different social groups within Malawian society, resilience-building interventions tend to be limited in the extent to which they meet the needs of different marginalised groups. While some ministries are considering gender concerns within their policies and planning, interventions that target other disadvantaged groups are lacking.

The country has numerous coordination mechanisms in place around GESI, and while ‘gender focal points have been established in Ministries, Departments and Agencies in the public sector for the purpose of coordinating mainstreaming of gender in the respective sectors’, AfDB highlights how their technical capacity, gender budget and opportunities for policy influence are often limited. This includes the Parliamentary Committee on Social and Community Affairs, a Parliamentary Women’s Caucus, which includes all female Members of Parliament, a ‘Gender Advisory Committee (GAC) responsible for advising the cabinet committee on gender [issues and for] mainstreaming gender in their respective line/sector activities’ and three Technical Working Groups (TWGs) on 1) Gender, Culture, HIV and AIDS and Human Rights; 2) Gender Based Violence and 3) Political Empowerment of Women. There is also a United Nations TWG on Gender and Human Rights and an NGO Gender Coordination Network (GCN). The Government has also established a ‘Gender, Youth Development and Sports Sector Working Group’ for overall coordination, including of the Gender TWG.
As outlined previously, while policies assign responsibility to other ministries, they frequently do not articulate what is required to achieve those responsibilities. Consequently, the respective ministries tend not to include those responsibilities within their own strategic planning, budgeting or implementation, and accountability mechanism are not in place.

There is also a gap between Government and development partners working on GESI. More coordinated and concerted effort is needed to mainstream GESI across sectors. Researchers and development partners could support this process by demonstrating how mainstreaming GESI across sectors and within resilience policies and programmes can help achieve better outcomes, irrespective of gender, to help incentivise change and to help build capacity in this area. Development partners should work with and support different sectoral ministries, such as Ministry of Gender, Children, Disability and Social Welfare and the Community Development Department; the Ministry of Local Government who are working at the District level; and the Ministry of Finance, Economic Planning and Development to promote positive change around GESI and intersectional approaches for resilience.

THE NEED FOR socIAIIy INCLUDIcE AND GENDEI-RESPONSIvE BUDGETING

According to the 2015 Gender Policy, the Ministry of Finance, Economic Planning and Development shall

‘ensure that adequate resources are allocated and disbursed for gender specific programmes across all sectors. It will also ensure that sectoral budgets are gender responsive so that different needs of all gender groups are met and shall ensure that the Malawi Growth and Development Strategy (MGDS), sectoral M&E Frameworks and [Public Sector Investment Programme] PSIP projects are gender responsive’.17
The Ministry also includes a strategy for ensuring that ‘gender is mainstreamed in national budgets, plans, strategies and programmes’ (Policy Priority Area 6, Objective 1, Strategy 2). The 2018/19 Gender Analysis of the national budget found that slightly less than 2% of the total national budget is invested in the promotion of gender equality and the empowerment of women. It found that to date, ‘Gender Responsive Budgeting are mostly dealt with as a matter of policy and not law, which makes it difficult to enforce some of the crucial recommendations or interventions’. However, gender inputs have been ‘submitted to the Ministry of Finance to be incorporated into the Public Finance Management … Act, which is presently under review’. This would then make gender-responsive budgeting a legal obligation.

Policy-makers and development partners need to commit to socially inclusive and gender-responsive budgeting across sectors and scales in order to ensure that all policies and programmes prioritise GESI and promote inclusive interventions that help to reduce inequalities and enhance people’s wellbeing and capacity to deal with shocks and stresses.

LACK OF INTEGRATION OF GENDER EQUALITY AND SOCIAL INCLUSION IN RESILIENCE POLICIES AND PROGRAMMES

The National Resilience Strategy recognises the importance of GESI, and of considering the vulnerabilities and capacities of disadvantaged groups when designing and implementing programmes. However, as highlighted in section 2, within the poverty spectrum and definitions of these groups, there is no specific reference to different marginalised/disadvantaged groups, or their needs, priorities, vulnerabilities or capacities. It is important that resilience is not ‘detached from the underlying causes of vulnerability’. The focus on poverty within the National Resilience Strategy, without adequate analysis of the different social, economic, cultural, political and environmental contexts which influence people’s vulnerability, capacity and exposure to different shocks and stresses is a severe limitation.

As a new initiative which has not yet finalised implementation arrangements, it is unclear to what extent the Government of Malawi and its various sectoral ministries will implement or consider the GESI components of the National Resilience Strategy. The Ministry of Gender, Children, Disability and Social Welfare is cited a handful of times in the document, but the governance structure and coordination mechanisms for ensuring gender-responsive programming, budgeting and interventions are not clearly articulated, and there are no accountability mechanisms in place to ensure GESI is prioritised across sectors.

A whole-of-government and whole-of-society approach is needed to build inclusive resilience. Policy-makers and programme managers need to work across sectors and scales to address the underlying structural inequalities which exist within society and to promote GESI across resilience-building policies and programmes.

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H This is outlined as the responsibility of ‘MoF, EPD, MoGCDSW, MoEST, UNDP, NORAD, MEJN, ECAMA, JICA, Action Aid, World Vision, Oxfam’.
CONCLUSION AND RECOMMENDATIONS

While support for women’s rights and opportunities is generally high among both men and women in Malawi, gender inequalities are deeply entrenched within society.

Discriminatory socio-cultural beliefs and practices remain obstacles to progress on women’s equality and social inclusion, including within resilience policy and programming. Despite efforts to increase the participation of women and disadvantaged groups in decision-making and leadership roles, progress has been limited. However, there is good knowledge of the barriers to gender equality in Malawi, and of culturally-sensitive approaches to address harmful social norms, including engaging men, boys, and religious and traditional leaders in interventions. These can be leveraged by working with existing programmes and traditional leaders who champion GESI.

Less is known about intersecting inequalities and how these influence people’s vulnerability and capacity to manage shocks and stresses. Understanding to what extent women’s empowerment programmes have been successful for different groups over time, and what the entry points are for advancing GESI, is critical. It is also important that the expertise and capacities of local actors and formal/informal networks are harnessed and supported to ensure resilience policies and programmes respond to the local context and different people’s needs, priorities, vulnerabilities and capacities.

Malawi has numerous policies in place which aim to enhance GESI. However, implementation of these policies varies considerably across sectors and scales, and there has been limited progress in taking
an intersectional approach in adaptation and resilience policies and programming. It is important that inclusive and equitable approaches to risk-informed development are promoted in Malawi, which address societal structural inequalities and intersecting vulnerability, capacity and exposure factors, to enhance protection and development outcomes for the most marginalised.

Limited monitoring and evaluation are critical gaps in implementing inclusive policies. Data are often disaggregated by gender and age, but not by other factors such as disability, religion, ethnicity, or sexuality. Data collected at the household level tend not to account for intra-household dynamics. In part due to lack of data, resilience-building interventions and policies tend to be limited in the extent to which they meet the requirements of different marginalised groups. There is a need to understand why increased knowledge on the nature of gender inequality has not led to more progress on gender equality, and what is required to ensure progress at different scales.

While improving gender analysis and awareness of intersecting inequalities is critical in resilience policy and programming, there is also a need to promote gender-responsive policies and budgeting across sectors and scales, to support people's wellbeing and capacity to prepare for, cope with and respond to shocks and stresses.

This paper has identified a number of knowledge and evidence gaps, as well as policy implementation and capacity gaps for promoting GESI in the context of resilience policy and programming in Malawi. The following is a summary of recommendations, particularly for policy makers, development practitioners and researchers to advance GESI in resilience policy and programming in Malawi:

1. **Address harmful socio-cultural practices and discriminatory social norms** which disadvantage women and marginalised groups, including through the sensitisation of boys and men, working through existing programmes and with traditional and religious leaders who champion GESI.

2. **Promote equal access of systems and services central to a person’s wellbeing**, including health and education services, to reduce maternal mortality, child malnutrition, persistent disparities in educational attainment, and to help build people’s capacity to manage shocks and stresses.

3. **Enhance the collection, use and sharing of disaggregated data** (by sex, age, economic status, religion, ethnicity, disability and geography as a minimum) in normal times and after a disaster.

4. **Take into account intra-household dynamics** in order to help better understand how intersecting factors influence people’s vulnerability, capacity and exposure to different shocks and stresses over time.

5. **Identify the enablers and constraints to women’s economic empowerment in Malawi and entry points for positive change**. This includes expanding the livelihood options and income generating activities available to women and disadvantaged groups and addressing the additional barriers women face due to unpaid care work and limited access to productive resources.

6. **Promote the meaningful participation of women and disadvantaged groups in decision-making, community planning and leadership roles**. This includes promoting women’s solidarity and confidence, alongside sensitisation programmes with men and boys to accelerate change.

7. **Support the meaningful inclusion of people with disabilities and older people in the design and delivery of resilience policies and programming**, which includes adhering to humanitarian standards, principles and guidelines, and moving away from ‘charity-based’ models that treat people purely as beneficiaries.

8. **Mainstream GESI and intersectional approaches across sectors and scales to help reduce vulnerability and build resilience cross-sectorally**. This includes ensuring that roles, responsibilities, socially inclusive and gender-responsive budgeting budgets and coordination/communication between different agencies and scales are clearly articulated and that cross-sectoral working on GESI and resilience is adhered to.
1. Molloy E. PROSPER Gender Equality and Social Inclusion Analysis Report. 2020a. p. 3; 4; 3; 25; 14; 4; 6; 5; 18; 5; 18; 5; 23; 12; 5.


