



# Gender Analysis for MVAC Emergency Cash Transfer Programme

Concern Worldwide Malawi May 2016

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This research was managed by Concern Worldwide on behalf of the INGO Consortium which includes: Concern Universal, Concern Worldwide, Goal, Save the Children and Oxfam.

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*Cover Photo:* Women beneficiaries in Traditional Authority (TA) Tengani, Nsanje describe how cash transfers have helped them meet their needs.

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The 12 communities we visited in 8 TAs across 2 districts who gave us their time, their perspectives, and their experiences. We hope that we have accurately reflected their views and reality in this report.

## DISCLAIMER

C12 Consultants compiled this analysis and the views expressed herein are those of the Consultants. Such views do not necessarily reflect those of Concern Worldwide, GOAL, or the INGO Consortium.



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## List of Acronyms and Abbreviations

ADMARC	Agricultural Development and Marketing Corporation (Malawi). The term refers to both the corporation, which supplies subsidised maize throughout Malawi, and the maize supply warehouses run by the corporation.
CBT	Community based targeting
CT	Cash transfer (including emergency cash transfer response and social cash transfers which take a longer-term, welfare approach. This report uses CT to denote both the individual transfer and cash transfer programming.
DODMA	District Officer for Disaster Management Affairs
DSWO	District Social Welfare Officer
ECT	Emergency Cash Transfers
FGD	Focus Group Discussion
FHH	Female-headed household
GVH	Group Village Head - refers to both a geographical area, and the chief who presides over it.
INGO	International Non-Governmental Organisation
JEFAP	Joint Emergency Food Assistance Programme
KII	Key Informant Interview
MDG	Millennium Development Goals
MHRC	Malawi Human Rights Commission
MVAC	Malawi Vulnerability Assessment Committee
SCT	Social Cash Transfers – Malawi Government welfare approach to CTs, which distributes small cash transfers to the very poor year round.
TA	Traditional Authority - refers to both a geographical area, and the chief who presides over it.
VCPC	Village Civil Protection Committee
VSL	Village Savings and Loans

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## Glossary of Chichewa terms used

<b>chifundu</b>	compassion
<b>chikamwini</b>	Practicing matrilineal (matri-local) marriage practices
<b>chitengwa</b>	Practicing patrilineal (patri-local) marriage practices
<b>fisi</b>	A male adult who has sexual intercourse with newly initiated girls
<b>ganyu</b>	informal daily hired labour
<b>kupita kufa</b>	a traditional practice in which a recently widowed woman must sleep with a relative or hired 'cleanser' to put to rest the spirit of the deceased
<b>kusasa fumbi</b>	a traditional practice in which a young girl is expected to have sex to finalise her initiation into adulthood
<b>kwatira</b>	to marry – an active verb used to describe a man who marries a woman
<b>kwatiwa</b>	to get married – a passive verb used to describe how a woman is married by a man
<b>nthakula</b>	(chiNgoni language) Practicing patrilineal (patri-local) marriage practices
<b>shazi</b>	A traditional practice in which young girls are expected to offer sexual services to visiting dignitaries

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## Executive Summary

Cash Transfers (CTs) provided an effective means of supporting men and women to meet their basic needs in an emergency. CTs assisted men and women to meet their practical needs, giving men a sense of purpose as a provider, and allowing women to fulfil their traditional roles as wife and mother. CTs led to a temporary boost in women and men's standing within their homes and communities, but have not led to any long-term discernible change in status. Although CTs do not directly lead to women's 'empowerment', they do have important implications for gender dynamics within homes and communities.

In order to study these implications, Concern Worldwide commissioned a gender analysis of Concern's and GOAL's emergency cash transfer programmes in Mchinji and Nsanje districts, respectively. The gender analysis sought the perspectives of 218 beneficiaries and key informants (110 women and 108 men) through focus group discussions, interviews, a participatory 'decision tree' tool, and a survey, which aimed to explore gendered attitudes in the project context.

The research found that through CTs, men and women were able to support their households; feeding their families and sending children to school. Through sharing food bought with CTs, women strengthened social bonds, making them more able to seek support from neighbours and extended family in times of need.

The project minimised barriers to women accessing project benefits by mainstreaming gender issues throughout; promoting women's participation on Village Civil Protection Committees (VCPCs), involving women where possible in the targeting process, and putting security measures in place so that women felt safe and protected at distributions. Although this project does not solely target women as beneficiaries, informal subjective assessment procedures by VCPCs attempted to target women if they believe the CT would be at risk of being misused if the husband were registered. In these cases, allowing men to cite benign reasons as to why they were not chosen is likely to lessen their resistance to their wives being named as beneficiaries.

The research found evidence that there is truth in some of the stereotypes around CTs regarding men and women's behaviour, with both men and women able to pinpoint examples of the misuse of cash by men, and the responsible use of cash by women. While these stereotypes are over-simplistic, ignoring them entirely could reduce the positive impacts that CTs have on households. VCPCs subjective assessment of men's reliability, while controversial, maximises CTs utility at household level, while ensuring that men are not 'all tarred with the same brush'.

Some female participants reported improved standing within their communities. CTs helped them to contribute to community events, and allowed them to share with their neighbours. Men reported that they were looked on more favourably within the community as they were seen to be fulfilling their masculine role of 'provider'. Male and female participants reported that they no longer needed to beg their families or neighbours for support, and were less reliant on doing ganyu in their wealthier neighbours' fields. However, these changes to their status were found to be temporary, and did not last beyond the CT period. These changes are more likely to be long lasting if CT responses are linked to medium or longer-term recovery or livelihood objectives.

Men and women described the manner in which they experience power in different ways. Women described feeling power within their traditional subservient roles, but also through their resilience and perseverance. Men described feeling 'power over' women, when they exercise their cultural dominance. However, they also described feeling agency, when they have the resources and power to act, and to make choices. Both women and men described feeling power when cultivating and harvesting crops. Beneficiaries highly valued the seeds that were distributed alongside CTs, as their contribution to their own development through their cultivation of the seeds gave them some semblance of power and control over their situations.

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CTs promote dialogue in the home, as men and women reported that they were more likely to engage in discussions about how to spend CT money, than income from other sources. The interim period between selection and distribution gave families an opportunity to plan for their spending, while sensitisations by Concern and GOAL prior to distributions emphasised joint decision-making at household level. While husbands and wives frequently discussed decisions, the final say generally rests with the man. Women's perspectives were generally sought when making decisions relating to food and the children, which fall within the remit of her traditional domestic role. Beneficiaries reported that it was easy to make decisions with CTs, as food had to be prioritised, reducing the likelihood of the cash being subject to negotiation and compromise within the household. CTs were found to have helped to improve husband and wife relationships by reducing stress, encouraging joint decisions and allowing men to spend more time with their families.

The key recommendations emerging from the analysis include:

1. Continue holding comprehensive sensitisations prior to targeting and distribution.
2. Continue strong accountability and inclusion practices during distributions.
3. Promote linkage activities that provide beneficiaries with opportunities to be agents of their own development.
4. Link CTs to conservation agriculture programming.
5. Continue VCPCs informal assessments of men's suitability for receiving CTs.
6. Train VCPCs in gender sensitivity.
7. Continue to link CT beneficiaries to VSL.
8. Ensure the needs of polygamous households are considered during targeting.
9. Set realistic expectations about impacts of CTs on gender equality.
10. For donors, increase funding flexibility to allow CT programmes to respond to changing contexts.

CTs have been a life saving measure, supporting men and women's basic needs for food and other necessities during a protracted disaster situation. Sustained support is required to ensure that people not only survive, but also gain the agency to take control of their lives and situations.

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## Introduction

The Malawi Vulnerability Assessment Committee (MVAC) estimated that 2.8 million people would be in need of food assistance between October 2015 and March 2016. As a result of this, a consortium of INGOs (comprising Save the Children, Concern Worldwide, Concern Universal, Oxfam, and GOAL), and the World Food Programme (WFP) came together to plan a response, with INGOS delivering a cash transfer response to 450,000 people, while WFP distributed food or cash to 2.4 million people. As part of the INGO Consortium, Concern Worldwide implemented cash transfers targeting 25,306 households in Mchinji District and 1,990 households in Nkhotakota District, while GOAL targeted 4,585 households in Nsanje district.

In recent years, Cash Transfers (CTs) have emerged as a cost-effective and efficient way of supporting vulnerable people in times of emergency. A recent DfID/ODI (2015) report recommended that humanitarian aid organisations should “give more cash transfers” and that CTs should be “central to humanitarian crisis response”<sup>1</sup>. CTs are perceived as ‘empowering’ as they allow people choice and options, and are seen to contributing to local development by stimulating local markets.

However, the impacts of CTs are not gender neutral, as CT programming tends to be rooted in gender assumptions. It is generally assumed that targeting women for CTs increases the likelihood that the money will benefit the whole family; as women are seen as “the rightful recipients of the transfers, as women use cash for the households more responsibly than men”<sup>2</sup>. It is also assumed that giving cash to women empowers them economically, as “giving women money will give them the voice and power to raise their status within the household and the community, ultimately promoting gender equality”<sup>3</sup>.

Concern Worldwide has commissioned a gender analysis of CTs in Mchinji and Nsanje districts to unpack how these assumptions play out within the specific context of Mchinji and Nsanje districts in Malawi, to ensure that CT programming ‘does no harm’ while reducing the vulnerabilities of the poorest people. The analysis aims to analyse the impact that emergency cash transfers have on intra-household gender dynamics, to capture learning, which will inform Concern and others’ future cash transfer programmes both in Malawi and more broadly.

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1. DfID/ODI - Centre for Global Development (2015) “Doing Cash Differently: How cash transfers can transform humanitarian aid. Report of the High Level Panel on Humanitarian Cash Transfers”.

2. Brady, C. (2011). *Walking the Talk: Cash Transfers and Gender Dynamics*. Concern Worldwide and Oxfam GB

3. *ibid*

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## Research Methodology

This gender analysis comprised six stages. See Appendix A for a detailed description of the research methodology.

1. **Desk Review:** An external literature review was conducted focussing on gender issues in cash transfer programming in Sub-Saharan Africa, as well as an internal project document review to better understand the project and contexts.
2. **Identification of appropriate Gender Analysis framework:** The analysis is rooted in the Moser Framework's analysis of roles and the distinction between practical and strategic needs, and borrows from Longwe's Women's Empowerment framework, examining the intervention's impact across 5 levels of empowerment; Welfare, Access, Consciencisation, Mobilisation/ Participation, and Control.
3. **Instrument development and refining: Four tools were developed;** a focus group discussion guide, a 'Decision Tree' discussion guide, a key informant interview guide, and a Gender Equality Scale survey (See Appendix D). The tools were refined with input from Concern and GOAL staff.
4. **Primary qualitative research:** 218 participants (110 women and 108 men) were interviewed through 24 FGDs, 11 individual interviews, and 176 surveys in 8 TAs (2 in Nsanje, 6 in Mchinji) across the 2 districts in April and May 2016 (See Appendix A for a breakdown of participant numbers).
5. **Coding of data:** The qualitative FGD and KII data collected was cleaned and then coded using the key objectives of the research to group findings. It was then further coded into 29 sub-themes. Analysis of survey data was done using Excel, PSPP (free alternative to SPSS), and the statistical software R. The results of the survey were then incorporated into the overall analysis.
6. **Analysis and report writing:** The 29 qualitative subthemes were then grouped into 6 macro themes. These were then sorted using Longwe's levels of empowerment as a guide so that they demonstrate progression in terms of promoting women's empowerment.

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## Gendered Context

Malawi is a highly patriarchal society. Rigid social norms, beliefs and attitudes, and highly gendered institutions diminish efforts towards women's empowerment at household, community and national levels. The country ranks 131 out of 187 countries in terms of gender equality<sup>4</sup>, with a gender inequality index score of 0.591. According to the 2014 MDG end-line report<sup>5</sup>, Malawi has not achieved Goal 3 on gender equality and the empowerment of women. Women are more likely to be food insecure, and are less likely to have control over the land that they farm. Girls have lower educational outcomes than boys with women being more likely to be illiterate. Traditional power structures often exclude women from decision-making and make them vulnerable to gender-based violence, including economic violence<sup>6</sup>.

These inequalities were evident within the research participants of this study. When asked "what is the highest level of schooling that you have completed", 55.7% of respondents indicated to have some primary school, 12.5% some secondary school, 8% completed primary school and 2.8% completed secondary school. There was a statistically significant difference in schooling between gender, with male respondents having on average a higher education level than female respondents.

Across both research districts, male respondents were on average 49 years of age and female respondents 45 years of age; with the youngest participant being 15, and the eldest 86. The team spoke with participants from various ethnicities: 44.3% were Chewas, 35.2% Senas, 13.1% Ngonis, 0.6% Yaos and 6.8% of other ethnicity. In Nsanje, respondents were mostly Senas (86.1%) and in Mchinji respondents were mostly Chewas (75%) or Ngonis (22.1%)<sup>7</sup>. Early marriage is common in both districts. Among research participants, a statistically significant difference exists between genders in age at first marriage. Male respondents were on average  $23.7 \pm 4.8$  and females  $18.6 \pm 2.5$  years of age when they first married.

Participants in both Nsanje and Mchinji reported polygamy as being common in their communities. This is in line with the Malawi Human Rights Commission (MHRC) report on cultural practices, which reported that polygamy occurred in the communities of 98% of respondents<sup>8</sup>. Having many wives can be seen as an indicator of status and wealth for men, and provides a source of cheap labour for the family. This practice not only often results in wives being neglected by husbands making them vulnerable to poverty<sup>9</sup>, and contributes to the spread of HIV and AIDS, but also highlights a deep inequality between husbands and wives. Women in Malawi cannot marry (*kwatira* - active verb – used to describe men who 'marry'), but instead 'get married' (*kwatiwa* - passive verb – used to describe women who are 'married' by men). A man, therefore, can 'do marriage' to more than one woman, but a woman can only 'be married' to one man.

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4. UNDP (2014) *Human Development Report*

5. National Statistics Office (2014) "Malawi MDG End-line Survey"

6. Economic violence occurs when one partner restricts their partner's access to financial resources, limiting their ability to be self-sufficient and forcing the victim to depend on the perpetrator.

7. Demographic data on participants was collected within the Concern Gender Equality Scale survey. Of the 207 focus group participants, 176 (85%) also participated in the survey. Due to the high level of overlap, it can be assumed that this demographic data is representative of all research participants.

8. Malawi Human Rights Commission "Cultural Practices and their Impact on the Enjoyment of Human Rights, Particularly the Rights of Women and Children in Malawi."

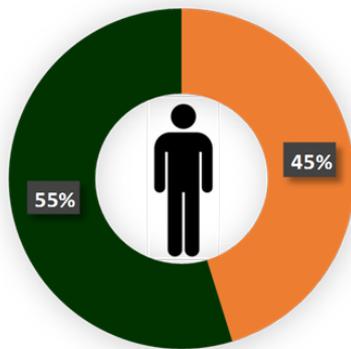
9. Male DSWO, Nsanje

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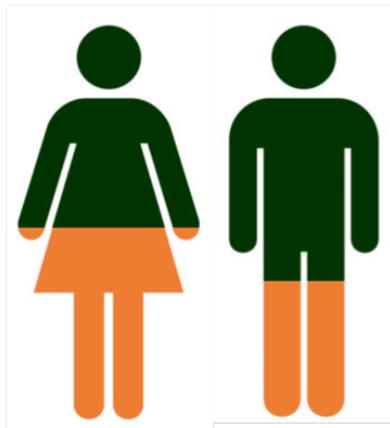
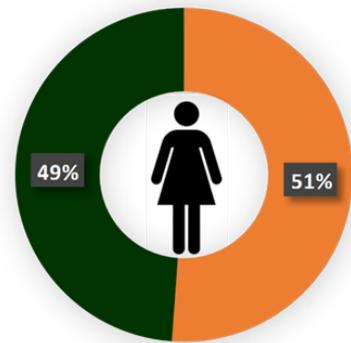
The Concern Gender Equality Scale survey demonstrated some interesting findings regarding the gendered attitudes and beliefs at play within the target districts. In general, all participants demonstrated conservative, patriarchal attitudes and beliefs towards gender and gender equality. Women tended to demonstrate more conservative attitudes than men e.g. in response to the statement 'A woman cannot refuse to have sex with her husband', 42% (Nsanje) and 68% (Mchinji) of women agreed, compared to only 28% (Nsanje) and 41% (Mchinji) of men (Women's Empowerment Scale). Within the scale measuring attitudes to violence against women, women were consistently more likely to agree to violence being justified in specific circumstances (if she goes out without her husband's knowledge, if she neglects her children, if she argues with her husband) than men (See Annex D for complete results of the survey). This disparity between women and men's responses is not surprising, as these statements refer to norms that police women's and not men's behaviour. Men therefore have the freedom to express more liberal attitudes without the fear of facing social sanctions, while women risk facing community disapproval or ridicule were they to express the same liberal attitudes. Another potential limitation existed. Enumerators may have experienced a response bias if interviewees did not respond truthfully, but rather with what they believed the enumerators wanted to hear, or in a way they might assume might reflect more positively on them.

Both men and women in Nsanje and Mchinji expressed positive attitudes towards girl children, with the vast majority of participants disagreeing with the statements "If there is limited money, it should be spent on sons first", and "It is more important for a woman to give birth to a boy than a girl".

## RESULTS FROM GENDER EQUALITY SCALE SURVEY



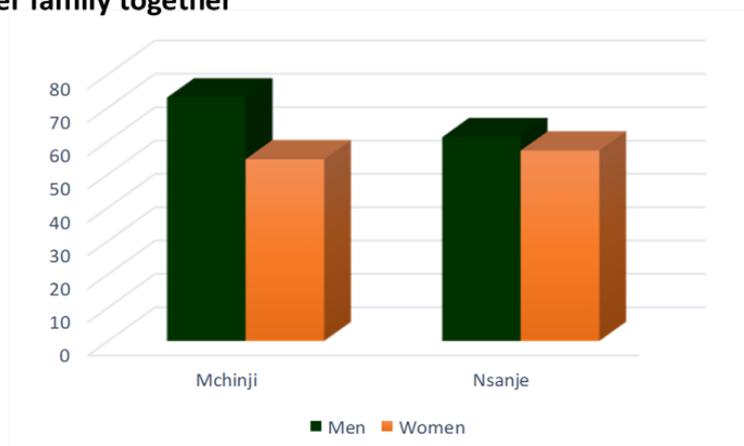
Half of men and women believe that a man who paid a bride price for his wife owns her



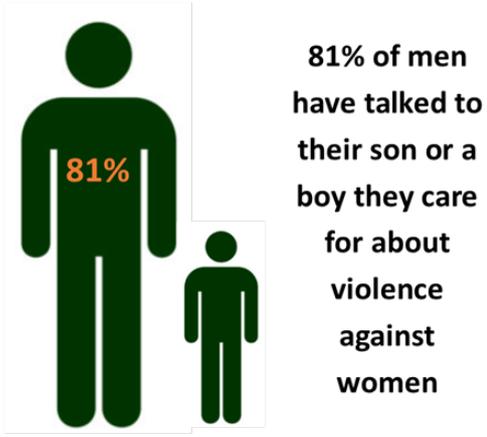
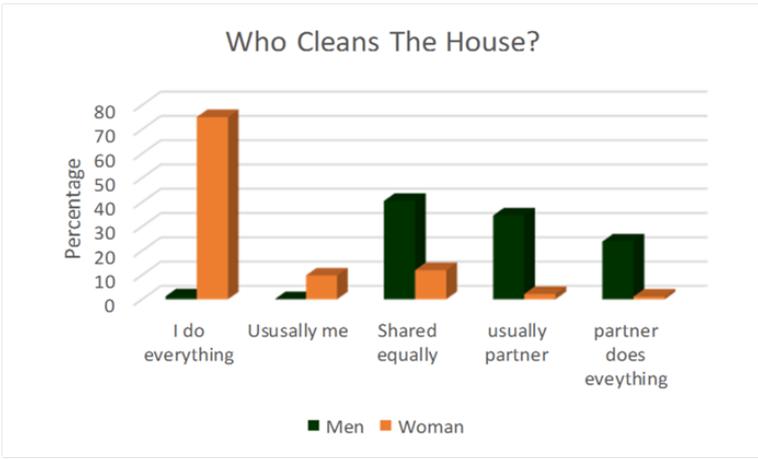
A third of men and almost half of women believe that a woman should tolerate violence in order to keep her family together



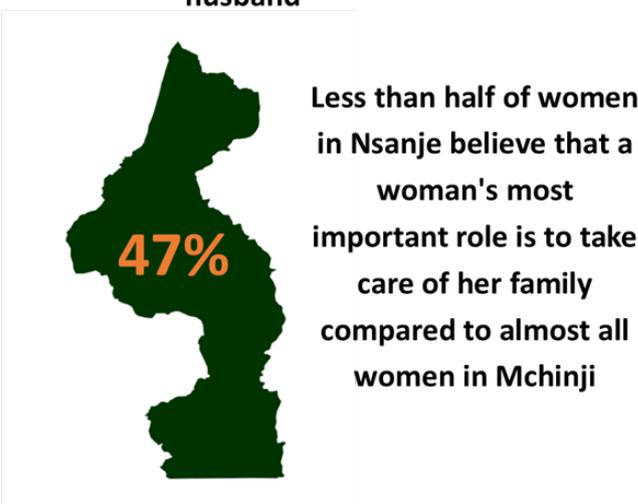
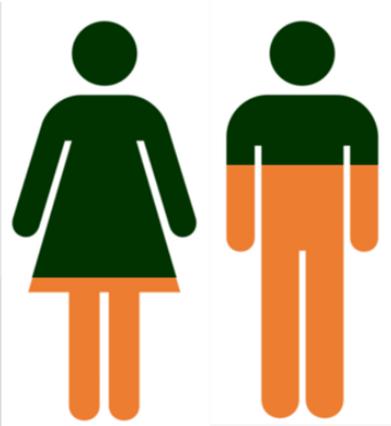
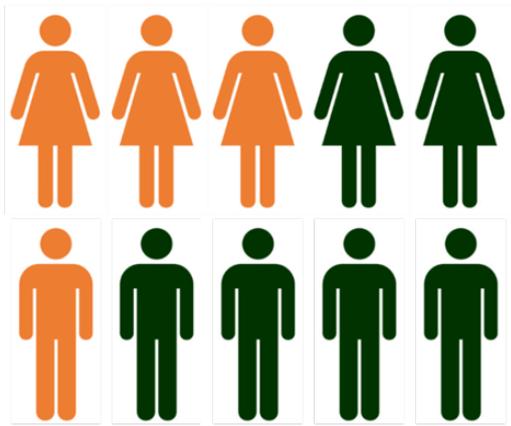
2 in 5 men and 3 in 5 women believe that a woman cannot refuse to have sex with her husband



The majority of men and women in both districts believe that if a woman works she should give her money to her husband



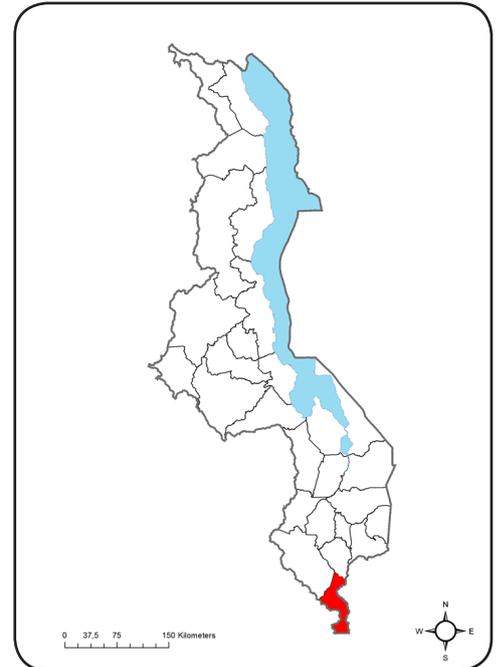
**Men and Women have different perspectives on how household chores are divided**



## Nsanje

Nsanje, the southern-most district in Malawi, in the Lower Shire livelihoods zone, is surrounded on three sides by Mozambique. It ranks consistently as one of the poorest districts in the country. Nsanje was one of the worst affected districts by the January 2015 Malawi Floods, with approx. 130 people killed and 70,000 people displaced to makeshift camps within the district. It has been one of the districts worst affected by the 2015-2016 drought, with significant crop failure. As part of the INGO Consortium's MVAC CT response, GOAL targeted 4,585 beneficiaries (2,425 female, 2,160 male) across 2 TAs (TA Ngabu, and TA Tengani) in Nsanje.

Nsanje is predominantly inhabited by the mainly Christian Sena people, who made up 86% of Nsanje respondents; a group which observes a patrilineal social and cultural system. Gendered cultural practices, which infringe on women's rights, such as *kupita kufa* (a practice in which a recently widowed woman must sleep with a relative or hired 'cleanser' to put to rest the spirit of the deceased<sup>10</sup>), *kusasa fumbi* (whereby a young girl who has gone through a four week period of confinement as part of her initiation to womanhood is then expected to have sex to finalise the process<sup>11</sup>), and early marriage, are commonly practiced. Widows are especially vulnerable to poverty in Nsanje, as it is common for her in-laws to seize any property left by her husband after his death<sup>12</sup>.



Location of Nsanje District

10. Malawi Human Rights Commission "Cultural Practices and their impact on the enjoyment of Human Rights, particularly the rights of women and children in Malawi".

11. Imani Development (2015) "Final Project Evaluation for Ending SRGBV in Malawi Project" Concern Worldwide.

12. Male DSWO, Nsanje.

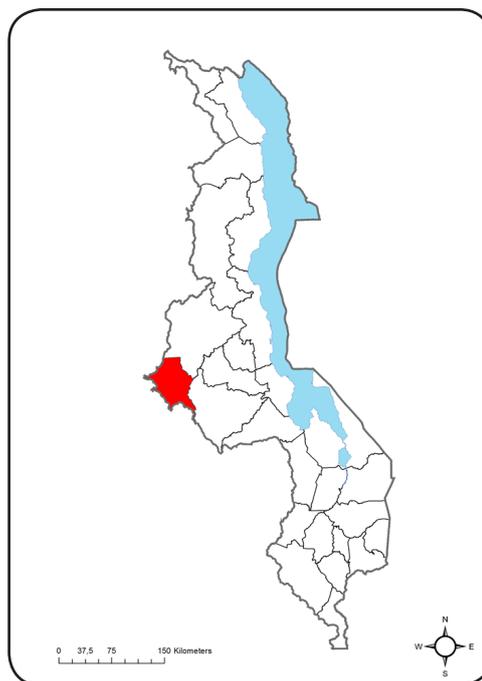
## Mchinji

Mchinji is located in the central region of Malawi in the Kasungu/Lilongwe Plain livelihoods zone. Mchinji Boma is one of the major border crossings to Zambia at Chipata. As part of the INGO Consortium's MVAC CT response, Concern Worldwide targeted 25,306 beneficiaries (14,716 female, 10,590 male) across 6 TAs.

The majority ethnic groups in Mchinji are Chewas and Ngonis; who made up 75% and 22% of Mchinji's respondents respectively. Both patrilineal and matrilineal communities were visited in Mchinji. Matrilineal communities (known as *chikamwini*<sup>13</sup>) are not matriarchal i.e. with families headed by the woman. The term instead refers to communities in which a new husband moves to his wife's village upon marriage, rather than new wife moving to her in-laws' village as would happen in patrilineal communities (known as *nthakula* by Mchinji's Ngonis, and *chitengwa* by Mchinji's Chewas<sup>14</sup>). The MHRC study concluded that both matrilineal practices and patrilineal practices can perpetrate gender based violence (GBV). Matrilineal, because it can deny the husband custody of his children if his wife dies or the marriage ends, while patrilineal practices can deny women ownership of family property when a marriage ends.

The prevalence of matrilineal practices may account for the statistically significant difference in responses between Nsanje and Mchinji to the statement 'children belong to a man and his family'; 61% of men and 79% of women in Nsanje agreed with this, compared to only 25% of men and 36% of women in Mchinji.

Other gendered traditional practices involving adult men having sex with young girls practiced by Ngonis and Chewas in Mchinji include *shazi* and *fisi*<sup>15</sup>.



Location of Mchinji District

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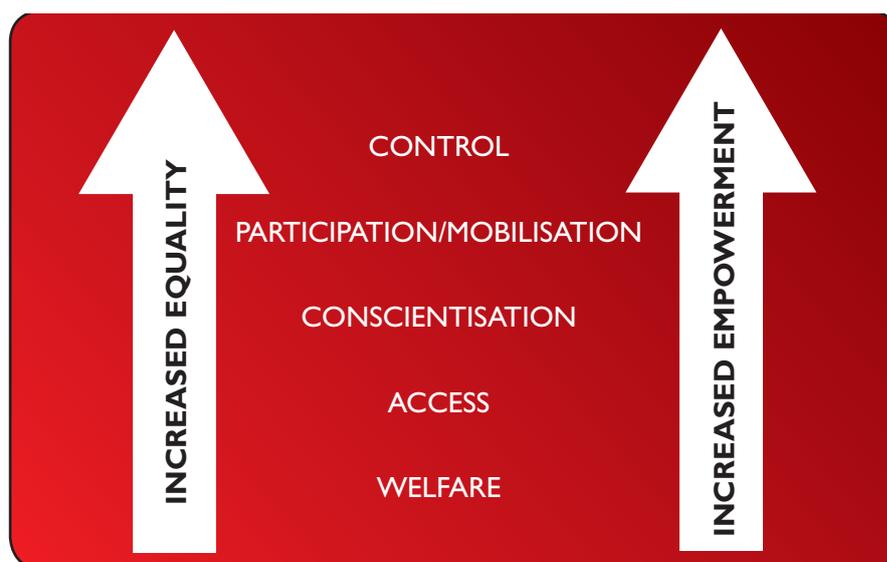
13. Malawi Human Rights Commission "Cultural Practices and their Impact on the Enjoyment of Human Rights, Particularly the Rights of Women and Children in Malawi".

14. *ibid*

15. *ibid*

## Analysis and Discussion

This section will explore the impact of CTs on gender dynamics and vice versa focussing on men's and women's gendered attitudes and behaviours, and CTs influence on intra-household gender dynamics and on women's empowerment. The framework for analysis borrows heavily from Longwe's Women's Empowerment Framework, which explores five levels of empowerment; an intervention concentrating on the higher levels is more likely to increase women's empowerment, while an intervention (such as CTs) that concentrates mainly on welfare is very unlikely to be empowering for women<sup>16</sup>. This framework proved useful as a tool to rigorously test assumptions about cash transfers and women's empowerment at different levels.



*Longwe's hierarchical levels of empowerment*

Although Longwe's levels of empowerment provide a useful guide to explore the extent to which women can participate in society, their hierarchical nature, in which one level is built on the level below, proved problematic in this research where CTs supported women in gaining marginally more control over household decisions, without increasing awareness of inequalities (conscientisation), supporting any sort of collective will for change (mobilisation). The research therefore uses Longwe's levels loosely, as a guide for

structuring the analysis. It examines women's practical and strategic needs, broken down using Longwe's levels of empowerment, but does not examine the ways in which higher levels built on those below. The table on the following page illustrates the ways in which the macro discussion themes relate to the Moser Framework's discussion of practical and strategic needs, and Longwe's levels of empowerment.

16. March, C., Smyth, I., & Mukhopadhyay, M. (1999) "A Guide to Gender Analysis Frameworks" Oxfam Publications.

Moser Framework	Longwe's Women's Empowerment Framework	Discussion Theme
Women's Practical Needs	Discussion Theme	Discussion Theme
	Access	Programme design and implementation
Women's Strategic Needs	Conscientisation	Stereotypes Community Status and Relations
	Mobilisation/Participation	Power and Agency
	Control	Decision Making

#### *Relationship of discussion themes to gender analysis frameworks*

The analysis begins by looking at how the project helped women to meet their practical needs (what women need to fulfill their socially accepted roles in society<sup>17</sup>) by examining how the project met women's basic needs, and by how issues of gender and inclusion were mainstreamed throughout project design and implementation. It will then go on to explore how the project impacted on women's strategic needs (what women need in order to change their existing roles and to challenge women's subordinate position<sup>18</sup>) by exploring how stereotypes around CT influence gender roles and positionings, how CTs influence women's and men's status in the community, how women and men conceptualise power and realize agency, as well as the impact of CTs on the gendered dynamics of household decision making.

### **Welfare: Meeting Basic Needs**

CTs have greatly assisted both women and men to meet their basic needs for food. In all TAs visited in the two districts, both men and women spoke of how cash transfers have helped them to survive through a very difficult period by allowing them to buy food; “[We have] been able to buy food. It helped a lot because of drought”<sup>19</sup>; “I am alive because of Concern. I have had something to eat because of Concern”<sup>20</sup>. They emphasised that CTs filled a gap, by providing income when there were few opportunities for income generating apart from ganyu (informal daily hired labour); “The money we received for CT we get it at a difficult time”<sup>21</sup>.

In Nsanje, all beneficiaries emphasised that the CT was used for food with little difference in responses between men and women. There were also a few beneficiaries who reported using some of their CTs for VSL contributions, and some women reported using CT money to contribute to village activities. However, the limited supplies of maize reaching isolated Nsanje and reported profiteering by vendors limited opportunities to use the CT to cover any other household expenses beyond maize requirements.

17. Molyneux, M. (1985) cited in Moser, C. (1993) “Gender Planning and Development: Theory, Practice, and Planning”. Routledge, London and New York.

18. *ibid*

19. Female partner, TA Ngabu, GVH Kaudza, Nsanje.

20. Female partner, TA Mlonyeni, GVH Mlonyeni, Mchinji.

21. Female direct, TA Mawwele, GVH Mphalabungu, Mchinji

Responses in Mchinji were slightly different. While beneficiaries in Mchinji also prioritised the purchase of food when receiving CTs, they also reported greater use of CT to cover other household expenses such as school fees and the buying of livestock (mainly chickens and in some cases goats and pigs), and fertiliser. The findings in Mchinji more closely matched the conclusions by Farrington, Holmes and Slater (2006) who reported, “In the short term at the household level, cash transfers may stimulate demand for healthcare and education, influence the accumulation of assets and livestock, and increase agricultural production through the purchase of fertilizers or farm labor”<sup>22</sup>.



Women in TA Ngabu, Nsanje described how difficult it has been for them to find food.

CTs were seen as greatly benefitting vulnerable groups such as female-headed households (FHHs); “FHHs are moving better because it’s as if they are having a husband in the house. They are even buying livestock”<sup>23</sup>. There were reports that by receiving CTs, FHHs no longer needed to engage in negative coping mechanisms which may put them at risk of violence; “FHHs don’t have to rely on prostitution or smuggling (getting another woman’s husband)”<sup>24</sup>.

Through CTs, women and men were able to support their households, feeding their families and sending children to school. The CTs supported them to meet their practical needs, fulfilling women’s traditional roles as wife and mother, and men’s traditional role as provider.

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22. Cited in Miller, C., Tsoka, M., & Reichert, K. (2008) “Impact Evaluation Report: External Evaluation of the Mchinji Social Cash Transfer Project” USAID/ Boston University/UNICEF

23. Female direct, TA Tengani, GVH Ntolongo, Nsanje

24. Male direct, TA Ngabu, GVH Machuwa, Nsanje

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## Sharing

There were mixed responses around the issue of sharing. Some people emphatically reported that they didn't share. This may have been due to sensitisations prior to distribution, which emphasised that CTs were meant for the targeted household and did not need to be shared within the community. Others reported that they shared the maize flour bought with CTs with family and neighbours, with women more likely to share than men; *"Mostly women are likely to share. It's just about having sympathy with other households. Women are sympathisers"*<sup>25</sup>; *"Women are more likely to share ... always sympathise with those who are suffering"*<sup>26</sup>.

The 2011 'Walking the Talk' report found that in Zimbabwe, while food aid was shared, cash was not, and reported that distributing CTs, as opposed to food, may be harmful to the social coping strategies that women engage in. This research, however, found that while beneficiaries were more likely to share food than cash, they frequently shared the food that they bought with cash, which minimises this risk. Women reported that their desire to share was driven by *Chifundo* (compassion); *"We share because it's not possible for us to be eating when we see our friends and relatives suffering"*<sup>27</sup>. The above cited report notes that, *"Community sharing is critically important to women who tend to have a range of lending and borrowing strategies, with neighbours, family, shops and so forth, that enable them to cope when things get tough"*<sup>28</sup>. In showing compassion and sharing with family and friends, women in Mchinji and Nsanje increase their social capital, allowing them to leverage support from friends and family if their situations are reversed in the future.

## Looking to the future

A 2008 evaluation of SCTs in Mchinji found that cash appeared to be a psychological boost for those that receive it, with close to 4 out of 5 intervention households versus one and a half out of five comparison households reporting that they were hopeful that the situation of their household would improve<sup>29</sup>. Unfortunately, this study did not find such hope for the future among participants. The vast majority of participants were extremely worried about what the future will bring; *"We were able to buy food, support kids in school, [buy them] uniform and materials, contribute to VSL groups. But now ECT has stopped, everything will fall apart"*<sup>30</sup>. Participants in Nsanje and Mchinji expressed extreme concern that CTs had ended, feeling that they had nowhere to turn in the wake of the dismal growing season they have just experienced; *"We go to Mozambique for ganyu, but looking forward even ganyu won't be there. [We are] trying to do winter cropping, but land is too dry"*<sup>31</sup>; *"Still the hunger situation will be worse in the coming months. Big problems with food shortage. We have not harvested much. Those who have harvested, it won't take them 2 or 3 months"*<sup>32</sup>. Participants expressed a sense of hopelessness and powerlessness in the face of the on-going drought; *"I bought food and managed to support children [with CTs], but now has stopped, I don't know where to go"*<sup>33</sup>.

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25. Male direct, TA Mavwele, GVH Kalelangwe, GVH Mphalabungu, Mchinji

26. Female partner, TA Zulu, GVH Mgulua, Village: Nanea, Mchinji

27. Female partner, TA Zulu, GVH Mgulua, Village: Nanea, Mchinji

28. Brady, C. (2011). *Walking the Talk: Cash Transfers and Gender Dynamics*. Concern Worldwide and Oxfam GB

29. Miller, C., Tsoka, M., & Reichert, K. (2008) "Impact Evaluation Report: External Evaluation of the Mchinji Social Cash Transfer Project" USAID/Boston University/UNICEF.

30. Female Direct, TA Ngabu, GVH Machuwe, Nsanje.

31. Male participant, TA Tengani, GVH Ntolongo, Nsanje

32. Female direct, TA Nkande, GVH Kawele, Mchinji

33. Female Direct, TA Ngabu, GVh Machuwe, Nsanje

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## Access: Project design and Implementation

### Project design

The INGO Consortium's MVAC Cash Transfer programme proposal<sup>34</sup> lists 'Partner capacity building in mainstreaming Gender and child protection' as a key project activity. Within the consortium, Save the Children was tasked with providing child protection and safeguarding technical support. Save the Children did this through conducting sensitisations with partner staff at induction and by providing contact points within their organisations for referral of protection issues.

The response modality was chosen using a HEA-based methodology implemented according to a common approach across southern Africa. In Malawi, this is implemented by MVAC.

The consortium took an approach to CT that was guided by the Malawi Government's Joint Emergency Food Assistance Programme (JEFAP) Food Distribution Manual<sup>35</sup>. The screening tools in this document recognise female-headed households (FHH) as a vulnerable group, after the chronically ill, the elderly and homes caring for orphans. Targeting was not based on sex, but on household vulnerability, with the head of household, be it male or female, named as beneficiary. The number of FHH targeted, compared to male-headed households targeted, was high due to FHHs' increased vulnerability. Community-based targeting (CBT) procedures described in the JEFAP include endorsement by women and girls as separate groups to ensure that their voices are heard.

The project aimed to mainstream gender to support women's practical needs throughout the programme, and ensure that at the very least the project did not do any harm to women. The project did not have any explicit objectives relating to the promotion of equality or women's empowerment.

### Female leadership in VCPCs

Village Civil Protection Committees (VCPCs) play a key role in project implementation, particularly during the CBT process, during which they identified potential beneficiaries, managed the community endorsement of beneficiaries, and verified whether beneficiaries met the selection criteria by visiting their homes. VCPCs provide the front line when exploring women's access and participation in CT activities. All communities reported that VCPCs had female members, with all reporting good levels of parity. A number of VCPCs had female chairs or secretaries, and several female VCPC members took part in this research. Female VCPC members asserted that they took an active part in VCPC activities and were not side-lined by male members; "the VCPC respects and recognises our voice. If [we are] against [an idea], we are given a chance to contribute"<sup>36</sup>.

Some community members indicated that although women were present in the committees, and although they had an equal say when it came to voting on issues, discussions tend to be dominated by men; "[there is] parity in VCPC but men have more voice. In a meeting, men have more voice, but when it comes to a decision, it's both parties"<sup>37</sup>. This echoes the findings of a recent Christian Aid (2016) study exploring women's leadership, which found that even when women are members of community structures, discussions tend to be dominated by men, and ideas suggested by women are only taken on board after being reinforced or supported by men<sup>38</sup>.

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34. "INGO Consortium Emergency Cash Transfer Response to the 2015-2016 Food Crisis in Malawi" Proposal.

35. JEFAP (2010) "Manual for the Provision of General Food Distributions during Emergency Programs in Malawi"

36. Female VCPC member, TA Ngabu, GVH Machuwe, Nsanje.

37. Male partner, TA Ngabu, GVH Kaudza, Nsanje.

38. Molloy, E (2016) "Gender and Power Analysis of Village Savings and Loans (VSL) within the Enhancing Community Resilience Programme (ECRP)" Christian Aid Malawi.

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## Targeting

All beneficiaries reported that the targeting process was clear and transparent. When asked why they were selected as beneficiaries, all participants were able to point to specific targeting criteria, such as having orphans, chronically ill family members, small land holdings etc. which matched with the official criteria laid out in the JEFAP guidelines. In several villages, participants mentioned that households were graded into levels of poverty, and although there are many 'poor' families, it was only the 'very poor' who were selected for the programme; *"It was a relief to me to be selected - others were also complaining - for poor people are in different grades - taking extreme poor, but others are also poor"*<sup>39</sup>. Beneficiaries stated that in general, non-beneficiaries tended to complain about not being selected, but did not complain about the targeting criteria or the process itself. This was verified by speaking to a very small number of non-beneficiaries (4 men and 2 women) in Mchinji district<sup>40</sup>.

All beneficiaries described the public endorsement process. In the majority of cases the process was considered fair and transparent. In most cases, both women and men felt that they participated actively in the process; *"selection was done in open - able to know who is supposed to be benefitting than when leaders choose. We took part - when a person mentioned was not eligible, we would deny them"*<sup>41</sup>.

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39. Male direct, TA Mavwele GVH Kalelangwe GVH Mphalabungu, Mchinji.

40. The utility of this data is limited given the small size of the sample.

41. Female direct, TA Ngabu, GVH Machuwe.



*Participants were all able to describe why they were targeted based on JEFAP criteria*

However, in a number of cases it seems while the process was done in public, community members had little control over proceedings “We didn’t take much part but we saw everything that was happening”<sup>42</sup>. A small minority described being entirely uninvolved in the process; “It was difficult for us to take much part [in targeting], they normally come to this village and say there are just 4 people who are allocated”<sup>43</sup>: “Whenever they were selecting us, we weren’t there”<sup>44</sup>.

As can be seen from the statements above the level of genuine participation that people had in the beneficiary selection process varied between contexts, and related strongly to the power of the VCPC members and the influence of local chiefs. The ‘Walking the Talk’ report discusses the pros and cons of CBT; “While CBT is commonly used and is considered to have many benefits including accountability, transparency and participation, it is not without its disadvantages. There are frequently errors of exclusion and inclusion... CBT can be seen as communally divisive, fraught with logistical difficulties and power relations, politically difficult, [and] open to manipulation”<sup>45</sup>. In Nsanje and Mchinji, participants believed that CBT promoted accountability, minimized perceived interference from chiefs, and reduced resentment among non-beneficiaries (discussed in a later section). However, it was found that in addition to the disadvantages highlighted in the ‘Walking the Talk’ report, CBT can lead to confusion in targeting practices e.g. in the case of polygamous families, where community perceptions that a polygamous family is a single family, differ from general humanitarian practice, which recommended that each wife of a polygamous family be targeted. This will be discussed in a later section.

42. Male direct, TA Mawwele GVH Kalelangwe GVH Mphalabungu, Mchinji

43. Female direct, TA Nkhandu, GVH Kawele, Mchinji.

44. Female direct, TA Ndua, STA Nyoka, GVH Kangwera, Mchinji.

45. Brady, C. (2011). *Walking the Talk: Cash Transfers and Gender Dynamics*. Concern Worldwide and Oxfam GB

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Some participants in Mchinji were unaware of the way that beneficiary numbers had been selected through the MVAC assessment, and through the District Executive Council (DEC) and Area Development Committees (ADCs), and believed that the target number for their village had been decided by Concern Worldwide; *“Number assigned to village was selected by Concern. Concern chose a proportion of the population to get the number. They were considering the number of people in the area”*<sup>46</sup>; *“The number was limited, Concern gave the number to each village”*<sup>47</sup>.

While many CT programmes specifically target women, this programme targeted household heads regardless of gender. In Nsanje, GOAL targeted 2,425 women, while Concern targeted 14,716 women and 10,590 men in Mchinji. Households were targeted using JEFAP criteria, with VCPCs then deciding whether it was the man or the woman who was the named beneficiary within that household. In both Nsanje and Mchinji (even in ‘matrilineal’ households in Mchinji as discussed in the previous section) the man is considered the household head. In cases where a woman is considered the household head, it is usually because she is widowed or separated and head of a ‘female headed household’ (FHH). In this programme however, many married women, who live with their husbands, were listed as the named beneficiary with conflicting reasons given as to why. All beneficiaries initially stated that there was no problem with a woman being the named beneficiary, as the money was going to the household, not to an individual; *“It’s the same, no difference if wife brings money, or if husband brings money”*<sup>48</sup>.

However, when probed, direct beneficiary men, direct beneficiary women, and wives of male beneficiaries in both districts described how VCPCs selected whether the husband or wife should be the named beneficiary based on an assessment of the man’s reliability and use of alcohol; *“When selecting they [the VCPC] will look if the person drinks, if so they will give it to the other”*<sup>49</sup>; *“Usually if the man is a drunkard and not responsible, the VCPC will choose the wife”*<sup>50</sup>; *“Normally women are registered because they assess the weaknesses of the husband, they take him as not able to support the HH”*<sup>51</sup>. This subjective assessment of men’s capability was a strategy that emerged within communities, and not from formal targeting strategies as laid out in the JEFAP guidelines. It is a strategy which participants considered appropriate, and was neither promoted nor discouraged by implementing partners.

In contrast to the views above, men whose wives were the named beneficiaries generally gave innocuous reasons such as that they had put their wives forward for registration as they themselves did not have valid identification, or the issue of men travelling for ganyu and not being available to attend distributions; *“Women received because the man put wife forward. Woman would be present. Man could be away, so we wouldn’t be able to get the money”*<sup>52</sup>. If women tended to be selected as the named beneficiary due to their husband being considered ‘less capable’, it is likely that partner men gave these reasons as a means of saving face. Men whose wives were named beneficiaries all expressed equanimity and acceptance about their wives selection. This may have been because to express anger or disappointment about not being selected would be to admit that they were passed over deliberately.

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46. Male direct, TA Nkanda, GVH Kawele, Mchinji

47. Female direct, TA Nkande, GVH Kawele, Mchinji.

48. Male partner, Nsanje, TA Tengani, GVH Ntlongo

49. Female partner, TA Ngabu, GVH Kaudza, Nsanje/Male direct, TA tengani, GVH Ntlongo, Nsanje

50. Female direct, TA Nkanda, GVH Kawele, Mchinji

51. Male partner, TA Ngabu, GVH Kaudza, Nsanje

Partner men stated that there was no ridicule or gossip about men whose wives were selected; *“Nobody says anything, nobody belittles you because wife is receiving”*<sup>53</sup>. However, other groups stated otherwise; *“If it is the woman who received, people will be talking. They will say that the family is there because of the woman. Not that the man is working hard”*<sup>54</sup>; *“[When wife is named beneficiary] many of them say the husband is stupid, not possible for the man to be at home and the woman to be registered. Men are saying the committee is not fair because they are registering the woman. If my husband was registered, it wouldn’t be possible for me to receive the cash - it’s up to the committee to judge who is best to register”*<sup>55</sup>.

Allowing men to cite benign reasons as to why they were not the named beneficiary is likely to lessen their resistance to their wives being named. This issue emphasised the control that VCPCs have over the process, as beneficiaries believed it appropriate that these committees would be in a position to judge a man’s reliability and make selections accordingly. This issue will be further discussed in a later section.

## Modality

Responses from participants in Nsanje and Mchinji differed on their preference for cash or food. Beneficiaries in Mchinji unanimously preferred cash over food, giving the ability to use cash to cover other household expenses beyond food as the main reason; *“Cash [is better]. We can use part for milling and paying school fees”*<sup>56</sup>; *“Money is better because you can buy soap, salt and other requirements”*<sup>57</sup>.

The fluctuating maize prices led to many participants in Nsanje stating a preference for food rations over cash distributions<sup>58</sup>. Preferences for cash or food led to significant disagreement among men in Nsanje, with some preferring cash because there are *‘lots of ways to use money’*<sup>59</sup>, while others argued that cash was not useful when maize supply was limited; *‘you can have money but there is no maize in ADMARC (Agricultural Development and Marketing Corporation)’*<sup>60</sup>.

Women in Nsanje were less likely to argue over this and tended to agree on a preference for food; *“Food would be better than cash. Maize is scarce and it’s expensive”*<sup>61</sup>; *“ECT works when there is food at the market, when there is no food, and you have cash, what are you going to buy?”*<sup>62</sup>. Women also discussed how high demand for maize in the days after CTs were distributed led to vendors temporarily increasing maize prices; *“Better to have food because usually when we receive money food prices rise. When the vendors hear that they have got the money. It’s better to have food rationing than cash transfer. You have the money, but food prices are high, you don’t buy relish, cooking oil, you only have maize. Whenever the vendors hear you have got CT, vendors hike their prices”*<sup>63</sup>.

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53. Male partner, Nsanje, TA Tengani, GVH Ntlongo

54. Male direct, TA Ngabu, GVH Machuwa, Nsanje

55. Female direct, TA Ndua, STA Nyoka, GVH Kangwera, Mchinji

56. Female direct, TA Nkande, GVh Kawele, Mchinji

57. Female partner, TA Zulu, GVH Mgulua, Village: Nanea, Mchinji

58. Maize prices increased by 100Mkw/kg from 180Mkw/kg to 280Mkw/kg between December 2015 and February 2016 (INGO Consortium Cash Transfer Programme Final Report).

59. Male direct, TA Ngabu, GVh Ngabu, Village Njovi 1, Nsanje

60. Male direct, TA Ngabu, GVH ngabu, Village Njovi 1, Nsanje..

61. Female direct, TA Tengani, GVH Ntlongo, Nsanje

62. Female partner, TA Ngabu, GVH Kaudzu, Nsanje

63. Female partner, TA Ngabu, GVH Ngabu.

Other women in Nsanje believed that receiving food rather than cash would remove the risk of cash being misused, as the wife of a male beneficiary explained; “We would rather food, because there are a lot of ways to use cash, The cash goes to different places. Sometimes when cash goes to other places, not even a bag of maize will be bought with the remaining”<sup>64</sup>. In summary, the majority of women in Nsanje expressed a preference for food, while men in Nsanje gave more mixed responses.



Women in TA Tengani, Nsanje valued their phones so much that some women wanted them included in the photo

One man demonstrated the powerlessness felt by beneficiaries who are reliant on hand outs when he stated that although food rations would be more practical, he didn't have any control over what he would receive; “Maize prices are rising. [But] both food and cash are good. We don't have the right to choose what you will give us”<sup>65</sup>.

Participants in Nsanje also described difficulties with the supply of maize of the district, including the sale of subsidised maize stocks to vendors who will sell it at inflated prices; “There are problems with ADMARC. I slept for 3/4 days outside ADMARC without buying anything. The ADMARC guys just sell maize to vendors”<sup>66</sup>. The tensions around maize supply reached a tragic peak just days before this research took place with the accidental shooting of a queuing customer by a security guard outside Mbenje town ADMARC warehouse in TA Ngabu, resulting in the angry crowd then storming the warehouse and seizing the maize inside. A woman in Nsanje alluded to this issue; “When people go to the ADMARC, they are being killed! When they go to the market, there is no maize!”<sup>67</sup>.

Men in Nsanje described how fluctuating maize prices increases men's stress and can also lead to conflict within the family; “When you get CTs, you get money and buy maize. Because price increases, you get less. The wife doesn't understand. [She says] “Only that portion for 15,000, you are a fool!”<sup>68</sup>.

64. Female partner, TA Ngabu, GVH Kaudza, Nsanje.

65. Male direct, TA Ngabu, GVH Ngabu, Village Njovi 1, Nsanje.

66. Male direct, TA Ngabu, GVH Machuwa, Nsanje

67. Female partner, TA Ngabu, GVH Kaudzu.

68. Male direct, TA Ngabu, GVH Ngabu, Nsanje.

Issues around mode of delivery also resulted in some interesting gendered implications. Many participants pointed to issues regarding Airtel and the use of phones as the only problems they had with the programme. However, the distribution of phones at the beginning of the programme was widely appreciated. Throughout the research, both male and female participants demonstrated the value they put on their phones, by showing phones that were wrapped in plastic bags to protect them from moisture, and by loudly and conspicuously receiving calls during FGDs. Women spoke of how they considered their phones a valuable asset, and went to great efforts to look after them; *“It's us that keeps the phone, even when sleeping, we keep it at our head! We have bought the phone covers to protect it. We care for it like it was my child! (laughter)”*<sup>69</sup>. Men in Nsanje described how having a phone can improve your social status; *“They look at you better when you have a phone ... People who didn't have phones, now have phones - very important to have a phone for communication”*<sup>70</sup>.

Some women who have phones may have her phone taken from her, however, as a means of policing her behaviour; *“There might be an instance when a woman might be denied the phone, if she is using it in the wrong way - phoning boyfriends”*<sup>71</sup>; *“Some men don't like their wives, and don't trust their wives so they don't like them having a phone”*<sup>72</sup>. In general, however, women direct beneficiaries kept the phones themselves; *“Now we have learned, we know how to operate [phones]! [Husbands have] no problem with [us having] phones. Because they know that these phones are coming with money”*<sup>73</sup>, and valued them as a means of direct contact with relatives in other villages; *“In the past, we couldn't even borrow a phone to send messages to a relative like making arrangement for a funeral. Men were stealing from us - always asking us to buy airtime to send a message and the rest of the airtime was kept by them”*<sup>74</sup>.

## Distribution

Women and men felt safe at distribution points. In the majority of cases, distribution centres were located close to villages. Women and men reported that the presence of police and community committees at distributions helped them to feel safe. Of the 24 groups met with, only one<sup>75</sup> felt that the distance that they had to travel (approx. 12km) was too long, and suggested that a closer point should have been established. This group described how women walked to and from distributions in large groups to avoid harassment or trouble while travelling.

A 2013 WFP study of programmes in 8 countries<sup>76</sup> found that cash and voucher transfer interventions tend to increase women's time burden as the time taken to travel to distributions to collect their transfers interfered with their household chores. However, there were no complaints, apart from the one mentioned above regarding distance, from participants regarding the time it took to attend distributions. It was clear that participants highly value the transfers and do not resent the time it takes to collect them.

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69. Female direct, TA Tengani, GVH Ntlongo

70. Male direct, TA Ngabu, GVH Machuwa, Nsanje

71. Male direct, TA Ngabu, GVH Machuwa, Nsanje

72. Male direct, TA Nda, SubTA Ndoku, GVH Kangwera, Mchinji

73. Female direct, TA Ndua, STA Nyoka, GVH Kangwera, Mchinji

74. Female direct, TA Ndua, STA Nyoka, GVH Kangwera, Mchinji

75. TA Zulu, GVH Mgulua, Village: Nanea, Mchinji

76. Berg, M., Mattinen, H., & Pattugalan, G. (2013) “Examining protection and Gender in Cash and Voucher Transfers” WFP/UNHCR

Participants also reported that there were few problems with distributions, and that procedures were transparent, with beneficiaries clearly informed of how much cash they would be receiving; “We could tell how much we should receive because we received the [text] messages. At distribution there is a display board”<sup>77</sup> and were aware of how they could complain if necessary; “[if a problem] we could go the procedure, there was one committee member set aside for that. We were given the number for a toll free line”<sup>78</sup>.

Participants in Nsanje complained about the scarcity of Airtel agents with whom to cash out. They pointed out that there was no agent available in Mbenje town (TA Ngabu), which meant they had travel to Nsanje Boma, and engage with a specific agent who forced them to purchase goods from his business before he would allow them to cash out. This complaint was addressed by GOAL staff, who visited the agent in question and ended this practice.

## Targeting polygamous households

As discussed in the gendered context section, polygamous households are common throughout both research districts. All participants stated that in polygamous households, only one family should be targeted. Participants viewed polygamous families as a single unit and ruled that it would be unfair for each ‘branch’ to be targeted. This would be seen as a single husband benefitting several times from the programme through each of his wives; “Polygamous households. In most cases, they were registering just one, because they all belong to one husband”<sup>79</sup>. The idea that each ‘extra’ wife could be registered as a FHH was dismissed; “Not possible to register them all as beneficiaries. People in the community already know they are one family!”<sup>80</sup>



Men were more confident about taking part in FGD activities than women, and were also more likely than women to write words than draw pictures to represent items

77. Male direct, TA Nda, SubTA Ndoku, GVH Kangwera, Mchinji.

78. Male direct, TA Nkanda GVH Kawele, Mchinji.

79. Female direct, TA Nkande, GVH Kawele, Mchinji.

80. Male GVH, TA Ngabu, GVH Kaudza, Mchinji)

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In general, polygamous men were viewed as 'better off'; the ability to marry more than one women being perceived as a marker of wealth, and so were seen as being less in need of CTs; *"Most of those who were manning two or three wives, they have something that he can care for those wives, so he is seen as better [off]"*<sup>81</sup>. In the case of polygamous households, two different ways of sharing the money were described. In some cases (particularly matrilineal areas in Mchinji, where 'sister wives' often live in different villages), it is generally just the first wife who is targeted, as she is likely to be neglected by her husband now that he has married a new wife. However, this is not always the case, with family dynamics leaving younger wives with little power; *"Polygamous households. Only one is targeted. Only husband or elder wife. Younger wives have problems. They have large families but they can't say anything"*<sup>82</sup>. In other cases, the money is divided between the wives; *"In polygamous HHs, just one family targeted, depending on the level of poverty between the 2 households. Whenever one family is registered, it means the whole family is supported"*<sup>83</sup>. This however, is not always done fairly, with one FGD participant in TA Ngabu, Nsanje, stating that she (as a younger wife) received just 1,000Mkw of the transfer.

Using CBT as a targeting approach restricts any changes to this approach, as participants considered it fair to target a polygamous family just once, regardless of the number of wives and children in that family.

### **Conscientisation: Awareness of Inequalities**

The project has had no discernible impact on people's awareness or understanding of inequalities between women and men. This is not surprising as the project did not explicitly set out to address structural inequalities or gendered attitudes or behaviours in anyway. The results of the Gender Equality Scale (See Annex A) indicate deeply entrenched gendered attitudes regarding women's and men's roles, appropriate behaviours, and means of policing norms. Interestingly, the survey showed that women hold significantly more conservative views about women's positions, and the appropriate use of violence to police women's behaviours, than men. As it is women whose behaviours are policed by these norms, they are more likely to be tightly bound by these conservative attitudes than men. Men have the freedom to express more liberal gendered attitudes than women as they are not the ones bound by them and so are unlikely to face sanctions within the community for doing so.

Male participants of FGDs indicated knowledge of the 'shoulds' of gender equality, and gave 'progressive' responses to some issues about gender equality<sup>84</sup>. Many participants, especially in Nsanje, reported that there had been civic education on issues of gender in their area. It is possible that, when giving responses to a non-Malawian female researcher, men gave responses that they thought would please the researcher. However, while many men seemed to know what they 'should' answer, there was little evidence of any genuine 'will' to change, or of a collective aim towards reducing inequality.

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81. Male direct, TA Nda STA Ndoka GVH Kangwera, Mchinji

82. Male direct, TA Ngabu, GVH Machuwa, Nsanje.

83. Male direct, TA Nkanda GVH Kawele, Mchinji.

84. See discussion on 'Masqueraders' in Wendoh, S. and Wallace, T. (2006) "Living Gender in African Organisations and Communities: Stories from The Gambia, Rwanda, Uganda and Zambia" Transform Africa.

## Stereotypes

People's adherence and belief in stereotypes can be a means of identifying their awareness of the ways in which inequalities are constructed. Stereotypes that surround gender and cash transfers abound. The 2011 'Walking the Talk'<sup>85</sup> report acknowledged that CTs that target women are based on the assumption that women in their private sphere roles of wife and mother are a more reliable means of ensuring that cash is used appropriately at household level. A 2006 Concern Worldwide evaluation in three districts in Malawi<sup>86</sup> noted that the assumption that "women who receive food will use it to feed their children, while men who receive cash will waste it on womanising and drink", while rooted in significant empirical evidence, is an overly simplistic stereotype.



An FGD in TA Tengani, Nsanje was interrupted by a passing herd of cattle

This research in Nsanje and Mchinji notes that there is validity in some of these assumptions about men and women's behaviour. Both men and women were able to pinpoint many examples of misuse of cash by men, and 'positive' use of cash by women; "Mostly men do little in terms of taking care, most responsibility falls on women. We see the need of sending a child to school, but the man does not see it"<sup>87</sup>; "We would love to have CTs solely targeting women. Women are not mischievous. Most men are mischievous and misuse money. Men have multiple affairs and drink"<sup>88</sup>; "He [husband] can take it for beer drinking. It's important to write women [on ration card] because when women is registered, money will be used for domestic reasons. The money can go in the name of the husband, but you may never see even a tambala. They should register women and then she can share with husband"<sup>89</sup>.

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85. Brady, C. (2011). *Walking the Talk: Cash Transfers and Gender Dynamics*. Concern Worldwide and Oxfam GB

86. Devereux, S., Mvula, P. & Solomon, C. (2006) "After the FACT: An Evaluation of Concern Worldwide's Food and Cash Transfers Project in Three Districts of Malawi" IDS, University of Sussex/Concern Worldwide

87. Female direct, TA Mavwele, GVH Mphalabungu, Mchinji.

88. Female partner, TA Ngabu, GVH Kaudzu, Nsanje.

89. Female direct, TA Ndua, STA Nyoka, GVH Kangwera, Mchinji.

Some men disputed the negative stereotypes about men saying “Most of the men bring back the money to their wives. It’s not every man who takes the money to go and buy beer”<sup>90</sup> Women also acknowledged that while this stereotype does not apply to all men, there is veracity in the generalisation; “Many men used money for domestic purposes. It means there is humanity in that person, but many of them were going for beer drinking. It’s the woman who takes care of everything. Early in the morning women will be thinking what to feed the children, but men don’t think of that, they just leave the home if there are problems”<sup>90</sup>.

The ‘Walking the Talk’ report discusses how these negative stereotypes pervade discussions around CTs; “Men are often negatively stereotyped as self serving, spending money on themselves, on cigarettes, alcohol and other women. Men are seen to be able to walk away from domestic demands, leaving women and children without support”<sup>92</sup>. It goes on to warn that designing programmes based on these stereotypes may normalise such behaviour. This study in Mchinji and Nsanje takes a slightly different view. The research notes that while CT programmes don’t want to risk reinforce stereotypes and normalising ‘negative’ behaviours by rooting project design entirely on stereotype and assumption, it is important to acknowledge the reality of many participants experience. Dismissing the stereotype entirely may result in reducing women’s control of money, and reducing the positive benefits CTs can have in supporting women’s practical needs.

By targeting household heads, regardless of gender, rather than solely women, this programme did not ‘generalise’ men as being wasteful or unreliable. Although it wasn’t an explicit design feature of the programme, VCPCs instead addressed these stereotypes on a case-by-case basis, assessing each male household head’s likelihood of using the cash appropriately. This informal community based assessment of a husband’s ‘reliability’, while controversial, balanced the dilemma between accepting stereotypes and dismissing them entirely. It ensured that ‘reliable’ men were not stereotyped as ‘wasteful drunks’, while keeping cash out of the hands of men who (based on community perceptions) are likely to fulfil this stereotype. It was a practical approach to recognising that the stereotype was rooted in lived experience and ensuring that cash was more likely to be used for household needs, while not branding all men as unreliable and wasteful.

This approach however further complicates the role of the VCPC as they are no longer simply following the objective selection criteria as laid out in JEFAP, but are now also making subjective judgements about the behaviour and habits of their neighbours. It’s unclear what protocols could be put in place to avoid issues of VCPC members misusing the ‘power of judgement’ over their neighbours.

## Women’s Status and Relations in the community

The majority of FGD participants believed that receiving CTs made little difference to their standing in the community; “Nothing has really changed on attitudes or behaviours [in the community]”<sup>93</sup>. Some participants mentioned that while receiving CTs, they were not reliant on their relatives and neighbours for hand outs; “Only change is that we are able to depend on our own. Before we became beggars to our relatives and friends”<sup>94</sup>. However, participants who did mention a change in status, tended to note that the change was temporary, and that their status has reverted to previous levels as the CTs have ended.

90. Male direct, TA Ngabu, GVH Machuwa, Nsanje

91. Female direct, TA Ndua, STA Nyoka, GVH Kangwera, Mchinji.

92. Brady, C. (2011). *Walking the Talk: Cash Transfers and Gender Dynamics*. Concern Worldwide and Oxfam GB

93. Male direct, TA Ngabu, GVH Machuwa, Nsanje.

94. Male direct, TA Tengani, GVH Ntlongo, Nsanje.

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In many communities, the gap between the non-targeted poor, and the targeted very poor was relatively small, allowing the CT to elevate the very poor temporarily above the poor in terms of wealth. This led to issues of jealousy and resentment in some cases; “Some of them [the community] are mocking us now the CT has stopped. ‘Now it has stopped, we’ll see what you’re going to do’”<sup>95</sup> “More people have perception to say we are equal now it has stopped, but while we were receiving things were not ok with them... Some of the people are seeing us to be better off. Others feel good that lives have been improved but others don’t feel good about us, they want to be the ones benefitting”<sup>96</sup>.

A 2008 evaluation of a social cash transfer programme in Mchinji had similar results with intervention households reporting that they were more likely to feel jealousy from other households in their communities and, on average, community members were less likely to help them since receiving the cash transfer<sup>97</sup>. Other participants of this study reported that involving the entire community in the selection process reduced the likelihood of jealousy from those who were not targeted; “No jealousy, as it’s the same people who were mentioning our names [during targeting]”<sup>98</sup>.

However, in comparison to the 2008 report in which 22% of intervention households reported that they experienced more conflict in the community since receiving the transfer, participants of this study stated that their neighbours’ jealousy manifested only in terms of grumblings rather than any form of negative action; “Usually there were issues of jealousy, they were not happy that their friends were receiving money. But they would just talk without acting”<sup>99</sup>.

Men described how receiving CTs allowed their communities to view them positively as they were fulfilling their normative roles as men. However, they also emphasised that this improved status was temporary; “They look at us as providers ... Man is considered a provider. If you get ECT you are providing. Everyone looks at you and is happy, but now it has ended, quarrels may start”<sup>100</sup>.

Women described using CTs to contribute to community events and rites of passage such as funerals, may improve their standing in the community; “Funerals, everybody has to contribute maize or money. We feel bad if we don’t contribute. We don’t have anything to contribute but it’s an obligation. There’s a relationship at village level to say you should help each other. We have used ECT to contribute to community events like funerals. If we have [money] it’s not possible to not contribute. We feel that we are being helpful to one who is in need. Someday when the same thing happens [to us], we hope that others will be able to contribute”<sup>101</sup>. From the quote above, it’s clear that by allowing them to fulfil their community obligations by contributing to these events, women feel better about their place within the community, and feel good about themselves. Women asserted that these community obligations lie more heavily with women than with men, alluding to women’s traditional role in community management<sup>102</sup>; “Funerals. Women are more involved. The women feel it more than men, to have that edge of contributing more”<sup>103</sup>.

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95. Female direct, TA Ngabu, GVH Machuwe, Nsanje

96. Male direct, TA Ndua, SubTA Njoku, GVH Kangwera, Mchinji.

97. Miller, C., Tsoka, M., & Reichert, K. (2008) “Impact Evaluation Report: External Evaluation of the Mchinji Social Cash Transfer Project” USAID/Boston University/UNICEF

98. Male partner, TA Ngabu, GVH Kaudza.

99. Male GVH, TA Mlonyeni GVH Mlonyeni, Mchinji.

100. Male direct, TA Ngabu, GVH Machuwa, Nsanje.

101. Female direct, TA Ngabu, GVH Ngabu, Njovi 1, Nsanje.

102. Moser (1993) discusses women’s triple role in reproductive work, productive work and community managing and community politics.

103. Female direct, TA Ngabu, GVH Ngabu, Njovi 1, Nsanje.

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These findings mirror a 2013 WFP study of programmes in 8 countries<sup>104</sup>, which found that cash and voucher transfer interventions had minimal impact on women's social status and gender relations. Giving cash to women did not necessarily mean that their roles, gender relations or perceptions of women were improved.

## **Mobilisation: Power and Agency**

Within the target communities, men are seen as holding power within their households. When asked about who holds power, quite varied responses were given, demonstrating complex understandings of power. When describing when they feel powerful, many men described situations when they dominate their wives; *"We feel powerful when we are ruling over the household... having that authority over the household makes us feel more power"*<sup>105</sup> *"I feel powerful ... When we are on top of women"*<sup>106</sup>. Lukes (2005) described this dimension of power as 'power over'; the ability to exercise domination over an individual or the agenda<sup>107</sup>.

However men described feeling other forms of power too. For example, when men in Nsanje described how CTs helped them to feel more powerful; *"We feel powerful when we receive money from CTs or from agriculture (Men shake hands and laugh together). It is the money that is ruling, giving us power. Because money is power"*<sup>108</sup>. CTs give men the power to support their families, and give them the wherewithal to engage in agriculture. Gavanta & Cornwall (2006) described this form of power as 'the power to act'<sup>109</sup>. The fungible resource of cash gives them options and choices.

When men feel agency, the 'power to act', it is a form of power that can be shared and is 'empowering'. This form of power is a 'rising tide that lifts all boats' demonstrated when the same men in TA Ngabu who described 'money as power' went on to say, *"For women, if the men have power, they feel more powerful. Even the children will be happy because there is money in the house"*<sup>110</sup>.

Women's power was described in interesting ways. Men in Nsanje recognised that both men and women have different forms of power found within their traditional roles; *"There is no one who has more power than the other - it depends on the roles - man goes to fetch the food, woman stays at home to cook for the family"*<sup>111</sup>.

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104. Berg, M., Mattinen, H., & Pattugalan, G. (2013) "Examining protection and Gender in Cash and Voucher Transfers" WFP/UNHCR

105. Male direct, TA Tengani, GVN Ntolongo, Nsanje.

106. Male direct, TA Mawele GVH Kalelangwe GVH Mphalabungu, Mchinji.

107. Lukes, S. (2005) "Power. A Radical View" 2nd Ed. Pelgrave, Macmillan, Hampshire.

108. Male direct, TA Ngabu, GVH Ngabu.

109. Gavanta J. and Cornwall, A (2006) "Power and Knowledge" Chapter 6 in Reason, P., and Bradbury, H. "Handbook of Action Research" Sage, London, pp. 71 – 82.

110. Male direct, TA Ngabu, GVH Ngabu.

111. Male direct, TA Ngabu, GVH Ngabu, Village Njovi 1, Nsanje



*Strong opinions in TA Ngabu, Nsanje*

Women described feeling power and control within their traditional roles; *“We are always submissive to our husbands. Most of the time, we respect our husbands. We feel powerful when we are respecting our husbands - we are the ones cooking and caring for him. Ensuring he is clean”*<sup>112</sup>. By fulfilling the ideal of womanhood; cooking and caring for their husbands, respecting him as head of the family, women felt secure and powerful in their gendered identities.

Men described women’s familiarity with the house, and their knowledge of its workings as a form of power, although the inherent contradictions in this view were expressed by a man, when he said *“The woman has power because the man goes out and the woman stays at home. Woman is the custodian of the house. They have power. They would say that it is men, because they haven’t realised that they are the one who is powerful. They are afraid that if they say that they have power that the man will shout at them, but we can see it is the woman that has power”*<sup>113</sup>. This description is incongruous, as the woman is ‘powerful’, yet afraid of angering her husband by saying so, demonstrating the complexities and fluidity of how people perceive and feel power in their homes.

Women also described their power in other ways, seeing their resilience and perseverance as a form of power. Their ability to withstand the structural inequalities they face imbuing them with strength and ‘power within’; *“We have more workload than them [men], we feel we are more powerful than them. Despite having husband, most burden is on the woman. When there is a problem, the man might run away, but the woman will be there facing the problem. When giving birth, we actually bear the pain”*<sup>114</sup>.

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112. Female partner, TA Mlonyeni, GVH Mlonyeni, Mchinji

113. Male direct, TA Tengani, GVH Ntolongo, Nsanje.

114. Female direct, TA Mawwele, GVH Mphalabungu, Mchinji.



Participants in TA Dambe, Mchinji, add to a ‘decision tree’

Both men and women described feeling powerful when farming, cultivating land and harvesting. It was clear that all participants feel in control of their lives when they grow crops and can provide for their families; “We will feel more powerful when we have more crops”<sup>115</sup> “[We feel powerful] when we produce more from the farm”<sup>116</sup> “We feel powerful when we have eaten. When you have harvested - if you have done farming and harvested a lot! Out of that you can buy different things and you can invest in the future”<sup>117</sup> “when we farm and produce enough and have enough food in the house, we feel powerful”<sup>118</sup>; “Whenever we go to the fields to cultivate to find foods for the household. In difficult times, when husband has gone to find food, it feels like you are actually human”<sup>119</sup>.

## Power and agency within programme activities

The power that men and women feel when cultivating and harvesting links to the value that participants put on the seed distribution which occurred alongside cash distributions in Nsanje and Mchinji districts<sup>120</sup>, with a large proportion of the participants mentioning the distribution of seeds as a positive part of the project; “Better to get MVAC [than SCT because the] project is also attached to other aspects like distribution of seeds”<sup>121</sup>

115. Male direct, TA Ngabu, GVH Ngabu, Nsanje.

116. Male direct, TA Tengani, GVH Ntolongo, Nsanje.

117. Male direct, TA Tengani, GVH Ntolongo, Nsanje

118. Female partner, TA Tengani, GVH Ntolongo, Village Losi, Nsanje

119. Male partner, TA Mawwele, GVH Kalelangwe Village Mphalabungu, Mchinji.

120. Seed distributions occurred as a complementary activity to CTs in Mchinji, Mchinga, Mulanje and Nsanje.

121. Female direct, TA Nkande, GVH Kawele, Mchinji

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The linking of seed distribution to cash distributions was a positive step as it required active engagement of beneficiaries. In CT programming, beneficiaries are provided with CTs and also receive ‘messaging’ on issues such as nutrition and child protection. They are ‘passive’ recipients of aid. CTs are an interim, emergency response measure designed to alleviate suffering, they are not designed to support beneficiaries to be agents in their own development. The addition of seeds helped in some way to offset this, as beneficiaries contributed to the project outcomes by cultivating these seeds. This was demonstrated by a beneficiary in Mchinji who when thanking Concern for the intervention, emphasised that they would ‘hold up their side of the bargain’ by working hard to grow the seeds;

*We thank CWW because they have saved so many lives. So many people are appreciating but because of this year, it seems that situation will be worse. Since receiving, it has helped us so much. For maize seeds, it has helped so many. We will try our best to properly use the assets like potato vines, maize seeds, vegetable seeds. We will try our best to work hard so that benefits can be seen. It's not possible for us to be relying on others. We have to stand on our own. God should bless Concern Worldwide<sup>122</sup>.*

Through cultivating the seeds, this participant was able to in some way lessen the “NGO as provider/beneficiary as receiver” dynamic and claim agency as a partner in the intervention. Both men and women in Nsanje and Mchinji described how they valued the seed distributions.

## **Control: Decision Making**

Women and men in both districts described how CTs made it easier to make decisions; “*With CTs, there is ready money - so decisions can be easily made*”<sup>123</sup>. As the CTs were received during a hunger period, there was no decision to be made, as food had to be prioritised. This meant that discussion about how to spend the cash transfer required less negotiation and compromise than such discussions at other periods, as the money had to be spent on food; “*When using money from agriculture, you already have money in the house. When you have ECT, the money is mostly directed to food. Options to spend are limited - only after buying food can you pay school fees and buy clothes*”<sup>124</sup>; “*With CTs, it's easier to make decisions because we have a purpose for the money, it is meant to buy food. It's easier to say, money has come, let's go and buy food*”<sup>125</sup>.

Men and women described when there is nothing in the house as times when there is no way to make a decision, as there are no resources about which to make a decision. In this way, the ability to make a decision gives women and men a level of power, of control over their circumstances that many of the beneficiaries did not have during this hunger period; “*We feel powerful when we make decisions. When we don't have money, decision making is low*”<sup>126</sup>.

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122. Male direct, TA Nda, SubTA Ndoku, GVH Kangwera, Mchinji

123. Male direct, TA Ngabu, GVH Ngabu, Nsanje.

124. Male direct, TA Ngabu, GVH Ngabu, Nsanje

125. Male partner, TA Tengani, GVH Ntolongo, Nsanje

126. Female direct, TA Ngabu, GVH Ngabu, Village Njovi 1, Nsanje



A participant takes part in the Gender Equality Scale Survey in TA Ndua, Mchinji

All participants, both men and women, mentioned that joint decision-making took place<sup>127</sup> when deciding how to spend CTs; *“It is a joint decision. Money comes in, we do programming as a pair”*<sup>128</sup> ; *“We make a joint decision after the money is in”*<sup>129</sup> ; *“we have to discuss everything”*<sup>130</sup> ; *“We discuss with wives after identifying all problems and prioritise what to spend it on”*<sup>131</sup>. This was the case whether it was the husband or wife who was the named beneficiary. Many participants were able to pinpoint exactly when and where discussions around how to spend cash transfers take place, giving detailed descriptions of conversations about money that happen when eating, or in bed before going to sleep; *“In my case, we chat late in the evenings after supper”*<sup>132</sup> *“When we are listening to the radio is when my wife tells me what she thinks about decisions”*<sup>133</sup>.

Men described how women’s roles in the domestic sphere give them a better insight into the needs of the household, and so their views need to be taken into account when spending CTs. However, this quote demonstrates that the final decision still rests with the man; *“Women prepare food so she is in a better position to know about food. She will propose to the husband ‘food is finished’ and he will say ‘Let’s buy!’”*<sup>133</sup> .

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127. This contrasts with a 2016 Christian Aid study regarding the influence of VSLs on decision-making in households which found significantly less evidence of joint decision making.

128. Male partner ben, TA Ngabu, GVH Kaudza, Nsanje

129. Female partner, TA Ngabu, GVH Kaudza, Nsanje

130. Female direct, TA Mawwele, Mchinji

131. Female partner, TA Ngabu, GVH Kaudza, Nsanje

132. Male partner, TA Mawwele, GVH Kalelangwe Village Mphalabungu, Mchinji.

133. Male partner ben, TA Ngabu, GVH Kaudza, Nsanje



Women in TA Mawwele, Mchinji draw sources of income onto a 'decision tree'

Participants' responses showed that couples were more likely to discuss the spending of CTs, than the spending of money from other sources; "Money from harvesting was different than money from MVAC - each time we receive CT we have to discuss with wife"<sup>134</sup>; "now we have built trust, because most of the decisions we are making together"<sup>135</sup>; "It's easier to make decisions with CTs. Now they have come to an end this month, the husbands will be jumping up and down"<sup>136</sup>; "Because the [CT] money was meant to be used in the HH, it has helped us to be agreeing on what to spend the money on"<sup>137</sup>. While husbands often make unilateral decisions regarding money from other sources, the sensitisations at the onset of CTs stressed the message that money should be spent as a household; husband and wife together; "There is a change [in how decisions are made] because most of the men are able to understand the purpose of the money, and are not taking it for other purposes, because the money is for the whole family. It means all members should be supported"<sup>138</sup>.

The interim period between notice of selection and the cash distribution, and the awareness of when the next distributions would take place provided a period in which couples could plan together, and allowed the emphasis to be put on household needs, rather than more spontaneous spending on other items; "When we receive the money, we already have a plan for the household. Usually buy shares, or pay for milling. Both decide on the plan"<sup>139</sup>. This finding echoes those of the Walking the Talk report, which reported that, "CTs increased intra-households discussions about how to spend the money given, in contrast to traditional male dominated decision making"<sup>140</sup>.

133. Male partner ben, TA Ngabu, GVH Kaudza, Nsanje

134. Male partner, TA Mawwele, GVH Kalelangwe Village Mphalabungu, Mchinji

135. Male direct, TA Ndua STA Njoka GVH Kangwera, Mchinji

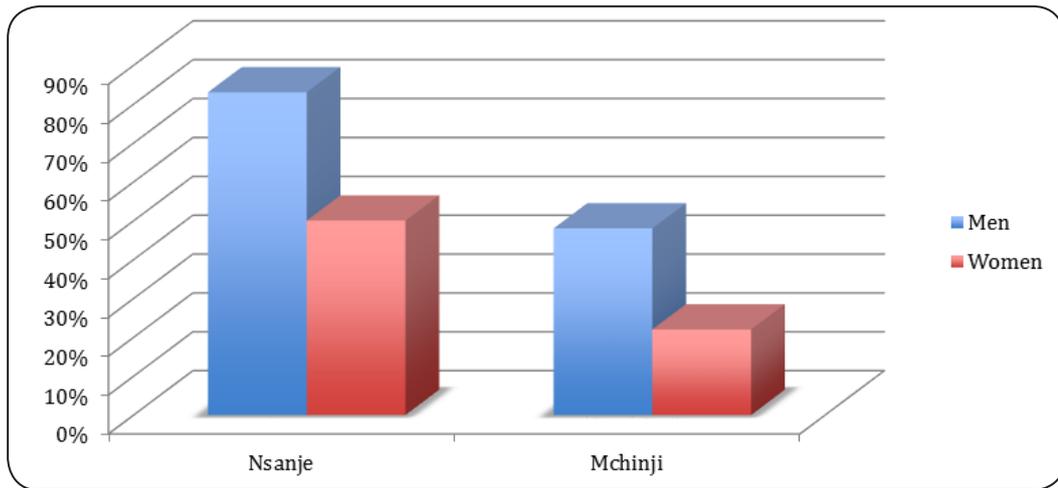
136. Female direct, TA Tengani, GVH Ntolongo, Nsanje

137. Female partner, TA Zulu, GVH Mgulua, Village: Nanea)

138. Female direct, TA Mawwele, GVH Mphalabungu, Mchinji.

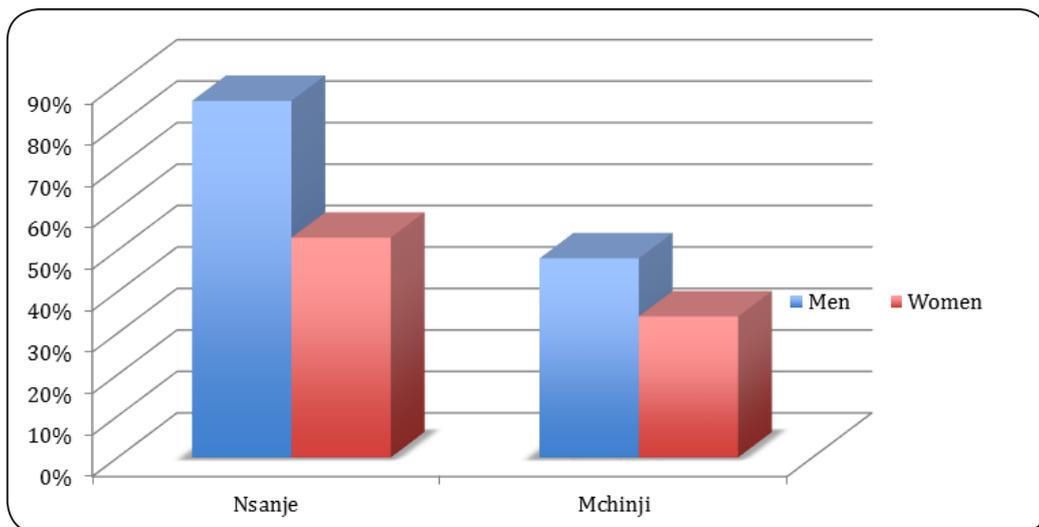
139. Male partners, TA Tengani, GVH Ntolongo, Village Losi, Nsanje

140. Brady, C. (2011). *Walking the Talk: Cash Transfers and Gender Dynamics*. Concern Worldwide and Oxfam GB



*% of men and women who believe that decisions about food and clothing purchases are made jointly*

Interestingly the Gender Equality Scale survey illustrated significant disparities between women and men's perceptions of who has the final say about decisions including food and clothing purchases, and large investments. 83% (Nsanje) and 48% (Mchinji) of men reported that decisions regarding food and clothing purchases were made jointly with their wives. In contrast, only 50% (Nsanje) and 22% (Mchinji) of women reported the same thing.



*% of men and women who believe that decisions about large purchases are made jointly*

This pattern was repeated when discussing large purchases; with 86% and 48% of men reporting joint decision-making, compared to 53% and 34% of women in Nsanje and Mchinji respectively. These disparities could be a result of 'verbal photoshopping' of attitudes by male respondents in order to paint a more positive picture of their households. It could also indicate that men and women have different ideas about what constitutes a joint decision. The FGD data indicated that while discussion does take place between husbands and wives, the final say rests with the husband. Husbands may perceive a decision which has been preceded by joint discussion as a 'joint decision' even when it is they themselves who has the final say, while women may see that not as a joint decision, but rather their husband's.

Through both the survey and FGD data, it is clear that husbands seek their wife's views on household decisions. However, the final decision rests with the man as head of the household; *"Mostly we make decisions together, buying livestock and whatever we earn from farming. Normally the final decision is made by a man. Decision of buying of farm inputs made by men"*<sup>141</sup>; *"Normally I am the one who prevails. But in some cases, it depends on the type of disagreement. When I am wrong, I will admit I am wrong. But in most cases, 3 quarters often will not admit they are wrong, so the man will usually prevail"*<sup>142</sup>; *"In most households in how to spend the money, although we might agree, men have the final say"*<sup>143</sup>. Husbands tended to have the final say on decisions even when the woman was the named beneficiary, as wives are generally expected to present any earnings they receive to their husbands; *"When I receive money, I was giving money to my husband"*<sup>144</sup>. This was confirmed in the survey with 68% of men and 57% of women across the two districts agreeing with the statement "If a woman works, she should give her money to her husband". This echoes the 2011 findings of the 'Walking the Talk' report, which stated "while it is a notable achievement that women have had a place in discussions about financial management, men have kept their place as household head and as key decision makers"<sup>145</sup>.

One man in Nsanje succinctly illustrated that a truly equal joint decision is not possible when he asked, *"Is it possible to have two chiefs in the village?"*<sup>146</sup>. Another man responded to his rhetorical question by describing the risk of getting things wrong having not listened to his wife's views; *"[But] if you do something and it goes wrong, the wife will say 'I told you so'"*<sup>147</sup>.

## Relationships

The majority of participants reported that receiving CTs reduced conflict in their homes, by reducing stress as basic needs were met; *"There weren't any disagreements. It has helped us to love each other in the families"*<sup>148</sup>. This seems to be a general outcome of CT programmes as reported in a 2014 literature review<sup>149</sup> synthesising the gender specific findings of nine CT project evaluations. In all of the evaluations cited, beneficiaries reported that CTs had a positive impact on household relations, reducing stress and tension.

CTs encourage discussion between husband and wife around how to use money (discussed above), which can also have a positive influence on household dynamics; *"Sometimes the relationship is improved because of joint decision making"*<sup>150</sup>; *"CTs didn't change anything [negatively] - rather it brought us together - we had to sit together and decide what to buy. we had to prioritise, we were always together"*<sup>151</sup>.

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141. Male partner, TA Mawwele, GVH Kalelangwe Village Mphalabungu, Mchinji

142. Male partner, TA Mawwele, GVH Kalelangwe Village Mphalabungu, Mchinji

143. Female direct, TA Mawwele, GVH Mphalabungu, Mchinji

144. Female direct, TA Ndua, Mchinji.

145. Brady, C. (2011). *Walking the Talk: Cash Transfers and Gender Dynamics*. Concern Worldwide and Oxfam GB

146. Male participant, TA Ngabu, GVH Ngabu, Nsanje

147. Male participant, TA Ngabu, GVH Ngabu, Nsanje

148. Female partner, TA Zulu, GVH Mgulua, Village: Nanea, Mchinji

149. Browne, E. (2014). *Evidence of impact of emergency cash transfers on gender and protection*. (GSDRC Helpdesk Research Report 1091). Birmingham, UK: GSDRC, University of Birmingham.

150. Male GVH, TA Ngabu, GVH Kaudza, Mchinji

151. Female partner, TA Mlonyeni, GVH Mlonyeni, Mchinji

A Group Village Head (GVH) in Mchinji reported that men were spending more time with their families as they were under less pressure to travel long distances (to Zambia) for ganyu; “Before they were devoting much time searching for piecework, but now they were staying close in their families and not going around searching”<sup>152</sup>; “For us [not registered] we were searching for ganyu, unlike our colleagues [who were receiving CT]”<sup>153</sup>. This is in line with the findings from a 2012 study of unconditional CTs in Somalia<sup>154</sup>, which reported that men were spending more time with their children as they didn’t need to migrate for work.



*Differences of opinion often emerged in FGDs, which provided a more nuanced understanding of the issues at play*

Women in Nsanje described how, by providing a ‘cash cushion’, CTs reduced the likelihood that a man’s drinking would lead to conflict in the house, as his spending money on alcohol was less likely to result in food shortages in the home; “CTs made marriages to be stronger as money was there. Because even if the husband goes to a drinking joint, the money will still be there. Food is there”<sup>155</sup>.

In these ways, CTs have helped to improve husband and wife relationships by reducing stress, encouraging joint decisions and allowing men to spend more time with their families.

152. Male GVH, TA Mkanda, GVH Kawele - GVH White Tumayo

153. Male non-beneficiary, TA Nkanda GVH Kawele, Mchinji

154. Wasilkowska, K. (2012). *Gender Impact Analysis: Unconditional Cash Transfers in South Central Somalia*. The Somalia Cash Consortium.

155. Female direct, TA Tengani, GVH Ntlongo

## Conclusion

CTs supported participants to meet their practical needs, fulfilling women's traditional roles as wife and mother, and restored men's sense of purpose in their role as provider. CTs also led to a temporary boost in women and men's standing within their homes and communities. However, CTs have not led to any long-term discernible change in men or women's status and power in the private or public spheres. Unsurprisingly, as there were not specific empowerment objectives in the project, CTs did not directly lead to women's 'empowerment'. However, they do support women in making the first steps on the ladder towards empowerment within the Longwe framework.

The research found that men were more likely to express progressive attitudes than women in both districts. This is probably due to women being more likely to face community sanctions, in the form of disapproval or rejection, for expressing such attitudes, as it is women who are policed by such norms. Restrictive gender norms then, while often imposed by men, are internalised and perpetuated by women.

Through CTs, men and women were able to support their households, feeding their families and sending children to school. The sharing of food bought with CTs helped to strengthen women's social bonds, and may make them more able to seek support from neighbours and extended family in times of need.



The project minimised barriers to women accessing project benefits by mainstreaming gender issues throughout; promoting women's participation on

VCPCs, involving women where possible in the targeting process, and putting security measures in place so that women felt safe and protected at distributions. Although this project does not specifically target women as beneficiaries, informal subjective assessment procedures by VCPCs attempt to target women if they believe the CT would be at risk of being misused if the husband were registered.

*Women reported that discussion was more likely with CTs than with other income*

This research found evidence that there is truth in some of the stereotypes around CTs regarding men and women's behaviour, with both men and women able to pinpoint examples of the misuse of cash by men, and the responsible use of cash by women. While these stereotypes are over-simplistic, ignoring them entirely could reduce the positive impacts that CTs have on households. VCPCs subjective assessment of men's reliability, while controversial, maximises CTs utility at household level, while ensuring that men are not 'all tarred with the same brush'.

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Some female participants reported improved standing within their communities. CTs helped them to contribute to community events, and allowed them to share with their neighbours. Men reported that Male and female participants reported that they no longer needed to beg their families or neighbours for support, and were less reliant on doing ganyu in their wealthier neighbours' fields. However, these changes to their status were found to be temporary, and did not last beyond the CT period. These changes are more likely to be long lasting if CT responses are linked to medium or longer-term recovery or livelihood objectives. Some participants reported that their neighbours were jealous of their receiving CTs, but there were no reports of jealousy escalating into malevolent action.

Men and women described the manner in which they experience power in different ways. Women described feeling power within their traditional subservient roles, but also through their resilience and perseverance. Men described feeling 'power over' women, when they exercise their cultural dominance. However, they also described feeling agency, when they have the resources and power to act, and to make choices. Both women and men described feeling power when cultivating and harvesting crops. Beneficiaries highly valued the seeds that were distributed alongside CTs, as their contribution to their own development through their cultivation of the seeds gave them some semblance of power and control over their situations.

CTs promote dialogue in the home, as men and women reported that they were more likely to engage in discussions about how to spend CT money, than income from other sources. The interim period between selection and distribution gave families an opportunity to plan for their spending, while sensitisations by Concern and GOAL prior to distributions emphasised joint decision-making at household level. While husbands and wives frequently discussed decisions, the final say generally rests with the man. Women's perspectives were generally sought when making decisions relating to food and the children, which fall within the remit of her traditional domestic role. Beneficiaries reported that food had to be prioritised by the household when they received CTs, reducing the likelihood of the cash being subject to negotiation and compromise. CTs were found to have helped to improve husband and wife relationships by reducing stress, encouraging joint decisions and allowing men to spend more time with their families.

CTs have been a life saving measure, supporting men and women's basic needs for food and other necessities during a protracted disaster situation. However, the state of disaster is not over, and is likely to intensify over the coming months. Sustained support is required to ensure that people not only survive, but take control of their lives and situations, as they so evidently desire to do.

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## Recommendations For Future Programming

### **Continue holding comprehensive sensitisations prior to targeting and distribution**

Strong community sensitisations that emphasised that CTs should target the household as a whole, and which described how the CTs should be used, reduced intra-household conflict between husbands and wives on how money should be spent. This activity should be included in future CT programming.

### **Continue strong inclusion and accountability practices during CT distributions**

The project encouraged gender parity on VCPCs, involved women where possible in the targeting process, and put security measures in place so that women felt safe and protected at distributions. These considerations assisted the project in addressing possible barriers to women's access to project activities and ensured that the project 'did no harm'. They should continue in future programming. CRM (Complaints Response Mechanisms) were seen to be functioning by beneficiaries, and allowed multiple channels for complaints. Anecdotal evidence indicated that some distribution points provided male and female help desk, to further reduce any possible barriers to accountability for women. This should be encouraged.

### **Promote linkage activities that provide beneficiaries with opportunities to be agents of their own development**

Linkage activities usually involve providing beneficiaries with pre-packaged 'messaging' on various issues. While CT distributions provide a useful opportunity to reach a wide audience with key health messages etc., care must be taken that a paternalistic donor/beneficiary dynamic, which places the beneficiary as a 'dependant' is not exacerbated. This research has shown that linking CTs to interventions that support participants' involvement in their own development, in this case seed distribution, allowed beneficiaries to become agents of their own development, rather than simply passive receivers of cash. CT programmes should aim for a blend of linkage activities, which encourage positive health practices while actively, rather than passively engaging beneficiaries.

### **Link CTs to Conservation Agriculture interventions**

In all TAs, when asked how the programme could be improved, beneficiaries requested links to agriculture inputs, and advice about farming techniques. Future CT programme could include linkages to CA outreach, as well as distribution of inputs to link emergency response distributions to participants' longer term resilience.

### **Continue targeting household heads alongside VCPC informal assessment of men's reliability**

Rather than solely targeting women, this project targeted both men and women as household heads. This avoided any risk of 'normalising' negative male behaviours or entrenching women's household burden. This study views VCPCs' informal assessment of men's suitability for targeting as a far from ideal, but practical approach to recognising that stereotypes about men misusing money, while overly simplistic, were rooted in lived experience, and making it more likely that cash be used for household needs. The practice avoided stereotyping men, while minimising issues in the cases where the stereotype rings true. However, as formalising this approach may prove controversial for implementing organisations, and may complicate the role of VCPCs, it may be best to allow VCPCs to use or not use this approach in their communities, as appropriate, based on how trusted the VCPC is within that community.

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## **Train VCPCs in gender sensitivity**

This research has shown that VCPCs role in CT programming goes beyond simply identifying beneficiaries using an objective screening tool. VCPC members have complex roles involving the negotiation of difficult community and household dynamics. Given the influence they have on the success of the programme at village level, VCPC members would benefit from intensive training on issues of gender and accountability.

## **Continue to link CT beneficiaries to VSL**

Beneficiaries in Mchinji and Nsanje reported using CT money to contribute to VSLs. VSLs then act as a conduit for cash; converting it from 'short-term' support, to a longer-term investment. This linkage increased the cash's 'transformative potential' as VSLs have many positive gendered impacts for women beyond their utility as a credit facility<sup>156</sup>.

## **Ensure the needs of polygamous households are considered during targeting**

This study has shown that generalisations about polygamous households abound at community level. These generalisations about a husband's responsibility to each of his wives, and about the family's perceived wealth may prevent members of needy polygamous households, particularly women, from accessing cash transfers. Further thought is required on how to include individual wives in polygamous household who meet JEFAP requirements, while respecting communities' decisions about who should be targeted through CBT.

## **Set realistic expectations about impacts of CT programming on gender equality**

This research has shown that although CTs have many positive benefits for women, they cannot be said to lead to women's 'empowerment', as empowerment is "a multi-faceted and long term goal that relies on individual, social, institutional and infrastructural change"<sup>157</sup>. As in this project, designers of CT programmes should be realistic about the expected benefits of the project to gender equality and empowerment.

## **Increase funding flexibility for programming in volatile contexts**

As was seen in Nsanje district, supply issues around maize made cash a less effective modality than had been originally expected. In this context, a 'mixed basket' of CTs and food rations may have been a more effective means of delivering support to beneficiaries. When funding programmes, donors should allow for

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157. Brady, C. (2011). *Walking the Talk: Cash Transfers and Gender Dynamics*. Concern Worldwide and Oxfam GB

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# Appendices

## Appendix A: Research Methodology

This gender analysis comprised several stages;

1. A desk review to better understand the project and contexts
2. Identification of appropriate Gender Analysis framework
3. Instrument development and refining
4. Primary qualitative research
5. Coding of data
6. Analysis and report writing

### Desk Review

In order to better understand the INGO Consortium's CT programme and Concern's role within it, gender dynamics within CT programmes and the requirements of the gender analysis process, a thorough desk review was conducted during the inception phase. An external literature review was conducted in order to better understand the issues and dynamics that relate to CTs in relation to gender in Sub-Saharan Africa, and Malawi in particular. An internal document review was also conducted in order to better understand the specific gendered context of Concern's implementation of the CT project. A detailed list of documents can be viewed in annex A.

### Identification of appropriate gender analysis framework

Gender Analysis framework identification was supported by a number of key sources, including March et al's (1999) "A Guide to Gender Analysis Frameworks"<sup>158</sup>, and the Oxfam (2005) 'Gender Training Manual', and was informed by discussions with Concern and GOAL's senior management. The Moser framework for gender analysis was identified as an appropriate framework in which to root the research. Roles are central to this framework, which is appropriate in the Malawian context, where women and men have very clearly differentiated roles in society. The analysis also borrows from Longwe's Women's Empowerment framework, examining the intervention's impact across Longwe's 5 levels of empowerment; Welfare, Access, Consciencisation, Mobilisation/Participation, and Control

### Instrument Development

Research instruments were developed based on several key sources including CARE (2012) "Good Practices Framework: Gender Analysis", the Oxfam (2005) 'Gender Training Manual' and C12's (2016) gender analysis of Village, Savings and Loans (VSL) in the 'Enhancing Community Resilience Programme' (ECRP) in Malawi. The research took a mixed methods approach, using a gender equality scale survey to gather background statistical evidence on gendered attitudes and behaviours in target communities, as qualitative methods of data gathering to unpack the impacts of CTs on gender dynamics and relations within communities. Qualitative research instruments such as focus group discussions (FGDs) were utilised as "qualitative research provides an in-depth, intricate and detailed understanding of meanings, actions, non-observable as well as observable phenomena, attitudes, intentions and behaviours"<sup>159</sup>. FGDs allowed for a clearer understanding and closer observation of group dynamics within communities e.g.

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158. March, C., Smyth, I., & Mukhopadhyay, M. (1999) "A Guide to Gender Analysis Frameworks" Oxfam Publications.

159. Gonzales, 2008 cited in Cohen, L., Manion, L., & Morrison, K. (2011) "Research Methods in Education" Seventh Edition. Routledge, Oxford.

contradictions of opinions within groups, and jokes and asides within conversations that can illuminate values and beliefs. Qualitative methods appreciate that there is no single truth, but multiple, fluid truths based on different perspectives and experiences<sup>160</sup>. One quantitative and three qualitative instruments (see annex B) were developed and used.



*The Concern Gender Equality Scale Survey in action in TA Mawwele, Mchinji*

perspective on the positive or negative effects the programme has had, as well as to gain insight into the gendered context within the community.

A shortened version of the **Concern Gender Equality Scale**<sup>161</sup> gathered statistics information measuring the prevalence of gendered attitudes and beliefs through a survey. The Concern Gender Equality Scale is an easy to administer scale, developed by Concern Worldwide's Programme Approaches and Learning Unit (PALU), which measures attitudes to gender equality which was developed in collaboration with Promundo, the organisation who originally developed the GEM (Gender Equitable Men) scale. It is important to note that this instrument was used to gather a quantitative measurement of qualitative data, as the resulting statistics are based on subjective (qualitative) attitudes and beliefs.

**Focus Group Discussion (FGDs)** were held with various groups including a) Women who were beneficiaries of the cash transfer programme and who received a transfer; b) Women who were in households that benefitted from the programme but whose husbands or other male relative received the transfer; c) Men who received a cash transfer as head of a household; and d) men whose wives received cash transfers.

**Key Informant Interviews (KIIs)** were conducted with Concern and GOAL staff members, district officials (District Social Welfare Officer (DSWO) and District Officer of Disaster Management Affairs (DoDMA)) and Community leaders (Group Village Heads, and Village Heads) to gain a broader

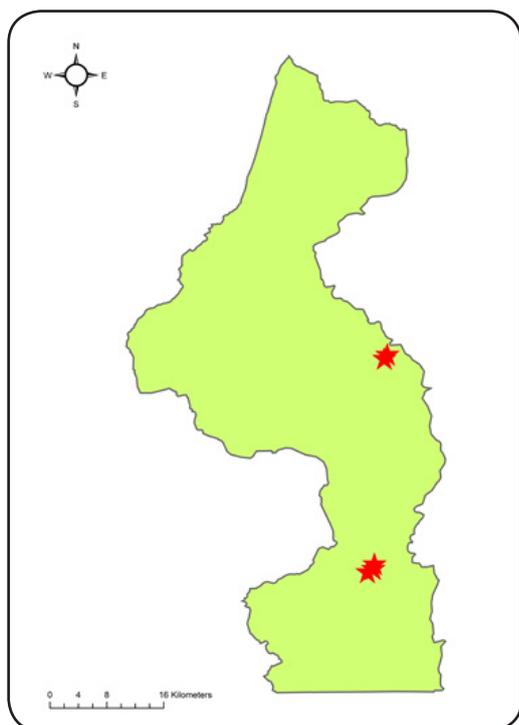
The **Decision Tree** tool was used with groups of women and groups of men, in order to discern whether CTs have any influence on gender dynamics relating to household decision-making, as well as to better understand notions of power within households.

## Primary Research

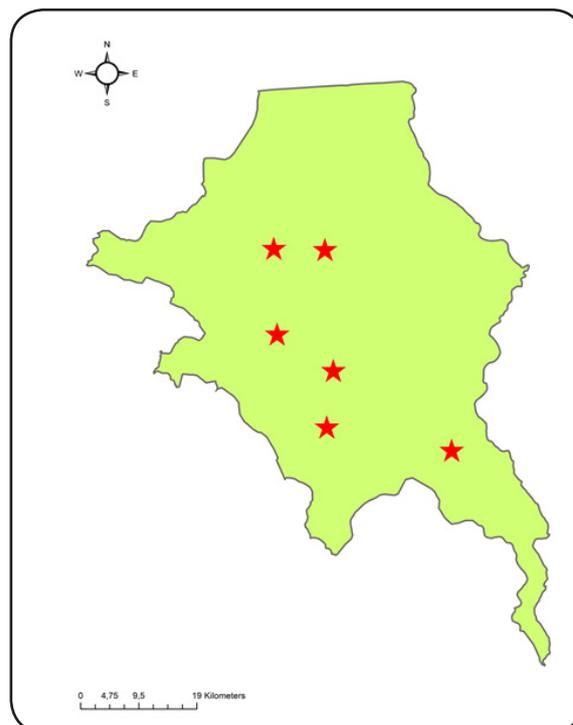
In late April and early May of 2016, the C12 consultant visited Nsanje district and Mchinji district to conduct primary research. GOAL implemented CTs in Nsanje, and the Nsanje research team comprised a balance of Concern and GOAL staff; a Concern project officer from the Nsanje livelihoods programme, an external enumerator, the GOAL gender focal person, and the M&E officer for the CT programme. In Mchinji, where Concern implements CTs, the team comprised the CT project manager, a CT project officer, a project officer from Concern's Health and Nutrition programme, and an external enumerator. In both districts, FGDs were conducted in Chichewa, with translation done on the spot by Concern or GOAL staff members.

In 6 communities across 2 TAs in Nsanje and 6 communities across 6 TAs in Mchinji, a group of men and a group of women was interviewed, with two team members conducting the Gender Equality Scale Survey while the consultant and translators conducted FGDs or Decision tree discussions. A total of 24 FGDs were conducted (12 FGDs and 12 Decision Tree discussions) with 207 participants (107 female and 100 male). Responses to questions were recorded on instrument templates, with direct quotes taken where possible. The consultant and research team members discussed the interviews daily to clarify meanings and correct misconceptions. 176 of the FGD participants (84 women and 92 men) also participated in the Concern Gender Equality Scale survey; 72 in Nsanje and 104 in Mchinji.

A total of 11 Key Informants were interviewed (8 male and 3 female). They consisted of 4 project staff (2 from GOAL (2 male), and 2 from Concern (1 male, 1 female)), 2 district officials (DSWO in Nsanje and DoDMA in Mchinji (2 male)), and 5 Village leaders (2 from Nsanje (1 male, 1 female) and 3 from Mchinji (2 male, 1 female)) Interviews with Project staff and district officials were conducted in English, while interviewed with Village leaders were conducted in Chichewa.



Map 1: Nsanje communities visited



Map 2: Mchinji communities visited

The tables indicate the breakdown of participants based on district and target group (*Direct* meaning the direct/named beneficiary of the CT, *Partner* meaning the husband or wife of a named CT beneficiary, and *Non ben* meaning a non-beneficiary of CTs).

	MALE	FEMALE	TOTAL KIIs
Nsanje	4	1	5
Mchinji	4	2	6
Total	8	3	11

Table 1: KII participants

	Men			Women			Total FGDS
	Direct	Partner	Non ben	Direct	Partner	Non ben	
Nsanje	31	14	0	31	21	0	97
Mchinji	19	33	3	30	23	2	110
Total	50	47	3	61	44	2	207

Table 2: FGD and Decision Tree Participants

## Coding and Analysis of Data

The qualitative FGD and KII data collected was coded using the key objectives of the research to group findings. Coding was done twice; initial coding involved using MS Excel to group raw data under the four key themes; Impacts of CTs on intra-household decision making; Positive and negative effects of CTs on community and household level gender dynamics; Ways in which CTs meet women and men's practical needs; and ways in which CTs contribute towards women's strategic needs. The second stage involved further sorting the quotes by subtheme, adding commentary and initial analysis. Once tangential sub-themes were excluded, this resulted in 29 sub-themes. It was at this stage that macro-trends began to emerge and in-depth analysis could take place.

Quantitative survey data for the Concern Gender Equality Scale was collected using Android-Tablet devices with ODK data collection software, which reduced the likelihood of errors in data input. Analysis of survey data was done by the C12 statistician using Excel, PSPP (free alternative to SPSS), and the statistical software R. The results of the survey were then incorporated into the overall analysis.

## Analysis and Report Writing

The 27 qualitative subthemes were then grouped into 6 macro themes. These were then sorted using Longwe's levels of empowerment as a guide so that they demonstrate progression in terms of promoting women's empowerment.

The quantitative data from the Gender Equality Scale was used in several ways. Firstly, it provided a statistical insight into the gendered context in which the project took place. It provided demographic data on research participants that would have been time consuming and difficult to record in an FGD context. It was also used to triangulate gendered attitudes and behaviours expressed in FGDs and to identify outliers within the qualitative data.

## Appendix B: Results of Concern Gender Equality Survey

**Appendix B Table 1: Attitudes towards women's rights. Percentages are shown disaggregated by gender and district.**

		NSANJE DISTRICT				MCHINJI DISTRICT			
GENDER		MALES	MALES SUM	FEMALES	FEMALES SUM	MALES	MALES SUM	FEMALES	FEMALES SUM
WHEN WOMEN WORK THEY ARE TAKING JOBS AWAY FROM MEN.									
	STRONGLY AGREE	5.6		2.9		2.1		0	
	AGREE	30.6	36.2	41.2	44.1	29.2	31.3	32.1	32.1
	DISAGREE	27.8		23.5		62.5		57.1	
	STRONGLY DISAGREE	36.1	63.9	32.4	55.9	6.2	68.7	10.7	67.8
	SUM	100	100	100	100	100	100	100	100
WHEN WOMEN GET RIGHTS THEY ARE TAKING RIGHTS AWAY FROM MEN (%)									
	STRONGLY AGREE	0		2.9		6.2		1.8	
	AGREE	19.4	19.4	38.2	41.1	16.7	22.9	18.2	20
	DISAGREE	38.9		29.4		58.3		63.6	
	STRONGLY DISAGREE	41.7	80.6	29.4	58.8	18.8	77.1	16.4	80
	SUM	100	100	100	100	100	100	100	100
RIGHTS FOR WOMEN MEANS THAT MEN LOSE OUT.									
	STRONGLY AGREE	8.3		2.9		0		1.8	
	AGREE	16.7	25	29.4	32.3	8.3	8.3	10.7	12.5
	DISAGREE	33.3		38.2		72.9		67.9	
	STRONGLY DISAGREE	41.7	75	29.4	67.6	18.8	91.7	19.6	87.5
	SUM	100	100	100	100	100	100	100	100
IF A WOMAN WORKS SHE SHOULD GIVE HER MONEY TO HER HUSBAND.									
	STRONGLY AGREE	25		20		4.2		1.8	
	AGREE	36.1	61.1	37.1	57.1	68.8	73	52.7	54.5
	DISAGREE	11.1		25.7		18.8		30.9	
	STRONGLY DISAGREE	27.8	38.9	17.1	42.8	8.3	27.1	14.5	45.4
	SUM	100	100	100	100	100	100	100	100
IF A MAN PAID A BRIDE PRICE FOR HIS WIFE, HE OWNS HER.									
	STRONGLY AGREE	8.3		26.5		16.7		9.3	
	AGREE	41.7	50	32.4	58.9	25	41.7	37	46.3
	DISAGREE	8.3		23.5		50		42.6	
	STRONGLY DISAGREE	41.7	50	17.6	41.1	8.3	58.3	11.1	53.7
	SUM	100	100	100	100	100	100	100	100

CHILDREN BELONG TO A MAN AND HIS FAMILY.									
	STRONGLY AGREE	19.4		35.3		10.4		7.1	
	AGREE	41.7	61.1	44.1	79.4	14.6	25	28.6	35.7
	DISAGREE	8.3		8.8		58.3		51.8	
	STRONGLY DISAGREE	30.6	38.9	11.8	20.6	16.7	75	12.5	64.3
	SUM	100	100	100	100	100	100	100	100
A WOMAN CANNOT REFUSE TO HAVE SEX WITH HER HUSBAND.									
	STRONGLY AGREE	13.9		24.2		12.5		28.6	
	AGREE	13.9	27.8	18.2	42.4	29.2	41.7	39.3	67.9
	DISAGREE	44.4		42.4		45.8		26.8	
	STRONGLY DISAGREE	27.8	72.2	15.2	57.6	12.5	58.3	5.4	32.2
	SUM	100	100	100	100	100	100	100	100
IF A WOMAN DOES SOMETHING WRONG HER HUSBAND HAS THE RIGHT TO PUNISH HER.									
	STRONGLY AGREE	8.3		14.3		4.3			
	AGREE	8.3	16.6	31.4	45.7	23.4	27.7	44.6	44.6
	DISAGREE	55.6		42.9		48.9		44.6	
	STRONGLY DISAGREE	27.8	83.4	11.4	54.3	23.4	72.3	8.9	53.5
	SUM	100	100	100	100	100	100	100	100

**Appendix B Table 2. Gender Equitable Men (GEM) Scale. Percentages are shown disaggregated by gender and district.**

	GENDER	NSANJE DISTRICT				MCHINJI DISTRICT			
		MALES	MALES SUM	FEMALES	FEMALES SUM	MALES	MALES SUM	FEMALES	FEMALES SUM
<b>A WOMAN'S MOST IMPORTANT ROLE IS TO TAKE CARE OF HER FAMILY</b>									
	TOTALLY AGREE	22.2		2.9		81.2		91.1	
	PARTIALLY AGREE	13.9	36.1	44.4	47.3	12.5	93.7	7.1	98.2
	DISAGREE	22.2		25		6.2		1.8	
	STRONGLY DISAGREE	41.7	63.9	22.2	47.2	0	6.2	0	1.8
	SUM	100	100	100	100	100	100	100	100
<b>MEN DON'T JUST TALK ABOUT SEX, THEY JUST DO IT.</b>									
	TOTALLY AGREE	16.7		25		12.5		17.9	
	PARTIALLY AGREE	33.3	50	44.4	69.4	12.5	25	21.4	39.3
	DISAGREE	27.8		25		58.3		55.4	
	STRONGLY DISAGREE	22.2	50	5.6	30.6	16.7	75	5.4	60.8
	SUM	100	100	100	100	100	100	100	100
<b>CHANGING DIAPERS, OR CLOTHS, GIVING KIDS A BATH, AND FEEDING KIDS ARE A WOMAN'S RESPONSIBILITY</b>									
	TOTALLY AGREE	11.1		41.7		35.4		66.1	
	PARTIALLY AGREE	22.2	33.3	36.1	77.8	14.6	50	14.3	80.4
	DISAGREE	27.8		11.1		45.8		19.6	
	STRONGLY DISAGREE	38.9	66.7	11.1	22.2	4.2	50	0	19.6
	SUM	100	100	100	100	100	100	100	100
<b>IT IS A WOMAN'S RESPONSIBILITY TO AVOID GETTING PREGNANT.</b>									
	TOTALLY AGREE	19.4		30.6		35.4		66.1	
	PARTIALLY AGREE	27.8	47.2	36.1	66.7	14.6	50	14.3	80.4
	DISAGREE	27.8		25		45.8		19.6	
	STRONGLY DISAGREE	25	52.8	8.3	33.3	4.2	50	0	19.6
	SUM	100	100	100	100	100	100	100	100
<b>A MAN SHOULD HAVE THE FINAL WORD ABOUT DECISIONS IN HIS HOME.</b>									
	TOTALLY AGREE	19.4		37.1		38.3		40	
	PARTIALLY AGREE	30.6	50	25.7	62.8	17	55.3	23.6	63.6
	DISAGREE	19.4		31.4		42.6		34.5	
	STRONGLY DISAGREE	30.6	50	5.7	37.1	2.1	44.7	1.8	36.3
	SUM	100	100	100	100	100	100	100	100

MEN ARE ALWAYS READY TO HAVE SEX.									
TOTALLY AGREE	19.4		37.1		33.3		62.5		
PARTIALLY AGREE	30.6	50	25.7	62.8	16.7	50	19.6	82.1	
DISAGREE	19.4		31.4		41.7		17.9		
STRONGLY DISAGREE	30.6	50	5.7	37.1	8.3	50	0	17.9	
SUM	100	100	100	100	100	100	100	100	100
A WOMAN SHOULD TOLERATE VIOLENCE IN ORDER TO KEEP HER FAMILY TOGETHER.									
TOTALLY AGREE	27.8		36.1		16.7		33.9		
PARTIALLY AGREE	16.7	44.5	13.9	50	8.3	25	7.1	41	
DISAGREE	27.8		27.8		60.4		50		
STRONGLY DISAGREE	27.8	55.6	22.2	50	14.6	75	8.9	58.9	
SUM	100	100	100	100	100	100	100	100	100
MEN SHOULD BE EMBARRASSED IF THEY ARE UNABLE TO GET AN ERECTION DURING SEX.									
TOTALLY AGREE	28.6		22.9		29.2		28.6		
PARTIALLY AGREE	14.3	42.9	25.7	48.6	0	29.2	3.6	32.2	
DISAGREE	22.9		20		22.9		26.8		
STRONGLY DISAGREE	34.3	57.2	31.4	51.4	47.9	70.8	41.1	67.9	
SUM	100	100	100	100	100	100	100	100	100

**Appendix B Table 3. Attitudes Towards Girl Children. Percentages are shown disaggregated by gender and district.**

	GENDER	NSANJE DISTRICT				MCHINJI DISTRICT			
		MALES	MALES SUM	FEMALES	FEMALES SUM	MALES	MALES SUM	FEMALES	FEMALES SUM
<b>IF THERE IS LIMITED AMOUNT OF MONEY, IT SHOULD BE SPENT ON SONS FIRST.</b>									
	TOTALLY AGREE	2.8		13.9		16.7		19.6	
	PARTIALLY AGREE	8.3	11.1	5.6	19.5	6.2	22.9	7.1	26.7
	DISAGREE	33.3		36.1		64.6		60.7	
	STRONGLY DISAGREE	55.6	88.9	44.4	80.5	12.5	77.1	12.5	73.2
	SUM	100	100	100	100	100	100	100	100
<b>IT IS MORE IMPORTANT FOR A WOMAN TO GIVE BIRTH TO A BOY THAN A GIRL.</b>									
	TOTALLY AGREE	5.6		19.4		10.4		3.6	
	PARTIALLY AGREE	11.1	16.7	5.6	25	0	10.4	1.8	5.4
	DISAGREE	36.1		47.2		58.3		66.1	
	STRONGLY DISAGREE	47.2	83.3	27.8	75	31.2	89.5	28.6	94.7
	SUM	100	100	100	100	100	100	100	100

**Appendix B Table 4. Attitudes Towards Violence Against Women.  
Percentages are shown disaggregated by gender and district.**

GENDER	NSANJE DISTRICT				MCHINJI DISTRICT				
	MALES	MALES SUM	FEMALES	FEMALES SUM	MALES	MALES SUM	FEMALES	FEMALES SUM	
<b>BEATING A WOMAN IS JUSTIFIED IF SHE GOES OUT WITHOUT TELLING HER HUSBAND.</b>									
TOTALLY AGREE	8.3		25		14.6		26.8		
PARTIALLY AGREE	2.8	11.1	33.3	58.3	6.2	20.8	26.8	53.6	
DISAGREE	41.7		13.9		70.8		46.4		
STRONGLY DISAGREE	47.2	88.9	27.8	41.7	8.3	79.1	0	46.4	
SUM	100	100	100	100	100	100	100	100	100
<b>BEATING A WOMAN IS JUSTIFIED IF SHE NEGLECTS HER CHILDREN.</b>									
TOTALLY AGREE	8.3		25		12.5		19.6		
PARTIALLY AGREE	2.8	11.1	36.1	61.1	12.5	25	25	44.6	
DISAGREE	44.4		13.9		54.2		48.2		
STRONGLY DISAGREE	44.4	88.8	25	38.9	20.8	75	7.1	55.3	
SUM	100	100	100	100	100	100	100	100	100
<b>BEATING A WOMAN IS JUSTIFIED IF SHE ARGUES WITH HER HUSBAND.</b>									
TOTALLY AGREE	8.3		19.4		4.2		16.1		
PARTIALLY AGREE	2.8	11.1	30.6	50	12.5	16.7	16.1	32.2	
DISAGREE	44.4		22.2		64.6		51.8		
STRONGLY DISAGREE	44.4	88.8	27.8	50	18.8	83.4	16.1	67.9	
SUM	100	100	100	100	100	100	100	100	100
<b>BEATING A WOMAN IS JUSTIFIED IF SHE REFUSES TO HAVE SEX WITH HER HUSBAND.</b>									
TOTALLY AGREE	11.1		19.4		6.4		30.4		
PARTIALLY AGREE	2.8	13.9	16.7	36.1	8.5	14.9	8.9	39.3	
DISAGREE	33.3		25		61.7		35.7		
STRONGLY DISAGREE	52.8	86.1	38.9	63.9	23.4	85.1	25	60.7	
SUM	100	100	100	100	100	100	100	100	100

**Appendix B Table 5. Attitudes Towards Sexual Exploitation. Percentages are shown disaggregated by gender and district.**

GENDER	NSANJE DISTRICT				MCHINJI DISTRICT				
	MALES	MALES SUM	FEMALES	FEMALES SUM	MALES	MALES SUM	FEMALES	FEMALES SUM	
<b>WHAT DO YOU THINK ABOUT MEN WHO PURCHASE SEX? I THINK IT IS A NATURAL THING FOR MEN TO DO.</b>									
STRONGLY AGREE	11.1		8.3		0		1.8		
AGREE	2.8	13.9	16.7	25	8.3	8.3	17.9	19.7	
DISAGREE	47.2		36.1		58.3		42.9		
STRONGLY DISAGREE	38.9	86.1	38.9	75	33.3	91.6	37.5	80.4	
SUM	100	100	100	100	100	100	100	100	
<b>I THINK IT IS OK AS LONG AS HE IS NOT MARRIED OR IN A RELATIONSHIP WITH SOMEONE.</b>									
STRONGLY AGREE	22.2		22.2		0		0		
AGREE	5.6	27.8	19.4	41.6	8.3	8.3	17.9	17.9	
DISAGREE	41.7		33.3		72.9		78.6		
STRONGLY DISAGREE	30.6	72.3	25	58.3	18.8	91.7	3.6	82.2	
SUM	100	100	100	100	100	100	100	100	
<b>I THINK IT IS SOMETHING THAT MOST MEN DO AT LEAST ONCE IN THEIR LIFETIME.</b>									
STRONGLY AGREE	25		22.2		2.1		0		
AGREE	13.9	38.9	13.9	36.1	14.6	16.7	34.5	34.5	
DISAGREE	44.4		41.7		60.4		52.7		
STRONGLY DISAGREE	16.7	61.1	22.2	63.9	22.9	83.3	12.7	65.4	
SUM	100	100	100	100	100	100	100	100	
<b>I THINK THAT SEX IS A SERVICE THAT CAN BE BOUGHT LIKE ANY OTHER SERVICE.</b>									
STRONGLY AGREE	8.3		5.6		4.2		7.1		
AGREE	19.4	27.7	38.9	44.5	10.4	14.6	17.9	25	
DISAGREE	33.3		27.8		66.7		58.9		
STRONGLY DISAGREE	38.9	72.2	27.8	55.6	18.8	85.5	16.1	75	
SUM	100	100	100	100	100	100	100	100	

**Appendix B Table 6. Household Decision-Making. Percentages are shown disaggregated by gender and district.**

	GENDER	NSANJE DISTRICT		MCHINJI DISTRICT	
		MALES	FEMALES	MALES	FEMALES
<b>WHO IN YOUR FAMILY USUALLY HAS THE FINAL SAY ABOUT THE FOLLOWING?</b>					
<b>FOOD AND CLOTHING PURCHASES</b>					
	YOU	8.3	27.8	50	41.8
	SPOUSE OR PARTNER	5.6	22.2	2.1	34.5
	YOURSELF & YOUR SPOUSE / PARTNER JOINTLY	83.3	50	47.9	21.8
	SOMEONE ELSE	2.8	0	0	1.8
	YOU & SOMEONE ELSE JOINTLY	0	0	0	0
	SUM	100	100	100	100
<b>LARGE INVESTMENTS SUCH AS PURCHASING HOUSEHOLD APPLIANCES OR EQUIPMENT</b>					
	YOU	8.3	19.4	44.7	17.9
	SPOUSE OR PARTNER	2.8	27.8	0	44.6
	YOURSELF & YOUR SPOUSE / PARTNER JOINTLY	86.1	52.8	44.7	33.9
	SOMEONE ELSE	2.8	0	10.6	3.6
	YOU & SOMEONE ELSE JOINTLY	0	0	0	0
	SUM	100	100	100	100
<b>REGARDING SPENDING TIME WITH FAMILY MEMBERS AND RELATIVES</b>					
	YOU	2.8	27.8	25	39.3
	SPOUSE OR PARTNER	5.6	16.7	18.8	21.4
	YOURSELF & YOUR SPOUSE / PARTNER JOINTLY	88.9	55.6	54.2	39.3
	SOMEONE ELSE	2.8	0	2.1	0
	YOU & SOMEONE ELSE JOINTLY	0	0	0	0
	SUM	100	100	100	100

**Appendix B Table 7. Division of household tasks. Percentages are shown disaggregated by gender and district.**

	GENDER	NSANJE DISTRICT		MCHINJI DISTRICT	
		MALES	FEMALES	MALES	FEMALES
NOW, FORGETTING ANY OUTSIDE HELP YOU MAY HAVE IN YOUR HOME HOW DO YOU AND YOUR SPOUSE/PARTNER DIVIDE THE FOLLOWING TASKS?					
WASHING CLOTHES					
	I DO EVERYTHING	0	63.9	2.1	83.9
	USUALLY ME	0	8.3	0	7.1
	SHARED EQUALLY OR DONE TOGETHER	63.9	19.4	33.3	8.9
	USUALLY PARTNER	13.9	5.6	45.8	0
	PARTNER DOES EVERYTHING	22.2	2.8	18.8	0
	SUM	100	100	100	100
CLEANING THE HOUSE					
	I DO EVERYTHING	0	63.9	2.1	82.1
	USUALLY ME	0	8.3	0	10.7
	SHARED EQUALLY OR DONE TOGETHER	52.8	19.4	31.2	7.1
	USUALLY PARTNER	16.7	5.6	47.9	0
	PARTNER DOES EVERYTHING	30.6	2.8	18.8	0
	SUM	100	100	100	100
BUYING FOOD					
	I DO EVERYTHING	17.1	27.8	20.8	34.5
	USUALLY ME	8.6	13.9	20.8	1.8
	SHARED EQUALLY OR DONE TOGETHER	51.4	38.9	54.2	25.5
	USUALLY PARTNER	8.6	2.8	2.1	20
	PARTNER DOES EVERYTHING	14.3	16.7	2.1	18.2
	SUM	100	100	100	100
PREPARING FOOD					
	I DO EVERYTHING	2.9	66.7	2.1	85.7
	USUALLY ME	0	8.3	0	8.9
	SHARED EQUALLY OR DONE TOGETHER	34.3	16.7	35.4	5.4
	USUALLY PARTNER	25.7	5.6	45.8	0
	PARTNER DOES EVERYTHING	37.1	2.8	16.7	0
	SUM	100	100	100	100

**Appendix B Table 8. Talking With Partner About Problems. Percentages are shown disaggregated by gender and district.**

	GENDER	NSANJE DISTRICT		MCHINJI DISTRICT	
		MALES	FEMALES	MALES	FEMALES
<b>WHEN WAS THE LAST TIME YOU TALKED TO YOUR PARTNER ABOUT THE PROBLEMS YOU ARE FACING IN YOUR LIFE?</b>					
	WITHIN THIS WEEK	11.1	8.3	68.8	57.1
	ONE TO TWO WEEKS AGO	13.9	22.2	20.8	21.4
	TWO TO FOUR WEEKS AGO	25	16.7	2.1	7.1
	MORE THAN FOUR WEEKS AGO, BUT LESS THAN SIX MONTHS AGO	8.3	5.6	2.1	3.6
	LONGER AGO, OR NEVER	41.7	47.2	6.2	10.7
	SUM	100	100	100	100
<b>WHEN WAS THE LAST TIME YOUR PARTNER CAME TO TALK TO YOU TO EXPLAIN HER (OR HIS) PROBLEMS?</b>					
	WITHIN THIS WEEK	11.1	8.3	58.3	50
	ONE TO TWO WEEKS AGO	22.2	16.7	22.9	23.2
	TWO TO FOUR WEEKS AGO	16.7	8.3	2.1	5.4
	MORE THAN FOUR WEEKS AGO, BUT LESS THAN SIX MONTHS AGO	5.6	11.1	10.4	5.4
	LONGER AGO, OR NEVER	44.4	55.6	6.2	16.1
	SUM	100	100	100	100

**Appendix B Table 9. Relationships and Violence (Asked to men only). Percentages are shown disaggregated by gender and district.**

	GENDER	NSANJE DISTRICT		MCHINJI DISTRICT	
		MALES		MALES	
<b>HAVE YOU EVER TALKED TO YOUR SON OR A BOY YOU CARE FOR IN THE HOME OR OUTSIDE THE HOME ABOUT VIOLENCE AGAINST WOMEN?!"</b>					
	NO	25		14.6	
	YES	75		85.4	

**Appendix B Table 10. Statistically significant differences for each question are shown disaggregated by district, gender and gender within district.**

	District	Gender	Gender within Nsanje District	Gender within Mchinji District
<b>Attitudes towards women's rights</b>				
When women work they are taking jobs away from men.	sig.	n.s.	n.s.	n.s.
When women get rights they are taking rights away from men.	sig.	n.s.	n.s.	n.s.
Rights for women means that men lose out.	sig.	n.s.	n.s.	n.s.
If a woman works she should give her money to her husband.	sig.	n.s.	n.s.	n.s.
If a man paid a bride price for his wife, he owns her.	sig.	n.s.	sig.	n.s.
Children belong to a man and his family.	sig.	n.s.	n.s.	n.s.
A woman cannot refuse to have sex with her husband.	sig.	sig.	n.s.	sig.
If a woman does something wrong her husband has the right to punish her.	sig.	sig.	sig.	n.s.
<b>Gender Equitable Men (GEM) Scale</b>				
A woman's most important role is to take care of her family	sig.	sig.	sig.	n.s.
Men don't just talk about sex, they just do it.	sig.	sig.	n.s.	n.s.
Changing diapers, or cloths, giving kids a bath, and feeding kids are a woman's responsibility.	sig.	sig.	sig.	sig.
It is a woman's responsibility to avoid getting pregnant.	sig.	sig.	n.s.	n.s.
A man should have the final word about decisions in his home.	sig.	n.s.	sig.	n.s.
Men are always ready to have sex.	n.s.	sig.	n.s.	sig.
A woman should tolerate violence in order to keep her family together.	sig.	n.s.	n.s.	n.s.
Men should be embarrassed if they are unable to get an erection during sex.	sig.	n.s.	n.s.	n.s.
<b>Attitudes Towards Girl Children</b>				
If there is limited amount of money, it should be spent on sons first.	sig.	n.s.	n.s.	n.s.
It is more important for a woman to give birth to a boy than a girl.	sig.	n.s.	n.s.	n.s.
<b>Attitudes Towards Violence Against Women</b>				
Beating a woman is justified if she goes out without telling her husband.	sig.	sig.	sig.	sig.
Beating a woman is justified if she neglects her children.	sig.	sig.	sig.	n.s.
Beating a woman is justified if she argues with her husband.	sig.	sig.	sig.	n.s.
Beating a woman is justified if she refuses to have sex with her husband.	sig.	sig.	n.s.	sig.
<b>Attitudes Towards Sexual Exploitation</b>				
<b>What do you think about men who purchase sex?</b>				
I think it is a natural thing for men to do.	sig.	n.s.	n.s.	n.s.
I think it is OK as long as he is not married or in a relationship with someone.	sig.	sig.	n.s.	sig.
I think it is something that most men do at least once in their lifetime.	sig.	n.s.	n.s.	n.s.
I think that sex is a service that can be bought like any other service.	sig.	n.s.	n.s.	n.s.

Household Decision-Making.				
Who in your family usually has the final say about the following?				
Food and clothing purchases	sig.	sig.	sig.	sig.
Large investments such as purchasing household appliances or equipment	sig.	sig.	sig.	sig.
Regarding spending time with family members and relatives	sig.	sig.	sig.	n.s.
Division of Household Tasks				
Now, forgetting any outside help you may have in your home how do you and your spouse/partner divide the following tasks?				
Washing clothes	sig.	sig.	sig.	sig.
Cleaning the house	sig.	sig.	sig.	sig.
Buying Food	n.s.	sig.	n.s.	sig.
Preparing food	n.s.	sig.	sig.	sig.
Talking With Partner About Problems				
When was the last time you talked to your partner about the problems you are facing in your life?	sig.	n.s.	n.s.	n.s.
When was the last time your partner came to talk to you to explain her (or his) problems?	sig.	n.s.	n.s.	n.s.
Relationships and Violence (Asked to men only)				
Have you ever talked to your son or a boy you care for in the home or outside the home about violence against women?	n.s.	not appl.	not appl.	not appl.

n.s., not significant; sig., statistically significant with  $p < 0.05$ ; not appl., not applicable

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## Appendix C: Documents and Literature consulted during desk review

Literature on gender and VSL in Africa reviewed;

- Berg, M., Mattinen, H., & Pattugalan, G. (2013) “*Examining protection and Gender in Cash and Voucher Transfers*” WFP/UNHCR
- Brady, C. (2011). *Walking the Talk: Cash Transfers and Gender Dynamics*. Concern Worldwide and Oxfam GB.
- Browne, E. (2014). “*Evidence of impact of emergency cash transfers on gender and protection*”. (GSDRC Helpdesk Research Report 1091). Birmingham, UK: GSDRC, University of Birmingham.
- Devereux, S., Mvula, P. & Solomon, C. (2006) “*After the FACT: An Evaluation of Concern Worldwide’s Food and Cash Transfers Project in Three Districts of Malawi*” IDS, University of Sussex/Concern Worldwide
- IASC (2015) “*Guidance on Gender Equality and Cash transfer Programmes*”.
- Miller, C., Tsoka, M., & Reichert, K. (2008) “*Impact Evaluation Report: External Evaluation of the Mchinji Social Cash Transfer Project*” USAID/Boston University/UNICEF
- Wasilkowska, K. (2012). “*Gender Impact Analysis: Unconditional Cash Transfers in South Central Somalia*”. The Somalia Cash Consortium

Key project documents were reviewed;

- JEFAP (Joint Emergency Food Assistance Programme) (2010) “<Manual for the Provision of General Food Distributions during Emergency Programs in Malawi”
- INGO Consortium Emergency Cash Transfer Response to the 2015 – 2016 Food Crisis in Malawi Proposal.
- Concern Worldwide (2013) “*Cash and Voucher Programming Standard Operating Procedures and Best Practice Recommendations*”
- INGO Consortium (2015) MVAC Emergency Cash Transfer registration and MEAL tools
- INGO Cash Consortium “*Humanitarian Fund Monthly Report – January*”
- INGO Cash Consortium “*Humanitarian Fund Monthly Report – February*”
- INGO Cash Consortium “*Post Distribution Monitoring Report Mchinji – February*”
- INGO Cash Consortium “*Post Distribution Monitoring Report Nkhotakhota – February*”

Documents consulted during framework selection and instrument development;

- CARE (2012) “*Good Practices Framework: Gender Analysis*”
- Williams, S. (2005 update) “*The Oxfam Gender Training Manual*” Oxfam Publications
- March, C., Smyth, I., & Mukhopadhyay, M. (1999) “*A Guide to Gender Analysis Frameworks*” Oxfam Publications.

## Appendix D: Research Instruments

### Annex D1: Focus Group Discussion Guide

**Objective:** To explore gender dynamics during targeting, distribution and use of CTs

**Target group:** 6-8 women, 6-8 men

**Materials:** Tools, notepaper and pens, camera

My name is Elizabeth Molloy. This is (translator). We are here to study the effects of CTs on gender in this community. I am an independent researcher conducting a gender analysis for the ECT project. I do not work for Concern Worldwide, and am not here to test you. We are here to learn about your experiences, so that we can help Concern to improve their projects in the future, and would like to hear your views.

#### Targeting

1. Why were you selected to be part of the ECT? Do you think that the way that people were selected was fair? Why/why not? Do any other people who were not selected complain about the targeting process? What do they say?
2. Do you feel that you had influence in the selection process? In what way? Were women and girls' views about targeting taken into account during targeting? How do you know?
3. Are women involved in the VCPC? Whose voices are the loudest?

#### Use of ECT

4. What have been the benefits of you being part of the ECT?
5. Do you think ECTs are more important for women or for men? Do you think that women should be specifically targeted by CTs?
6. Do people share their transfer? With whom? Why? Are women or men more likely to share?
7. When you receive your ECT, do you keep it or do you give all or part of it to someone else?
8. Who in your household gets to decide how the ECT is spent?
9. What do men spend the CT on? What do women spend the CT on?

#### Cashing out

10. Do you keep the phone with you, or does someone else look after it? Why?
11. Do you cash out, or does someone else do it for you? Who? Why? Where do you cash out? Did you experience any problems cashing-out?
12. Were you aware of the cash-out fee? Did you feel safe going to an agent?

#### Household dynamics

13. Has receiving CTs changed the relationship between you and your husband/ wife? What are you doing differently now? Is it better or worse? Is it different to before ECTs started? Is there any change to the atmosphere at home?
14. What about for FHH, have CTs changed how things are in their houses? (Note: a previous study in Mchinji noted that men often married FHHs in receipt of CTs to gain access to cash, this question will try to gently explore this)
15. Do you think women or men should be targeted for ECT? How do people feel if there is a married couple and the wife receives the ECT? What do people say?
16. Have the impacts of CTs been different in polygamous households? Were all families targeted? If not what happened? Was there any issues between families as a result?

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17. How did it feel to be the direct recipient of the CT? How did your partner respond. OR How did you feel about your partner receiving the CT?

### **Community Dynamics**

18. Has ECT changed anything about how people see you in the community? Has there been any change in your status? What is different now? Is it better or worse? Why do you think this is? (Different for women and men?)

### **Protection**

19. Are there situations (where you, or other) women in the community may face problems challenges, taken advantage of, or otherwise at risk by receiving ECTs? How common are these problems?

20. Are there any situations when a woman might experience violence as a result of ECTs?

21. Do you feel safe going to and from, and at, distributions?

### **CRM**

22. Did you or anyone you know, experience any problems with CTs? What sort of problems did people experience? What did they do?

23. Do you know how you can complain if you have a problem with CTs? Would you, or did you, use any of the ways to complain? Tell me about it.

24. If you raised a complaint about CTs, how did you do it? And what was the response? Did anything change?

### **Conclusion**

25. If you could change ECTs, what would you change? Do you think it is better to receive cash or food? Do you prefer the SCT (small transfers for a longer period of time) or ECTs (larger transfers over a shorter period of time)? Why?

26. What would need to be done differently about ECT, so that it doesn't just meet your immediate needs, but also helps you to invest in the future?

**Thanks you for giving your time to contribute to this research. Is there anything else you would like to add before we finish?**

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## Annex D2: Key Informant Interview Guide

**Objective:** To elicit perspectives on the impacts and gender dynamics of CTs from external actors (non-beneficiaries in leadership positions).

**Target groups:** Concern WW staff, community leaders (TAs, GVHs, Community committee chairs incl.VCPC), District Government staff e.g. DSWO, DCDO, DoDMA

**Materials:** Notebook and pens, camera, voice recorder.

My name is Elizabeth Molloy. This is (translator). We are here to study the effects of CTs on gender in this community. I am an independent researcher conducting a gender analysis for the ECT project. As someone with experience in how CTs are affecting communities, we wanted to hear your perspectives.

### Gendered Context

1. What are the greatest issues facing women in this district?
2. How is district different in terms of culture from other districts?
3. Is this area patrilineal or matrilineal? What does this mean in practice? Do you think that being matrilineal/patrilineal is better or worse for women?
4. What are some of the most common cultural practices than impact on women's empowerment in this district?

### Cash Transfers

5. Why was this area selected to receive CTs? How did the targeting process take place?
6. Were women involved in targeting? In what way? Were there any problems with the targeting process? Were any people included who you think should not have been included? How did this happen? Were any people left out who should have been included? Why should they have been included and why do you think that they weren't?
7. Do you think that women should be specifically targeted by CTs? Why, why not? Is it better for women to receive cash or food? Is it different for men? Why?
8. How was the distribution process? Were there any problems? What went well will the distribution process?
9. Was it different for women and for men? Did women feel safe? Did men feel safe?
10. Have there been any problems with the use of the CT money?
11. Have you heard any complaints about anything to do with CTs? What was the complaint and how did you hear about it?
12. Do you think that CTs are more important for women or for men? Why?
13. Are there any risks for women who receive CTs? What sort of risks? Is it different for older women or younger women?
14. Do CTs have different impacts for women and men?
15. Although CTs are generally used by beneficiaries for meeting basic needs, have you heard of anyone who has used CTs productively e.g. in a way that contributes to their longer-term livelihoods? (for business, or agriculture, education etc).
16. How could CTs be designed to help people to use them productively?
17. Have people been involved in the linkage activities? Nutrition messaging? Child protection messaging? VSLs?
18. Have mainly women or men been involved in linkage activities? Why? Do you think they are more important for men or for women?
19. In your view, which is better between SCT and MVAC ECT? Why? Is it different for women and men?

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20. Does receiving a CT change anything in the household between husbands and wives? Is it different if the husband receives or the wife receives the CT?
  21. Have you noticed any changes in the community because of the CTs?
  22. What do people say about women who receive CTs? Is it different that what they say about men?
  23. Is there any difference in behaviour or attitude between women who receive CTs and those who do not?
  24. Have you noticed any changes in households? How does CTs affect the relationship?
  25. Have you noticed any problems with CTs?
  26. If you could change anything about CTs, what would it be?

**Do you have any questions for us?**

**Thanks so much for your participation and help with this study.**

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## Annex D3: Decision Tree

**Objective:** To explore intra-household decision making dynamics

**Target group:** 6-8 women, 6-8 men

**Materials:** Prepared tree drawing on flip-chart, showing branches at top, roots at the bottom, markers, notebook and pens, voice recorder, camera.

**Note:** Questions in italics are optional probing questions, which will be asked to probe responses from previous questions. The questionnaire is flexible, and may be diverted by the responses of participants.

### INTRODUCTION

My name is Elizabeth Molloy. This is (translator). We are here to study the effects of CTs on gender in this community. I am an independent researcher conducting a gender analysis for the ECT project. I do not work for Concern Worldwide, and am not here to test you. We are here to learn about your experiences, so that we can help Concern to improve their projects in the future. We'd like to ask you about how some key decisions are made in the household, which affect incomes and the financial health of the family. We want to explore how different family members are involved, and what influences the outcome of decisions.

### ACTIVITY

#### Labelling the Tree

This is a picture of a tree that represents household income. At the bottom of the tree, the roots represent all of the critical sources of income that help determine a good harvest and family income.

At the top of the tree, we have the branches, representing all of the important expenditure decisions that are made in the household.

1. What are the important sources of income in your household? (CTs, Social cash transfers, agriculture, small business, FISP, VSL loans and dividends, remittances etc.) *(Draw a symbol or write the decision on the roots of the tree)*

2. Now let's consider, what are the major household decisions that have to be made in your family? (Probe: Food, agricultural inputs, shelter, education, invest in business, VSL shares, hospital fees, clothing, discretionary spending e.g. video shows, tea houses etc., sharing with others, weddings/funerals etc.) *(Draw a symbol or write the decision labeling the branches of the tree.)*

#### Categorising decisions

Now, we are going to try to identify who in the household generally makes these different decisions. Looking at the bottom and top of the tree (or symbol) mark the following decisions:

### Category 1 – [own decisions]

1. What decisions on the tree do you consider to be mainly **your own decisions**? (That is, you may need to inform someone else, but they are considered your domain)

- Why are these considered your decisions alone? Do you consult or inform other family members? (Before or after the decision?)
- *What happens if you do not consult others on this decision?*

### Category 2 – [Someone else's]

2. What decisions on the tree do you consider **primarily someone else's decisions**?

(That is, you may or may not be informed by your spouse or other family member?)

27. Whose decisions are these? Why? In what ways are you involved? (Are you consulted? Informed afterward?)

28. What happens if you do not agree with the decision the person has made?

### Category 3 and Category 4 (Decisions in which you have influence or joint decisions):

3. What are the decisions where your **opinion matters but you don't have the final say**? (That is, you are consulted by your husband/family member, but you don't have the final word)

4. What are the decisions where **your opinion matters a lot** (a decision cannot be made **unless you and your spouse/family both** come to an agreement)?

- Why do you think these decisions are always decided jointly?
- What strategies do you/your spouse use to influence the outcome, either directly or indirectly?
- When there is disagreement, who usually prevails?
- *Give an example where you successfully influenced an outcome*

### Category 5: Decisions that cause conflict

5. Finally, which of these decisions generally cause the **most disagreement** in the household? (Mark these with a star)

- Why do these decisions generate more conflict or disagreement? How do the disagreements get resolved?
- *Describe/give examples of a recent decision that caused conflict.*
- *In general in this community, do verbal insults, aggression, or violence take place within families?*
- *When do you think that violence /or insults are acceptable? When is it not acceptable?*
- *How might violence/verbal insults affect women's participation in decisions?*
  
- Are there some decisions that should generally be made by men? Why?
- Are there some decisions that should generally be made by **women**? Why?

### **Impact of ECT**

Does receiving ECT money make it easier or harder to make decisions in the household?

Has receiving ECTs changed anything about how decisions are made in your household? In what way?

Looking at the different types of decisions we have discussed, are there any differences in the decisions in which your opinion matters but you don't have the final say, or the decisions in which you both must agree, when the money comes from ECT?

Are there any decisions that were previously somebody else's that you now have a say in?

Do you and your husband/wife discuss how to spend the ECT? Is this different to how decisions were made before?

Is ECT money used differently than other income that comes onto the family?

What about FHH, when you receive ECT money, do you ask anyone for advice or do you decide how to spend it yourself? Is this different from other sources of income?

### **Power**

When do you feel powerful? What would help you to feel more powerful?

Who has power in your household?

### **Conclusion**

Looking at the tree, what are your thoughts about this picture, overall?

Thinking back to the way decisions were made in the past, are there any differences in the way decisions are made from the time of your mother/father?

What is the change? Why do you think they are changing?

What do you like about the way decisions are currently being made in your household?

Where would you most like to see change? Why? Are there other decisions (not on this tree) where you would like to see change?

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## **CONCLUSION**

Thank you so much for participating in this research. Do you have any questions for us?

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## Annex D4: Concern Gender Equality Scale Survey

Thank you for taking the time to take part in this survey out.

A few notes as you fill this survey out:

1. This questionnaire is strictly confidential. We do not ask for your name or any other type of identifying information. No one will be able to trace the survey to the person who filled in the answers.
2. Please answer honestly. There are no right or wrong answers.

### Informed Consent

The purpose of this questionnaire is to ask men and women about their relationships, their families, their working life, their health, and their relationships with their children, if they have children. All the information in this questionnaire will remain confidential. No information such as your name or address or any detail that would identify you will be used in any way. If at any time you want to stop, please feel free to do so. If there is any question you do not want to answer, feel free to skip them. It should take you no longer than 15 minutes to complete the questionnaire. Do you agree to participate in the survey?

Yes, I agree to participate

No, I do not agree to participate

### Part 1: Socio Demographic Data

**We would first like you to provide some information about yourself**

1. How old are you (please state current age in years)? \_\_\_\_\_ years old

2. Can you please indicate whether respondent is; male  or female

3. Who is the direct beneficiary of ECTs? Respondent  or Husband/Wife

4. What ethnic group do you belong to?

Chewa <input type="radio"/>	Ngoni <input type="radio"/>
Sena <input type="radio"/>	Tumbuka <input type="radio"/>
Yao <input type="radio"/>	Lomwe <input type="radio"/>
	Other <input type="radio"/>

5. What is the highest level of schooling you have completed?

No schooling <input type="radio"/>	Some secondary school <input type="radio"/>
Some Primary School <input type="radio"/>	Completed Secondary School <input type="radio"/>
Completed Primary School <input type="radio"/>	Some higher level education <input type="radio"/>
Higher level degree <input type="radio"/>	

6. Have you ever been married? Yes  or No

If you have never been married please skip to question 9

7. How old were you the **first time** you were married (please state in years)? \_\_\_\_\_ years old

8. How old was your spouse at your first marriage? \_\_\_\_\_ years old

9. Who provides the main source of income in your home?

Self <input type="radio"/>	Pensions <input type="radio"/>
Partner <input type="radio"/>	Government Support (Welfare) <input type="radio"/>
Parents <input type="radio"/>	Other <input type="radio"/>

## Part Two: Gender Attitudes and Behaviours

There is a large amount of discussion about issues of gender and equality, we would like to get your reaction to each of the following statements – there are four particular options ranging from Strongly Agree to Strongly Disagree.

<b>Attitudes towards women's rights</b>	<b>Strongly Agree</b>	<b>Agree</b>	<b>Disagree</b>	<b>Strongly Disagree</b>
1. When women work they are taking jobs away from men.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. When women get rights they are taking rights away from men.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Rights for women means that men lose out.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. If a woman works she should give her money to her husband.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. If a man paid a bride price for his wife, he owns her.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Children belong to a man and his family.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. A woman cannot refuse to have sex with her husband.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. If a woman does something wrong her husband has the right to punish her.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

<b>Gender Equitable Men (GEM) Scale</b>	<b>Totally agree</b>	<b>Partially agree</b>	<b>Disagree</b>	<b>Strongly Disagree</b>
9. A woman's most important role is to take care of her family	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. Men don't just talk about sex, they just do it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. Changing diapers, or cloths, giving kids a bath, and feeding kids are a woman's responsibility.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. It is a woman's responsibility to avoid getting pregnant.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. A man should have the final word about decisions in his home.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. Men are always ready to have sex.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. A woman should tolerate violence in order to keep her family together.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. Men should be embarrassed if they are unable to get an erection during sex.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

<b>Attitudes Towards Girl Children</b>	<b>Totally agree</b>	<b>Partially agree</b>	<b>Disagree</b>	<b>Strongly Disagree</b>
17. If there is limited amount of money, it should be spent on sons first.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. It is more important for a woman to give birth to a boy than a girl.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Attitudes Towards Violence Against Women	Totally agree	Partially agree	Disagree	Strongly Disagree
	19. Beating a woman is justified if she goes out without telling her husband.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
20. Beating a woman is justified if she neglects her children.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Totally agree	Partially agree	Disagree	Strongly Disagree
21. Beating a woman is justified if she argues with her husband.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22. Beating a woman is justified if she refuses to have sex with her husband.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Attitudes Towards Sexual Exploitation What do you think about men who purchase sex?	Strongly Agree	Agree	Disagree	Strongly Disagree
23. I think it is a natural thing for men to do.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
24. I think it is OK as long as he is not married or in a relationship with someone.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
25. I think it is something that most men do at least once in their lifetime.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
26. I think that sex is a service that can be bought like any other service.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Section 2: Behaviours					
Household Decision-Making. Who in your family usually has the final say about the following?	You	Spouse or partner	Yourself & your spouse / partner jointly	Someone else	You & someone else jointly
	27. Food and clothing purchases	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
28. Large investments such as purchasing household appliances or equipment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29. Regarding spending time with family members and relatives	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Division of Household Tasks Now, forgetting any outside help you may have in your home how do you and your spouse/partner divide the following tasks?	I do everything	Usually me	Shared equally or done together	Usually partner	Partner does everything
	30. Washing clothes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
31. Cleaning the house	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
32. Buying Food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
33. Preparing food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Talking With Partner About Problems	Within this week	One to two weeks ago	Two to four weeks ago	More than 4 weeks ago, but less than 6 months	Longer ago, or never
	1. When was the last time you talked to your partner about the problems you are facing in your life?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. When was the last time your partner came to talk to you to explain her (or his) problems?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Relationships and Violence (Asked to men only)	Yes	No
3. Have you ever talked to your son or a boy you care for in the home or outside the home about violence against women?	<input type="radio"/>	<input type="radio"/>



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