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Responding to COVID-19

Learning from Program Adaptation with Titukulane

This learning brief captures the experience of a large USAID-funded Resilience Food Security Activity, Titukulane, in responding to COVID-19 in Malawi. The brief includes challenges associated with the response and how Titukulane will adapt to unforeseeable shocks in its programming and implementation based on learning from the COVID-19 response.

Impacts of COVID-19 on Program Participants: Titukulane supports the implementation of the National Resilience Strategy and operates in Zomba and Mangochi, two districts in Malawi that are the most impacted by effects of climate change. The program works with ultra-poor and chronically vulnerable households that are food insecure even in normal agricultural seasons. Limited access to land, low use of advanced technology such as hybrid maize seeds and chemical fertilizers, low quantities of marketed surpluses, and limited opportunities for non-farm employment, even during the normal periods, contribute to chronic food insecurity and poverty. As households began to harvest their maize crops in March-April 2020, which is the main source of their food security, livelihoods, and incomes, they had to face the emerging global pandemic, the coronavirus disease (COVID-19).

The pandemic has affected multiple spheres of life, including restrictions on mobility to seek additional employment and livelihood opportunities, reduced access to the social services such as health care and education, and an increase in gender-based violence. To better understand the needs of women, the Ministry of Gender, Children, and Community Development in collaboration with CARE, UN Agencies, and others conducted the



Titukulane's Chief of Party, Nivo Ranaivoarivelo (left) handing PPE and hand washing buckets to Mangochi District Council Chairperson (centre) and District Commissioner. @ Titukulane 2020



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[Malawi COVID Rapid Gender Analysis](#) (RGA), using CARE's RGA Framework. The RGA provides information on the impacts, needs, capacities, and coping strategies of women, men, girls and boys, and other vulnerable groups in Malawi. The key findings show that women and girls are faced with discriminatory systemic inequities that lock women out of decision making, put adolescent girls and vulnerable populations at serious risk of not able to access needed services for maternal, obstetric, and gender-based violence services¹. The recommendations of the RGA pointed to the need for addressing the key gender inequality gaps in the COVID-19 national response plan. To respond to COVID-19, Titukulane developed an adaptive management plan to repurpose the project activities and resources to meet the immediate needs of the beneficiaries. This necessitated the five-year project to reorient its activities to meet the emergency risk management needs resulting from the pandemic.

Titukulane's COVID-19 Response

Titukulane worked with district and national level management and administrative systems, to contribute to the Water, Sanitation and Hygiene (WASH), Food Security, Economic Empowerment, and Gender and Protection Cluster meetings. During these meetings, Titukulane channels information upward on district-level challenges in the COVID-19 response.

At the district level, Titukulane works with the District Civil Protection Committee (DCPC)² in Zomba and Mangochi districts to help them design better responses to COVID-19. Specifically, in Mangochi, Titukulane was assigned joint leadership with Ministry of Gender on coordinating the gender and protection activities. In line with the District Response Plan for COVID-19, Titukulane implemented the following activities as part of its COVID-19 adaptive management plans:

Awareness campaigns

A major and immediate intervention for Titukulane's COVID-19 response involved designing and customizing messages about COVID-19 for the communities and the targeted populations. The major effort related to the tailoring of the approved messages by Ministry of Health to meet the needs of the Activity's targeted population and groups. Gender and youth issues in were integrated in the awareness messages.



¹ [Malawi COVID Rapid Gender Analysis](#), Ministry of Gender, Child Development and Community Development. May 2020.

² The DCPC is acting as COVID-19 district taskforces in both the Titukulane target districts. District Commissioners of these districts serve as the chairpersons for the Taskforces.

Training of health care workers in COVID-19 case management

Titukulane provided financial support for the training, which was organized by the District Health Office. The objective of the training was to equip health care workers with knowledge and skills on how to manage suspected and confirmed COVID-19 cases and be able to minimize the risk of transmission to themselves and others. Participants of the training included Nurses, Clinical Officers, Medical Assistants, Health Surveillance Assistants (HSAs), Dental Officers, Physiotherapy Officers, Laboratory Technicians and Pharmacy Technicians. The trainings also integrated gender and vulnerability sensitivity in the process of delivering services.

Procurement and delivery of the Non-Food Items and WASH equipment

Titukulane supplied various WASH Personal Protective Equipment (PEP) and hygiene materials to markets, churches, mosques and health facilities in the district as part of COVID-19 response.

Learning and Adaptive Management

Through implementation of COVID-19 response interventions, Titukulane learnt several critical lessons, centered mostly on WASH. More generally, **engagement with government offices** in Zomba and Mangochi districts was **key to designing the interventions** in line with the District COVID-19 response plan. The following table shows key lessons linked to responses and associated challenges:

Challenges	Learning & Adaptive Management
Awareness campaigns	
Difficulty to effectively influence social distancing amidst political rallies during the campaign period.	Targeted engagement with influencers (such as political leaders) is critical, even if they might not be the primary beneficiaries.
Water scarcity in some remote areas would make frequent hand washing difficult, even when there is enough knowledge and messages shared through the awareness campaign.	Contextualizing messages to situation of beneficiaries is important.
Buying a tablet of soap for handwashing might not be a priority among poor households. Waste management infrastructure also continues to be a challenge in Health Care Facilities, yet this is critical for COVID-19 messaging.	There should also be flexibility to incorporate new messaging . As COVID-19 evolved, new guidelines emerged from authorities such as government and World Health Organization.
Gender inequalities and GBV vulnerability manifested due to COVID-19, yet service providers often focused on the health aspects of the response.	Promote alternative means and traditional solutions to addressing challenges (for example use of ash powder in place of scarce soap could be promoted for hand washing)
	Integrate, gender, GBV and youth issues messages in pandemic response activities.
Healthcare Worker Training	
Reported cases of infection among health care workers.	Ensure effectiveness of the training by providing other resources such as personal protective equipment.
Communities have been hiding returning immigrants which is making it difficult to follow up on those with COVID-19.	Strengthen capacity of health care workers for following up on COVID-19 cases.

Titukulane is a five-year USAID-funded Resilience Food Security Activity, running from 2019 to 2024. Titukulane, which means “let’s develop together” in Chichewa, supports the implementation and effectiveness of the Malawi National Resilience Strategy (NRS), which is established to guide investments in agriculture, reduce impacts and improve recovery from shocks, promote household resilience, strengthen management of Malawi’s natural resources, and facilitate coordination between government institutions, civil society organizations, and development partners.

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