Education and HIV and AIDS in Malawi:
The role of open, distance and flexible learning

Natalia Streuli and Catherine M. Moleni

Abstract

In a context in which HIV and AIDS is affecting many lives around the globe, education has been described as the most effective 'social vaccine' against this pandemic. Getting every child into school seems to be essential to mitigate the impact of HIV and AIDS. However, worldwide evidence suggests that HIV and AIDS have swamped education sectors with a range of challenges, especially in countries were education sectors were already weak. As a result, many children are not accessing education or are leaving school before achieving basic literacy and numeracy skills. This paper is one of the background documents developed as part of SOFIE research project funded by the Joint DFID-ESRC Scheme that explores the potential role of open, distance and flexible learning (ODFL) as a complement to conventional schooling in Malawi and Lesotho to overcome the barriers to education presented by HIV and AIDS. Drawing mostly on secondary data, the analysis of documents, reports and academic articles, as well as on primary data from interviews and discussions with key informants in Malawi, this paper reviews the way in which the education sector in Malawi is responding to support students' access to education and achievement in the context of the AIDS epidemic. It also identifies and analyses key ODFL initiatives and structures used to address challenges in the education system. Available research evidence suggests that ODFL should be supported alongside conventional schooling because it has the potential to alleviate the huge demands that the system is facing. The evidence also recommends the design of inclusive programmes that reach out to all vulnerable children, not only orphans, and particularly those from the lowest socio-economic quintiles. Some good practices are discussed.

Table of Contents

List of Tables

List of Figures

List of Abbreviations

ACEM	Association of Christian Educators in Malawi
ADB	African Development Bank
AIDS	Acquired Immune Deficiency Syndrome
CBO	Community Based Organisation
CDA	Community Development Assistants
CDSS	Community Day Secondary Schools
CERT	Centre for Educational Research and Training, University of Malawi
CIDA	Canadian International Development Agency
CSS	Conventional Secondary Schools
DEC	Distance Education Centres
DFID	Department for International Development (UK)
DHS	Demographic and Health Survey
ECM	Episcopal Conference of Malawi
EDI	Education For All Development Index
EFA	Education For All
EMC	Educationally Marginalised Children
EMIS	Education Management Information Systems
EQUIP	Educational Quality Improvement Program
ESAR	Eastern and Southern Africa
FBO	Faith Based Organisation
FGD	Focus Group Discussions
FPE	Free Primary Education
FTI	The Education for All - Fast-track Initiative
GEEI	Gender Equality in Education Index
GAR	Gross Attendance Rate
GER	Gross Enrolment Rate
GoM	Government of Malawi
GTZ	German International Development Agency
HDI	Human Development Index
HIPC	Highly Indebted Poor Countries
HIV	Human Immunodeficiency Virus
IRFOL	International research Foundation for Open Learning
JCE	Junior Certificate of Education
MCDE	Malawi College of Distance Education
MDGs	Millennium Development Goals

MGDS	Malawi Growth and Development Strategy
MICS	Multiple Indicator Cluster Survey
MIITEP	Malawi Integrated In-service Teacher Education Program
MOE	Ministry of Education
MOEST	Ministry of Education, Science and Technology
MOEVT	Ministry of Education and Vocational Training
MOWCD	Ministry of Women and Child Development
MSCE	Malawi School Certificate of Education
NAC	National Aids Commission (Malawi)
NACP	National AIDS Control Program (Malawi)
NAF	Malawi National HIV and AIDS Action Framework
NALP	Malawi National Adult Literacy Programme
NAP	Malawi National HIV and AIDS Policy
NAR	Net Attendance Rate
NER	Net Enrolment Rate
NESP	National Education Sector Plan
NORAD	Norwegian Agency for Development Cooperation
NSO	National Statistics Office (Malawi)
ODA	Official Development Assistance
ODFL	Open Distance and Flexible Learning
ODL	Open and Distance Learning
OVC	Orphans and Vulnerable Children
PIF	Policy and Investment Framework for the Education Sector
PSLCE	Primary School Leaving Certificate of Education
PSSP	Primary School Support Programme
REFLECT	Regenerated Freirean Literacy through Empowering Community Techniques
SADC	Southern African Development Community
UNAIDS	Joint United Nations Programme on HIV and AIDS
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
VLC	Village Literacy Committees
WB	The World Bank
WFP	World Food Programme
WHO	World Health Organization

1. Introduction

HIV and AIDS is clearly a development problem that is affecting people's welfare, undermining social cohesion and security, incapacitating global workforces, and diminishing social and economic productivity. In particular, Sub-Saharan Africa is at the centre of the pandemic. The region as a whole –has just over 10 % of the world's population, but it is home to more than 60 % of all people living with HIV—24.5 million. Approximately 2.7 million additional people were infected with HIV in 2005. The same year, the AIDS epidemic claimed the lives of an estimated 2 million people in the region. More than twelve million children are estimated to be AIDS-related orphans (UNAIDS, 2006a).

Education systems have a critical role in fighting the HIV and AIDS epidemic because of their capacity to reach large numbers of people with crucial information and skills. For some a complete primary education can halve the risk of HIV infection for young people (Boler and Jellema, 2005), whereas others describe education as an effective preventive measure (World Bank, 2002, UNAIDS, 2002) or as a 'social vaccine' (Coombe and Kelly, 2001) against HIV and AIDS. Increasingly, research suggests that as the landscape of AIDS epidemics change and present increasing vulnerability amongst poor and illiterate populations, education can prove vital in protecting young people from HIV infection (VanderMoortele and Delamonica, 2000). In countries with high or fast-growing epidemics, getting every child into school is essential to reverse the impact of HIV and AIDS on the human and social capital on which poor people's livelihoods depend (GCE, 2004). However, a systematic review of published literature also reveal that the association between education and HIV itself has been rarely the focus of analysis –especially in developing countries1, making it hard to assess the role of education in the context of HIV and AIDS (Hargreaves and Glynn, 2002).

The concern is that HIV and AIDS is swamping the education sector with a wide range of additional problems (Coombe and Kelly, 2001). The epidemic is reducing both the supply and demand of education (Kelly, 2000). Systems are straining under teacher shortfalls as teachers become infected, fall sick and eventually die; whilst educational planning and management processes are also affected (Allemano, 2003, Kelly, 2000, Bennell, 2005a). On the other hand, HIV and AIDS is reducing the demand for education, as households see the loss of wage earners, which can make children's access to school harder as the costs of education are more difficult to meet and children's labour is increasingly required at home.

The available evidence indicates that not enough is yet being done to address the impact of HIV and AIDS on education systems. An analysis of school survey data from Uganda, Botswana and Malawi, found that schools provided very little support for AIDS-related orphans and other vulnerable children (Bennell, 2005b). A recent study in South Africa and Mozambique concludes that efforts to accelerate the education sector response to HIV and AIDS tend to focus primarily on the curriculum to provide relevant information, life skills and teacher training (Pridmore and Yates, 2005), rather than direct support for those affected by HIV and AIDS. Similarly, few strategies are been implemented to address the needs of out-of-school children, even though children are increasingly missing lessons and dropping out of school before achieving basic literacy and numeracy skills.

Pridmore and Yates (2005) note that a powerful argument has been made that new models of schooling need to be developed for vulnerable children and young people who may not be able to attend school regularly (Pridmore and Yates, 2005). It has been suggested that approaches drawn from non-formal education should be prioritized alongside formal education to increase access, quality and relevance of schooling among children in general, and children affected by HIV and AIDS in particular (Hepburn, 2001). Others advocate for

---

[1] An overall of 27 articles with appropriately analysed results from general population groups in developing countries were identified, providing information on only 6 countries

schooling systems that are more flexible and accessible to all children (Moleni and Nampota, 2006, Kadzamira et al., 2001, UNESCO, 2006a, Robson and Sylvester, 2007, Kadzamira and Nell, 2004).

In this context, the three year research project funded by the Joint DFID-ESRC Scheme[2] is exploring the role of open, distance and flexible learning (ODFL) in Malawi and Lesotho, as ways to overcome the barriers to education access and achievement presented by HIV and AIDS. The research focuses on young people affected by HIV and AIDS, and seeks to offer them an appropriate, alternative route to learning through ODFL that complements and enriches conventional schooling. The findings aim to contribute towards evidence-based development of ODFL policy and practice (Pridmore and Yates, 2007).

ODFL, for the purposes of the project and this paper, is defined as those learning opportunities which attempt to "reduce barriers than can often inhibit learning and to enhance access…barriers [that] may be a result of the physical separation of learners from teachers, or due to the inability of learners and teachers to meet at mutually exclusive times." (Hodgson, 1993, pp85-86, cited in Pridmore and Yates, 2006). The main features of ODFL systems include "some combination of multimedia packages, learning workshops, counselling and tutorial support, modular courses, flexible timetabling, negotiated curricula and support through guidance" (Pridmore and Yates, 2006).

This paper is one of the background documents for the project. It intends to provide a state of the art review (i) of the way in which the education sector –both government and civil society- in Malawi is responding to support students' access to education and achievement in the context of the HIV and AIDS epidemic and (ii) identify and analyse key ODFL initiatives, structures and networks being implemented in Malawi to increase access and achievement.

The paper draws mostly on secondary data and the analysis of policy and strategy documents, agency reports and academic articles. Additional material was located through database and library searches (refer to Annex 1 for the search strategy). It is also informed by primary data from semi-structured interviews and informal discussions with key informants – e.g. in line ministries, development agencies, and NGOs- conducted during the project start up visit in April 2007 (Pridmore and Yates, 2007).

The paper is divided in three main sections. The first section provides the context: an overview of the education system in Malawi, highlighting major educational challenges faced at the primary and secondary levels, and discussing some of the specific problems attributed to the impact of HIV and AIDS. The second section describes and analyses major responses of the government, civil society and international organisations to support children's and young people's access to learning in the context of HIV and AIDS, with a focus on programmes and interventions that adopt open, distance and/or flexible approaches to educational provision. The last section concludes with implications for research, policy and practice

2. Provision of Education in the context of HIV and AIDS

This section offers a brief overview of Malawi, in terms of its socio-economic development and the impact of HIV and AIDS in recent years, and outlines its educational system. It goes on to discuss some of the major challenges within the formal system, with reference to educational access and attainment at primary and secondary levels. It also discusses how the impact of HIV and AIDS has further weakened the education sector and is raising additional barriers to addressing the challenges faced.

---

[2] Known as the SOFIE project

2.1 Background

Malawi is a small, landlocked country in sub-Saharan Africa, limited in natural resources and with a population highly dependent on agriculture, much of which involves subsistence farming[3]. Malawi is divided into three administrative regions – the northern, central and southern regions – that reflect historical, socio-cultural and political differences. The population structure is characterised by a high dependency ratio, with almost half (45%) of the population below 15 years of age. Population density is relatively high compared to other countries in the region, with resultant land shortages. Urbanisation is increasing, although over 85 % of the population is still found in rural areas.

A former British colony, Malawi gained its independence in 1964. In 1966, Malawi became an official one-party state governed for the next thirty years by the Malawi Congress Party (MCP) under the leadership of Dr. Kamuzu Banda. The early nineties saw the start of political changes in Malawi, with calls for improved development and an end to human rights abuses. The country's first multiparty elections were held in 1994. One of the new democratic government's first acts was to introduce free primary education (FPE), heralded as a key pro-poor strategy.

Table 1: Selected Development Indicators for Malawi

Population*	11,627,000
Total area (sq km)	118, 484
Land area (sq km)	94, 276
Density (population per sq km)**	105
Urban population (%) **	14
Total fertility rate*	6.1
Under-five rate (per 1,000 live births)*	133
Life Expectancy at birth (years)*	37.5
Literacy rate (%)*	66
male	79
female	52
HIV adult prevalence (%)*	12.5
GNP per capita***	$160

* 2004 Malawi Demographic Health Survey (NSO and ORC Macro, 2005)
** 1997/98 Integrated Household Survey (cited in NSO and ORC Macro, 2005)
*** 2005 EFA Global Monitoring Report (UNESCO, 2005)

Malawi's per capita income had declined from US$230 in 1994 to about US$160 in 2001 (UNESCO, 2005). Currently ranked 164 in the Human Development Index (HDI), Malawi is one of the poorest countries in the world, with over half of the population (52.4%) categorised as 'poor' and just under a quarter (22.4%) described as 'ultra-poor' (UNDP, 2007; NSO and ORC Macro 2005). Poor health and social indicators continue to characterise poverty in the country, reflected in poor literacy levels, a high under-five

---

[3] A recent Demographic and Health Survey, indicated that 57 % of economically active men and 70 % of economically active women are small-scale subsistence farmers (NSO, 2005).

mortality rate, widespread malnutrition and a life expectancy at birth of just 37.5 years (NSO and ORC Macro, 2005).

2.2 HIV and AIDS in Malawi

Malawi, like its neighbours in sub-Saharan Africa, has been severely affected by HIV and AIDS. Annually, deaths due to HIV/AIDS are estimated at approximately 80,000 (For 0 to 49 years - see Figure 1 below) and a fall in both population growth rates and life expectancy has largely been attributed to the epidemic (MoE, 2006). Nationally, the estimated HIV and AIDS prevalence in adults (15 to 49 years) in 2005 was 14 %, giving a total of 790,000 infected adults. Evidence indicates that prevalence rates are stabilising in some area of the country, particularly in the urban centres (NAC, 2005) and this is reflected in national rates that have remained constant for the last few years. Urban adult prevalence is estimated at 17.1 %, in contrast to a rural prevalence rate of 10.8 %, although the gap between urban and rural prevalence is narrowing[4]- and the absolute number of people living in rural areas who are HIV+ outnumber urban dwellers by roughly three to one (Bryceson et al., 2004) The majority of new infections are amongst young people (15 –24 years), with young women four times more likely to be infected than young men[3] (NSO and ORC Macro, 2005). Currently, the estimated HIV prevalence rate amongst 15-24 year-olds in Malawi is 6 % (9 % amongst females and 2 % amongst males).

Figure 1: Current and projected cases of AIDS in Malawi
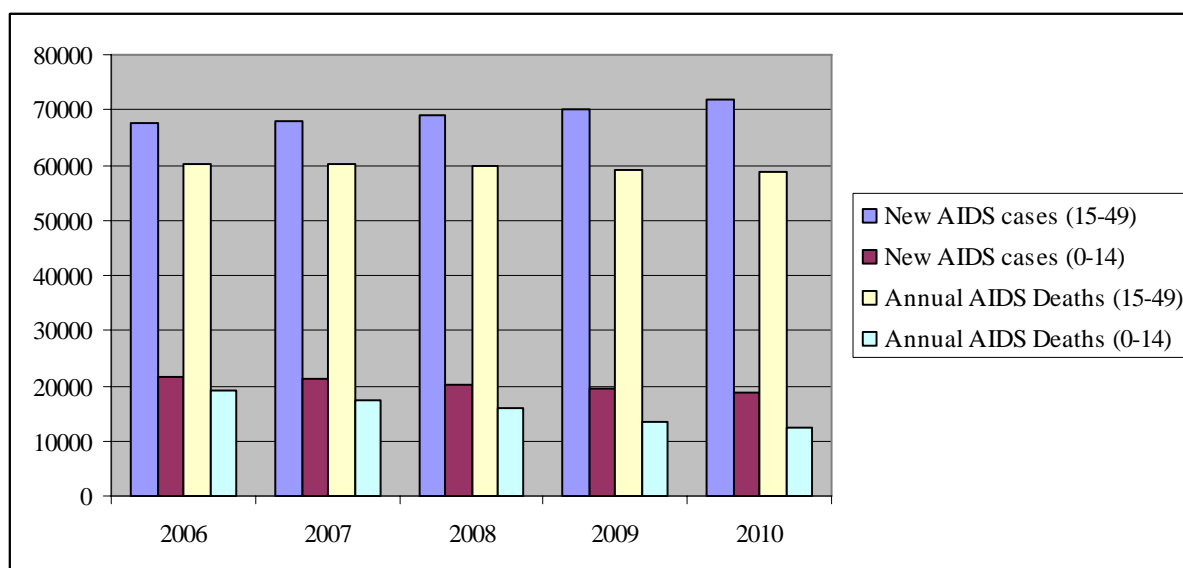
The epidemic has affected all sectors of Malawian society. Social services are struggling to cope with the numbers infected and affected by HIV/AIDS. Households are being severely affected by the loss of breadwinners and care-givers and the ever-increasing numbers of orphans. According to a recent Multiple Indicator Cluster Survey, it is estimated that 12.6 % of children aged between 0 and 17 years are orphans[5], having lost one or both parents

---

[4] In the 2000 Malawi Demographic and Health Survey, HIV prevalence rates for urban and rural areas were estimated at 23% and 12%, respectively.
[5] The Government of Malawi defines and orphan as "a child who has lost one or both parents because of death and is under the age of 18 years" (GOM, 2005b)

(NSO and UNICEF, 2007)[6] and of these, 45 % are estimated to be as a result of AIDS-related deaths; over half a million children (UNAIDS/UNICEF/ USAID, 2004).

Table 2 presents recent data from the 2004 Demographic Health Survey (MDHS), which indicates that approximately 3.5% of children are double orphans, having lost both parents, whilst a much greater proportion of single orphans are paternal orphans. However, this national data does not distinguish AIDS-related orphans from others. Only limited information on children affected by HIV and AIDS is available, due partly to inherent difficulties in identifying children who are AIDS-related orphans. Schools, for example, may be reluctant to make such distinctions and only have limited or inadequate records regarding enrolled orphans.

Table 2: Parental status of children under 18 (percentages)

Year Survey (DHS)	Number of children under 18	DOUBLE		MATERNAL		PATERNAL	
		male	female	male	female	male	female
2004	31,981	3.6	3.4	0.8	0.8	5.8	5.7

Source: NSO and ORC Macro 2005[7]

Orphans are not the only children to be affected by the impact of HIV and AIDS on their lives. Many children with HIV-positive parents, may have both parents living, but these parents are ill and increasingly unable to provide for their children's financial and psycho-social needs. Often these vulnerable children will become the effective care-givers for parents living with HIV and AIDS. In addition, at the end of 2005, an estimated 91,000 children in Malawi were living with HIV (UNAIDS, 2006a).

2.3 Overview of the education system

The formal education system in Malawi comprises of three levels: primary, secondary and tertiary, following a 8-4-4 arrangement. In 1994, the introduction of FPE saw for all pupils saw enrolments increase from 1.8 million to nearly 3 million (Castro-Leal, 1996). Thus, the majority of Malawian children now have access to the first level of education, although access to the subsequent levels remains very restricted. Thus, the vast majority of enrolments are concentrated at primary level. As an illustration, in 2003 there were 3,264,531 students enrolled in formal schools or technical colleges and of these the post primary enrolment constituted only approximately 5 % (see Figure 2). Currently, gross enrolment rates[8] (GER) at primary level exceed 100 %, suggesting that few children have *never* attended school. However, the number of children completing a full cycle of primary education is low, with fewer girls than boys completing, and the educational attainment of young people remains poor (Kadzamira and Nell, 2004). The illiteracy rate amongst 15 to 24 year-olds is reported to be approximately 27 %: 18 % for males and 37% for females (UNESCO, 2007).

---

[6] The MICS survey aims at providing statistically valid estimates at district level on a number of indicators related to the wellbeing of children and women in Malawi.
[7] Data available at the National Statistical Office of Malawi website: http://www.nso.malawi.net
[8] Number of all children enrolled, as a percentage of the total official school-age population (i.e. 6-13 years for primary and 14-17 years, secondary).

Figure 2: Enrolment for basic and secondary education 1993-2006[9]
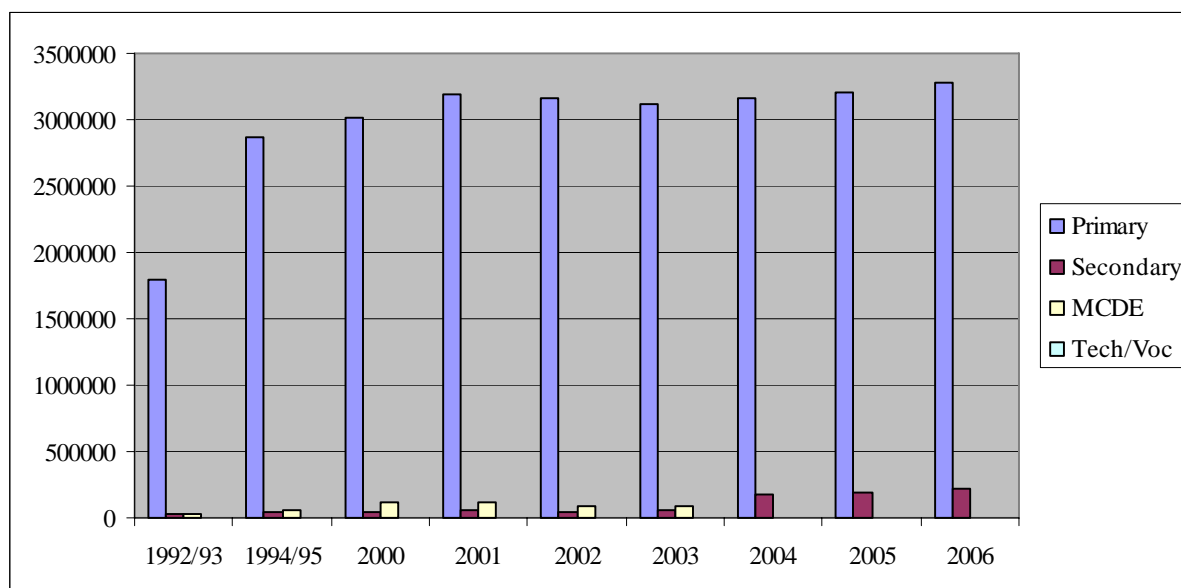
Enrolment rates, however, should be treated with caution. Gross enrolment rates are inflated by the large proportion of over-age children in the system, and net enrolment rates[10] (NER) sometimes exceed 100%[11], the latter a reflection of the inaccuracy of school records. Nationally representative household surveys also collect data on children's school attendance (see Table 2) and these indicate net attendance of around 80% at the primary level. Thus, at any one time, approximately 20% of primary-age children (6-13 years) are out of school. Net attendance rates (NAR) at the secondary level reflect low transition rates, with just over a tenth (11.4%) of secondary-age children (14 – 17 years) attending formal secondary schooling. Gross attendance rates (GAR) of approximately 30% are inflated by large number of over-age young people still in secondary education.

Table 2: Basic Statistics on Education[12]

Indicator (%)	Primary			Secondary		
	Total	Female	Male	Total	Female	Male
GAR	105.8	102.7	108.9	29.6	25.2	33.5
NAR	82.0	83.8	80.1	11.4	12.7	10.2
Repetition	19.9	19.6	20.2	8.8	10.0	8.1
Survival Rate (grade 5)	53.0	52.9	53.3	NA	NA	NA
Survival Rate (grade 8)	31.9	27.2	19.9	NA	NA	NA

---

[9] Data for TEVET colleges and MCDE open schools was not available for the years 2004 – 2006 (EMIS, 2006)
[10] Number of official school-age population in school as a percentage of the total school-age population.
[11] This cannot be the case statistically, but occurs largely due to a lack of birth registration and inaccurate reporting of children's ages (EMIS 2006). See Fig 3 for net and gross enrolments rates for primary level in recent years
[12] GAR and NAR were obtained from Malawi 2004 DHS (NSO and ORC Macro, 2005) whereas repetition rates and survival rates were calculated from EMIS data for 2006. Repetition is indicated by the proportion of pupils who are repeaters, as a % of the total number of pupils enrolled. Survival rates show the proportion of a cohort who reach the given grade as a % of pupils enrolled in the first standard of a given cycle.

The Ministry of Education (MoE) is the major provider of all formal primary and secondary education and teacher training in Malawi,[13] although recent years have seen a rapid expansion in the role being played by non-state providers (NSPs), particularly with regard to secondary education. In 2006, over a quarter of all enrolments at secondary level (29%) were with non-government schools (EMIS, 2006). Many of these are schools owned and run by private proprietors on a commercial basis, including small-scale 'dwelling house' schools run by private individuals, and often unregistered (Lewin and Sayed, 2005). In contrast, the vast majority of primary schools are government-owned or government-assisted.

Up until the late 1990s, a parallel system of distance education centres (DECs) run by the Malawi College of Distance Education (MCDE), provided an alternative route for primary school completers not selected to attend conventional day or boarding government schools. These centres generally provided a poorer quality of education, characterised by low pass rates in the Malawi School Certificate of Education (MSCE), and had higher user costs in comparison to conventional schools (Lewin and Sayed, 2005). In 1998, these centres were re-designated Community Day Secondary Schools (CDSSs) in response to increasing demand for formal secondary education. Whilst the aim of this move was for government to provide a wider, unified system of secondary education, what currently operates is, essentially, a two-tier system of CDSSs, which provide the majority of public secondary education, and higher quality conventional secondary schools (CSSs).

Current estimates suggest that the overall budget required to finance both primary and secondary alone is US$145 million/year over the ten year period (without inflation). This represents a likely financing gap of US$32 million/year if current domestic and ODA investment trends continue. Although the government of Malawi gives priority to primary education, allocating around 65% of all public spending on education (Lewin and Sayed, 2005), the resources allocated are not enough and do not necessarily have a direct impact on children. On average the government spends about 6 % on goods and services at the primary level, compared with nearly 40 % of allocated budgets at teacher-training colleges, 35 % at technical and vocational colleges, and about 26 % at the secondary education. Moreover, about 84 % of the primary education allocation is spent on teachers' salaries (Milner et al., 2001). At the secondary level, its current share of the budget allocation (around 10 -15% in recent years), is insufficient to bring about any significant expansion in the public secondary system (Lewin and Sayed, 2005). During the period 2005/06 budgetary allocation to all levels of education was 14.2 % of the total government budget. This falls short of the FTI recommended benchmark of 20 %. However, recent HIPC completion has released debt relief that may enable additional domestic resources to be allocated to the sector (GoM, 2005a).

2.3.1 Challenges facing primary education

Despite the impressive gains in primary school enrolments, particularly for girls, following the introduction of FPE in 1994, other educational outcomes have remained poor, undermined by problems of low internal efficiency and poor school quality. One aspect of the poor efficiency in primary education is the high level of grade repetition in schools, leading to increased class sizes and high numbers of over-age children, with an increased risk of drop-out amongst persistent repeaters. It has also been suggested that repetition can put girls at risk from older boys in classes (UNAIDS, 2006c.) Research evidence shows that the majority of children who enter primary school will have repeated a grade at least once during their schooling career (Kadzamira and Nell, 2004). Using a grade transition model to analyse pupil flow rates, research has found that on average a pupil completes the eight-year primary cycle in 9-12 years (Kadzamira and Nell, 2004, Durston and Nashire, 2001).

---

[13] Other ministries involved in education are: the Ministry of Gender and Community Services, which is responsible for early childhood education and adult literacy, and the Ministry of Labour, which is responsible for technical education and vocational education and training.

Figure 3: Primary gross enrolment versus net enrolment rates
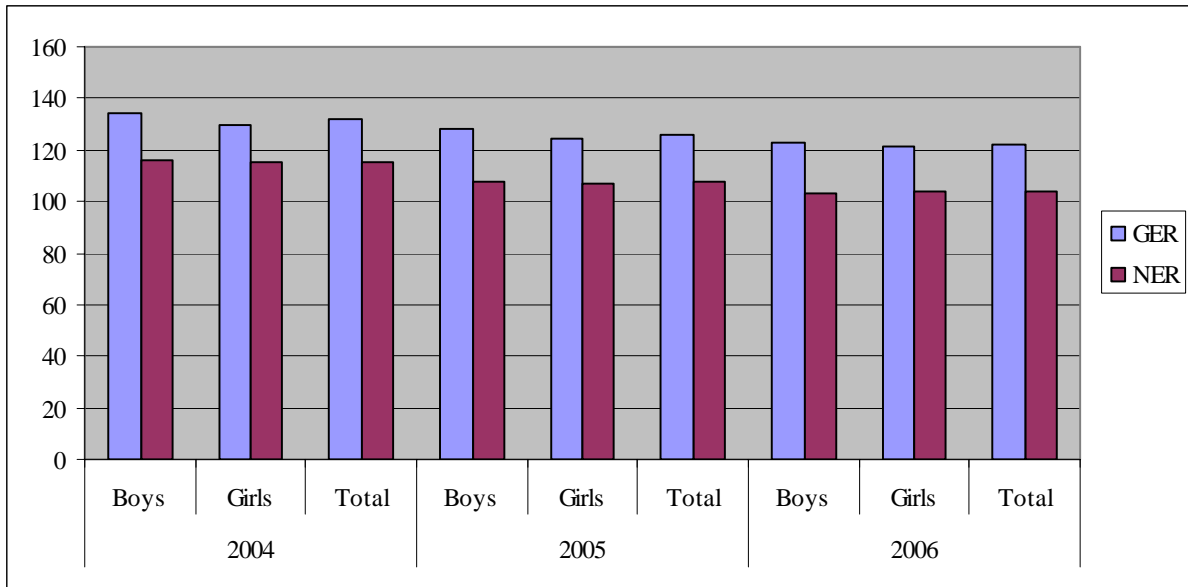
Repetition is more common in the early grades (as illustrated in Figure 4), a likely reflection of poor achievement at this level – not surprising in the context of large, over-crowded classrooms and scarce material and human resources. Other reasons advanced by research to explain high repetition include irregular attendance and interrupted schooling (Kadzamira and Nell, 2004). Moreover, repetition puts repeaters at a disadvantage because 75 % of places in secondary school are kept for non-repeaters (Pridmore and Yates, 2007). It appears that many parents and teachers are not fully aware of these restrictions, leading to a tendency to encourage upper primary pupils, particularly boys, to repeat to gain better scores in their Primary School Leaving Certificates (PLSCE) – the basis of their selection to government secondary schools (Kadzamira et al., 2004). Because of the problems brought by repetition within the system, the Association of Christian Educators in Malawi (ACEM) is pushing for automatic grade promotion for Standards 1-4.

Figure 4: Primary repetition rates by standard and sex (percentages)
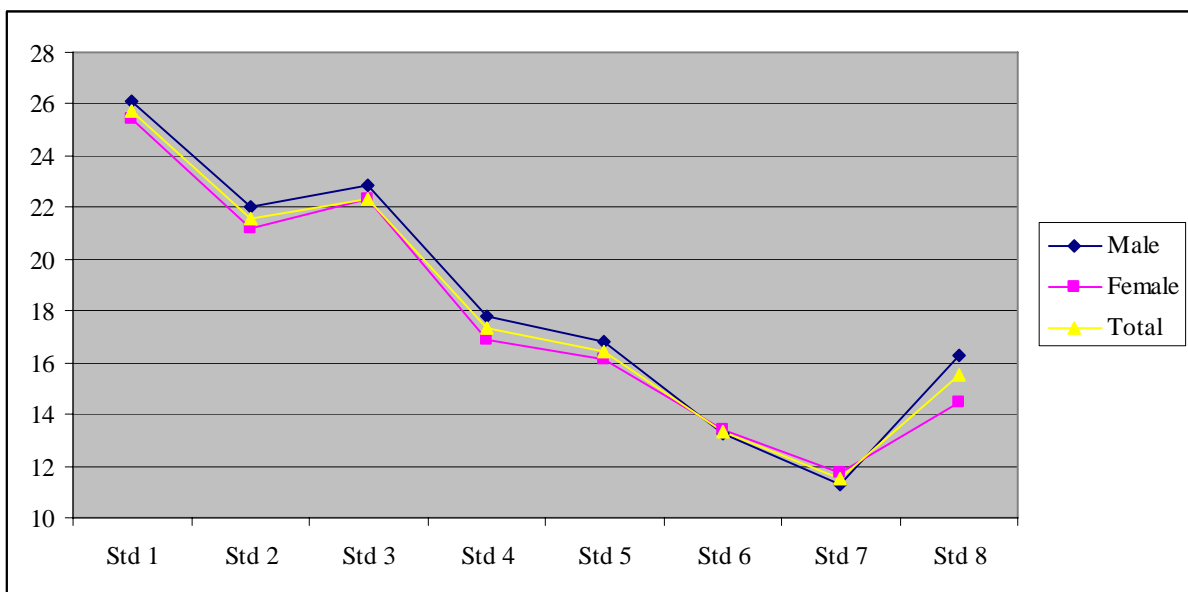
Another major issue in Malawi's education system is that of dropout, which is particularly high in the early grades (see Figure 5). Figures indicate that as many as half of all schoolchildren leave school before reaching Standard 5 (see Table 2) and research amongst primary school dropouts has shown that the majority of those interviewed had spent three years or less in school (Kadzamira and Nell, 2004, Moleni and Nampota, 2006). The probability of a child surviving to the last grade of primary is very low. The analysis carried out by Moleni, Nampota and Kadzamira (2005) of pupil flow rates in 2005 indicated that out of every 1,000 pupils in Standard 1 in 2005, only 172 will graduate or complete primary education, reflecting under 20% of initial enrolment.[14] In addition, educational data presented showed that that nearly half of the 800,000 plus pupils who enrolled in Standard 1 in 2004 did not proceed to Standard 2 in 2005: 25% repeating Standard 1 and 23% dropping out of the system.

Figure 5: Primary school dropout rates by grade and sex in 2006
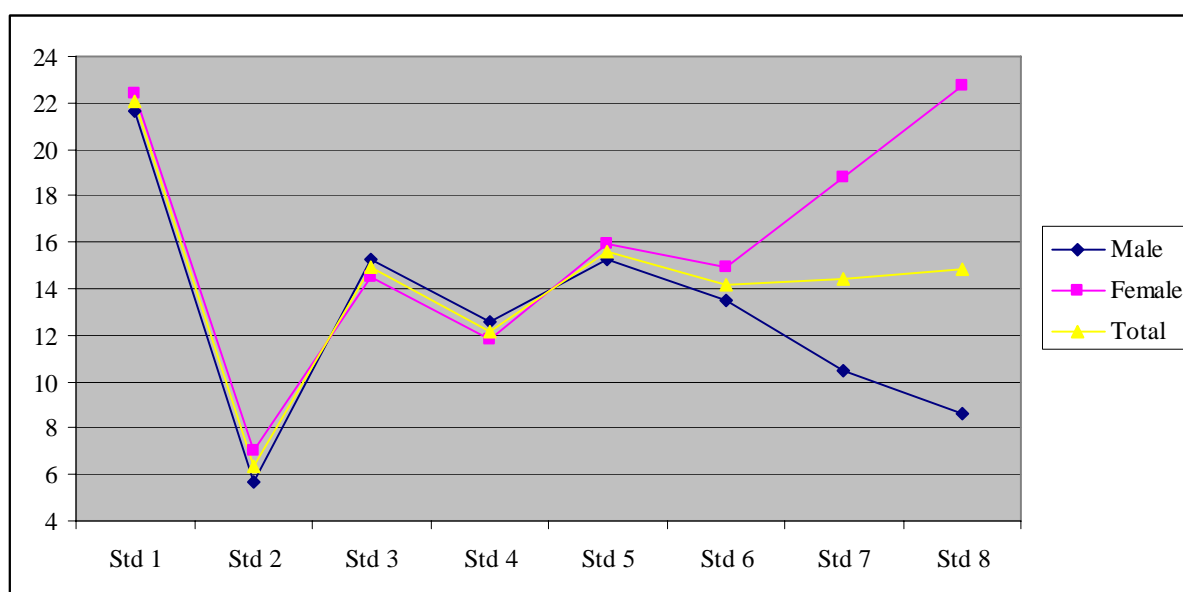
Despite the introduction of FPE, many households struggle to meet costs associated with sending their children to school and economic factors are often given as reasons for reduced demand and poor retention rates in schools. A domestic household survey in Malawi revealed that families continue to pay for primary education: 80 % of households pay for school materials; 70 % for uniforms; 60 % for school development funds; and 33 % for school meals. The almost 18 % gap in school attendance between lowest and highest income quintiles suggests that costs of primary education remains an obstacle for the very poor (Avenstrup et al., 2004) (see Figure 6) and research consistently suggests that children from poorer households are more likely to drop out of school (Moleni, Nampota and Kadzamira, 2005). Other less frequently mentioned reasons include difficulties with school work, long distances to school, demand for labour at home, illness of self, illness and death in the family (Kadzamira and Rose, 2003a, Kadzamira and Chibwana, 2000, Rose, 2002). For girls, late entry to schooling, in conjunction with repetition, means that many will have reached puberty before completing primary education. This places additional socio-cultural pressures on girls and reasons behind girls' dropouts include early marriage, pregnancy or demand for domestic work (Kadzamira and Rose, 2003a).

---

[14] Such analysis is somewhat at odds with current survival rates presented in by the MoE in 2006 EMIS data, which calculates survival rates to the final grade as closer to 30% (see Table 2).

Figure 6: Primary GER and NER per wealth quintiles
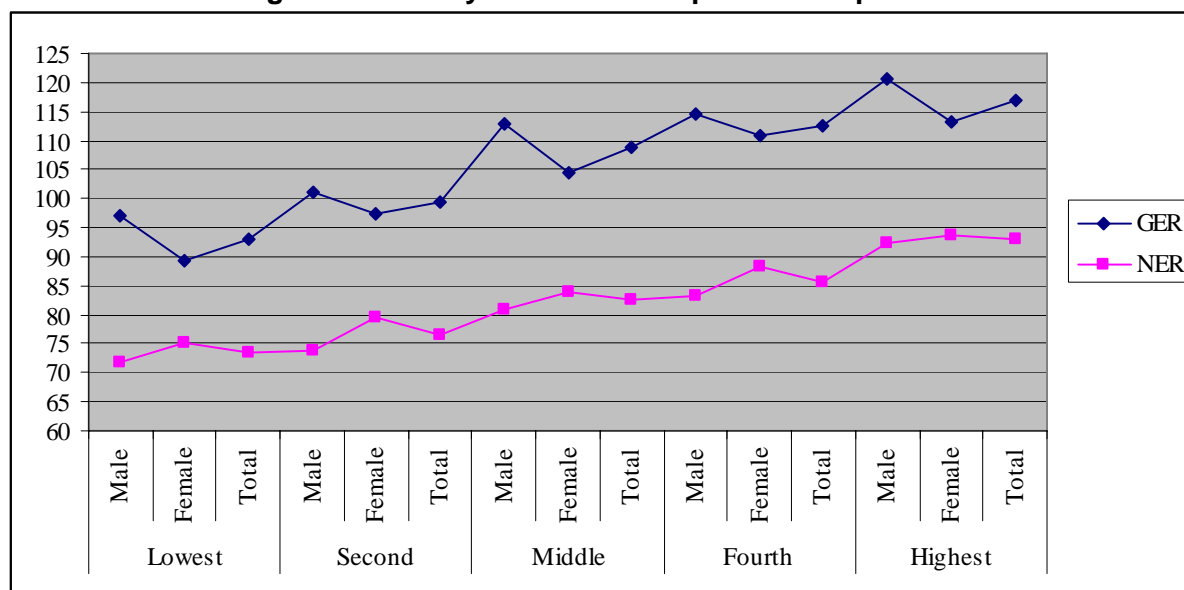
Issues of educational quality have also been identified as threats to pupil retention. Since 1994, and the rapid expansion of enrolments in the primary system there has been a wide gap between the focus on the quantity of children who have access to schooling (learning) and the quality of learning they receive (Harris and Schubert, 2001). Stakeholders in government and development agencies suggest that poor learning conditions (such as large class sizes –often of 100 or more pupils to one teacher[15]), the lack of learning materials and poor infrastructure are all push factors that can lead to drop-out (Pridmore and Yates, 2007). The learning conditions are particularly poor for the lowest standards, with priority in the allocation of the scarce resources being given to the senior classes largely because of the pressure created by Standard 8 examinations (Kadzamira et al., 2004). In addition to this, more recent evidence emerging from qualitative studies into violence in schools, suggests that occurrences of verbal, physical and sexual abuse by teachers and fellow pupils can lead to irregular attendance and eventual drop-out, particularly for girls (Kadzamira et al., 2006).

2.3.2 Challenges faced by secondary education

Despite the increased enrolments in recent years, transition rates to secondary school remain low (Lewin and Sayed, 2005). According to household survey data, just over a tenth (11.4%) of students of official secondary school age (14 – 17 years) attend secondary school. With gross attendance of approximately 30%, however, this data show that numbers are inflated by a substantial proportion of over-age children, more of whom are boys (NSO, 2005) (see Table 2 below).

Historically, Malawi has had one of the lowest transition rates from primary to secondary school in sub-Saharan Africa, with less than 10% accessing secondary schools (Lewin and Sayed, 2005). Although with gross secondary attendance rates currently at around 30 %, the transition rates to secondary education can be said to have improved in recent years,

---

[15] The GoM's teacher:pupil ratio benchmark is 1:60, but in 2006 the trained teacher: pupil ratio in primary schools was 1:84, EMIS (2006) Education Statistics 2006. Lilongwe, Education Management Information System (EMIS), Department of Education Planning, Ministry of Education and Vocational Training. This average figure masks between and within-school variations. Teacher: pupil ratios can be significantly higher in lower standards.

much of this is due to figures inflated by large numbers of over-age students, especially boys (NSO and ORC Macro) Increases in transition rates since the mid-1990s can be attributed in part to the increased access afforded by CDSSs and the loosening of restrictions on establishing privately-run schools (Lewin and Sayed, 2005). Access to better quality, conventional secondary schools, however, is highly competitive and admission rates to these types of schools have only increased very modestly in recent years (Kadzamira and Nell, 2004). In the context of the limited capacity of the government to absorb the demand for secondary places (see Figure 6) the drastic difference in the number of primary versus secondary schools enrolment is based on a selection process determined by students' scores in their PLSCE, which restricts entry. Students not eligible for places in government schools may seek places in the private sector, although these are likely to require higher user-costs (Kadzamira and Nell, 2004). Low completion rates and poor attainment at primary level curb the numbers of children seeking access to secondary education, which, it has been argued, disproportionately effects children form poorer households (Kadzamira and Nell, 2004, Kadzamira and Rose, 2003). Finally, it is apparent that the cost of secondary schooling is prohibitively high for most households in Malawi and the poorest households are "virtually unrepresented" at the secondary level (Kadzamira and Rose, 2003:510).

Figure 6: Number of all schools 2006
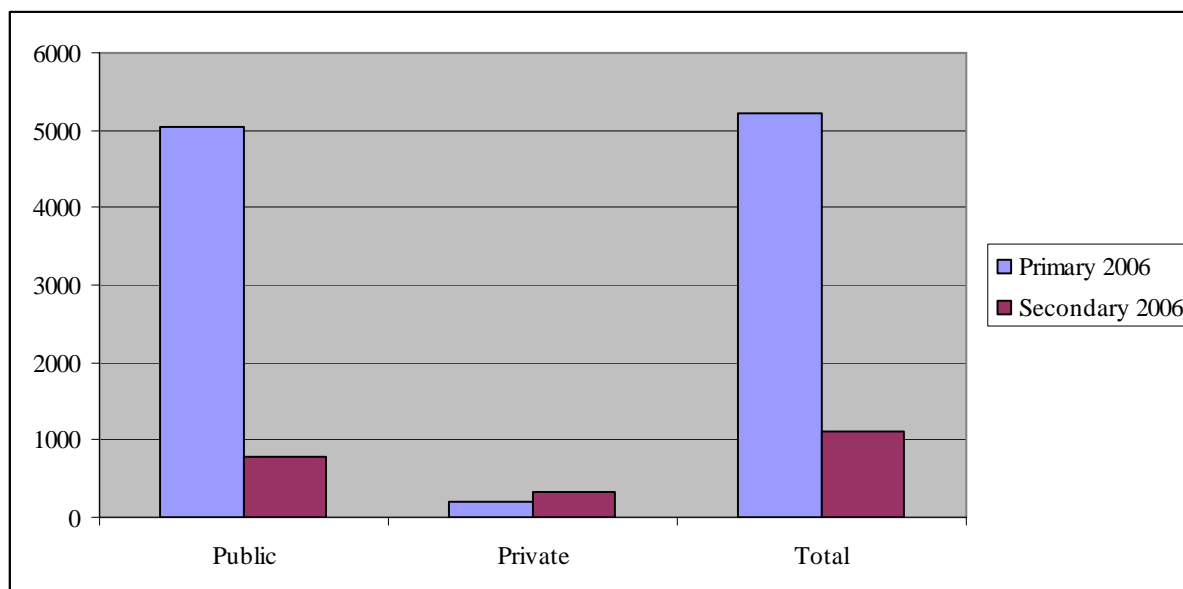
Compounding issues of restricted access, the government secondary system has operated on a largely inequitable basis. When MCDE distance education centres (DECs) were converted to CDSSs in 1998, these schools inherited a system characterised by large classes, inadequate teaching and learning facilities and under-qualified teachers. For example, class sizes, were often in excess of 100 students (ADF, 2001). Moreover, user-fees, which often included additional costs in the guise of development or project funds to be met by communities, were higher than those of subsidised conventional secondary schools (Moleni, 1999). Thus, these new schools not only charged higher fees than conventional government schools, but also offered a much lower quality of education, with resultant poor performance by students. In 1999 for example, only about 4 % CDSS students who sat for the MSCE passed it, compared to almost 30 % of the CSS students (Pridmore and Yates, 2007). In a bid to address some of these issues, and to meet government requirements to reduce student: teacher ratios to 50:1, government included CDSSs in the selective entry system operated for CSSs, with consequent reduction in enrolments. In addition, fees were

capped in order to bring them closer into line with CSSs (MoE, 2001). However, although class sizes are now smaller, the ratio of students to qualified teachers stands at 104:1 (see Table 3).

Table 3: Key quality indicators

Indicator	Primary	Conventional Secondary (Government Day)	CDSS (Approved)
Pupil: qualified teacher ratio Pupil: teacher ratio Pupil per permanent classroom	84:1 76:1 107:1	29:1 22:1 47:1	104:1 22:1 47:1

Source: (EMIS, 2006)

Internal efficiency indicators appear to be better for secondary schools than primary schools, largely because repetition rates are almost negligible: students in government schools are not allowed to repeat (Kadzamira and Nell, 2004). Dropout rates are also lower than at primary level – estimated to be less than 4%. The main reason that students drop out before completing their secondary education is that of school-related costs. According to 2006 figures, over half of secondary school dropouts (58%) left because of failure to pay tuition fees (EMIS 2006). Senior officials in the MoE[16] suggested that in secondary schools dropout in the lower grades is due to economic reasons, long distances between school and home[17] and, amongst girls, pregnancy (Pridmore and Yates, 2007). A recent national survey of adolescents in Malawi found that tuition fees, lack of school materials –e.g. books, pencils – were among the main reasons for leaving school (Munthali et al., 2006). In 2006, almost a fifth (19%) of girls dropping out of secondary school was attributed to early pregnancy and/or marriage (EMIS, 2006). In addition to this, some students leave secondary school after Form 2 because of poor performance - those who fail the Junior Examination held after 2 years generally are not allowed to repeat or progress to the next grade (Kadzamira and Nell, 2004).

Another reason given by young people for leaving school was 'lack of interest' (Munthali et.al. 2006) and although this needs to be further unpacked, this may well reflect concerns over the relevancy of the education being provided. It has been argued that the main purpose of secondary education remains that of preparing students for tertiary education, which does not fit the needs of the majority of students for whom secondary education is the final stage of their education. In focus group discussions carried out by Kadzamira and Nell (2004), many children and parents claimed that school was not adequately preparing them to earn a living. Similarly, discussions with older school dropouts highlighted a tension between the requirement to earn money to support themselves and/or households and experiences of schooling perceived as having little relevance to their immediate needs.

2.4 Impact of HIV and AIDS on Education in Malawi

The UNAIDS interagency working group on 'AIDS, Schools and Education' noted that the attainment of the MDGs for education cannot be achieved without urgent attention to HIV and AIDS (UNAIDS, 2002). Apart from sero-positiveness among teachers, children and their parents, HIV and AIDS has also weakened the quality of training and education: trained teachers are lost, student–teacher contact is reduced as inexperienced and under-qualified teachers take over, and class sizes increase (Rispel et al., 2006). The text box below

---

[16] Charles Inani and Oskar Mangana Director Chief Education Officer and Assistant Chief Education Officer, Secondary Education, MoE
[17] MoE has a policy of a 10km radius for the catchments area

highlights some of the ways in which HIV and AIDS can impact on education systems in the region. In Malawi, the HIV and AIDS epidemic is putting education on the brink, as it further undermines a sector already struggling to address issues of access and attainment.

Impact of HIV and AIDS on Education

On the classroom environment:

● Teachers and students under severe psychological and physical stress

● Interference of discriminatory practices in the teaching–learning processes

● Teachers ill-prepared to cope with rapidly changing learning and learners' conditions

On the school environment

● Disruption in management of teaching personnel and overall organisation of schools due to death and absenteeism of teachers, discrimination and stigmatisation

On teachers

● Teacher absenteeism due to attending funerals, market days and/or moonlighting for extra income

● Teacher illness and death

On the community environment

● Climate of suspicion straining relationships between schools and communities

● Integration of teachers in communities compromised

● Parents and community leaders ill-informed about, and unprepared to cope with, HIV and AIDS

Source: (adapted from Boukary, 2006)

2.4.1 Impact on students

Although it is widely believed that AIDS-affected children experience a number of educational challenges, research evidence show that the impact that HIV and AIDS have on their lives cannot be generalised. Rather, it is complex, dynamic and cumulative. Any discussion of the impact on schooling has to be contextualised and is, to a large extent, country-specific (Pridmore, 2008).

This can be seen in the large body of research that has focused on the effects of orphan status on schooling. Some writers argue that orphans are more likely to dropout of school or to repeat grades (e.g. World Bank, 1997). Similarly, a review of MICS and DHS from 1997 to 2001, suggested that orphans aged 10-14 years in all countries studied, including Malawi, were less likely to be in school than children of the same age with both parents still alive or those living with at least one parent (UNICEF, 2002) –see Figure 8. Other findings suggest that the alleged correlation between dropping out and orphanhood is quite varied and complex and that enrolment rates are perhaps most strongly associated with poverty (Ainsworth and Filmer, 2002).[18] More recent figures from Malawi, however, suggest that there is little significant difference between orphans and non-orphans in terms of enrolment at primary school level (NSO and ORC Macro, 2005, NSO and UNICEF, 2007). Longitudinal research from Northern Malawi found that enrolment rates at primary school varied little

---

[18] The study analysed the relationship between orphan status, household wealth, and child school enrolment using data collected in the 1990s from 28 countries in Sub-Saharan Africa (including Malawi), Latin America, the Caribbean, and Southeast Asia, among children aged 7 to 14.

according to parental HIV status on orphanhood, although fewer orphans were enrolled in secondary school (Floyd et al., 2007).

However, in one of the first impact studies of HIV and AIDS on education in Malawi, it was shown that pupil absenteeism was higher amongst orphans. More than half of both female and male orphans in the primary schools surveyed had been absent from schools in the previous two weeks, compared to less than half of non-orphans (Kadzamira et al., 2001). Similarly, approximately 40 % of the orphans in the surveyed secondary schools had been absent from school, compared to a third of the non-orphans. Orphans were also more likely to face interrupted schooling over longer periods of time (Kadzamira et al., 2001). Also, a longitudinal study of panel data from 2000 and 2004 found a greater likelihood that orphans would drop out of school compared to non-orphans as grade level increases (Sharma, 2006).

Figure 8: Secondary School Attendance by Orphanhood Status in Selected Countries
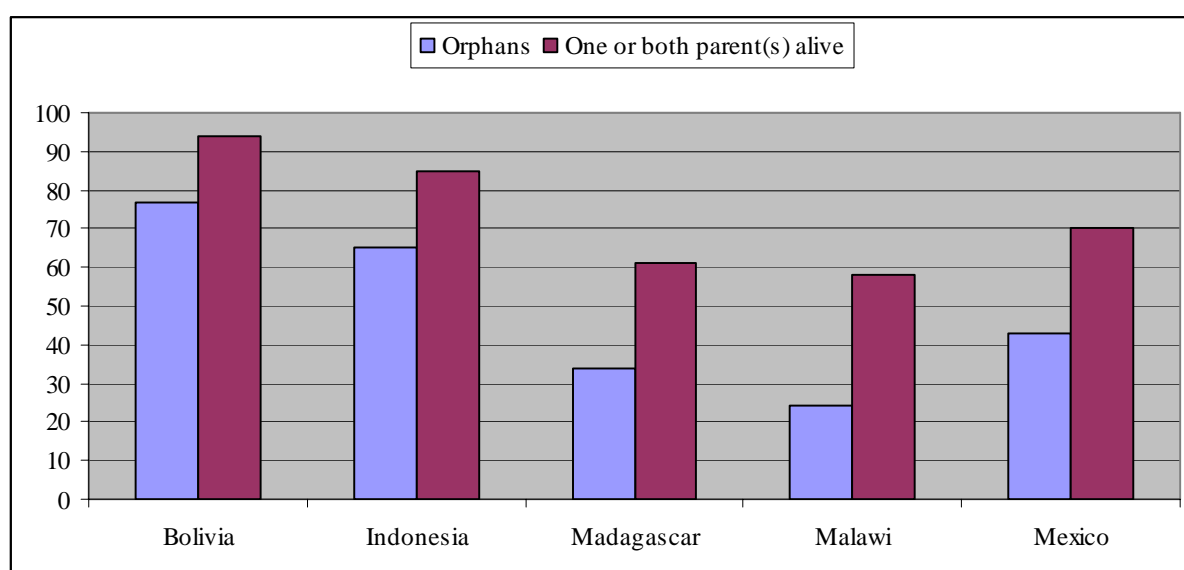
Source: (UNICEF, 2002)

In another study carried out in Malawi schools, one-third of children reported they missed school to care for the sick, whereas 6 % of children reported missing school for attending funerals (Harris and Schubert, 2001). These percentages doubled for children who had lost both parents. Double orphaned children were twice as likely to dropout (17.1%) during the 2000 school year as children with one parent dead (9.1%), or both parents living (9.5%). Reasons given for erratic attendance and dropout amongst orphans were predominately associated with poverty, such as a lack of clothing and school materials, and increased demand for their labour at home. In addition, qualitative research with orphans and other children affected by HIV and AIDS suggests that teachers, already overwhelmed by large class sizes and few resources, can offer little support to these vulnerable children (Kendall and O'Gara, 2007, McBride, 2004). Whilst findings from the previously mentioned school-based survey suggested little overt discrimination (Kadzamira et al., 2001a), other qualitative work describes examples of teasing and bullying of orphans in schools (Kendall and O'Gara, 2007, Mann, 2002).

2.4.2 Impact on teachers

HIV and AIDS not only impacts on households and the demand for education, but also undermines the provision of schooling. Some data suggests that more than 30 % of teachers

in parts of Malawi are HIV positive (World Bank et al., 2002), and that current teacher attrition rates run at 6 %, much of which has been attributed to the effects of HIV and AIDS (MoE, 2006). Following on from earlier impact studies (Kadzamira et al., 2001, Malawi Institute of Management, 2002), IIEP and its partner Ministries of Education launched a collaborative research programme in 2003 to study the impact of, and responses to, HIV and AIDS in Tanzania, Malawi and Uganda.[19] Research carried out under this programme included a study on the impact of HIV and AIDS on educational governance (Chawani and Kadzamira, 2004).[20] This study found high and increasing levels of attrition at the central, division and district levels. Death was the cause of the highest levels of attrition, accounting for more than 40 % of all people that left the service between 1999 and 2004. Deaths were disproportionately high among young adults of both sexes, which correspond with the mortality trends expected in situations of high HIV and AIDS prevalence. The study also found widespread silence, stigma and discrimination in the education sector.

Morbidity amongst teachers also impacts on the effectiveness of schools. Research has shown that school heads were reluctant to place teachers on official sick leave, since this was time-bound and would eventually lead to dismissal. Rather teachers would remain at the schools in name, although would not be teaching (UNESCO, 2006b, Chawani and Kadzamira, 2004, Moleni and Ndalama, 2004). A study of teacher absence and attrition in high HIV prevalence districts found that school' ad-hoc copying strategies inevitably led to increased workloads for teachers and poor quality of learning (Moleni and Ndalama, 2004). In addition, teachers affected by HIV and AIDS would request transfers to urban centres in order to access medical care and rural schools, already chronically under-staffed, had little chance of seeing them replaced (Moleni and Ndalama, 2004). High staff attrition also results in the reduced capacity of schools through the loss of the training, skills and aptitudes of particular teachers. Research indicates that teachers are often absent in order to attend funerals and care for sick family members, which is suggested to be more common among female teachers (Kamlongera, n.d.). Such observations suggest the need to plan for teacher cover and/or alternative modes of learning for the pupils, whilst developing clear frameworks to support teachers and schools affected by HIV and AIDS.

3. Supporting Access and Attainment for Educationally Marginalised Children

In Malawi, HIV and AIDS is undermining an education system already struggling to address poor internal efficiency and make progress towards international targets of universal primary completion by 2015. Key to achieving this goal is the need to reach those children who are educationally marginalised. Those children who for one or other reason, have difficulty in accessing primary education, or who drop out prematurely, or who have been pushed out of the formal education system by the system itself, or who fail to learn, despite being in school (Badcock-Walters et al., 2005). This next section discusses the education sector's response to educationally marginalised children, including orphans and others affected by HIV and AIDS. This section first discusses the policy environment then highlights several key strategies and programme responses, including examples of open, distance flexible approaches to learning.

---

[19] Objectives of the programme were: to identify problems related to the impact of HIV/AIDS on the education sector and to prioritize areas for action; to formulate responses to gaps identified in current policy, leadership practices and management capacities; to develop a database to track patterns and trends in HIV/AIDS-related teacher and student absence, abandonment and mortality; and to formulate effective mitigation and prevention measures based on a qualitative assessment of the impact of HIV/AIDS on selected schools and their surrounding communities.
[20] Its purpose is to examine how AIDS affects the daily life of the staff of the central ministry, and division and district offices. Primary data were obtained by conducting interviews with MoE employees at different levels.

3.1 Policy environment

3.1.1 Addressing access

The introduction of FPE in 1994 has, without doubt, been one of the major actions taken by the Government of Malawi to support children's access to primary education. This policy enabled greater numbers of children previously disadvantaged to enrol in school, resulting in a dramatic 63 % increase in enrolment (UNAIDS, 2006c, UNICEF, 2004). In tandem with the abolishment of primary school fees, the requirement for school uniform was also abolished, in an aim to address the high indirect costs of attending school, particularly for girls. However, FPE, has been criticised for being introduced with little critical analysis of the capacity of the education sector to implement such policy reforms and, thus, dramatically overstretched the education system (World Bank, 2003, Chimombo, 1999). Some writers also argue that FPE policy did not sufficiently consider the ways in which direct and indirect costs of schooling continue to be prohibitive for some households, or the effects that the expansion would have on quality; and claim that FPE is not contributing to the achievement of poverty alleviation goals as was intended (Kadzamira and Rose, 2003, Durston and Nashire, 2001). Others note that FPE impacted negatively on educational quality as large numbers of inexperienced and untrained teachers were recruited (Hepburn, 2001).

One early attempt to reach out to other educationally disadvantaged groups, was the drafting of a re-admission policy for pregnant schoolgirls in the mid-1990s. Pregnancy was – and remains – major reason for older girls at both primary and secondary level leaving school prematurely. Prior to this 'pregnancy policy', evidence of pregnancy would lead to permanent exclusion of the girl from school. The current guidelines allow for girls to come back after one year, upon 'application'. According to the policy statement, this chance is given only once during a girl's education cycle. If a male student is responsible for the pregnancy he is also supposed to be withdrawn together with the girl for one academic year. Implementation of this policy, however, has been problematic, because procedures are not clearly laid out and head teachers have interpreted it differently. For example, ACEM, a network of faith-based groups who own 63 % of all secondary schools, are advocating for girls who left school due to pregnancy to re-enter into a different school in order, they claim, to avoid discrimination, although there are also concerns that such girls will be seen as 'bad' examples to others[21]. There is no evidence on how many girls and boys actually re-entry school, or their reasons for not doing so, which constitutes an important gap in the literature. Thus, an inflexible re-entry policy can be detrimental for young people's educational attainment. More work needs to be done to change people's attitudes to girls returning to school after delivery and provide more for more flexible opportunities to support their return.

More recently, the GoM launched a National Education Plan (NESP) 2006-2015. The policy draws on the National Long-term Development Perspective for Malawi (Vision 2020), the Policy Investment Framework 2000 and the more recent Malawi Growth and Development Strategy (MGDS) (MoE, 2006). The following text box presents some of the targets set for primary education. Those for secondary education have not yet been agreed; but the document states that these will focus on achieving gender equity by 2015[22].

NESP key targets in primary education

Pupil to Qualified Teacher Ratio:	from 83:1 in 2005 to 55:1 by 2015
Completion rate:	from 25% in 2005 to 75% by 2015
NER:	from 81% in 2005 to 95% by 2015
Pupil to classroom ratio:	from 111:1 in 2005 to 60:1 by 2015

Source: (MoE, 2006)

---

[21] Pers. Comm., Lexon Ndalama, Executive Secretary, ACEM, 29th August, 2007.
[22] Annex 2 provides a detailed account of the NESP goals, actions and outcomes

NESP aims to increase NER at primary level and recognises the need to make selection and admission processes for secondary schools more equitable, and contemplates the need to increase the relevance of curriculum (Goals 1&2). The policy also acknowledges the need to strengthen complementary educational modalities for learners at both primary and secondary levels (Goal 1, Priority 3). This is the first time MoE policy has officially recognised the potential of alternative approaches to increase educational provision and improve access. Previously, non-formal education in Malawi has focused on areas such as early childhood development, adult literacy and some forms of vocational education, all of which are the remit of other Ministries.

3.1.2 Tackling the impact of HIV and AIDS

An important omission, however, in the NESP is any discussion of actions specifically targeting children affected by HIV and AIDS, as well as initiatives to outreach children and young people that are unable to access school (MoE, 2006). Specific measures to address the shortage of teachers and their poor training levels are also absent in the NESP. This seems to be a glaring omission: it is unclear how class sizes and pupil: teacher ratios can be reduced without significant improvements in the recruitment, equitable deployment and retention of teachers, particularly in the context of the impact of HIV and AIDS on teacher morbidity and attrition.

A study documenting the outcomes of the first international survey of education sector readiness to manage and mitigate the impact of HIV and AIDS[23] suggests that the MoE and civil society in Malawi had made considerable improvements towards institutionalising effective responses (UNAIDS, 2006b). This includes the establishment of an HIV and AIDS Steering Committee with a mandate to design, co-ordinate, monitor, and approve HIV and AIDS interventions in the education sector. All heads of departments are members of the Committee as well as other senior officers from other key education institutions. The GoM has also issued a National HIV and AIDS Policy[24] (NAP), which aims to consolidate efforts, expand interventions as well as to provide national leadership of a multi-sectoral response to HIV and AIDS (GoM, 2003a). The policy affirms the importance of promotion and protection of human rights as a guiding principle, and recognises HIV and AIDS as a public health, social, economic, and development issue (MALGA, 2006). More specifically, it calls for ensuring that: (i) girls and boys, both in and out of school, have access to life skills education; (ii) orphans are not denied access to primary education, whether by virtue of their inability to pay, their age or their gender; and (iii) that child-headed households are supported, in order to safeguard the best interests of children. It also calls for HIV and AIDS research to address gaps in existing knowledge about HIV and AIDS and to inform policy, practice and HIV and AIDS-related interventions.

In addition to this, the GoM has published the Malawi National HIV and AIDS Action Framework (NAF) for the period 2005-2009, which defines guiding principles, goals, objectives and strategies for improved planning, management and evaluation of interventions addressing the HIV and AIDS epidemic.[25] The framework captures the multi-disciplinary nature of the AIDS epidemic and tackles both the bio-medical, and the social, cultural, economic, and political factors.[26] Line ministries, religious organisations and NGOs are expected to translate the framework into action, and establish focal points for HIV and

---

[23] Ministries of education (MoEs) in 71 countries (including Malawi) and civil society organisations in 18 countries were interviewed, in person and electronically, in separate research processes.
[24] The development of the policy received financial and technical support from USAID funded POLICY Project, UNDP and UNAIDS.
[25] A total of US$ 724 million has been committed by both donors and the GoM to financing the NAF up to 2009. Funds came from: Government 27%, United Nations including World Bank 22%, Global Fund 37%, and bilateral donors 14%.
[26] Information obtained from IIEP website

AIDS activities at all levels and in all sections of their institutions (Kamlongera, n.d.). Progress has been made to mainstream HIV and AIDS through the development of education sector strategic plans and partnerships are developing between MoE, other ministries, private sector, and NGOs. Furthermore, each division and district education office is expected to have a Desk Officer for HIV and AIDS and each district has a separate budget line for activities designed to address issues of HIV and AIDS.

Even though Malawi has important policies that address HIV and AIDS impact on the education sector, some obstacles still remain. Research conducted by IIEP revealed a lack of strong leadership or sustained advocacy on HIV and AIDS issues in the education sector (Chawani and Kadzamira, 2004, Chawani and Kadzamira, 2003). In addition, policies such as prevention of discrimination against sero-positive staff are not adequately enforced. Specific policies are required in the education sector not only to protect teachers and students from the impact of HIV and AIDS, but also to preserve MoE capacity to manage the educational system. Furthermore, responses to pupils' needs with regard to HIV and AIDS have centred on curricular issues such as HIV prevention or life skills education, with little support for those directly infected or affected. Despite earlier UNICEF-supported strategies and programmes to provide training in guidance and counselling for the education sector, there is little evidence of school-based counsellors to support HIV-affected children. Limited training is offered to teachers who are patrons of extra-curricular anti-AIDS clubs (Kadzamira et al., 2001).

3.1.3 Supporting Orphans and other vulnerable children

In addition to the National HIV/AIDS policy, the Malawi government currently provides policy direction for organisations providing care and support to OVCs through the National Policy on Orphans and other Vulnerable Children launched in 2003. The policy puts emphasis on the family and community responsibility to care for OVC, rather than institutional care, stating its intent to "increase community participation in developing community-based orphan care initiatives" (GoM, 2003a: 5) However, although capacity of communities to absorb and support OVC is very high in Malawi, many communities are now reaching their limits and there are increasing requests for orphanages (Pridmore and Yates, 2007).

The role of the community in supporting the provision of basic education, mediated by school management committees (SMCs) has received increasing prominence in Malawi's education policy since the 1990s. The current Policy Investment Framework (PIF) highlights active participation of communities as a key strategy in improving the quality of education in primary schools (MoE, 2000). In support of this, the government drafted a National Strategy for Community Participation in Primary School Management, outlining the means by which community involvement can move towards genuine, sustainable participation (GOM, 2003b). Critics however, point to a gap between government's commitment to community participation and the reality of communities' involvement, which is often limited to the contribution of resources for school development, with little opportunity for real decision-making (see Rose, 2002 for an expansion of this argument).

In 2005, the government of Malawi through the Ministry of Gender, Children, and Community Services (MOGCCS) launched its 2004-2009 National Plan of Action for Orphans and Other Vulnerable Children (NPA-OVC) as a framework to guide policy implementation (GoM, 2005b). The plan calls upon the need to enhance access for OVC to essential quality services such as education, health, nutrition, water and sanitation (Strategy No.1). Although spear-headed by the MoGCCS, by its nature, NPA-OVC requires a strong multi-sectoral commitment. Earlier research, prior to launch of the current policy, noted poor co-ordination among the various stakeholders in the delivery of orphan care programmes and little evidence of concrete assistance to orphans in schools (Kadzamira et al., 2001). The newly launched National Plan has ambitious strategies in place to remedy such observations, including the provision of bursaries for OVCs support for school feeding programmes in an

additional 1000 schools. Moreover, UNICEF is supporting capacity building for district Social Welfare Officers and the re-named Ministry of Women and Child Development (MOWCD) to implement the OVC policy.

3.2 Strategies and programme responses

Following a framework developed by Ephraim Mhlanga (2008) in his review and analysis of interventions to enhance educational access and attainment, this section highlights several education sector strategies and programme-level responses, used currently or in recent years, to expand access and address inequities in educational provision in Malawi. Few focus specifically on the needs of HIV and AIDS affected children, but on orphans, girls and other educationally marginalised children.

3.2.1 Addressing costs of schooling

An early example of addressing cost as a barrier to schooling was implemented under the Girls Attainment in Basic Literacy and Education (GABLE) Programme introduced in 1991[27]. As well as a Social Mobilization Campaign to encourage parents and community leaders to send girls to school, a planned fee-waiver for primary girls – made obsolete by the introduction of FPE – was shifted to the secondary level, so that all (non-repeating) girls enrolled in secondary school, irrespective of need, were eligible for scholarships to cover tuition fees. It is important to note that GABLE sponsored scholarship scheme for girls was only equivalent to fees for CSSs and did not cover the additional costs associated with CDSSs, where even tuition fees were often pegged higher than at CSSs. This led to inequities in the system, as the majority of girls in CSSs came from wealthier backgrounds (Moleni, 1999). Furthermore, because of the extensive financial support from USAID, serious questions regarding its sustainability emerged. The GABLE scholarship scheme has since been superseded by the secondary school bursary scheme (SSBS) managed by local assemblies. Whereas the GABLE programme covered all girls, the secondary school bursary scheme targets both girls and boys on the basis of need. A needy pupil was defined as any pupil genuinely not able to pay his or her school fees (MoE, 2001). Scant information is available as to coverage of the scheme or its impact, an important gap in the literature given that the majority of secondary school dropouts claim to have left because of school costs.

The NPA-OVC plans to offer specific support to OVC by expanding existing bursary schemes to 65,000 primary school age and 35,000 secondary school age OVC ($1,950,000 and $2,450,000 annual cost respectively) (GoM, 2005b). In addition, since 2006, UNICEF has been funding conditional cash transfers for about 2,000 vulnerable families with children at risk of dropping out of schools. Transfers are dispersed through district assemblies and local government structures (UNESCO, 2006b).

3.2.2 Community mobilisation

In line with prevailing government policy, several programmes have been increasingly involving communities to support educationally marginalised children within their communities. One such programme was the Community-Based Options for Protection and Empowerment (COPE) implemented by Save the Children USA that was designed to mobilise communities to respond to a range of issues stemming from the AIDS epidemic. The programme model encourages and facilitates community ownership of the problems related to HIV and AIDS. According to programme evaluations, COPE created around 200 Village AIDS Committees which mobilised and conducted care and support activities – benefiting some 20,000 AIDS orphans. One of the committees' aims was to ensure the continuation of children's education: members would take turns visiting the most vulnerable

---

[27] for an impact evaluation of GABLE see (Bernbaum, 1999)

households, and even ran fund raising activities to provide food, soap and school supplies or help with school fees for some orphans (Donahue and Williamson, 1999). This programme has been endorsed by the GoM, and has been evaluated several times (e.g. Donahue and Williamson, 1998). One extensive, largely qualitative evaluation found that in COPE-mobilised communities discrimination towards orphaned children was much less pronounced than within the wider community (Mann, 2002). In addition, where community-mobilisation around HIV and AIDS was well-established, boys and girls had greater awareness of how to protect themselves from the disease.

In an initiative to improve girls' access and retention in schools, the Forum for Women's Education in Malawi (FAWEMA), with funding from UNICEF, is supporting 'mothers groups' in primary schools and a few secondary schools. Ten 'mothers' – older, trusted women from the community – are trained together with the school head, a member of the school management committee and two community leaders to act as ambassadors and promote the value of girls education in their community (Pridmore and Yates, 2007).

3.2.3 Improving the quality and relevance of schooling

Another donor-funded programme that draws strongly on elements of community mobilisation, but takes a more holistic stance to also address key issues of educational quality and relevance, is the Primary School Support Program (PSSP)**,** a three-year initiative funded by USAID/Malawi in collaboration with the GoM. Currently it targets all of the 226 primary schools in Dowa district, and aims to achieve equitable access to quality basic education by (i) increasing access to basic education and improve learning with special focus on orphans, vulnerable children, girls and children with special needs; (ii) increasing resources at the school level; and (iii) improving teaching and learning outcomes in schools (USAID/Malawi, 2006). Regular in-service training is provided for teachers and schools are also incorporating activities making the learning environment more attractive to pupils, thus decreasing drop-out rates. Some are introducing competitive football teams and playgrounds, whilst others are using local artisans to provide training in vocational life skills such as tinsmithing, tailoring, and carpentry[28]. Community members are developing village registers to track all school-aged children, so as to help identify those out-of-school children and convince them to re-enrol school. Some schools are establishing school gardens, selling the produce and then using the money to subsidize the education needs of girls and OVCs. (an evaluation of the programme can be found in USAID Malawi, 2007). Although the initial evaluation appears promising and, as with COPE, instilling community ownership into activities is a key strategy, the fact that such programmes are reliant on heavy donor funding raises serious questions about the sustainability of these activities.

An increasing body of research indicates that an unsafe school environment can reduce demand for education, especially for girls. Coupled with this, HIV and AIDS can increase dropout rates of affected girls due to pregnancy, as a result of increased impoverishment making them susceptible to older men, including teachers (Pridmore, 2007, Kadzamira et al., 2006) HIV and AIDS affected children, both boys and girls, can suffer disproportionately from verbal abuse and harsh punishments from teachers, because of erratic attendance and poor concentration (Pridmore and Yates, 2005). Thus, a crucial issue in keeping girls, and boys, in school is the need to address situations of abuse, including gender-based violence, which has been well documented in Malawian schools (see Leach et al., 2003, Kadzamira et al., 2006). One such intervention is the USAID-funded Safe Schools Project (SSP), a three-year project with the overall objective of developing and having in place prevention, reporting and response systems regarding GBV in schools. Strategies include a national advocacy campaign and materials development, as well as school-based activities design to train and support teachers and pupils in issues of GBV (Kadzamira et al., 2006).

---

[28] Pers. Comm. Nick Shawa, Programme Officer, PSSP:SFP, May, 17th, 2007.

The Tiwoloke[29] project is a recent initiative to address concerns over the impact of HIV and AIDS on teacher attrition, absenteeism and motivation and, consequently, its impact on the quality of schooling. It aims to provide training for all primary school teachers and their spouses to empower them with the necessary knowledge and life skills to reduce their personal risk from HIV and AIDS and to promote a healthy lifestyle (DFID, 2007).

3.2.4 Flexible approaches to expanding and improving access

Whilst addressing supply-side issues of both the quantity and quality of educational provision is critical in improving educational access and attainment, it is recognised that various socio-cultural and economic factors mitigate against initiatives to encourage children, especially, girls to remain in, and complete, schooling. Hidden opportunity costs of schooling remain, particularly for those households affected by HIV and AIDS and, disproportionately, it is still children from poorer and more vulnerable sections of society that are out of school and are most likely to dropout (World Bank, 2004)[30] Advocates for non-formal or flexible approaches to educational provision argue that these can offer a more accessible and relevant form of schooling for children not easily accommodated by the current, formal system and, as such, have the potential to complement Malawi's efforts to address EFA and MDG goals of access and gender equity (MoE, n.d.). As described earlier, the NESP now recognises the need for such approaches in order to cater for the high numbers of children of school-going age who have dropped out – or may be in danger of dropping out – of formal schooling (MoE, 2006). It has also been argued that introducing complementary non-formal, basic education programmes for overage and out of school children and youth could reduce pressure on the formal primary school system (Kadzamira and Nell, 2004). Countries with similar experiences to Malawi who have had their primary enrolments expand rapidly, have introduced non-formal education to complement the formal system and mainly cater for overage children who are too old to enter primary school.[31] Complementary models that provide for a more flexible type of schooling in Malawi include community school projects and the MoE's recently developed Complementary Basic Education system (CBE).

Community schools

Community schools are schools located within the communities, working with locally recruited teachers, who are often provided with little initial training, but who receive greater on-going training and support. The schools are frequently owned and managed by NSPs, such as NGOs, churches or communities themselves. Other key features include: a truncated, needs-based curriculum, a flexible timetable, low-cost infrastructure and community-based management committees to oversee school activities, including monitoring of teacher and learner attendance and greater potential involvement in decision-making (DeStefano et al., 2006). Community schooling is a popular approach in some AIDS-affected areas, and can be particularly relevant in rural areas where the school calendar reflect communities' agricultural cycles. Research suggests that community schools increase access for all children within a given community, especially OVC who are unable to access government schools (Donahue and Williamson, 1998). In Zambia, for example, in 2004, over 500,000 orphans were enrolled in community schools set up and run by NGOs, CBOs or FBOs, not only expanding access for vulnerable children from poorer and disadvantaged households, but increasing enrolment in basic education by 25 %, thus making an important contribution to Zambia's EFA goals (DeStefano, 2006). Community schools, with their low student: teacher ratios and increased community supervision can also create a safer learning environment for girls (Kadzamira and Rose, 2003). In Malawi, some examples of

---

[29] Tiwoloke, which means 'let's cross', makes use of the 'stepping stones' approach to behavioural change. It is being implemented by ActionAid with additional funding from DFID and the National Aids Commission (NAC).
[30] World Bank (2004) *Country Strategic Plan*, p3.
[31] Uganda and Tanzania have both introduced complementary basic education programmes, which cater for overage pupils who are not old enough to attend adult literacy classes.

community schooling, include the DFID-funded Community Schools Project and the Save the Children Fund (US) Village Based Schools project (Rose, 2002, Durston and Nashire, 2001). Sited in remote areas where access to primary schooling was poor, such community schools, by design, were able reach out to previously marginalised children. Moreover, the role of school management committees in monitoring and following up on absenteeism in Village-Based schools was reported to have helped reduce dropout rates, particularly for girls. These projects were, however, supported by development agencies providing both financial and technical support beyond that available to government schools, raising questions of sustainability if they were to be rolled out nationally. In addition, these schools can place a heavy burden on resource-poor communities expected, for example, to construct and maintain the infrastructure of the schools (Rose, 2002, Hoppers, 2005).

Complementary Basic Education

A more recent emergence of a complementary model of schooling in Malawi is seen in the current piloting of Complementary Basic Education (CBE). This MoE initiative, currently supported by GTZ through its Basic Education Programme, targets out-of-school children and youth aged between 9 and 17 years who have dropped out before completing Standard 5 and aims to help them acquire basic literacy numeracy and life skills. Learners are expected to follow a 3-year course of learning with equivalency to the formal primary system, with the option of re-entry into primary school if appropriate for their circumstances. The programme's conceptualisation strongly drew on teaching and learning approaches used by non formal literacy classes (e.g. REFLECT[32] literacy and livelihood projects and the Adolescent Girls Literacy Project[33]) and adopted many elements of a community schools model. CBE was designed to be low-cost and is characterised by smaller class sizes, centres located close to the homes of learners, local recruitment of para-professionals as teachers, community management committees and flexible timing of classes to suit learners' needs (Ministry of Education, n.d.). A three-year pilot is now underway in 15 learning centres across Ntchisi, Chikwawa and Lilongwe districts, implemented on behalf of district assemblies by local NGOs.

A baseline survey showed that a proportionately higher number of orphans had enrolled with CBE, compared to formal primary schools within the district (Moleni and Nampota, 2006). In Chikwawa, several of the learners were married, with small children. In 2007, an early evaluation of the pilot showed that children were benefiting from the learning approach, stressing the positive relationship between learners and teachers. In a few cases communities had implemented flexible timetabling, shifting classes to accommodate market days or community-based events. The evaluation showed, however, that despite this more flexible approach, one of the main challenges for the CBE pilot was learner absenteeism, generally linked to poverty and household responsibilities (Moleni and Nampota, 2007).

Open and distance education

Open and Distance Learning (ODL) is becoming an accepted and indispensable part of the mainstream of educational systems in both developed and developing countries (UNESCO, 2002). In Malawi, ODL has been mainly used to widen access to secondary education and to maintain and improve quality in the conventional education system, specifically through in-service training of teachers.

---

[32] Regenerated Frearian Literacy through Empowering Communities Techniques (REFLECT) - literacy circles that attempt to integrate literacy, social development and empowerment using an approach that fuses Participatory Rural Appraisal (PRA) techniques and Paulo Friere's literacy theories. REFLECT approaches have been used in various development projects in Malawi as a means of improving literacy levels of project participants.
[33]Adolescent Girls Literacy Project (AGLIT) provides out-of-school adolescents (now including boys) with the opportunity to learn basic literacy, numeracy, and life skills through an integrated health and literacy curriculum.

The Malawi Distance Education College (MCDE) was established in 1965 – one of the earliest in the region – to offer a distance education programme to students who were not able to access conventional secondary schools. Instruction was provided through Distance Education Centres (DECs), provided and financed by communities, where students could meet, under the supervision of a Teacher-In-Charge and one or more Teacher Supervisors (primary teachers provide by the MoE), to study the secondary curriculum using traditional distance education materials (correspondence sets, radio instruction, audio cassettes, etc.) provided by the MCDE. Due to the overwhelming demand for secondary education, however, these DECs became, informally, more akin to conventional schools, with instructors finding themselves teaching the curriculum in a face-to-face environment in over-crowded and under-resourced classrooms (SSTEP Malawi, n.d.). By the late 1990s, over 125,000 students were enrolled, in over 500 DECS, employing over 3,000 primary-trained teachers. In the wake of the conversion of DECs into Community Day Secondary Schools (CDSSs) in 1998, a CIDA-funded distance education programme the Secondary School Teacher Education Project (SSTEP) was launched to up-grade primary teachers employed at the DECS, who, although now placed in the CDSSs, were not qualified to teach at secondary level. To date over 780 teachers have graduated (SSTEP Malawi, n.d). In addition, both the University of Malawi and the Unversity of Mzuzu in the North have recently established distance education programmes for teacher education. International providers, such as the Rapid Results College, also operate in Malawi (UNESCO, 2002).

After 1998, the services of the MCDE were reduced and the college is now working with Open Secondary Schools, 'night schools' hosted by conventional schools that provide 'second-chance' access to young people and adults who want to pursue their JCE and MSCE qualifications. More than 11,000 learners are enrolled through this initiative. According to a report on the potential of open schooling in secondary education in sub-Saharan Africa prepared by the IRFOL, such approaches to learning could be beneficial to both out-of-school youth and adults (Fentiman, 2004). However, ODL initiatives in Malawi present some weaknesses. For example, in 2005, MCDE stopped printing instructional material because lack of qualified staff and insufficient funding. Since 1999, the college has not printed full courses for Junior Certificate. MCDE students have complained that they were losing out in the college's mismanagement.[34] Fentiman's study calls upon the need to devise proper training programmes for tutors and supervisors in ODL; as well as to teach the staff the differences between conventional and distance education modes and how to handle distance education materials (Fentiman, 2004).

Correspondence education has been an important medium of instruction in the region with radio widely used. In Malawi, over 60 % of the population have access to a radio, whereas television coverage largely is confined to major towns. Programmes in sub-Saharan Africa have already shown that providing radio and audiocassette instruction to learners is possible using national resources alone. However, the main challenge is their sustainability (UNESCO, 2006b). USAID is planning a 3 year national IRI project to put a radio in every community in Malawi (more than 16,000) to deliver primary school curriculum materials. Radios will be kept in the communities so that if the teacher does not come someone else can turn the programme on. It is hoped that the IRI broadcasts will help teachers to develop their teaching skills as well as deliver education to students. This will be rolled out to standard 1 in January 2008, standard 2 in 2009 and standard 3 in 2010 (Pridmore and Yates, 2007).

---

[34] Source: Malawi News, October 8-14, 2005. Available at: http://www.sdnp.org.mw/edu/new/news.html

4. Implications for Research, Policy and Practice

4.1 Considerations for Policy and Practice

Although there have been impressive gains in enrolment in primary education in Malawi following the introduction of FPE in 1994, there has been little significant impact on the internal efficiency of the system. Dropout and repetition rates area high and attendance for many is erratic. Other major challenges include a lack of teachers, over-crowded classrooms and scare resources, challenges compounded by the impact of HIV and AIDS. Entry to secondary education remains highly restrictive and inequitable, with less than a third of young people able to take up the opportunity to attend secondary schooling. There is compelling evidence that children from vulnerable groups - low-income households, orphans and girls - are the most affected groups. More needs to be done to ensure that children from vulnerable groups are enrolled sufficiently early, are retained until they complete at least the full primary cycle and are provided with education of a minimally acceptable quality. Where children are selected to secondary school, more effort needs to be made to ensure that needy children can access scholarship funds and other forms of support to allow them to attend school. Initiatives will be required to acknowledge and address both barriers at the household and community level and school-related factors likely to reduce demand.

Evidence presented in this paper suggests that in the face of high direct and opportunity costs - particularly for those households impoverished by the impact of HIV and AIDS - and a poor quality of education often perceived as lacking relevancy, young people find themselves increasingly under pressure to absent themselves or dropout permanently from school. In addition, with the increasing impact of HIV and AIDS, schools already facing difficulties in supporting the needs of children that make it into school are unlikely to reach out to those children who are unable to access school regularly (Kendall and O'Gara, 2007, Pridmore, 2008). The findings from this review indicate a real need to move away from the conventional 'one size fits all' view of schooling and reinforce the argument that new, more flexible models of schooling should be developed if all children are to have meaningful access to learning (Badcock-Walters et al., 2002, Bennell, 2005b, Pridmore, 2008).

Recent changes in the policy environment – as reflected in the NESP – suggest that there is increasing political will within the education sector in Malawi to promote alternative approaches to delivering education. To date, examples of ODFL initiatives that have operated in Malawi – community schools, distance education etc.- have run parallel to existing formal education structures. Many of the strategies used by ODFL programmes, however, can offer important lessons on how to improve the flexibility, inclusiveness and relevance of conventional schools and, as such, contribute towards improved retention and access to learning. However, given that almost all interventions described in this paper are donor-funded project-based initiatives, challenges of sustainability would have to be considered. Similarly, whilst these initiatives demonstrate that community involvement has potential to promote greater support for orphans and other vulnerable children, including those affected by HIV and AIDS, issues of capacity and, motivation need to be addressed. Alongside this, experiences from established non-formal and complementary models of educational provision can provide policy-makers with important information on effective strategies to increase access to learning for out-of-school youth.

The Ministry of Education's CBE programme has shown that a more open and flexible approach to learning has encouraged many vulnerable children to take up their education. More needs to be known, however, about how to mitigate barriers to regular attendance and continue to support these 'second-chance' learners in their efforts. If such programmes are to be rolled out on a wider scale – either as complementary to the formal system or with elements incorporated into conventional schooling – more evidence-based dialogue on barriers to access and successful strategies to retain children is required. Coalitions in the sector need to work closely together to create a greater impact on advocacy for policy

recognition of ODFL (Milner et al., 2001, Kadzamira et al., 2001). International NGOs implementing ODFL programmes need to be properly coordinated, supervised, resourced and supported to ensure that learners receive a quality education. Such strategies to ensure this might include setting - and monitoring - minimum standards, ensuring that curricula and materials are consistent with those used by formal schools, providing regular in-service training for under-qualified teachers, and creating links with formal educators for mentoring support (UNESCO, 2006b). Where ODFL approaches would be incorporated into the formal system, strategies would need to address the capacity of schools and teaching staff to take on additional tasks and outreach activities.

A key issue in responding to the challenges of reaching educationally marginalised children, is the identification of those vulnerable and in need of additional support. This not only requires adequate tracking and monitoring systems at school, community and district level, but an understanding of how such children are defined – and by whom. Much of the literature on the impact of HIV and AIDS on educational access and attainment focuses on orphan status. Large- scale studies show that the extent to which orphans are under-enrolled relative to other children is often country-specific, whilst disadvantage is consistently associated with those children from the poorest households, including poor orphans (Ainsworth and Filmer, 2002). Thus, as the authors argue, orphan status alone is not necessarily a good targeting criterion for programmes aimed at raising attendance rates, because not all orphans are universally in need and other vulnerable groups may be excluded. For example, children affected by HIV and AIDS include not only AIDS-related orphans, but HIV-infected children; children living in households with sick family members and children living in households expanded by the inclusion of children orphaned by AIDS (Pridmore, 2007). This, in addition to difficulties inherent in identifying children orphaned by AIDS, suggests that policies and programmes aimed at improving support for educational marginalised children should use a more encompassing definition of vulnerability.

The Government of Malawi (GoM, 2005) defines a vulnerable child as one who:

 "…*has no able parents or guardians, is staying alone or with elderly grandparents or lives in a sibling headed household or has no fixed place of abode and lacks access to health care, material and psychological care, education and has no shelter*"

Balanced against this, however, there is need for greater understanding of the needs of children affected HIV and AIDS, so that a more inclusive definition of vulnerability does not ignore the specific disadvantage faced by these children. As noted earlier in this paper, such disadvantage is likely to include issues of stigma and discrimination (Kendall and O'Gara, 2007).

> **Interventions to increase educational access and attainment: lessons to be learnt**
>
> - Where appropriate, initiatives should target all vulnerable children in communities affected by HIV and AIDS. Whilst more openness and commitment is needed if schools are to play an effective supportive role for children affected by HIV and AIDS, school managers and teachers should be aware of the sensitivities of identifying such children in order to avoid further stigmatisation.
>
> - Non-formal education approaches, such as complementary models of schooling should be explored as an alternative route for older students and teenage mothers. Learning from established NFE and literacy programmes, these could reduce pressure on primary schooling and contribute to poverty alleviation goals by providing older students with vocational and training skills. Open and distance learning could provide alternative educational provision for out-of-school youth. For children of primary school-going age the focus should be on integrating ODFL strategies into formal schooling.
>
> - Initiatives should be developed with community participation and cater to community needs. Implementing organisations should develop participatory methods for assessing community needs. The successful implementation of initiatives requires that appropriate management and administrative structures are in place at the community and national level to monitor and evaluate their implementation, progress and effectiveness. Experiences of programmes working successfully with communities to support vulnerable children could provide useful lessons in how to identify and monitor those children at risk of dropout.
>
> - Interventions at secondary school level could focus on the use of open, distance and flexible programmes linked to conventional secondary schools. In this scenario, complementary basic education could provide important highlights on how to relate programming with government requirements. Since USAID is going to finance a nationwide IRI project in Malawi, findings from this could be useful to assess how such a strategy could work at secondary level. Particular attention should be paid to students from CDSS, where the quality of educational provision is low.

4.2 Further Research

In order to inform the development of policy and programmes through which ODFL strategies can support improved access to education in Malawi, further research is required into the factors that influence the attendance, retention and attainment of educationally marginalised children, including those affected by HIV and AIDS. At an international level, there has been a move towards reframing schools' roles to include outreach to OVC. UNESCO's statement on Quality Education and HIV and AIDS claims that "schools must find creative ways of seeking out children in households affected by HIV and AIDS" (UNESCO, 2004). Yet, despite the roles envisioned for schools, there are still few studies that examine the daily interactions of schools, AIDS-affected communities and OVC[35] (e.g. Bennell, 2003), particularly with regard to improving retention and access to learning.

Although there is a growing body of literature that identifies the reasons why children and young people in Malawi are missing out on education, few of the studies reviewed for this paper included school dropouts in their sample – relying instead on the perspectives of in-school children and teachers. This underlines an important research gap that needs to be addressed.

In addition, the design of household and school-based surveys is such that they are only able to collect what is, in effect, a list of barriers, with little opportunity to 'unpack' the

---

[35] In this regard, UNESCO is working with five countries in southern Africa –Botswana, Malawi, Mozambique, Zambia and Zimbabwe –to conduct a large-scale study on community and school linkages. The purpose of this study, however, is to identify where good mechanisms exist to reinforce HIV and AIDS education (UNESCO, 2006a).

interplay between the 'push and 'pull' factors that influence access to learning, whether negative or positive. There is a need for more in-depth qualitative work to map the processes leading to interrupted schooling and eventual dropout. Key pre-cursors to permanent exclusion need to be identified. In addition, longitudinal data on the patterns of absenteeism and dropout is urgently required in order to learn more about patterns of exclusion over the primary cycle. For example, evidence from existing studies is not sufficient to show what happens to children who drop out in the early years of schooling and whether or not they re-enter the school system at a future stage. Furthermore, longitudinal studies could provide valuable information on children's transition to secondary education and how the costs of secondary schooling impact on access and retention.

Whilst research findings from Malawi presented in this paper do not provide clear evidence of significant differences in school enrolment between orphans and non-orphans, less is known about the impact of HIV and AIDS on class attendance, retention and access to learning. More studies are required which can identify and profile those children who fail to access school regularly and are at risk of drop out and, thereafter, assess the extent to which their circumstances are AIDS-related. Further qualitative case study work within a range of contexts would be valuable in exploring the complex and cumulative effects of HIV and AIDS on children's access to education. Such qualitative work could also be important in uncovering issues surrounding stigma and discrimination. In addition, qualitative research could also assist in addressing another important gap in the literature – to what extent girls who have become pregnant are re-entering school, what influences their decision and what barriers they might face if they return.

In addition to school and community-based research, a systematic meta-analysis of evaluations of educational programmes and strategies designed to improve access and attainment could be used to analyse such interventions for clear evidence of action designed to benefit specifically children affected by HIV and AIDS. Analysis of strategies in key areas such as community-school relationships; teachers' attitudes, capacity and motivation; collaboration and support across sectors (e.g. health and social welfare) and promoting sustainability would provide valuable evidence to guide future policy and practice.

References

ADF (2001) Appraisal Report: Support to Community Day Secondary Schools. African Development Fund.

AINSWORTH, M. & FILMER, D. (2002) Poverty, AIDS and Children's Schooling: A Targeting Dilemma. *Policy Research Working Paper.* Washington DC, The World Bank.

ALLEMANO, E. (2003) HIV/AIDS: a Threat to Educational Quality in Sub-Saharan Africa. Analytical framework and implications for policy development. Working document commissioned by ADEA for its Biennial Meeting (Mauritius, December 3-6, 2003) (Draft). Paris, Association for the Development of Education in Africa (ADEA), International Institute for Educational Planning.

AVENSTRUP, R., LIANG, X. & NELLEMANN, S. (2004) Kenya, Lesotho, Malawi and Uganda: Universal Primary Education and Poverty Reduction. A case study from Scaling Up Poverty Reduction: A Global Learning Process and Conference Shanghai, May 25–27, 2004 Washington D.C., The International Bank for Reconstruction and Development, The World Bank.

BADCOCK-WALTERS, P., HEARD, W. & WILSON, D. (2002) Developing district-level early warning and decision support systems to assist in managing and mitigating the impact of HIV/AIDS on education. Paper presented at the Barcelona Worldwide AIDS Conference in 2002.

BADCOCK-WALTERS, P., GORGENS, M., HEARD, W., MUKWASHI, P., SMART, R., TOMLINSON, J. & WILSON, D. (2005) Education Access and Retention for Educationally Marginalised Children: Innovations in Social Protection. *Innovations in Social Protections.* Mobile Task Team (MTT), Health Economics & HIV and AIDS Research Division (HEARD), University of KwaZulu-Natal, South Africa.

BENNELL, P. (2003) The Impact of the AIDS Epidemic on Schooling in Sub-Saharan Africa. Background paper for the Biennial Meeting of the Association for the Development of Education in Africa, December 2003.

BENNELL, P. (2005a) The Impact of the AIDS Epidemic on Teachers in Sub-Saharan Africa. *The Journal of Development Studies,* 41**,** 440-466.

BENNELL, P. (2005b) The impact of the AIDS Epidemic on the Schooling of Orphans and Other Directly Affected Children in sub-Saharan Africa. *Journal of Development Studies,* 41**,** 467-488.

BOLER, T. & JELLEMA, A. (2005) Deadly inertia: A cross-country study of educational responses to HIV/AIDS. Brussels, Global Campaign for Education.

BOUKARY, H. (2006) HIV and AIDS in Africa: the education system and the need for an accelerated response', paper presented at the regional workshop on good practices in education sector responses to HIV and AIDS in Africa, Johannesburg, South Africa, 12–14 September 2006.

BRYCESON, D. F., FONSECA, J. & KADZANDIRA, J. (2004) Social Pathways from HIV/AIDS Deadlock of Disease, Denial and Desperation in Rural Malawi. Lilongwe, Renewa and Care.

CASTRO-LEAL, F. (1996) Who benefits from public education spending in Malawi? results from the recent education reform. *World Bank Discussion Paper.* Washington D.C., World Bank.

CHAWANI, B. S. & KADZAMIRA, E. (2003) The impact of HIV/AIDS on the education sector in Malawi: Study 1 Examining policy, leadership and advocacy responses in the education sector. Lilongwe, MoEST and UNESCO/IIEP.

CHAWANI, B. S. & KADZAMIRA, E. (2004) The Impact of HIV/AIDS on the Education Sector in Malawi: Study 2 Examining the Impact of Governance in the Education Sector. Ministry of Education Science and Technology (MoEST) Government of Malawi, and IIEP-UNESCO.

CHIMOMBO, J. P. G. (1999) Implementing educational innovations: a study of free primary education in Malawi, unpublished PhD thesis, University of Sussex

COOMBE, C. & KELLY, M. J. (2001) Education as a Vehicle for Combating HIV/AIDS. Paris, UNESCO

DESTEFANO, J. (2006) Meeting EFA: Zambia Community School (EQUIP2 Case Study). Academy for Educational Development (AED).

DESTEFANO, J., HARTWELL, A., SCHUH-MOORE, A. & BALWANZ, D. (2006) Meeting EFA: Reaching the underserved through complementary models of effective schooling. Academy for Educational Development (AED).

DFID (2007) Case studies: Teachers stepping stones to behavioural change in Malawi. Available from http://www.dfid.gov.uk/casestudies/files/africa/malawi-steppingstones.asp [Accessed 7th October 2007]

DONAHUE, J. & WILLIAMSON, J. (1998) Community Mobilization to Address the Impacts of AIDS: A Review of the COPE II Program in Malawi. Washington, DC, Displaced Children and Orphans Fund and War Victims Fund.

DONAHUE, J. & WILLIAMSON, J. (1999) Community Mobilization to Mitigate the Impacts of AIDS. Washington, DC, Displaced Children and Orphans Fund and War Victims Fund.

DURSTON, S. & NASHIRE, N. (2001) Rethinking Poverty and Education: an attempt by an education programme in Malawi to have an impact on poverty. *Compare: A Journal of Comparative Education,* 31**,** 75-91.

EMIS (2006) Education Statistics 2006. Lilongwe, Education Management Information System (EMIS), Department of Education Planning, Ministry of Education and Vocational Training.

FENTIMAN, A. (2004) Forum on Open Schooling for Secondary Education in Sub-Saharan Africa. Report for the Commonwealth of Learning. Gaborone, Botswana 5th-8th October, 2004. International Research Foundation for Open Learning (IRFOL), and Commonwealth of Learning (COL).

FLOYD, S., CRAMPIN, A., GLYNN, J., MADISE, N., MWENEBABU, M., MNKONDIA, S., NGWIRA, B., ZABA, B. & FINE, P. E. M. (2007) Social and Economic Impact of parental HIV on children in northern Malawi. *AIDS Care,* 19**,** 781-790.

GCE (2004) Learning to survive: How education for all would save millions of young people from HIV/AIDS. Brussels, Global Campaign for Education.

GOM (2003a) National HIV/AIDS Policy: A Call for Renewed Action. Office of the President and Cabinet, National AIDS Commission.

GOM (2003b) National Strategy for Community Participation in Primary School Management: the move beyond bricks towards community involvement in whole school development, Draft Report July 2003, Ministry of Education, Science and Technology, GOM, Lilongwe, Malawi.

GOM (2005a) 2005/2006 Budget Statement, New State House, Lilongwe, 10th June 2005.

GOM (2005b) National Plan of Action for Orphans and other Vulnerable Children in Malawi, 2004-2009. Lilongwe, Government of Malawi.

HARGREAVES, J. R. & GLYNN, J. R. (2002) Educational attainment and HIV-1 infection in developing countries: a systematic review. *Tropical Medicine and International Health* 7**,** 489–498.

HARRIS, A. M. & SCHUBERT, J. G. (2001) Defining "quality" in the midst of HIV/AIDS: Ripple effects in the classroom. Paper presented at the 44th annual meeting of the Comparative and International Education Society, Washington, DC, March 2001, Improving Educational Quality (IEQ) Project.

HEPBURN, A. E. (2001) Primary Education in Eastern and Southern Africa: Increasing Access for Orphans and Vulnerable Children in AIDS-affected Areas. Durham, Terry Sanford Institute of Public Policy, Duke University.

HOPPERS, W. (2005) Community Schools as an educational alternative in Africa: a critique. *International Journal Review of Education,* 51**,** 115-137.

KADZAMIRA, E. C. & CHIBWANA, M. P. (2000) *Gender and primary schooling in Malawi,* Brighton, Institute of Development Studies.

KADZAMIRA, E. C., MALUWA-BANDA, D. M., KAMLONGERA, A. & SWAINSON, N. (2001) The Impact of HIV/AIDS on Primary and Secondary Schooling in Malawi: Developing a Comprehensive Strategic Response. Centre for Educational Research and Training (CERT).

KADZAMIRA, E. C. & ROSE, P. (2003) Can free primary education meet the needs of the poor?: evidence from Malawi *International Journal of Educational Development,* 23**,** 501-516.

KADZAMIRA, E. C., MOLENI, C. M., KHOLOWA, F., NKHOMA, M., ZOANI, A., CHONZI, R. & CHIGEDA, A. (2004) Student Testing and Assessment Reform. Lilongwe, final report submitted to World Bank Malawi

KADZAMIRA, E. C. & NELL, M. (2004) Potential Programmes for Out-of-School Youth: exploring the interface between Basic Education and Vocational Education and Training. Lilongwe, GTZ Malawi Basic Education Programme (GTZ-MBEP).

KADZAMIRA, E. C., MOLENI, C. M. & KUNJE, D. (2006) Unsafe Schools: Findings from School-related Gender based Violence PRA/PLA study in Machinga District, Zomba, Centre for Educational Research and Training (CERT), University of Malawi.

KAMLONGERA, A. (n.d.) HIV/AIDS Intervention in the Education Sector in Malawi. Ministry of Education, Science and Technology.

KELLY, M. J. (2000) Planning for Education in the Context of HIV/AIDS. Paris, UNESCO, International Institute for Educational Planning

KENDALL, N. & O'GARA, C. (2007) Vulnerable children, communities and schools: lessons from three HIV/AIDS affected areas. *Compare: a journal of comparative education,* 37**,** 5-21.

LEACH, F., FISCIAN, V., KADZAMIRA, E., LEMANI, E. & MACHAKANJA, P. (2003) An Investigative Study of the Abuse of Girls in African Schools. *DFID Educational Papers: researching the issues no.54,* London, DFID.

LEWIN, K. M. & SAYED, Y. (2005) Non-governmental secondary schooling in Sub-Saharan Africa. Exploring the Evidence in South Africa and Malawi. *DFID Educational Papers: researching the issues no.59.,* London, DFID.

MALAWI INSTITUTE OF MANAGEMENT (2002) The Impact of HIV/AIDS on Human Resources in the Malawi Public Sector; Lilongwe. Malawi Institute of Management, Lilongwe, Government of Malawi/UNDP.

MALGA (2006) Managing HIV/AIDS at the Local Level in Africa: Project outputs and achievements. Lilongwe, Mzuzu and Zomba, Malawi Local Government Association (MALGA).

MANN, G. (2002) Family Matters: the Care and Protection of Children Affected by HIV/AIDS in Malawi. Save the Children Alliance

MCBRIDE, R. (2004) Fenced into Cycles of Deprivation: Orphans, their female carers and education in Malawi. In YEAKEY, C. C., RICHARDSON, J. W. & BUCK, J. B. (Eds.) *Advances in Education in Diverse Communities: Research, Policy and Praxis.* Elsevier JAI.

MHLANGA, E. (2008) Review of innovation in interventions to increase access to education and attainment. *SOFIE Opening Up Access Series no.2.* London, Institute of Education. Available from: http://www.ioe.ac.uk/sofie/publications.html

MILNER, G., CHIMOMBO, J., BANDA, T. & MCHIKOMA, C. (2001) The Quality of Primary Education: Some Policy Suggestions Based on a Survey of Schools. Malawi, An Interim Report. In ROSS, K. N. (Ed.) *SACMEQ Educational Policy Research Series: Report No. 7.* Paris, UNESCO International Institute for Educational Planning, and Ministry of Education, Science and Technology Malawi.

MOE (n.d.) Complementary Basic Education for out-of-school children and youth: Implementation Strategy, Lilongwe, Ministry of Education.

MOE (2000) Policy Investment Framework (PIF), Ministry of Education, Sports and Culture, Lilongwe.

MOE (2001) Ministry of Education, Science and Technology: Press Release, *June 21st 2001, The Nation.*

MOE (2006) National Education Sector Plan - Executive Summary. Lilongwe, Ministry of Education and Vocational Training.

MOLENI, C. M. (1999) Addressing girls' participation in secondary education in Southern Malawi: the GABLE scholarship programme, unpublished M.Ed thesis, University of Bristol.

MOLENI, C. M. & NDALAMA, L. (2004) Teacher Absence and Attrition in primary schools in Malawi: a case study of four districts, Zomba, Centre for Educational Research and Training (CERT) and Malawi Institute of Education (MIE).

MOLENI, C. M. & NAMPOTA, D. C. & KADZAMIRA, E. (2005) Complementary Basic Education in Malawi: a Needs Analysis, Zomba, Centre for Educational Research and Training, University of Malawi

MOLENI, C. M. & NAMPOTA, D. C. (2006) Complementary Basic Education in Malawi. Baseline Survey. Zomba, Centre for Educational Research and Training, University of Malawi

MOLENI, C. M. & NAMPOTA, D. C. (2007) Complementary Basic Education in Malawi: Term One Evaluation. Zomba, Centre for Educational Research and Training, University of Malawi.

MUNTHALI, A., ZULU, E. M., MADISE, N., MOORE, A. M., KONYANI, S., KAPHUKA, J. & MALUWA-BANDA, D. (2006) Adolescent Sexual and Reproductive Health in Malawi: Results from the 2004 National Survey of Adolescents. Occasional Report No. 24. New York, Guttmacher Institute.

NAC (2005) HIV & Syphilis Sero-Survey and National HIV Prevalence Estimates Report. Lilongwe, Ministry of Health, and National AIDS Commission.

NSO and ORC MACRO (2005) Malawi Demographic and Health Survey 2004. Calverton, Maryland, National Statistical Office (Malawi) and ORC Macro.

NSO and UNICEF (2007) Monitoring the Situation of Children and Women: Malawi Multiple Indicator Cluster Survey 2006. Preliminary Report, Zomba, National Statistical Office, and UNICEF, Lilongwe.

PRIDMORE, P. (2007) The Impact of health on education access and achievement: A cross-national review of the research evidence, *CREATE Pathways to Access, Research Monograph no.2.,* University of Sussex, Centre for International Education, Consortium for Research on Educational Access, Transitions and Equity (CREATE).

PRIDMORE, P. (2008) Access to conventional schooling for children and young people affected by HIV and AIDS in sub-Saharan Africa: A cross-national review of recent research evidence. *SOFIE Opening Up Access Series no.1.* London, Institute of Education. Available from: http://www.ioe.ac.uk/sofie/publications.html

PRIDMORE, P. & YATES, C. (2005) Combating AIDS in South Africa and Mozambique: the Role of Open, Distance, and Flexible Learning (ODFL). *Comparative Education Review* 49**,** 490-511.

PRIDMORE, P. & YATES, C. (2006) The Role of Open, Distance and Flexible Learning (ODFL) in HIV/AIDS Prevention and Mitigation for Affected Youth in South Africa and Mozambique. *DFID Educational Papers: researching the issues no.61,* London, DFID.

PRIDMORE, P. & YATES, C. (2007) Strengthening ODFL systems to increase education access and attainment for young people in high HIV prevalence SADC countries: Visit report Phase 1 SOFIE project, Institute of Education, University of London.

RISPEL, L., LETLAPE, L. & METCALF, C. (2006) Education sector responses to HIV and AIDS: Learning from good practices in Africa. London, Commonwealth Secretariat, Association for the Development of Education in Africa (ADEA), and the Human Sciences Research Council (HSRC).

ROBSON, S. & SYLVESTER, K. B. (2007) Orphaned and vulnerable children in Zambia: the impact of HIV/AIDS epidemic on basic education for children at risk. *Educational Research,* 49**,** 259-272.

ROSE, P. (2002) Community Participation in school policy and practice in Malawi: balancing local knowledge, national policies and international agency priorities. *Compare,* 33**,** 47 - 64.

SHARMA, M. P. (2006) Orphanhood and Schooling Outcomes in Malawi. *American Journal of Agricultural Economics,* 88**,** 1273-1278.

SSTEP MALAWI (n.d.) Secondary School Teacher Education Project: Background, retrieved on 10th October, 2007, http://www.sstep-malawi.com/backg.html.

UNAIDS (2002) HIV/AIDS and Education: A Strategic Approach. Geneva, UNAIDS.

UNAIDS (2006a) 2006 Report on the global AIDS epidemic. Geneva, Joint United Nations Programme on HIV/AIDS.

UNAIDS (2006b) Education Sector Global HIV & AIDS Readiness Survey 2004: Policy Implications for Education & Development. UNAIDS Inter-Agency Task Team on Education.

UNAIDS (2006c) Quality Education and HIV & AIDS. UNAIDS Inter-Agency Task Team (IATT) on Education.

UNAIDS/UNICEF/USAID (2004) Children on the Brink: a joint report of new orphan estimates and a framework for action*,* UNICEF.

UNDP (2007) Human Development Report 2007/2008, retrieved on 15th December 2007 at http://hdrstats.undp.org/countries/country_fact_sheets/cty_fs_MWI.html.

UNESCO (2002) Open and Distance Learning: Trends, Policy and Strategy Considerations Paris, Division of Higher Education, UNESCO.

UNESCO (2004) Quality Education and HIV/AIDS. Paris, United Nations Educational, Scientific and Cultural Organization.

UNESCO (2005) 2005 EFA Global Monitoring Report, Paris, UNESCO

UNESCO (2006a) Good Policy and Practice in HIV& AIDS and Education: HIV & AIDS and Educator Development, Conduct and Support. Booklet 3. Paris, United Nations Educational, Scientific and Cultural Organization.

UNESCO (2006b) Good Policy and Practice in HIV& AIDS and Education: HIV & AIDS and Safe, Secure and Supportive Learning Environments. Booklet 2. Paris, United Nations Educational, Scientific and Cultural Organization.

UNESCO (2007) 2007 Global Monitoring Report, Paris, UNESCO

UNICEF (2002) Orphans and other children affected by HIV/AIDS, UNICEF fact sheet, New York, United Nations Children's Fund.

UNICEF (2004) The State of the World's Children 2004: Girls, Education and Development. New York, United Nations Children's Fund.

USAID & CERT (2002) The Changing Roles of Non-Governmental Organisations in Education in Malawi. Zomba, Centre for Educational Research and Training (CERT), University of Malawi and United States Agency for International Development (USAID), Bureau for Africa, Office of Sustainable Development.

USAID MALAWI (2006) Primary School Support Program: a Schools Fees Pilot (PSSP:SFP) January - March Technical Report.

USAID MALAWI (2007) Primary School Support Program: A School Fees Pilot (PSSP: SFP). Annual Report, January - December, 2006. Prepared for the United States Agency for International Development, by the American Institutes for Research in partnership with Creative Center for Community Mobilization, Malawi Institute of Education, and Miske Witt & Associates, Incorporated.

VANDERMOORTELE, J. & DELAMONICA, E. (2000) The "Education Vaccine" Against HIV. *Current Issues in Comparative Education,* 3**,** 11 pages.

WORLD BANK (1997) *Confronting AIDS: Public Priorities in a Global Epidemic,* New York, Oxford University Press.

WORLD BANK (2002) Education and HIV/AIDS: A window of hope. Washington, DC., The World Bank.

WORLD BANK (2003) Local Government Responses to HIV/AIDS: A Handbook to support local government authorities in addressing HIV/AIDS at the municipal level. Cities Alliance, UNDP/UNHabitat, AMICAALL, UNDP, and the World Bank.

WORLD BANK (2004) Country Strategic Plan Malawi, Lilongwe, World Bank

WORLD BANK, PCD, UNICEF & UNAIDS (2002) Ensuring Education Access for Orphans and Vulnerable Children: A Training Module. *Education & HIV/AIDS.* Mombasa, The World Bank, The Partnership for Child Development (PCD), UNICEF and UNAIDS.

ANNEX 1 : Literature Search Strategy

Published and unpublished literature was located through database and library searches, as follows:

- Library catalogue searches at the Institute of Education, University of London

- Bibliographic databases: IBSS (International Bibliography of the Social Sciences), ASSIA/CSA (Applied Social Sciences Index and Abstracts), ERIC (Education Resources Information Center); UNESDOC/UNESBIB (UNESCO Documents and Publications), and PsycINFO.

- Databases of organisations: The World Bank, DFID, UNICEF, UNESCO, UNAIDS, the HIV/AIDS Impact on Education Clearinghouse[36], UNESCO Education and HIV & AIDS Programme –Harare Cluster Office,[37] the Centre for International Education, Sussex School of Education; and the IIEP website.

- Databases of official Malawi Government websites: The Official Website of The Government Of Malawi, the Ministry of Education and The National Statistical Office portals.

- Free text searching of the internet using gateways such as Eldis and CRIN (Child Rights Information Network), and search engines including Google and Scholar Google.

> **Keywords used in the search include:**
>
> - child$, girl$, boy$, young people, youth, orphan$, vulnerable;
>
> - education, school$, access, achievement, non-formal, open, distance, alternative, flexible, and complementary;
>
> - HIV and AIDS;
>
> - Malawi.

---

[36] http://hivaidsclearinghouse.unesco.org/ev_en.php
[37] http://www.harare.unesco.org/hivaids/search_by_category.asp?cat=20&desc=Impact%20Studies

ANNEX 2 : Strategic objectives for the sub-sectors

GOAL	STRATEGIC OBJECTIVES		
1) Equitable Access	**Basic**	**Secondary**	**TVT**
Priority 1	Increase net enrolment rates, targeting those disadvantaged by gender, poverty, special needs and geographical location	Increase enrolment and make selection and admission of students more equitable	Increase enrolment in TVT by broadening skills range and diversifying delivery modalities Maximise private sector participation in TVT
Priority 2	Improve, expand and maximise use of educational infrastructure Optimise private sector participation in basic education	Improve, expand and maximise use of educational infrastructure Optimise private sector participation in basic education	Improve, expand and maximise use of educational infrastructure Make selection and admission of TVT trainees more equitable
Priority 3	Strengthen complementary basic educational modalities for learners	Strengthen complementary secondary education modalities	
2) Relevance and Quality	**Basic**	**Secondary**	**TVT**
Priority 1	Improve teaching inputs as so to facilitate more effective learning Reduce class sizes to facilitate more effective learning Enhance the relevance of the primary curriculum and improve delivery	Improve teaching inputs as so to facilitate more effective learning	Enhance the relevance of the TVT curriculum and improve delivery
Priority 2	Introduce appropriate incentives to teachers and supervise their performance	Introduce appropriate incentives to teachers and supervise their performance	Improve teaching inputs to facilitate more effective learning
Priority 3		Enhance the relevance of the secondary curriculum and improve delivery	Establish Research departments in technical and vocational training centres
3) Governance and Management	**Basic**	**Secondary**	**TVT**
Priority 1	Mobilise communities to participate in 'whole-school development' and management Ensure Appropriate Decentralisation of Delivery of Education Services		Reform policy for TVT institutions
Priority 2	Monitor performance and strengthen internal efficiency of sub-sector	Monitor performance and strengthen internal efficiency of sub-sector	Monitor performance of and strengthen internal efficiency of sub-sector

Source: (USAID and CERT, 2002)

ANNEX 3: Framework for OVC programming in Malawi

1989/1990	HIV/AIDS was incorporated into school curricula
1991	Malawi ratified the UNCRC;
1991	First National Consultation on the situation of OVC was held, leading to the formation of the National Task Force on OVC;
1992	OVC Policy guidelines were produced;
1993/4	A nationwide OVC needs assessment and a National OVC Situation Analysis on care practices were conducted;
1996	Elements for a National Orphan Care Programme were established;
1999	A Training Manual on Orphan Care was produced; then,
2003	Participants from Malawi attended an OVC skills building workshop in Lesotho;
2003	Malawi adopted its National Orphan Care Policy;
2003	The Accelerated Girls Education project supported by Ministry of Education and UNICEF was launched to ensure the quality and accessibility of education to orphans, working children, and children with special needs;
2004	A Rapid Assessment, Analysis and Action Planning Process (RAAAP) was conducted, which contributed to the development of the National Plan of Action for Orphans and other Vulnerable Children, 2004-2009[38]
	Under the National Policy on Early Childhood Development, children under five are eligible for free programmes that prioritise early childhood physical, psychosocial and development needs;

Source: (Ministry of Education and Vocational Training, 2006)

---

[38] The Technical Working Group, consisting of members from the National Task Force on OVC, UNICEF, UNAIDS, USAID and WFP validated the data, drafted the RAAAP report and came up with a preliminary Action Plan. Through many additional stakeholders meetings and hiring of additional consultants, the initial plan then further developed into the National Plan of Action for OVC in Malawi.