

Theatre for a Change

# Midline Report

The Tiphunzire Project

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## Acronyms

<b>AoC</b>	Agent of Change
<b>CLC</b>	Community Listening Clubs
<b>CSO</b>	Community and Social Organization
<b>CP</b>	Child Protection
<b>CPP</b>	Child Protection Policy
<b>CSM</b>	Child Safeguarding Manager
<b>DFID</b>	Department for International Development (UK)
<b>EGMA</b>	Early Grade Mathematics Assessment
<b>EGRA</b>	Early Grade Reading Assessment
<b>FGD</b>	Focus Group Discussion
<b>GBV</b>	Gender-Based Violence
<b>GC</b>	Girls' Club
<b>GEC</b>	DFID-UKAID Girls' Education Challenge
<b>HHS</b>	Household Survey
<b>IS</b>	In-School
<b>INGO</b>	International Non-Governmental Organization
<b>KAP</b>	Knowledge, Attitudes and Practices
<b>KII</b>	Key Informant Interview
<b>MEL</b>	Monitoring, Evaluation and Learning
<b>MoEST</b>	Ministry of Education Science and Technology
<b>OS</b>	Out-of-School
<b>SHN</b>	School Health and Nutrition
<b>SMC</b>	School Management Committee
<b>SRH</b>	Sexual and Reproductive Health
<b>SRHR</b>	Sexual and Reproductive Health Rights
<b>SRGBV</b>	School-related Gender-Based Violence
<b>TTC</b>	Teacher Training College
<b>UNICEF</b>	United Nations Children's Fund
<b>VfM</b>	Value-for-Money

## Executive Summary

### ***Background to project***

Although Malawi has made significant progress in addressing gender differences in enrollment rates<sup>1</sup>, some 22% of primary school-aged girls do not attend school, while 60% of girls enrolled do not attend school regularly<sup>2</sup>. Furthermore, although enrollment rates have evened out in the early years of primary school, more boys are enrolled in later primary years. Dropping-out or missing school results in lower completion rates for girls compared to boys in Malawi, and this is often due to early pregnancy or early marriage<sup>3</sup>. A study on the effect of sexual and reproductive health (SRH) choices and educational trajectories of youth in Malawi show that girls who miss one or more school terms due to pregnancy are less likely to return to school than their counterparts who dropped out for other reasons<sup>4</sup>.

Through funding from the UK Department for International Development's (DFID) Girls Education Challenge<sup>5</sup> (GEC), Theatre for a Change<sup>6</sup> (TfaC) is implementing *Tiphunzire!* (Let's learn!), a set of intervention activities that aim to improve the access, retention and learning outcomes of marginalised girls in 225 primary schools in rural and peri-urban Malawi. Through a partnership with the Malawian Ministry of Education, Science and Technology (MoEST), TfaC selected intervention schools and trained over 360 female teachers in specialized skills to meet the needs of marginalized girls and to engage others in the school and the wider community in the promotion of girls' education. Teachers from Tiphunzire are known as "Agents of Change" (AoCs). TfaC has provided further training and financial support to AoCs throughout project implementation.

AoCs organize weekly afternoon Girl Clubs for both in-school and out-of-school girls. Participants engage in interactive group activities to build self-confidence, role-playing games to address real life situations, and exercises to train literacy and numeracy skills. These clubs incorporate both in-school and out-of-school girls, many of which have later enrolled back in school. AoCs also support their fellow staff and school authorities in the adoption of Child Protection Policy (CPP) and age-friendly and gender sensitive teaching methods<sup>7</sup>. Tiphunzire also organizes periodical outreach activities with schools and communities and has developed strategic partnerships with local government and civic society organizations through their intervention model.

Tiphunzire was implemented in two phases. Phase 1 began in 2013 and placed AoCs in 36 schools across six districts (Balaka, Salima, Dedza, Nkhokhotakota, Chikwawa and Lilongwe West) in Southern and Central Malawi. In 2014, Phase 2 the project scaled-up and AoCs were deployed to an additional 189 schools also covering four new districts (Mchinji, Blantyre, Lilongwe Rural East, and Ntcheu). Tiphunzire operates in 10 of the 28 districts of Malawi.

### ***The Midline Evaluation***

At midpoint of the intervention, Tiphunzire wishes to obtain rigorous evidence to inform a review of its impact, relevance, effectiveness, value-for-money and sustainability of the project. To move forward, the project also wishes to understand the key implementation and contextual barriers to improving the learning of marginalized girls in their intervention schools. This midline study reports on the main findings and

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<sup>1</sup> EFA Global Monitoring Report 2000-2015.

<sup>2</sup> Global Affairs Canada (2015) Malawi Education: Country Report

<sup>3</sup> *Ibid*, 1.

<sup>4</sup> Satvika Chalasani, Christine A. Kelly, Barbara S. Mensch, Erica Soler-Hampejsek (2012). *Adolescent pregnancy and education trajectories in Malawi*.

<sup>5</sup> For more information about the Girls' Education Challenge, please visit: <https://www.gov.uk/international-development-funding/girls-education-challenge>

<sup>6</sup> For more information about Theatre for a Change, please visit: <http://www.tfcafrica.com/>

<sup>7</sup> Abuse in Malawi schools has been well documented. See Rancourt (2012) *Ending School Related Gender Based Violence in Nsanje (Baseline, Concern Worldwide)*.

recommendations and uses a mixed-methods approach in the appraisal of programme-level evaluation questions.

Since 2013<sup>8</sup> Tiphunzire has tracked a cohort of marginalized girls across 36 schools in six districts of Malawi (Balaka, Salima, Dedza, Nkhosakota, Chikwawa and Rural Lilongwe). This cohort-tracking design enables empirical observations on the changes in the learning outcomes and conditions of participants of the study since baseline and a continuous assessment of the project's assumptions.

Data was gathered at baseline in 2013 and recently at midline in May/June 2015 using the Malawi Early Grade Reading Assessment (EGRA)<sup>9</sup> and the Early Grade Mathematics Assessment (EGMA)<sup>10</sup> for a cohort of 827 marginalised girls across 72 primary schools in rural and peri-urban Malawi. Attendance data was gathered from attendance registries made available to the data collection team at participating schools. The evaluation also relied in the administration of the Girls' Semi-Structured Questionnaire, the Household Survey and ad-hoc questionnaires, key informant interviews and focus group discussions in the appraisal of project outcomes, benchmarks, and recommendations.

To estimate the project's impact, we measured Tiphunzire's attribution to the changes in learning outcomes, access and retention of a stratified sample of Girl Clubs' participants<sup>11</sup> using a quasi-experimental approach. This approach relies in the study of a 'counterfactual' as a way of controlling for unobserved phenomena and of estimating the project's achievement by means of a fixed effects regression model. This design is well suited to non-randomized interventions (whose sites are selected by criteria other than randomization) and when individual-level outcome data is not available from the baseline period<sup>12</sup>. In so doing, we analysed a cross-sectional dataset of 1768 marginalized girls participating in Tiphunzire activities since 2013.

The data was analysed through three fixed effects regression models using literacy, numeracy and attendance scores as dependent variables. By virtue of its cross-sectional nature, this approach follows a quantitative appraisal of the project's achievement on the levels, rather than changes, in education outcomes.

## Key Findings

### Literacy

Literacy was measured at Baseline using the EGRA 2010, and at Midline using the EGRA 2011. The EGRA incorporates nine subtasks, including letter-naming fluency, initial sound awareness, syllable segmentation, syllable reading fluency, familiar word fluency, nonsense word reading fluency, oral reading fluency, reading comprehension, and listening comprehension. The EGRA measure is a composite score from 1 to 68 calculated using all subtasks except oral reading fluency<sup>13</sup>.

- For a sample of 1090 participants the regression model found that the Tiphunzire project had an impact at the  $p < .05$  significant level on literacy ( $p = .037$ ) as measured through overall EGRA score.
- Tiphunzire accounts for 4.1 points of EGRA<sup>14</sup> improvements made by the treatment group across time. The model was able to explain 18.1% of variance in the data.
- For the treatment group, out-of-school girls saw an improvement of 13.0 pts on the EGRA test. At midline, in-school girls who were in Standard 5 at baseline improved by 14.1 pts and Standard 6 girls improved by 15.3 pts in the EGRA test.

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<sup>8</sup> *Op cit, 1, Theatre for a Change (2013).*

<sup>9</sup> 2011 EGRA,

<sup>10</sup> YEAR EGMA

<sup>11</sup> See stratification criteria in p.10.

<sup>12</sup> Caveat about ILC Midline

<sup>13</sup> Oral reading fluency was not collected at Baseline by the previous external evaluator, preventing subsequent comparisons at Midline.

<sup>14</sup> EGRA Overall Score (weighted- see EGRA Annex 3 and Annex 7)

## Numeracy

Numeracy was measured through the EGMA 2010 at Baseline and at Midline. The Malawi EGMA test is comprised of eight subtasks which include oral counting, rational counting, number identification, number discrimination, pattern completion, word problems, addition problems, and subtraction problems. The overall score for the EGMA test is the average percentage of correct responses from subtests 3 to 8.

- For a sample of 1329 participants the regression model found no visible impact at significant levels as measured through the EGMA test ( $p=.243$ ).
- While significant at the  $p<.001$ , this regression model was only able to explain 4.3% of the total variance thus demonstrating limited predictive value.
- For the treatment group, out-of-school saw an improvement of 9% on the EGMA test. At midline, in-school girls who were in Standard 5 at baseline improved by 2% and Standard 6 girls improved by 5% in the EGMA test.

## Attendance

Attendance was measured as the percentage proportion of days an in-school girl is present in a school calendar month. As such, the regression incorporates only girls who were in-school at the time of the baseline.

- In-school girls who at baseline were in Standard 5 improved their attendance to school by 8.6% and those who were in Standard 6 by 13.1%.
- The model was able to explain 14.6% of the total variance at  $p<.001$  for 1069 cases. However, the impact of the intervention on the attendance level was not visibly significant ( $p=.912$ ).

## Retention

We measure retention as the percentage of in-school girls who have stayed in school since the baseline. These are girls who were enrolled in school at baseline and who reported to be attending school by themselves and their guardians at midline.

- Findings show that all in-school girls in both treatment and control schools are still in school and have not dropped out.
- However, we consider a girl who attends school 50% of the time or less to be at risk of dropping out. These are girls who attend school only half of the total calendar month. Findings show that 2.6% of girls in the treatment group and 4.6% of girls in the control group are at risk of dropping out. These differences are not significant according to chi-square tests.

## Enrolment

To measure enrolment, we constructed a dummy variable for girls defined as out-of-school at baseline who reported to have been attending school at midline and for whom attendance data was available. From the original cohort of 'out-of-school' girls, we considered a girl to be re-enrolled if she was attending more than 50% of school days per calendar month. We considered cases for whom attendance data was not available and who reported not to be attending school as not re-enrolled. Readers should bear in mind that all girls participating in the study are sampled from within Girls' Clubs, rather than randomly from the entire school population.

- Findings show that 92% of out-school girls in treatment schools have re-enrolled, compared to only 52% of out-of-school girls in control schools. According to Chi-square tests, these differences are significant at the  $p<.001$  suggesting that an out-of-school girl's re-enrolment is highly associated with her treatment status. These results confirm the significant effect of the intervention in encouraging out-of-school girls participating in Girls' Clubs to enrol back to school.

## What are the key lessons learned about what has worked or not worked, why, for whom, under what conditions and with what effects?

1. **Building confidence and increasing participation of girls will positively impact on their attendance and learning.** Linear regressions determined that self-efficacy, self-esteem and school belonging are statistically significant predictors of learning outcomes in literacy, numeracy, and attendance. These findings collectively validate the project's assumption that if girls have higher academic self-efficacy, and have a positive attitude towards attending school this will lead to improved learning outcomes and improved attendance.
2. **Increased attendance leads to higher grades. Percentage attendance per month is a statistically significant predictor of learning outcomes based on a regression model.** This validates the project's assumption that increased attendance at school is a predictor of learning outcomes in literacy and numeracy.
3. **Girls who fear abuse/ are victims of abuse at school are less likely to attend school.** In order to test this assumption we examined a mean score of safety from the girls SSQ in relation to percentage attendance per month. Bivariate correlations reveal that there is a statistically significant positive correlation between these two variables, indicating that girls who feel safer attend school more frequently ( $p < 0.05$ ). However, a linear regression did not find that safety predicted school attendance.
4. **Whether a girl is pregnant, has ever been pregnant, is married or living as married, or is sexually active affects her attendance to school.** Sexually active girls attend schools 29% fewer days than average, girls who have been pregnant attend 46% fewer school days on average and girls who have given birth attend, on average, 51% fewer schools days than non-mothers. Girls who are married or living with men as if married attend 23% fewer school days than their unmarried peers. T-test comparisons revealed these difference to be statistically significant ( $p < 0.05$ ).
5. **Tiphunzire participants are less sexually active than non-participants.** Pearson Chi-square tests show that participating in Tiphunzire's Girls' Clubs is significantly associated with being less sexually active ( $p < 0.05$ ).
6. **AoCs are the core implementation node, but face challenges engaging parents and communities to actively support girls' education.** The project failed to meet targets for output 3 (parents actively support girls education). This was arguably due to cancellations of listening clubs (due to challenges with the radio broadcaster), lack of incentives for community listening club participants, initial difficulty building trust with parents and communities, and inconsistent capacities of community and parent organisations between schools making it difficult to develop systematic approaches to engaging participants. AoCs also faced some barriers through the lack of support of head teachers and fellow teachers and misconceptions about the project's aims amongst broader school stakeholders.
7. **Local authorities such as School Health and Nutrition co-ordinators, District Education Managers as well as Heads Teachers and Chiefs have been supportive in the identification and support of marginalized girls as well as project delivery.** By engaging with local lines of authority, the project seeks to create a knowledge base and a human platform to enhance prospects of sustainability.

## 1 Introduction

According to UNESCO, marginalization can be understood as “extreme and persistent disadvantage that sets groups apart from the rest of society”<sup>15</sup>. Their report concludes that low learning achievement is one of the most widespread forms of marginalization among the youth, particularly in cases of poverty and vulnerability. A child’s attendance to school has been shown to be a strong predictor of literacy and numeracy acquisition in the primary years<sup>16</sup> and interventions that aim to increase the access and retention of children in school may thus offer a mean to root out learning disadvantages.

Although Malawi has made significant progress in addressing gender differences in enrollment rates<sup>17</sup>, some 22% of primary school-aged girls do not attend school, while 60% of girls enrolled do not attend school regularly<sup>18</sup>. Furthermore, although enrollment rates have evened out in the early years of primary school, more boys are enrolled in later primary years. Dropping-out or missing school results in lower completion rates for girls compared to boys in Malawi, and this is often due to early pregnancy or early marriage<sup>19</sup>. A study on the effect of sexual and reproductive health (SRH) choices and educational trajectories of youth in Malawi show that girls who miss one or more school terms due to pregnancy are less likely to return to school than their counterparts who dropped out for other reasons<sup>20</sup>.

Through funding from the UK Department for International Development’s (DFID) Girls Education Challenge<sup>21</sup> (GEC), Theatre for a Change<sup>22</sup> (TfaC) is implementing *Tiphunzire!* (Let’s learn!), a set of intervention activities that aim to improve the access, retention and learning outcomes of marginalised girls in 225 primary schools in rural and peri-urban Malawi. Tiphunzire organizes afternoon Girl Clubs for its participants who are then exposed to extracurricular teaching in literacy, numeracy and SRH education. These clubs incorporate both in-school and out-of-school girls, many of which have later enrolled back in school. Tiphunzire also organizes periodical outreach activities with schools and communities and has developed strategic partnerships with local government and civic society organizations through their intervention model.

At midpoint of the intervention, Tiphunzire wishes to obtain rigorous evidence to inform a review of programme-level questions that address the impact, relevance, effectiveness and value-for-money and sustainability of the project. To move forward, the project also wishes to understand the key implementation and contextual barriers to improving the learning of marginalized girls. Therefore, this midline study seeks to inform an evaluation case study that began in 2013 combining both (quasi) experimental and qualitative research strategies.

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<sup>15</sup> Unesco, E. F. A. (2010). *Global monitoring report 2010: Reaching the marginalized*.

<sup>16</sup> See: Newman Ford, L., Fitsgibbon, K., Lloyd, S. & Thomas, S. (2008). A large scale investigation into the relationship between attendance and attainment: a study using innovative, electronic attendance monitoring system. *Studies in Higher Education*, 33, 6: 699-717

Attendance Works (2014). Research brief: Attendance in the Early Grades: Why it Matters for Reading. Available at: <http://www.attendanceworks.org/wordpress/wp-content/uploads/2014/03/Attendance-in-the-Early-Grades.pdf>

Roby, DE 2004, ‘Research on school attendance and student achievement: a study of Ohio schools’, *Educational Research Quarterly*, vol. 28, no. 1, pp. 3-14.

Daraganova, Mullan, & Edwards (2014). Occasional Paper No. 51. Attendance in primary school: factors and consequences. Commonwealth Australia.

<sup>17</sup> EFA Global Monitoring Report 2000-2015.

<sup>18</sup> Global Affairs Canada (2015) Malawi Education: Country Report

<sup>19</sup> *Ibid*, 1.

<sup>20</sup> Satvika Chalasani, Christine A. Kelly, Barbara S. Mensch, Erica Soler-Hampejsek (2012). *Adolescent pregnancy and education trajectories in Malawi*.

<sup>21</sup> For more information about the Girls’ Education Challenge, please visit: <https://www.gov.uk/international-development-funding/girls-education-challenge>

<sup>22</sup> For more information about Theatre for a Change, please visit: <http://www.tfacafrica.com/>

## 1.1 Background to project

The Tiphunzire project assumes that by improving marginalised girls' sexual and reproductive health<sup>23</sup>, girls will be empowered to make better life decisions and subsequently improve school engagement. Through subsequent improvements in access and retention to school, the project assumes that marginalised girls will improve their learning outcomes in literacy and numeracy. By supporting schools to adopt child protection policies and practices the project also aims to make schools safer places where girls who fear abuse or have been victims of abuse are as likely to attend<sup>24</sup>.

Through a partnership with the Malawian Ministry of Education, Science and Technology (MoEST), TfaC trained over 360 female teachers in innovative teaching practices that aim develop the autonomy and efficacy of marginalized girls. The girls' club curriculum incorporates interactive group activities to build self-confidence, role-playing games to address real life situations, and exercises to train literacy and numeracy skills. TfaC has provided training and financial support to AoCs throughout project implementation.

At the impact level, the project aims to improve the life chances of marginalized girls by supporting girls participating in the project to enrol and stay in school throughout the lifecycle of the project and to improve their learning outcomes. Additionally the project aims to secure additional funding through the life cycle of the project and establish mechanisms to ensure girls are enabled to complete a full cycle of education.

At schools, TfaC-supported teachers are known as "Agents of Change" (AoCs). AoCs are pre-service teachers trained in TfaC's participatory approaches. Once deployed in schools, AoCs:

- Organize and facilitate weekly Girls Clubs including both in- and out-of-school girls;
- Promote girls' education and school enrolment among parents and the wider community through home visits and monthly Community Listening Clubs;
- Mobilize school- and community-level authorities to identify and support marginalized girls and, in so doing, support their school in its attainment of Model School status;
- Engage school authorities and fellow staff in the adoption of Child Protection Policies (CPP), and child-friendly and gender-sensitive teaching practices, and;
- Provide monitoring data so as to improve programming and project delivery.

Tiphunzire was implemented in two phases. During Phase 1 AoCs were deployed in 36 schools across 6 districts (Balaka, Salima, Dedza, Nkhokota, Chikwawa and Lilongwe West) in Southern and Central Malawi. During Phase 2 the project scaled-up and AoCs were deployed to an additional 189 schools also covering 4 new districts (Mchinji, Blantyre, Lilongwe Rural East, and Ntcheu). Tiphunzire operates in 10 of the 28 districts of Malawi.

According to Tiphunzire's Theory of Change, the project aims to enable marginalised girls to complete a full cycle of education and demonstrate enhanced learning. This aim will be achieved through four key outputs:

1. Teachers receive training and demonstrate the ability to teach literacy and numeracy in participatory and interactive ways, delivering girl-friendly education across Malawi.
2. Marginalised girls' at risk of dropping out of school demonstrate increased participation and confidence at school. Out-of-school girls enrol in school as a result of project activities.

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<sup>23</sup> Theatre for a Change (2013): Theory of Change (internal document). Furthermore, Cultural norms promote early marriage, often also leading to early pregnancy and subsequent dropout of school. The UN Foundation (2012) found that "50% percent of all girls in Malawi are married by age 18 and 25% of all adolescent girls already have a child". Almost 9% of girls who dropped out of school in 2010 did so because of early marriage and pregnancy, citing embarrassment around menstruation as a reason for missing school (see M&E Framework)

<sup>24</sup> Abuse in Malawi schools has been well documented. See Rancourt (2012) *Ending School Related Gender Based Violence in Nsanje (Baseline, Concern Worldwide)*.

3. Parents and communities have a more supportive attitude towards girls attending school, have increased knowledge around and confidence to discuss SRH and gender rights with their girls, as a result of community meetings and listening clubs.
4. Schools are safer for girls as a result of the institutionalization of child protection policies, leading to increased participation of girls in school.

### 1.1.1 Project theory of change and assumptions

The long-term goal of the project is to see improved life chances for marginalised girls. The project is also expected to have a positive impact on poverty reduction for marginalised girls and their households, as well as increase the opportunities and choices girls are able to access and make in their lives. Achieving these results will require changes at the learner-, school-, household-, community- and, policy-level.

We have identified eight core assumptions underpinning the theory of change:

1. **Building confidence and increasing participation of girls will positively impact on their attendance and learning.** As a result of TfaC's direct experience implementing projects with school-aged children in Malawi over the last eight years, TfaC works on the assumption that building confidence, assertiveness and interpersonal skills amongst girls will lead to increased attendance at school. TfaC concluded that girls in our target schools do not feel included or able to fully participate in the classroom and that building confidence will lead to girls' increased participation in the classroom. Ultimately, if girls enjoy school and have a positive attitude to attending school this will lead to improved learning outcomes due to higher engagement in lessons.
2. **Increased attendance leads to higher grades.** There is substantial body of evidence that shows that increased attendance at school is the first step to improving learning outcomes amongst children<sup>25</sup>. Although the quality of teaching in many rural Malawian schools is low, the additional contact time offered to TfaC's target girls by specially trained AoC teachers through the project will mean that increased attendance leads to more engagement with quality literacy, numeracy and life skills sessions, ultimately resulting in higher marks in annual school tests.
3. **Girls who fear abuse/ are victims of abuse at school are less likely to attend.** TfaC also assumes that, by improving child protection and abuse reporting procedures at each target school through planned all-staff training, girls will feel safer at school and be more likely to attend regularly. However, strengthening child protection procedures within school will not necessarily mean there are adequate accountability mechanisms outside of school to prevent and respond to cases of violence against children. To address this possible barrier parents, influential community members and local religious leaders have been encouraged to join community listening clubs to listen to radio broadcasts focused on violence against children, which aim to raise awareness of children's rights and the steps to take when a person is suspected of abusing a child.
4. **Girls will receive more tailored support from AoCs due to small group sizes and subsequently learn more effectively.** With an average national pupil/teacher ratio of 1:107<sup>26</sup> and class size of 94<sup>27</sup> it is difficult for learners who are falling behind to get individual support from teachers. TfaC believes the Girls' Clubs will provide a space to offer more tailored support to marginalised girls struggling to keep up with their peers in class. The Clubs will allow girls to ask questions about subjects they are struggling with and experience literacy, numeracy and life skills in highly

<sup>25</sup> Newman Ford, L., Fitzgibbon, K., Lloyd, S. & Thomas, S. (2008). A large scale investigation into the relationship between attendance and attainment: a study using innovative, electronic attendance monitoring system. *Studies in Higher Education*, 33, 6: 699-717

Attendance Works (2014). Research brief: Attendance in the Early Grades: Why it Matters for Reading. Available at: <http://www.attendanceworks.org/wordpress/wp-content/uploads/2014/03/Attendance-in-the-Early-Grades.pdf>

Roby, DE 2004, 'Research on school attendance and student achievement: a study of Ohio schools', *Educational Research Quarterly*, vol. 28, no. 1, pp. 3-14.

Daraganova, Mullan, & Edwards (2014). Occasional Paper No. 51. Attendance in primary school: factors and consequences. Commonwealth Australia.

<sup>26</sup> UNICEF (2011) GER Malawi

<sup>27</sup> Op. Cit. UNESCO (2013)

participatory and engaging ways. A reduction in class sizes is one of the key recommendations for addressing poor numeracy skills in primary aged learners made in the country's National Early Grade Mathematics Assessment Baseline (2010).

5. **Parents of marginalised girls (and particularly out-of-school girls) feel alienated by the physical school environment which leads to lack of support for girls' education.** Getting parents of out-of-schools girls to 'cross the threshold' and come into schools for Open Days was an important step in engaging parents in their girls' education and aims to remove the fear parents may associate with school as a result of their own experiences as children or their lack of engagement with education in general. AoCs start the process of familiarising parents with schools during home visits to out-of-school and newly enrolled girls' homes to discuss some of the benefits of girls enrolling and staying in school.
6. **Sexually active girls are able to avoid pregnancy.** A significant barrier to education amongst marginalised girls is dropping out of school due to pregnancy. Ensuring that sexually active girls can avoid pregnancy will be key to keeping girls in school and will be addressed through specific workshops on teen pregnancy, contraception and family planning as well as discreet signposting of reproductive health services to girls by AoCs. For girls who are already mothers, schools will need to actively encourage re-enrolment and make provisions for breastfeeding where girls have babies. Malawi has a national policy for re-enrolment of young mothers so AoCs have worked with school management committees (SMCs) to ensure these are adhered to in target schools and introduced in schools lacking them.
7. **Parents and schools allow teaching on SRH and family planning and pregnancy in school.** In relation to the assumption that sexually active girls will need access to information and services to avoid pregnancy, parents and schools will also need to agree to allow teaching on SRH, family planning and pregnancy in Girls' Clubs. TfaC has mitigated the risk of schools not allowing these topics by including a clear outline of what the project will entail in the agreement the school signs to agree to take part in the project. Parents have also consented to their daughters being allowed to take part in Clubs covering SRH, family planning and pregnancy when they agree for their daughters to be part of the programme.
8. **Parents and guardians allow girls to cut down time spent on chores and income generating activities.** In many rural communities girls are involved in household chores (e.g. cleaning or taking care of younger siblings) and income generating activities that provide an essential source of income for families. In order for girls in employment to return to school, their families will need to be able to see the long-term benefit of education, above short-term loss of household income. For girls already in school, it will be easier to negotiate for mothers, fathers and brothers to take on shares of household chores and income generating activities to allow the girls to attend more regularly and study outside of school. For families with out-of-school girls this will be a major challenge and was factored into AoC training in 2013 when TfaC held workshops on negotiation and communication with parents and guardians of marginalised girls, as well as influential community leaders who helped to convince families of the long-term gains in sending girls back to school.

### 1.1.2 Summary of interventions

The results chain below outlines the key activities that have taken place according to each of the project's outputs.

1. **Teachers receive training and demonstrate the ability to teach literacy and numeracy in participatory and interactive ways, delivering girl-friendly education across Malawi.** Training has taken place with student teachers in 11 teacher training colleges (TTCs) since 2007. The training at this level is intended to have impact beyond the GEC project and strengthen ties with the MoEST by building the capacity of teachers to engage with marginalised girls and better involve children in the learning process once posted to rural primary schools as part of their teaching practice. AoCs will be recruited from the cohort of previously TfaC trained teachers, all of whom graduated with an Open College Network certificate in facilitation after a year of TfaC training at selected TTCs.

2. **Over the lifetime of the project a cohort of 8985 teachers have gained knowledge in SRH, gender rights, girls' education and child protection and use these skills when placed in rural primary schools.** Training in TTCs is funded by match funding from Christian Aid<sup>28</sup> and TfaC has amended their current TTC curriculum to include subject matters relevant to the GEC project, including additional modules on SRH, child protection, literacy, numeracy and working with marginalised girls. To reach target beneficiaries, teachers were trained to identify at risk girls, in school and in the community using the Orphans and Vulnerable Children register in each school. This enables them to successfully mobilize the school and surrounding communities in the promotion of girls' education as well as conduct after-school sessions with the girls known as Girls' Clubs.
3. **Marginalised girls' at risk of dropping out of school demonstrate increased participation and confidence at school. Out-of-school girls enrol in school as a result of project activities.** Marginalised girls will take part in single-sex Girls' Clubs after school. The clubs will involve single sex sessions for marginalised girls (30 in-school girls and 10 out-of-school girls per school) in which girls will work to improve their literacy, numeracy, life skills, empowerment, confidence and self-efficacy. Out-of-school girls who re-enrol at school have also be supported with back-to-school packs consisting of school uniform, exercise books, pens, pencils and a bag. Girls attending girls clubs have been given reusable sanitary towels, which are being provided by project partners, IRISE<sup>29</sup> and AFRIPADS<sup>30</sup>.
4. **Parents and communities have a more supportive attitude towards girls attending school, have increased knowledge around and confidence to discuss SRH and gender rights with their girls, as a result of community meetings and listening clubs.** AoC outreach activities aim to sensitize parents and guardians of the rights of girls to access school, and of the key role that SRH has in girls' social and educational development. Consent has also been established where appropriate for girls' inclusion in SRH education. Through community support, AoCs have also confidentially identified marginalised girls not in school. AoCs have also led Community Interactive Radio Drama Listening Clubs, for the promotion of gender equality, sexual and reproductive health and the benefit of investing in girls' education for families. These sessions take place once a month during term time and involve parents of club girls.
5. **Schools are safer for girls as a result of the institutionalization of child protection policies, leading to increased participation of girls in school.** The cross curricular extension of this learning was enabled by classroom management techniques that create participatory and empowering learning environments for girls where personal and social skills continue to be improved and spelling, reading and writing are developed in a range of different areas. School Health and Nutrition (SHN) Coordinators and AoC teachers, with the support of Head teachers, will extend this learning to other areas of the curriculum through In Service Training. In addition, AoCs provided child protection training for all teachers, focusing on identification and support for at-risk girls. Model School Awards will be given to schools demonstrating increased attendance, learning and improved child protection for marginalised girls.

## 1.2 M&E approach and research methods

### 1.2.1 Evaluation approach

TfaC wishes to evaluate Tiphunzire to generate lessons learned and develop ways to move forward. We consider this evaluation as having three categorical scopes:

- **Evaluation Scope.** From Baseline to Endline periods, the final evaluation in 2016 will seek to answer programme-level questions such as determining the Tiphunzire Project's impact on improving

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<sup>28</sup> For more information about Christian AID, please visit: <http://www.christianaid.org.uk/>

<sup>29</sup> For more information about IRISE International, please visit: <http://www.irise.org.uk/>

<sup>30</sup> For more information about AFRIPADS, please visit: <http://www.afripads.com/>

access, retention and learning outcomes in literacy and numeracy. It will also discuss the project in terms of its relevance, effectiveness, value-for-money, and sustainability.

- **Midline Thematic Scope.** Tiphunzire's delivery of its project outputs will be assessed alongside project achievements in access, retention and learning outcomes in order to determine drivers of success and identify areas for improvement. Barriers to educational access and burdens of marginalization will also be explored in order to better understand target beneficiaries and intended and unintended effects of the project. We also report on AoC feedback and initial findings on value-for-money analysis to outline lessons learned and provide concrete and implementable recommendations to move forward.
- **Temporal Scope.** This evaluation will focus on the Tiphunzire project from its baseline created in October 2013 through its midline period in May/June 2015. Findings will therefore be communicable with the M&E Framework (2013), the Year 1 Baseline Study (2013), the Year 2 Baseline Study (2014), and other project related documents.

### 1.2.1.2 Determining the Project's Achievement through Impact Measuring

To estimate the project's impact, this study will measure Tiphunzire's attribution to the changes in learning outcomes, access and retention of a stratified sample<sup>31</sup> of Girl Clubs' participants using a quasi-experimental approach. This approach relies in the study of a 'counterfactual' as a way of controlling for unobserved phenomena and of estimating the project's achievement by means of a fixed effects regression model. This design is well suited to non-randomized interventions and when individual-level outcome data is not available from the baseline period<sup>32</sup>.

**Analytical Objectives.** To estimate the project's impact, this study will measure Tiphunzire's attribution to the changes in learning outcomes, access and retention of a stratified sample of Girl Clubs' participants using a quasi-experimental approach. This approach relies in the study of a 'counterfactual' as a way of controlling for unobserved phenomena and of estimating the project's achievement by means of a fixed effects regression model. This design is well suited to non-randomized interventions and when individual-level outcome data is not available from the baseline period<sup>33</sup>.

To estimate impact, quasi-experimental designs rely in the study of a counterfactual as a way of estimating the treatment effects of this type of interventions. In general, this means the creation of a control group by gathering data on populations not exposed to any development intervention. This way, a beneficiary group (or treatment group) can be compared to a non-intervention group (or control group) to reveal treatment effects.

To determine the impact of Tiphunzire's Project, we analysed a cross-sectional dataset of 1768 marginalized girls participating in Tiphunzire activities since 2013. The data was analysed through three fixed effects regression models using literacy, numeracy and attendance scores as dependent variables. By virtue of its cross-sectional nature, this approach follows a quantitative appraisal of the project's achievement on the levels, rather than changes, in education outcomes.

The model follows the general expression:

$$Y_i = \beta + \gamma * (U_i * E_i) + \delta * E_i + \omega * U_i + v_i$$

Where  $Y_i$  are the levels in learning scores or attendance achievement for each girl (either originally sampled or replacement),  $\beta$  is an intercept,  $\gamma$  is the achievement,  $U_i$  is a treatment dummy variable taking value 0 for girls in the control group and taking value 1 for girls in the intervention group,  $E_i$  is a time dummy taking value 0 for baseline observations and taking value 1 for midline observations, and  $v_i$  is a standard residual

<sup>31</sup> See sample stratification criteria in p. 15.

<sup>32</sup> This evaluation had originally intended to carry out Difference-in-Differences techniques to estimate impact but these were however not possible as the previous external evaluator did not present a data where individual names are matched to unique codes in the dataset, making it impossible to track the same participants over time. See Annex 8 for further details.

<sup>33</sup> *Ibid*, 30.

term. By proving the significant presence of impact, this model aims to show that participatory pedagogies significantly affect the learning of marginalized girls.

**Sampling Objectives.** The primary population of interest are marginalized girls who attend school or not. Participants of the intervention are defined as girls who have enrolled in Girls' Clubs since the onset of the intervention. Marginalized girls have been identified by the AoCs and their school communities and invited to join depending on their marginalization status. On average, AoCs have selected 40 girls to participate in girls clubs according to a set of observable marginalisation and vulnerability criteria. We may therefore assume that all beneficiaries are marginalized and may not rely on marginalization data to select participants for this study, except for control cases. We created a counterfactual by gathering outcome data on populations not exposed to any development intervention (control sample) and comparing it to a (treatment) dataset gathered on Girls' Clubs participants at the aggregate level. As such, we rely on cross-sectional panel data in the analysis of the project's achievement<sup>34</sup>.

**Sampling Stratification Criteria.** As a distinct group, marginalized girls are classified according to in-school and out-of-school status aiming for a 66.6% of in-school girls and 33.3% of out-of-school girls. These girls were selected from a list of participants obtained from previous baseline data. In dealing with attrition, we selected replacement cases from the same list to preserve cohort composition and, where these girls were not available, we replaced them with Girls' Clubs' participants in the same standard level and school. In-school Girls' Clubs' participants were selected through a standard-level criterion corresponding to the primary school years in the Malawian education system. This means Standard 5 and 6 at the baseline level and Standard 6 and 7 at a midline level for most of the cohort. We also included in-school girls who at Baseline level were in Standard 5 but repeated the grade and out-of-school girls who re-enrolled in any standard level. Primary school education in Malawi is made up of eight years (referred to as Standard 1 to Standard 8).

**Household Sampling.** In addition to the total cohort of marginalized girls, we have sampled the heads of their households. This follows educational findings that decision-making about going to school remains relatively centralized in the family structure. This enabled the collection of relevant socio-economic and attitudinal data from guardians of the participant girls, as well as the confirmation of consent for participation in the study for the girls under their care.

**Data Collection.** Data was gathered at baseline in 2013 and recently at midline in May/June 2015 using the Malawi Early Grade Reading Assessment (EGRA) and the Early Grade Mathematics Assessment (EGMA) for a cohort of 827 marginalised girls across 72 primary schools in rural and peri-urban Malawi. Attendance data was gathered from attendance registries made available to the data collection team at participating schools.

**Table 1. Baseline & Midline Sample Sizes**

Cohort	Treatment		Control	
	Baseline	Midline	Baseline	Midline
Standard 5 at Baseline	65	158	68	131
Standard 6 at Baseline	219	246	216	181
Out-of-school	190	48	183	63
Sub-Total	474	452	467	375
Total Treatment/Control	926		842	
Baseline Total	941			
Midline Total	827			
<b>Total Sample (baseline and midline)</b>	<b>1768</b>			

<sup>34</sup> See note 30 on DiD implementation challenges.

**Research Tools.** The study adopted a mixed-methods approach to measure a variety of research domains. These are described in detail per instrument in Annex 3.

For key dependent variables in the regression models, we administered the following standardized tools:

1. **Literacy - Malawi Early Grade Reading Assessment (2011).** The Malawi EGRA test has been conducted in Malawi by RTI and USAID in 2010 and 2011. The Malawi EGRA was adapted into Chichewa with MoEST linguistic and curriculum specialists well-versed in the teaching of Chichewa reading skills in primary schools. The adaptation process conducted by RTI, USAID and MoEST ensures that items are specific to Chichewa rules and structure. Based on guidance from the Fund Manager and the absence of oral reading fluency data from the year 1 Baseline, we calculated an Overall EGRA score to measure literacy. The Overall EGRA Score was calculated by weighting scores of individual subtasks as shown in Annex 3. According to internal consistency testing, all eight subtasks included in the Overall EGRA score correlate highly with each other, achieving a reliability Cronbach's Alpha score of 0.8. This indicates the scale is internally consistent (a 'good' measure: Cronbach's Alpha  $0.7 \leq \alpha < 0.9$ )<sup>35</sup>.
2. **Numeracy - Malawi Early Grade Mathematics Assessment (2010).** The Malawi EGMA test is comprised of eight sub-tasks. It is designed to measure the rate at which students develop critical early math skills. These subtasks are described in more detail in the EGMA Toolkit developed by RTI and USAID (2009). The overall score for the EGMA test is the average percentage correct from sub-tasks 3 to 8.
3. **Attendance- School Registers.** Historical attendance data made available by school authorities through school registries and attendance records triangulated with attendance spot-check data. Attendance was measured as the percentage proportion of days present in a school calendar month. For the baseline the study used historical attendance records for the months of September and October 2013 as proxy of the attendance level. For the midline, we used the month of February 2015<sup>36</sup>. Using the following expression, the level of attendance was calculated for each participant of the study:

$$\text{Attendance Level} = \frac{\text{DaysPresentperSchoolCalendarMonth}(s)}{\text{TotalDaysperSchoolCalendarMonth}(s)} \times 100$$

For benchmarking exercises, assumption testing and programming we have also administered the:

4. **Semi-structured Questionnaire (SSQ) with Marginalized Girls.** Contingent on parental consent, the SSQ is administered to marginalized girls and aims to provide self-reported psychometric data on attitudes, aspirations, and basic SRH information.
5. **Household Survey with Parents & Caregivers.** It is designed to provide contextual information about project participants such as economic and social characteristics and data on parental values towards girls' education, SRHR, and life aspirations
6. **School Checklist on Gender Sensitivity & Facilities.** Provides school level information about child-friendly and gender-sensitive facilities in schools as well as information on child protection systems.

In order to triangulate with quantitative findings and produce concrete and implementable recommendations we organized the following activities with selected groups or individual staff:

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<sup>35</sup> C.f. DeVellis, R.F. (2012). Scale development: Theory and applications. Los Angeles: Sage. pp. 109–110; George, D., & Mallery, P. (2003). SPSS for Windows step by step: A simple guide and reference. 11.0 update (4th ed.). Boston: Allyn & Bacon.

<sup>36</sup> We selected these months as these are outside the harvest or raining seasons and these factors are known to significantly affect attendance. The records were found in school registers or attendance books that were made available by head teachers in all midline schools.

7. **Document and Literature Review.** Prior to the evaluation and throughout the appraisal of results the evaluation team has made use of key project documents and the relevant literature on the issues being discussed.
8. **Safety Mapping Exercises.** Mapping exercise with marginalized girls to identify “safe” and “unsafe” places and discuss underlying concepts to define “safe” and “unsafe”.
9. **Focus Group Discussions (FGDs).** FGDs were held with parents who attend listening clubs, AoCs and community members. Discussions focused on identifying project effects and causal mechanisms.
10. **Key Informant Interviews (KIIs).** KIIs were held with project staff to discuss project design and implementation in relation achievement of outcomes and learning. KIIs were also held with a number of school stakeholders including head teachers, AoCs, and out-of-school girls. These discussions focused on individual experiences of the projects and its effects.

### 1.2.2 Limitations of the Evaluation Approach

This study has encountered and addressed a few limitations. First, intervention schools are located in predominantly rural sites, which may not represent the overall population of Malawi.

Second, the data relies on retrospective self-reported data. There is therefore the possibility that participants had difficulties recalling important information or providing socially desirable responses to sensitive items, leading to respondent bias. This could be the case for SRH responses, which had lower than average response rates than the rest of the Girls' questionnaire.

Third, One South joins this evaluation at its Midline and relies on a pre-existing dataset without traceable individual level information about participants. This has made it impossible to track the same participants since the baseline period and disqualifies individual-level analytical approaches such as difference-in-differences techniques. Whilst the project originally intended to employ such designs, poor practices on behalf of the previous external evaluator inhibited our ability to identify the tracked cohort at the individual level. We have by now collected comprehensive cohort tracking information matched to individual codes to enable future individual level comparisons.

Fourth, participants of the study were drawn from Girls' Clubs, rather than randomly from the entire school population. This is because Tiphunzire's participants are selected according to marginalization criteria and are exposed to the intervention so long as they participate in Girls' Clubs. As such, readers should bear in mind that findings may only be generalized to the restricted sample it represents.

Fifth, given the aggregate nature of the sampling approach, there is the possibility of sampling bias for baseline participants who could have dropped out from both Girls' Clubs and their school. As such, out-of-school girls who left the intervention could be an underrepresented group in the present sample.

Finally, our literacy measure is non-standardized as it is a composite measure of EGRA subtasks rather than the more widely-used Oral Reading Fluency (ORF). This is because the inherited baseline dataset did not include ORF scores. We have relied on the guidance of other GEC projects in the calculation of a composite EGRA score based on available baseline data<sup>37</sup>.

### 1.2.3 Monitoring Approach

The timing and methods used to measure progress against Tiphunzire's logframe have been carefully considered during its development. TfaC aims to conduct monitoring at various intervals to capture change at different points in the project's lifetime by using monitoring information collected on a monthly, termly and annual basis. The development of the logframe, and its validation by MoEST partners and AoCs has influenced the design of the project's monitoring activities, as well as the selection of tools for collecting data at the primary school-, TTC- and community-level. These tools have also been chosen to ensure that TfaC can

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<sup>37</sup> See Annex 3 for the weighting of the various subtasks.

accurately collect and analyze information in order to feed into quarterly output updates, as well as annual logframe updates to DFID.

The design of the monitoring and evaluation framework for the GEC programme is based on the tried and tested Monitoring and Evaluation (M&E) processes TfaC already has in place for the existing education programme. Within the programme TfaC collects monthly monitoring data on project activities including participation and quality of facilitation in SRH workshops and radio listening clubs, student involvement in gender campaigns, uptake of HIV testing and participation in child protection training. All data currently sent by primary schools (via Frontline SMS) and TTC (in Excel via email) and School Health and Nutrition Coordinators (via Frontline SMS) is collated and cleaned on a monthly basis at TfaC Malawi and stored in two annual project databases – one for primary school data and one for TTCs.

Monitoring within the GEC project will build on this model and occurs at a number of different levels – within 226 primary schools, at the five TTCs and through monitoring and support visits conducted by the MoEST and TfaC staff.

### **1. Primary Schools**

- AoC teachers have been given a Java-enabled mobile phone, allowing them to upload and send monthly reports to an online web console, which can be either viewed online or exported for further analysis into Excel or other statistical software including SPSS.
- AoCs collect girls' attendance data by working with relevant teachers to keep TfaC attendance registers as well as keeping their own attendance registers for Girls Clubs and radio listening clubs.

### **2. Training Officers at Teacher Training Colleges**

- Monitoring: Training Officers at the six TTCs involved in the GEC project will keep paper records of all activities undertaken at colleges and then send monthly narrative monitoring reports and databases to the TfaC education programme monitoring officer via email. The Excel databases include information on attendance at workshops, open days, HIV testing and distribution of condoms. Narrative reports include qualitative information on programme progress including case studies of student teachers who have seen changes in their lives during involvement with TfaC. The model of reporting has been developed with training officers over the last three years and has included capacity building to ensure all officers have proficient Excel skills to collate and enter accurate evidence of activities every month.

### **3. Participatory monitoring with girls, schools and communities**

#### *Girls' monitoring*

- An important level of monitoring within the programme will be that which involves participants including girls, schools, parents and community members monitoring project progress. Participatory monitoring links with the first principle of our M&E framework - to empower TfaC's participants and stakeholders and to engage the people the project has worked with in assessing the effectiveness of programmes TfaC runs, and ask them to analyse if and how changes have happened as a result of TfaC's work.

#### *School and Community monitoring*

- Community members who participate in radio listening clubs and debates will also fill out scorecards to track whether the project is having an impact on marginalised girls within their communities.

### **4. School Health and Nutrition (SHN) Coordinators**

- TfaC have trained 33 SHN Coordinators, from all 28 districts in Malawi, to use the same tools for monitoring and reporting as primary school mentors, along with an additional tool for assessing school management support for HIV/AIDS and child protection-related activities at schools. SHN Coordinators send us their monitoring reports via SMS, which TfaC triangulates with reports from primary school mentors and TTC training officers to assess whether schools where TfaC trained teachers are working are managing to fully involve learners and staff in activities.

## 2 Key Findings

### 2.1 What impact has the project had on marginalised girls' learning?

#### 2.1.1 What impact has the project had on literacy outcomes?

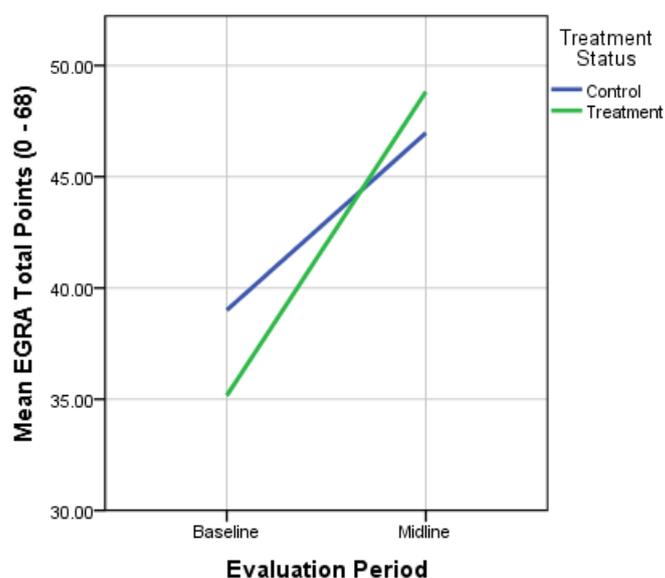
**Summary Results.** Table 2 summarizes the aggregate results for EGRA scores for treatment and control cases over time. Intervention girls in Standard 5 at Baseline, improved their EGRA score by an average of 14.1 total points compared to the control group improvement of 13.4 points. Standard 6 intervention girls, improved their total EGRA score by an average of 15.3 EGRA points compared to a change of 13.6 points in the control group. Out of school girls improved by an average of 13 points in the treatment group compared to 3.3 points in the control group.

**Table 2. Mean EGRA Score for Treatment and Control (Std. Dev)**

Cohort	Treatment		Control	
	Baseline	Midline	Baseline	Midline
Standard 5 at Baseline	36.6 (16.1)	50.7 (18.1)	38.0 (15.7)	51.4 (17.5)
Standard 6 at Baseline	38.0 (15.7)	53.3 (14.8)	41.2 (15.9)	54.8 (13.2)
Out-of-school	32.4 (15.4)	45.4 (17.1)	37.5 (12.0)	40.8 (21.0)

**Changes in Literacy.** Figure 1 depicts the trajectories of outcome changes. The steeper green line in Figure 1 shows a larger improvement in literacy level for treatment than control cases.

**Figure 1. Trend in Literacy Changes for Treatment and Control**



**Project's Achievement.** The regression model found that the Tiphunzire project had an impact at the  $p < .05$  significant level on literacy as measured through overall EGRA score. Of the mean improvement in literacy outcomes, Tiphunzire accounts for 4.1 points of EGRA<sup>38</sup> improvements made on the treatment group since 2013. Summary statistics for the regression model are shown in the table below. The model was able to explain 18.1% of variance in EGRA scores as seen in Table 3 below.

**Table 3. Time Fixed Effects Regression – Impact on Level of Literacy**

Regression EGRA Total Points (0-68)	
Unstandardized B (Std Error)	
(Constant)	39.266 (1.108)***
Interaction Time and Treatment (Interaction Dummy)	4.077 (1.950)*
Evaluation Period (Time Dummy)	12.592 (1.443)***
Treatment Status (Treatment Dummy)	-3.664 (1.495)*
R <sup>2</sup>	.181
F	79.843 (3, 1087)***
N (valid list-wise)	1090

\* Denotes Sig Test Result at the  $p < .05$  level

\*\* Denotes Sig Test Result at the  $p < .01$  level

\*\*\* Denotes Sig Test Result at the  $p < .001$  level

**Non-readers.** Non-readers are students who score 0 on the EGRA Subtask *Oral Reading Fluency*. Despite the intervention's impact on literacy, there is a large percentage of non-readers in treatment schools.

The table below shows the percentage of non-readers in the treatment group by district. Chikwawa has the highest proportion of non-readers. It is important to note that despite these high proportions, national averages of non-readers are higher by comparison with the 2010 National EGRA Baseline identifying 41.9% of participants in Standard 4 as non-readers<sup>39</sup>.

**Table 4. Percentage Non-Readers by District (Treatment Cases)**

District	Total N	% Scored '0' on Oral Reading Fluency
Chikwawa	135	33.3%
Dedza	103	14.8%
Lilongwe	361	24.1%
Nkhotakota	183	24.1%
Salima	138	3.7%

**Performance by District.** Box plot analysis (see Annex 7) show higher median literacy scores in control schools than in treatment in Chikwawa, Nkhotakota, and Dedza and at significant levels in Dedza and Chikwawa. While the visual ignores changes since the baseline period, it may nonetheless help identify district-level challenges during implementation of the project.

Chikwawa had also the lowest average ORF score with a mean of 39.9 correct words per minute. Salima had the highest ORF score of 60 correct words per minute<sup>40</sup>. This is not surprising, given that Chikwawa had the

<sup>38</sup> EGRA Overall Score (weighted- see above).

<sup>39</sup> USAID (2010). Malawi National EGRA Baseline.

<sup>40</sup> Oral fluency is understood as 'the ability to translate letters into sounds, unify sounds into words, process connections, relate text to meaning, and make inferences to fill in missing information'. Students are scored on the number of correct words read per minute for connected text oral reading fluency. It is most often used to assess literacy skill on the whole.

highest proportion of non-readers (33.7%) and Salima had the least (3.7%). The closest reference comparison are national EGRA scores for standards 1-4, with standard 4 learners achieving an average of 11.6 correct words per minute in 2010<sup>41</sup>.

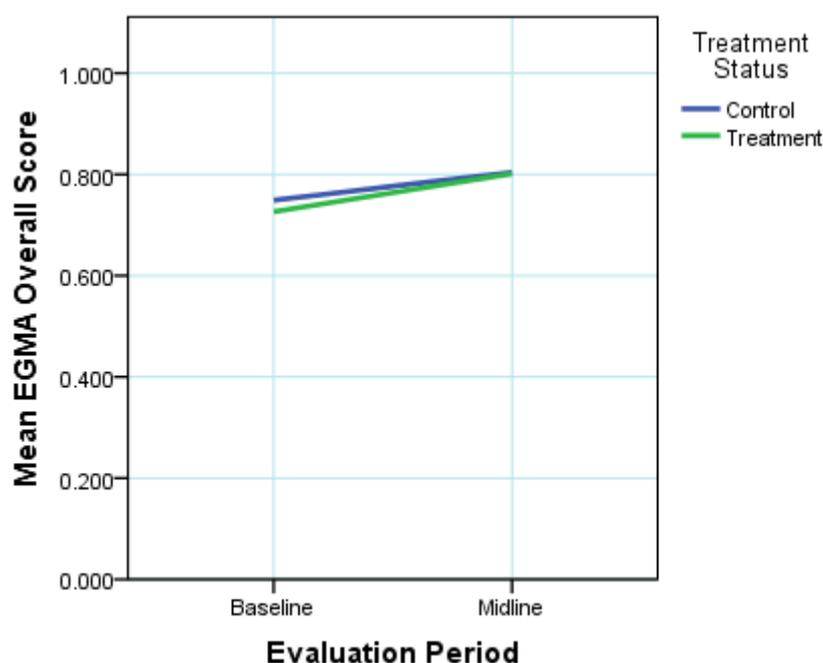
## 2.1.2 What impact has the GEC had on numeracy outcomes?

**Summary Results.** Table 5 summarizes the aggregate results for EGMA percentage scores for treatment and control cases over time. Intervention girls in Standard 5 at baseline, improved their EGMA overall score by an average of 2% compared to the control group which improved their scores by an average of 8% between baseline and midline. Intervention girls in Standard 6 at baseline, improved their overall EGMA scores by an average of 5% compared to an average improvement of 4.4% in the control group. Out of school girls in the intervention improved by an average of 8.9% between baseline and midline compared to the control group where out of school girls decreased their scores by an average of 3.3%.

**Table 5. Mean EGMA Percentage Score for Treatment and Control (Std. Dev)**

Cohort	Treatment		Control	
	Baseline	Midline	Baseline	Midline
<b>Standard 5 at Baseline</b>	77.2 (9.5)	79.2 (14.9)	72.7 (20.6)	80.7 (12.2)
<b>Standard 6 at Baseline</b>	76.0 (12.5)	81.0 (12.0)	78.5 (13.1)	82.9 (9.2)
<b>Out-of-school</b>	67.8 (25.0)	76.7 (9.7)	71.5 (17.6)	68.2 (20.1)

**Changes in Numeracy.** Figure 2 depicts the trajectories of aggregate outcome changes in numeracy. The green line in Figure 2 depicts the scoring trend for treatment schools. While slightly steeper than the blue (control) line, the lines do not cross, showing no improvement over and above the control group.



**Figure 2. Trend in Numeracy Changes for Treatment and Control**

<sup>41</sup> USAID (2010). Malawi National EGRA Baseline.

**Project's Achievement.** The regression model found that the Tiphunzire project had no visible impact on the numeracy of intervention girls at significant levels as measured through the EGMA test. However, the model was only able to explain 4.3% of the total variance ( $p < .001$ ) demonstrating a rather low predictive power.

Summary statistics for the regression model are shown in the table below:

**Table 6. Time Fixed Effects Regression – Impact on Level of Numeracy**

	Regression EGMA Overall (% Score)	
	Unstandardized B (Std Error)	
(Constant)	0.749 (.008)***	
Interaction Time and Treatment (Interaction Dummy)	0.020 (0.017)	
Evaluation Period (Time Dummy)	0.055 (0.012)***	
Treatment Status (Treatment Dummy)	-0.023 (0.012)	
R <sup>2</sup>	.043	
F	19.781 (3, 1326)***	
N (valid list-wise)	1329	

\* Denotes Sig Test Result at the  $p < .05$  level

\*\* Denotes Sig Test Result at the  $p < .01$  level

\*\*\* Denotes Sig Test Result at the  $p < .001$  level

**Performance by District at Midline.** Box plot analysis (see Annex 7) show higher median literacy scores in control schools than in treatment schools in Nkhotakota and Dedza at significant levels. While the visual ignores changes since the baseline period, it may nonetheless help identify poor performing districts.

### 2.1.3 Were there any unintended effects?

The intervention did not have any unintended effects on literacy or numeracy. As demonstrated, the intervention had a positive impact on literacy outcomes.

### 2.1.4 Has your project closed the gap in learning among marginalised girls?

Tiphunzire has designed and implemented an intervention that positively affected the lives of marginalized girls in rural Malawi. Findings show that 5.1 points in the EGMA test can be attributed to the activities of Tiphunzire.

## 2.2 What impact has the GEC had on enabling marginalised girls to be in school?

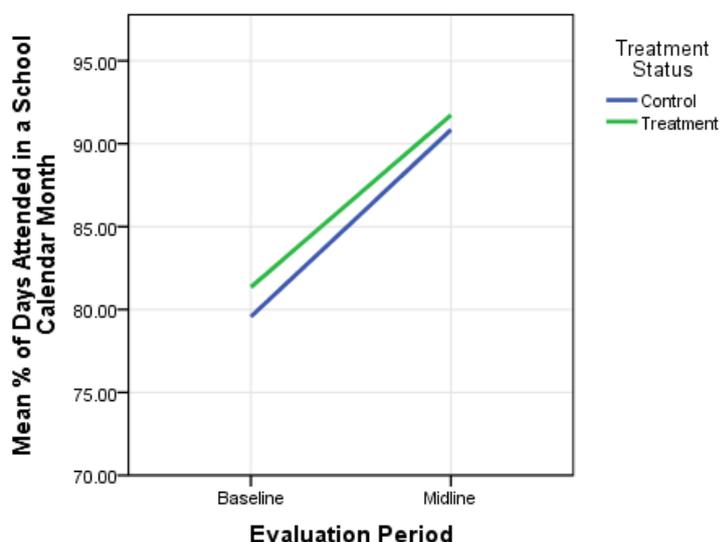
### 2.2.1 What effects has the GEC had on attendance?

**Summary of Results.** The level of attendance, understood as the percentage of days attended in a regular school calendar month, was calculated for in-school cases and are depicted in the table below:

**Table 7. Attendance Level for Treatment and Control (In-school girls)**

Cohort	Treatment		Control	
	Baseline	Midline	Baseline	Midline
Standard 5 at Baseline	80.0 (14.3)	90.8 (16.8)	78.8 (15.1)	91.6 (13.8)
Standard 6 at Baseline	79.8 (15.2)	93.8 (9.7)	77.3 (15.5)	90.0 (14.4)

**Changes in the Level of Attendance.** Figure 3 depicts the trajectories of aggregate outcome changes level of attendance. Parallel trajectory lines show very little differences between treatment and control trajectories.



**Figure 3. Trend in Attendance Changes for Treatment and Control**

**Project's Achievement.** When excluding out-of-school cases, the fixed effects model indicates that the project had no visible impact at significant levels in the attendance scores of treatment girls. The trend analysis in figure 3 supports these results as the changes in attendance outcomes have been very similar between treatment and control cases, both seeing average attendance rates of over 90% at the midline period. Table 8 summarises the regression results.

**Table 8. Regression Results for Attendance (Time Fixed Effects)**

	Level of Attendance
	Unstandardized B (Std Error)
(Constant)	.788 (.009)***
Interaction Time and Treatment (Interaction Dummy)	.002 (.018)
Evaluation Period (Time Dummy)	.117 (.013)***
Treatment Status (Treatment Dummy)	.017 (0.13)
R <sup>2</sup>	.146
F	60.619 (3, 1066)***
N (valid list wise)	1069

\* Denotes Sig Test Result at the  $p < .05$  level

\*\*Denotes Sig Test Result at the  $p < .01$  level

\*\*\* Denotes Sig Test Result at the  $p < .001$  level

Tiphunzire continues to monitor the fallout from the severe flooding in the Southern regions of Malawi during early 2015. The effects of this devastation will be felt throughout Malawi and the project for some time. Due to the flooding, the project anticipated significant drops in Girls' Club attendance, which may affect significant learning for girls if they are not consistently attending school. TfaC expects to see an increase in future, as the schools continue to reopen.

**Performance by District.** The best performing district is Nkhotakota with a median attendance level of 100%, followed by Lilongwe Rural with a median score of 95%. The worst performing districts are Dedza with a median of 81% followed by Salima and Chikwawa<sup>42</sup> both with a 90% median.

**Perceived Barriers to Attendance.** We considered asking parents and guardians if their girls had missed school for more than two weeks and to provide all reasons their girls had missed school. Table 9 shows that no money for school fees or materials was the most popular response, supporting the project's innovation of providing a back-to-school pack for out-of-school girls. The second most popular response was 'illness' as shown in the table below:

**Table 9. Barriers to attendance according to parents and guardians (% frequency of response)**

Reason Given	Frequency %
No money for School Fees / Materials	62.1
Illness	25.2
Child did not want to go	5.2
Needed extra income	3.8
Marriage/Union	3.2
School Closed	3.1
Natural Disaster (e.g. Floods)	2.4
Menstruation	1.9
Pregnancy	1.7
Needed at Home	1.3
Death in the Family	1.2
School Unsafe	1.1
Teachers on Strike	0.6
Teachers Absent	0.6

**Attendance Spot Checks.** The overall objective of the spot checks is to verify the validity of attendance data and record keeping. We sampled 50% of all intervention schools (117) and all control schools (36) for registry and headcount data.

Through this data, we were able to calculate two statistics:

Percentage attendance by Headcount:

$$\text{Percentage attending (Headcount)} = \frac{\text{Total \# of female students as counted by Field Worker}}{\text{Total \# of female students enrolled according to Student Registry}} \times 100$$

Percentage Attendance according to Register:

$$\text{Percentage attending (Teacher)} = \frac{\text{Total \# of female students listed as Present in today's registry}}{\text{Total \# of female students enrolled according to Student Registry}} \times 100$$

<sup>42</sup> According to the Declaration of State Disaster (January 2015) statement by HE President Mutharika, both Chikwawa and Salima were affected by floods during the flooding episodes of early 2015. Readers should bear this in mind when interpreting attendance data for these districts. See: [http://www.norway.mw/norway\\_malawi/News-from-Malawi/News/Heavy-floods-in-Malawi-48-killed-70-000-displaced/#.VdosgvR7xns](http://www.norway.mw/norway_malawi/News-from-Malawi/News/Heavy-floods-in-Malawi-48-killed-70-000-displaced/#.VdosgvR7xns)

The results of this spot check are summarized in the table following.

**Table 10. Headcount and Daily Registry Discrepancy (Treatment and Control)**

Group	Number of Schools (n)	Percentage attending through headcount (%)	Percentage Attending through register (%)	Discrepancy (difference between previous two columns)
Treatment	117	71.8%	72.9%	1.2%
Control	36	76.0%	79.0%	3%

### 2.2.2 What effects has the GEC had on retention?

We measured retention as the percentage of in-school girls who have stayed in school since the baseline. These are girls who were enrolled in school at baseline and who reported to be attending school by themselves and their parents or guardians.

Findings show that all in-school girls in both treatment and control schools are still in school and have not dropped out.

However, we consider a girl who attends school 50% of the time or less to be at risk of dropping out. These are girls who attend school only half of the total calendar month. Findings show that 2.6% of girls in the treatment group and 4.6% of girls in the control group are at risk of dropping out. These differences are not significant according to chi-square tests.

### 2.2.3 What effects has the GEC had on enrolment?

To measure enrolment, we constructed a dummy variable for girls defined as out-of-school at baseline who reported to have been attending school at midline and for whom attendance data was available. From the original cohort of 'out-of-school' girls, we considered a girl to be re-enrolled if she was attending more than 50% of school days per calendar month. We considered cases for whom attendance data was not available and who reported not to be attending school as not re-enrolled. Readers should bear in mind that all girls participating in the study are sample from within Girls' Clubs, rather than randomly from the entire school population.

Findings show that 92% of out-school girls in treatment schools have re-enrolled, compared to only 52% of out-of-school girls in control schools.

According to Chi-square tests, these differences are significant at the  $p < .001$  suggesting that an out-of-school girl's re-enrolment is highly associated with treatment status. These results confirm the significant effect of the intervention in encouraging out-of-school girls to re-enrol in school.

### 2.2.4 Were there any unintended effects?

While the project has improved enrolment, a number of AoCs<sup>43</sup> reported during a focus group discussion in Lilongwe that the provision of 'back-to-school packs' for out-of-school girls has resulted in jealousy amongst in-school girls. These packs are given to incentivize out-of-school girls to return to school and to in-school girls on a case-by-case basis. During this FGD, AoCs provided anecdotal evidence that a few in-school girls have subsequently dropped out of school for a brief period of time in order to obtain back-to-school packs. We recommend exploring this issue further through targeted monitoring as it remained nonetheless isolated to one school only.

<sup>43</sup> Focus Group Discussion with AoCs in Lilongwe (Mtemambalane School, June 5th, 2015)

### **2.2.5 Has the project closed the gap in attendance/retention/enrolment among marginalised girls?**

The project has made significant impact in improving the access of out-of-school girls to school and the retention of in-school girls. Triangulating with qualitative data, we find that AoCs from Lilongwe manifested this is highly due to the enthusiasm of attending after-school clubs, without which many girls would have not come to school. Their role in engaging communities in support for girls' education has also played a key role in generating enthusiasm among parents for girls' education.

During a FGD conducted in Lilongwe an AoC manifested that "*[Girls] would come to school and knock off at break time, but now they are trying to stay in class because of the talks we have had in the club. One of them actually told me that 'madam if it were not for you I would have been in Lilongwe working, but because of you [I] am now in Standard 7'*". Another factor that prevents girls from coming back to school is poor SRH attitudes in the student population. According to another AoC "*there is this girl, she has had a miscarriage, but she never stopped coming to school when she was pregnant and anyone who ridiculed her was dealt with by me. She has learnt a big lesson and I don't think she would repeat'*". AoCs have also made use of traditional authorities in villages to hold parents and guardians accountable for a girls' attendance to school: "*the child sees that we come through the village heads so they come so their parents don't get in trouble'*". These project strategies have improved the chances of marginalised girls in project areas.

There is, however, inconclusive evidence on the impact of the project in the overall level attendance given the small differences in attendance changes among treatment and control cases.

### **2.3 To what extent has the GEC reached and impacted on marginalised girls?**

We report the extent to which the project has reached marginalised girls in Table 11. This table uses selected items from the marginalization checklist in TfaC's M&E framework to report on different forms of marginalization experienced by the treatment cohort at the midline period. We have also calculated the estimated population reached of the various sub-groups at Midline. Although this data is not available at Baseline, this provides a reasonable estimate of the number of marginalized girls reached by the intervention by Midline.

**Table 11. Sample proportions at Midline according to Marginalized Checklist & Estimated Population Reached by Intervention**

Sample Sub-Group	Treatment Sample Proportions (IS and OS) N=476	Estimated Population Reached by Intervention at Midline (No. of People)
Single Orphans	29%	2,621
Double Orphans	11%	994
<b>Dwellers of Temporary Structures, Shacks, or Tents</b>	2%	180
Married or Living with a Man as if Married	9%	813
Sexually Active	13%	1,175
Mothers	7%	632
Has been pregnant	8%	723
Living in a Child Headed Household	3%	271
Living with a Single Parent	24%	2,169
<b>Non-intact Family Structure (Either due to Death or Divorce)</b>	66%	5,966
Death in the Family as a result of HIV/AIDS	7%	632
Attends less than 50% of school days in a given month	2.6%	235
Ever Repeated a Year in School	83%	7,503
Has experienced Abuse or Violence	24%	2,169

Based on these criteria, the tables following detail the project's beneficiaries and reached populations through midline sampling.

**Table 12. Direct beneficiaries**

Beneficiary type	Total project number	Total number of girls targeted for learning outcomes that the project has reached by midline	Comments
Direct learning beneficiaries (girls) – girls in the intervention group who are specifically expected to achieve learning outcomes in line with targets.	9040	1440 (Year 1 Cohort) (7065) up to midline	Project pilot year Yr. 1 schools 36- scale up to Year 2- (additional 189) 225 schools/ 6 districts to 10 districts.

**Table 13. Other beneficiaries**

Beneficiary type	Number	Comments
Broader student beneficiaries (boys) – boys who will benefit from the interventions in a less direct way, and therefore may benefit from aspects such as attitudinal change, etc. but not necessarily achieve improvements in learning outcomes.	141727	Number of boys at project schools. Schools hold open days for all pupils.
Broader student beneficiaries (girls) – girls who will benefit from the interventions in a less direct way, and therefore may benefit from aspects such as attitudinal change, etc. but not necessarily achieve improvements in	148223	Number of girls at project schools. Schools hold open days for all pupils to attend

learning outcomes.

Teacher beneficiaries – number of teachers who benefit from training or related interventions.	376 – Agents of Change (female) 1859 – male teachers (trained by AoCs) 3150 – female teachers (trained by AoCs)	AoCs trained in depth on facilitation and knowledge of SRH/ Child Protection Others trained by AoCs in Child Protection and Gender inclusivity.
Broader community beneficiaries (adults) – adults who benefit from broader interventions, such as community messaging /dialogues, community advocacy, economic empowerment interventions, etc.	1100 men 3300 women	Attendances at Community Listening Clubs

**Table 14. Target groups – by school**

Grade Level (Baseline)	Project definition of target group	Sample size of target group at midline
Standard 5	Yes	289
Standard 6	Yes	427
Total:		<b>716</b>

**Table 15. Target groups – by age**

Age Groups	Project definition of target group	Sample size of target group at midline
<b>11-14</b>	Yes	368
<b>14-18</b>	Yes	390
Total:		<b>758</b>

**Table 16. Target groups – by school status**

Educational sub-groups	Project definition of target group	Number targeted through project interventions	Sample size of target group at midline
<b>Out-of-school girls: have attended school or have never attended school</b>	Yes	2983	111
<b>Girls in-school</b>	Yes	6057	716
Total:		<b>9040</b>	<b>827</b>

Through the assessments made in this report, the project has room to grow in terms of reaching out to participants through their parents. There have been efforts made to increase the participation of the community at large through incentives given at Community Listening Clubs.

There have been many positive conditions through which the project has been able to successfully target marginalized girls. The most successful cases occur where strong relationships have been strengthened

between the AoCs and community groups such as School Management Committees and Mother's Groups. These relationships have enabled the project to reach and recruit marginalized girls in Girls' Clubs.

Despite the success of the strong relationships that have been formed between the AoCs and some communities, it has been a continued challenge to initially get the community behind the project. As the project targets the marginalised, this has led to the selection of girls that come from low-income backgrounds. This directly affects participation in Community Listening Clubs as there are more pressing matters in the parents' lives such as income-generating employment and attending market days.

Due to the above challenges, a number of communities posed barriers to Tiphunzire in making substantial impact. In some schools, there have been instances of resistance from Head Teachers as reported by AoCs. To tackle this, the project is developing district-level stakeholder meetings to address these problems in the hope that accurate communication of the projects aims and positive outcomes can reduce the impact of these barriers.

### 2.3.1 Characteristics of the Cohort at the Baseline Level

A comparison between treatment and control groups at Baseline revealed almost no statistically significant differences indicating the treatment and control group are comparable and a reliable counterfactual was established. EGRA Overall Scores however did differ significantly between the treatment and control group with the control group outperforming the treatment group at Baseline.

**Table 17. Baseline characteristics split between groups**

Characteristic	Treatment Group Average	Control Group Average	Difference	Statistical Significance (represented by P-value of the associated t-statistic of the difference)
<b>HHS</b>				
Household income per month	6235	4973	1262	p > .05
Tribe of HH (Chewa)	74.6%	75.7%	1.1%	p > .05
Highest level of education head of HH	58.1%	59.6%	1.5%	p > .05
<b>HH (# Primary school completed)</b>				
Age of girl	13.7	13.6	0.1	p > .05
Minutes it takes to school	64	67	3	p > .05
# of girls that have a disability	44 (13.4%)	38 (13.7%)	0.3%	p > .05
# girls that are mothers	20 (7.1%)	27 (8.1%)	1%	p > .05
# girls that are married	12 (3.6%)	4 (1.4%)	2.2%	p = .05
<b>Girls SSQ</b>				
Perceived safety at school (4 point scale)	1.53	1.49	0.04	p > .05
# able to go to school while menstruating	69.9%	72.1%	2.2%	p > .05
<b>EGRA score</b>	<b>29.8</b>	<b>33.5</b>	<b>3.7</b>	<b>p &lt; .05</b>
EGMA score	83.9%	84.8%	0.9	p > .05

### 2.3.2 Comparison of Household Economic Characteristics between Baseline and Midline

The table below compares household characteristics between Baseline and Midline. As shown, both cohorts are comparable on most economic characteristics. Both cohorts are comparable to the extent that treatment and control differences are not significant in either of the evaluation periods.

**Table 18. Household Comparison**

Characteristic	Baseline Treatment Group Average	Baseline Control Group Average	Midline Treatment Group	Midline Control Group
# of Children < 5	0.73	0.83	0.8	0.73
# of Children 5-18	3.2	3.41	2.45	2.36
# of Adults living in household	2.7	2.84	2.15	2.08
Unable to Meet Basic Need Without Charity	72.7%	71%	51.6%	54.5%
Able to Meet Basic Needs	23%	23.4%	37.9%	38.2%
Able to Meet Basic Needs with some non-essential goods	1.5%	2.6%	7.4%	5.6%
Able to purchase most unessential goods	0.3%	0.4%	2%	0.9%
Plenty of disposable income	1.2%	1.9%	1.2%	0.9%

Although there are differences in the perceived levels of poverty between cohorts at Baseline and Midline, independent samples t-tests prove no statistically significant differences between perceived poverty groups in terms of their performance in EGRA, EGMA or attendance at Midline level<sup>44</sup>.

## 2.4 What has worked, why and with what effects?

### 2.4.1 How has the project performed against its target outputs?

Table 19 below summarises the project's performance against target outputs as set out in Tiphunzire's log-frame. The midline targets referred to in this table relate to the latest cumulative targets at the time of the project's midline evaluation.

**Table 19. Project performance against Midline Targets in Logframe outputs**

Output and Output indicators	Midline Target (planned)	Midline Target (achieved)	Variance between achieved & planned targets
<b>Output 1: Agents of Change run inclusive workshops (AoC training; Girls' Clubs; Listening Clubs; Holiday Clubs)</b>			
	# planned	# achieved	Difference (%)
1.1 Percentage of AoCs who demonstrate ability to teach literacy, numeracy and life skills in participatory and interactive ways	90%	83%	-7%
1.2 Percentage of AoC with correct basic sexual and reproductive health (SRH) knowledge	85%	84%	-1%
1.3 Percentage of AoC with knowledge of girls' gender and sexual and reproductive health rights	82%	70%	-12%

<sup>44</sup> Individual-level data about participant characteristics was either not made available from the baseline period or lacked the indicators of interest for the present analysis.

<b>Output and Output indicators</b>	<b>Midline Target (planned)</b>	<b>Midline Target (achieved)</b>	<b>Variance between achieved &amp; planned targets</b>
1.4 Percentage attendance at AoC Girls 'Clubs/ Holiday Clubs	60%	74%	24%
1.5 Percentage of girls who show improved self-confidence and self-efficacy (improved by at least 10% on previous score)	N/A	40%	N/A
<b>Output 2: Marginalised girls increase participation in co-educational environments (Girls' Clubs; Listening Clubs; Holiday Clubs)</b>			
	# planned	# achieved	Number (%)
2.1 Percentage of club girls with awareness of their gender, sexual and reproductive health rights	70%	80%	10%
2.2 Percentage of club girls who believe they have the power to make decision in their own lives	40%	73%	33%
2.3 Percentage of club girls demonstrating the ability to confidently interact with boys in coed learning environments	75%	90%	25%
2.4 Percentage of club girls able to attend school during menstruation	65%	66%	1%
2.5 Percentage of club girls who report that they enjoy school	85%	89%	4%
<b>Output 3: Parents actively support girls' education (Community mobilisation and sensitisation; Open Days; Community Listening Clubs; AoC/ team home visits)</b>			
	# planned	# achieved	Number (%)
3.1 Percentage of girls' club parents/ guardians who feel that it is equally valuable to invest in a daughter's education than a son's when funds are limited	85%	70%	-15%
3.2 Percentage of Listening Clubs attended by at least 30 community members every month	60%	14%	-46%
3.3 Percentage of girls' club parents / guardians with knowledge of girls' gender and sexual and reproductive health rights	73%	20%	-53%
3.4 Percentage of girls' club parents/guardians who feel that their daughter is as likely as their son to make use of her education after school	65%	44%	-21%
3.5 Percentage of girls' club parents/ guardians who report feeling comfortable discussing SRH issues with their daughters	50%	35%	-15%
<b>Output 4: Project schools are more safe and inclusive (CPP policy put in place; AoC training of teachers in inclusive learning environments and CPP)</b>			
	# planned	# achieved	Number (%)
4.1 Percentage of AoC teachers with comprehensive knowledge of child abuse reporting mechanisms in school	80%	67%	-13%
4.2 Percentage of non-AoC teachers at intervention schools with positive attitudes towards girls' participation in class	68%	86%	18%
4.3 Percentage of club girls who feel equal to	68%	82%	14%

Output and Output indicators	Midline Target (planned)	Midline Target (achieved)	Variance between achieved & planned targets
boys in classrooms			
4.4 Percentage of club girls reporting they feel safe at school	65%	94%	29%
4.5 Percentage of club girls able to identify a person in school that they could report abuse to	60%	48%	-12%

TfaC considers AoCs, with TfaC support, to be the main instrument in the delivery of outputs 2 and 3 while TfaC more directly supports delivery of outputs 1 and 4. TfaC's training and continued support to the AoCs to run workshops at their schools are believed to have led to TfaC's impact in delivering highly inclusive workshops.

The project has identified a particular challenge for the intervention in sensitising parents (Output 3). TfaC has understood that this pillar of the Theory of Change: Community Sensitisation, has not operated as effectively as the others due to variety of key reasons:

**1. Building trust with communities and parents.** It takes time for AoCs to build trust with communities and parents. There was an initial lag in establishment of Community Listening Clubs as AoCs worked hard to build trust with the communities to make time to come to club. Listening clubs that were successful in working with parents and communities did so because they occurred regularly and were inclusive. Unfortunately, for the first year of activities the radio broadcaster proved unreliable and many Community Listening Club broadcasts did not air as expected. This made it difficult for AoCs to build trust with communities. The project has now switched broadcasters and has committed to airing the CLCs on the same day of each month. This stability has allowed the AoCs to develop routine and trust with the community listeners.

**2. Diversity in capacity of community structures.** The project encourages AoCs to make use of existing community structures (SMCs, Mother Groups) to gather support for the GEC activities. However, AoCs and the project have encountered challenges with this concept, as the skill levels and abilities of these groups vary greatly from each community. The project has recognised this challenge and during AoC refresher training AoCs participate in sessions on community and school community engagement.

**3. Challenges facilitating Community Discussions.** AoCs may find it more difficult to facilitate Community Discussions than girls clubs. In addition to sessions on community engagement (to get parents to attend CLCs), AoC refresher training has provided further support to AoCs for community engagement by running sessions on how to engage communities in discussion using the TfaC methodology.

**4. Little cross-over between Community Listening Clubs & Girls Clubs.** The overlap of girl and community engagement has been minimal. Recent GEC holiday club and girls club curriculum have now been developed to provide cross over points between CLCs and the girls clubs. In the girls clubs learners work together towards one performance per term to be performed at the Community Listening Club. Upcoming curriculum will have girls performing speeches, poems, plays on child rights and gender and power specifically for their parents. This forum will provide a safe space for girls and their guardians to discuss these issues together with an AoC facilitator present. It is also hoped that in doing, it creates another incentive for parents and guardians to attend and actively participate in the CLCs.

**5. Confusion about target audience (parents and community members).** The project has identified that there may be a confusion among AoCs about the target audience for Community Sensitisation. While the project encourages the attendance of Community members at CLCs, the project measures the knowledge, attitudes and skills of parents. The project will clarify this

distinction between parents and community members with improved AoC communications about project targets and aims.

**6. Lack of resources devoted to parents relative to girls.** It is noted that historically TfaC have committed more resources and support to girls than to their parents. AoCs have identified this as a major obstacle to encourage parents to attend. However, as a response to the low attendances at listening clubs, the project took on board AoC suggestions, and washing soap is now made available to parents that attend and stay for the duration of the CLC. Recent Community Listening Club attendance data demonstrates the positive impact of this incentive on parents' attendance. Since this intervention the attendance of more than 30 adults at each club has reached 30%, with signs that this will continue to improve with time. TfaC anticipates this will enable future achievement of Output 3 targets.

**7. Focus on girls.** The success of the intervention for girls has been the individual focus and ratio of learners with an AoC. The project will conduct further research into how to leverage the existing project model to improve parent engagement. E.g. Home visits are currently used for AoCs to follow up with girls that have poor attendance. The project is exploring the use of the home visit to encourage AoCs to facilitate discussions with parents about investing in girls education and improved SRH.

**8. Open Day Structure.** Another key area for parent and guardian engagement is the Open Day. In many schools, these open days have been geared towards learner and school community engagement, however in new GEC curriculum; specific steps for planning an open day are outlined. Learners are encouraged to invite parents to attend and specific Open Day activities are developed to include various stakeholders, including parents and guardians.

The above points, demonstrate the need to clarify key project assumptions for Output 3, The GEC project is committed to a continued emphasis on Output 3, and recognises that this significant emphasis, particularly on support for AoC engagement with communities and parents is needed if there is to be a significant change in the log-frame indicators.

The barriers to Output 4 have been key assumptions that existing CP infrastructure is adequately in place in all districts and communities. AoCs and fellow teachers have varied knowledge on existing CP structures. To address this barrier the project with the TfaC Child Safe Guarding Manager (CSM) has developed a Child Protection action plan. This will be distributed to all schools at District Level Stakeholder meetings with child safeguarding and protection (CP) training to ensure that all schools, and AoCs and head teachers have and understand their appropriate CPP. The Child Protection Action Plan establishes the following measures:

1. At AoC refresher training AoCs receive comprehensive Child protection training with the CSM or facilitators trained to ensure that they are receiving the most up to date and accurate information;
2. AoCs will deliver a CP refresher training to all teachers in their schools.
3. All School Health and Nutrition Coordinators, have received Child Safeguarding and Protection training to improve project monitoring and support to AoCs.
4. The GEC project manager, GEC MEL manager, and TfaC CSM now meet monthly to ensure that CP project monitoring is robust and updated and any GEC CP reported cases are dealt with immediately.

#### **2.4.2 Effects of interventions on barriers to girls' educational outcomes**

This section explains what barriers to girls' education have been identified at midline level. Due to the lack of availability of baseline data at the individual level, we will only consider studying *changes* in the effects of these barriers at the endline period. In Table 20, we identify what types of activities the project delivered to address the types of barriers.

Multiple analyses of variance and correlational analyses were conducted to assess the barriers that girls face in achieving their learning outcomes. To assess learning outcomes, both EGMA and EGRA performance were included. The results listed in Table 20 apply to both outcomes, unless otherwise specified in the notes. All types of barriers affect learning outcomes significantly.

Attendance, is primarily affected by the economic factors, the safety of the road to school (primarily in the neighbourhood and on the way back from school), as well as personal factors related to pregnancy and early marriage and household factors such as the level of education that both the girls' mothers and fathers obtained. The only barrier that was identified by TfaC, which did not turn out to affect either attendance rates or learning outcomes was the inadequacy of toilet facilities. Although 32% of girls indicated that the toilets were uncomfortable to use, this did not affect their attendance or learning.

**Table 20. Summary of barriers to education outcomes and types of project interventions**

Potential barrier	Effects on Outcomes		Type of Project Intervention that addresses this barrier	Comments
	Attendance?	Learning?		
<b>ECONOMIC FACTORS</b>				
Poverty	Yes	Yes	Economic: Provision of school materials	Analysis of variance show that girls from households which have more difficulty to fulfil their basic needs without charity perform worse on EGRA.
Cost of school (fees, books, uniforms, etc.)	No	Yes	Economic: Provision of school materials	Correlational analyses show a counterintuitive, negative relationship between ability to afford schooling and performance on EGMA.
Domestic chores and livelihood activities	No	Yes	N.A.	Analysis of variance shows that girls who have difficulty completing homework due to house chores perform worse on both EGRA and EGMA. Their attendance is however not affected.
Other economic factors	-	-	-	
<b>SCHOOL-BASED FACTORS</b>				
Poor quality of education and teaching	No	Yes	Teacher training: AoCs	Analyses of variance with Teacher Autonomy Support as indicator.
Long distance to school	Yes	-	N.A.	Based on qualitative input from AoCs
Lack of adequate facilities	-	-	N.A.	
Inadequately trained teachers	No	Yes	Teacher training: AoCs	Qualitative input
Inadequate teaching or learning materials	-	-	Teacher training: AoCs	
Lack of female teachers	-	-	N.A.	
Lack of adequate sanitation facilities	No	No	N.A.	No significant correlations with how comfortable toilets are to use.
Availability of schools	-	-	N.A.	
Teachers treat boys and girls differently	No	Yes	Teacher training: AoCs	Positive correlation between girls' ratings of gender fair

				teaching and their EGRA performance.
Teacher absenteeism	No	-	N.A.	Teacher absenteeism is not selected as a reason for dropping not attending school.
Shortage of teachers	-	-	N.A.	
Corporal punishment	-	-	Teacher training on child protection	
Language of instruction not mother tongue	No	No	N.A.	Analyses of variance: no difference between Chichewa speakers and others.
Poor school management	-	-	N.A.	
Poor governance of girls' education	-	-	Teacher training: AoCs. AoCs raise awareness in their schools.	
Other school based factors	-	-	-	
<b>ATTITUDES AND SUPPORT</b>				
Negative attitudes towards girls' education	No	Yes	Teacher training AoCs (home visits); community based awareness, attitudes & behaviour (Tisinthe radio listening club)	The daughters of parents who see disadvantages to sending a girl to primary school, perform lower on EGRA.
Lack of family support and parental involvement girls' education	No	Yes	Teacher training AoCs (home visits); community based awareness, attitudes & behaviour (Tisinthe radio listening club)	Analyses of variance show that daughters of supportive and involved mothers and controlling fathers score better on EGRA. Parental monitoring (the extent to which a parent is aware of what their daughters do outside of school) is also positively related to EGRA performance.
Negative perceptions of the relevance of education	No	Yes	Teacher training AoCs (home visits); community based awareness, attitudes & behaviour (Tisinthe radio listening club)	Significant correlation: If parents see less relevance of educating girls, their daughters perform worse on EGRA.
Social exclusion	No	Yes	Teacher training AoCs (home visits); community based awareness, attitudes & behaviour (girls' clubs with both IS and OS girls)	Positive correlation between school belonging and EGRA performance.
<b>VIOLENCE AND SAFETY</b>				
Insecurity and fear of violence	No	Yes	Community based awareness, attitudes & behaviour; empowerment & self-esteem	Learning effect only refers to EGRA. No relationship was found between safety and gender-based violence in any location for EGMA.
Lack of safety or harassment at school	No	No	Community based awareness, attitudes &	No significant correlations between the girls' safety

			behaviour	perception and their performance.
Sexual harassment and violence	No	Yes	Community based awareness, attitudes & behaviour; empowerment & self-esteem	Learning effect only refers to EGRA. No relationship was found between safety and gender-based violence in any location (e.g., school, road to school, around home) for EGMA.
Unsafe journey to school	Yes	Yes	Community based awareness, attitudes & behaviour	Both the perception of the parent and the girl herself matter for EGRA performance of the girl. This girls' perception of the safety of the journey back from school also matters for her attendance.
<b>PERSONAL FACTORS</b>				
Early pregnancy	Yes	Yes	Teacher training & support: empowerment & self-esteem; community-based awareness.	Analyses of variance show that girls who have ever been pregnant perform worse on EGMA and EGRA and attend school less than girls who have not.
Early or forced marriage	Yes	Yes	Teacher training & support: empowerment & self-esteem; community-based awareness.	Analysis of variance reveals that girls who are married perform worse on EGRA than those that are not.
Issues around general and sexual health	Yes	Yes	Teacher training & support: address SRH issues in Girls' Clubs.	Note: General health is correlated with better EGRA and EGMA performance and higher attendance. Analyses of variance show that girls that are sexually active score lower on both EGRA and EGMA than girls who are not, and also have lower rates of attendance.
Issues around disability	No	Yes	N.A.	
Lack of motivation, confidence, aspirations	Yes (only motivation)	Yes	Teacher training & support: empowerment & self-esteem; community-based awareness.	There are positive correlations between EGMA and EGRA performance as well as with attendance for motivation for school and academic self-efficacy. Self-esteem is related to EGMA and attendance, but not EGRA performance.
<b>OTHER</b>				
Low levels of education in family	Yes	Yes	N.A.	Analyses of variance show that both maternal level of education and paternal level of education affect the child's EGRA performance and attendance, not EGMA performance.
Availability of electricity in the household	No	Yes	N.A.	Note: Analyses of variance show an effect in the counterintuitive direction: Girls

from households *with* electricity have lower EGRA scores than those with less access (no effect for EGMA).

Death of an adult in the household	No	Yes	N.A.	Effect of learning only applies to EGRA
Broken family structure	No	Yes	N.A.	Analysis of variance shows a significant difference
Living in child headed household	No	No	N.A.	No significant difference, but N = 20 for child headed HH.
Number of children living in HH, per adult	No	Yes	Marginalisation	

### 2.4.3 How has the project's interventions demonstrated value for money?

In order to ensure the project achieves value for money, project implementation has considered cost-efficiency and cost-effectiveness in management decision making.

To promote efficiency, TfaC tenders for the provision of sanitary pads to project beneficiaries, and for all administrative costs such as stationary and printing. This is done to ensure that the project achieves a cost-efficient means of mobilizing resources to achieve project outputs. Furthermore, teacher training is conducted at the district level to ensure good value for money. The costs of transporting all AoCs to Lilongwe to receive training exceeds the costs of the project team travelling to each district to conduct trainings locally.

We have calculated cost per output ratios in order to better establish the project's value for money. These are shown in the table below.

**Table 21. Annual Costs per Output and Beneficiary**

<b>Output</b>	<b>Annual Cost per beneficiary (2014)</b>
1. Agents of Change run inclusive workshops	<b>£17.12</b> per teacher trained (4900 teachers trained)
2. Marginalised girls increase participation in co-educational environments	<b>£20.50</b> per marginalised girl reached (9040 girls)
3. Parents actively support girls' education	<b>£25.00</b> per parent reached (3325 parents participating in listening clubs)
4. Project schools are more safe and inclusive	<b>£369.37</b> per school reached (225 schools)

Cost-effectiveness can be understood as how well outputs are converted to outcomes and impact. TfaC engages with local stakeholders including School Health and Nutrition Coordinators, Mothers Groups, and District Education Offices to support project achievement of outcomes at good value for money. SHN coordinators conduct routine monitoring activities in TfaC treatment schools to support the project in monitoring progress. Mothers groups are further engaged to support AoCs with achievement of project impact such as enrolment of out of school girls.

To enable comparability between projects, we have calculated a ratio of administrative costs to total costs per year. Of a total of £891,090 spent on the project in 2014, £38,256 was spent on administrative costs, only a 4.3% of the total costs in 2014.

### 2.4.4 In what ways has your project demonstrated innovation and with what effects?

Gender and educational norms, poverty and poor sexual and reproductive health are significant barriers to girls' retention, achievement and learning in primary schools in Malawi. Traditional gender norms mean there is increased pressure on girls to remain at home, rather than attend school. Where there are limited resources, parents prefer to invest in the education of their sons. Within our recent baseline study, 25% of

households said that gender played a role in their decision on whether to send a child to school and 32% said it made more sense to send a boy as they are more likely to use their education. Poor quality teaching in primary schools concerning sexual and reproductive health and rights (SRHR) due to teachers feeling uncomfortable to address the issues results in poor SRHR for all students in the school environment. Additionally the lack of a safe learning environment for female students who have been open to incidents of sexual abuse from male peers and teachers increases girls' likelihood of not attending or enjoying school (Nsanje Baseline Report, 2012). Finally there is a lack of attention to the SRH needs of girls in general, for example, in the provision of inadequate sanitation facilities during menstruation and a lack of support for pregnant or new mothers, which also contributes to the low attendance, retention and achievement at school of many girls.

The project aims to address the barriers that are preventing marginalised girls from accessing quality education in Malawi and therefore innovates by addressing these forms of marginalisation through specialized interactive teaching. TfaC also recruits female primary school teachers who were trained in the TfaC methodology during their time in TTCs. These teachers are then able to apply an extracurricular curriculum that focuses on improving learning for marginalized girls.

TfaC methodology looks at changing behaviours by facilitating participants to explore the way voice, body and space are used in relationships, and how these can disempower or empower them and therefore affect their SRH risk status. Facilitators run activities to support participants to practice using their own body, voice and space differently. This is done within theatre-based activities e.g. sculpting, role-play and/or touch tag:

- Sculpting uses body and space to show different emotions, states and/or a freeze of a scenario.
- Role-play uses body, voice and space to act out scenarios.
- Touch tag occurs during the second showing of a role-play: an audience member touches an 'actor' and becomes that character. They then change the behaviour of the character, pushing for a more positive outcome from the scenario.

The altered use of body, voice and space in a situation can achieve an improved outcome e.g. being able to say 'no' to unwanted sex, resulting in improved SRH. Role-playing and touch tag are social forms of learning and promote cooperative behaviour, improve participant involvement in their own learning, and most importantly within an SRHR context: increase empathy and understanding of different perspectives<sup>45</sup>. Experiential learning is used throughout the workshops – the scenarios coming from the participants themselves.

Using TfaC methodology, teachers are trained in how to integrate literacy and numeracy activities into their SRHR-focused workshops throughout the academic year. These exist as games, songs and warmers within each workshop and include reflections by the girls around their use of literacy or numeracy skills and how these could be improved and/or used in daily life. Teachers are also trained to run literacy and numeracy focused workshops. These are run in 'Holiday Clubs' and run for five half-days during the week before the start of each term.

Parents and community decision makers are also involved in the project via the Parent-Teacher Association (PTA) and Community meetings as well as home visits and attendance at Community Listening Clubs once a month. Community Listening Clubs are community-focused radio programmes highlighting a specific topic each month which promotes discussion and debate with the Community around girls' education. All of the radio programmes; for communities and students, are interactive in that listeners can call a free phone number and touch tag into the live performance.

They are also trained in how to improve individuals' self-confidence and self-efficacy and familiarise participants with pressing SRHR topics. Through improving the self-confidence and sexual and reproductive health of marginalised girls through these innovative approaches, TfaC's Tiphunzire Project has supported

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<sup>45</sup> Jarvis, L., Odell, K. & Troiano, M. (2002). Role-playing as a Teaching Strategy. California State University Sacramento. Staff Development Presentation.

the improvement of the learning outcomes of marginalised girls and their access to- and retention in school. The GEC has chosen Tiphunzire's and its intervention model as an Innovation Window (IW) project as a result.

A major innovation of the project is the use of technology and social media for communication including outward communication of the project as well as incoming project reports from AoCs which in a quickly developing technological environment has proved challenging, yet fruitful. The country is now well covered by 3G network which allows the project to be pioneers in using the internet and other ICT technologies. This has allowed a major wider reach and scalability than other similar projects that do not use such time-efficient methods.

## **2.4.5 What are the key lessons learned about what has worked or not worked, why, for whom, under what conditions and with what effects?**

In order to address this question we tested a number of the core assumptions underpinning the project's theory of change.

### **1. Building confidence and increasing participation of girls will positively impact on their attendance and learning.**

Although we do not have data on psychological variables at Baseline we ran bivariate correlations and linear regressions on Midline data for academic self-efficacy, self-esteem and school belonging to assess this assumption. We measured *academic self-efficacy* based on responses on a scale of strongly disagree to strongly agree to the following four items (I feel like I can raise my hand in class whenever I want; I feel confident in my ability to learn; I feel capable of learning the material in school, and; I am able to achieve my goals in school).

The Rosenberg Self-Esteem Scale is one of the most widely-used self-esteem measures in social science research. Self-esteem is a positive or negative orientation toward oneself; an overall evaluation of one's worth or value. People are motivated when they have high self-esteem<sup>46</sup>, and having it indicates positive self-regard. Self-esteem is only one component of the self-concept, which Rosenberg defines as "totality of the individual's thoughts and feelings with reference to himself as an object"<sup>47</sup>.

School belonging was measured through mean scores of the following items: (1) I feel close to people at this school; (2) I feel part of this school; (3) I am happy to be at this school, and; (4) the students at this school are against me (reversely coded).

Findings indicate that *academic self-efficacy* positively correlates at statistically significant levels with Overall EGRA Score ( $p < 0.001$ ), Overall EGMA Score ( $p < 0.001$ ), and percentage attendance per month ( $p < 0.001$ ). Furthermore, linear regressions demonstrate that academic self-efficacy is a predictor of Overall EGRA Score ( $R^2 = 0.041$ ,  $b = 3.95$ ,  $p < 0.001$ ), Overall EGMA Score ( $R^2 = 0.03$ ,  $b = 0.044$ ,  $p < 0.001$ ), and the level of attendance ( $R^2 = 0.035$ ,  $b = 0.529$ ,  $p < 0.001$ ), thus validating the project's theory of change. These findings suggest that academic self-efficacy can predict a girl's performance in EGRA and EGMA as well as her level of attendance. This makes intuitive sense with girls who feel more able to succeed in an academic domain exhibiting that success in practice.

*Self-esteem* also positively correlates at statistically significant levels with Overall EGRA Score ( $p < 0.05$ ), Overall EGMA Score ( $p < 0.05$ ) and the level of attendance ( $p < 0.05$ ). Linear regressions found that self-esteem was a statistically significant predictor of Overall EGRA ( $R^2 = 0.012$ ,  $b = 2.585$ ,  $p < 0.05$ ), Overall EGMA ( $R^2 = 0.014$ ,  $b = 0.035$ ,  $p < 0.05$ ), and the level of attendance ( $R^2 = 0.01$ ,  $b = 0.051$ ,  $p < 0.05$ ). Self-esteem therefore is a statistically significant predictor of learning outcomes and the level of attendance. However, further research needs to be conducted to understand the causal dynamic of this relationship. Anecdotally, a number of AoC's mentioned that often the more outspoken participants were more successful

<sup>46</sup> Wigfield A, Eccles JS, eds. (2001). *The Development of Achievement Motivation*. San Diego, CA: Academic Press

<sup>47</sup> Rosenberg, M. (1965). *Society and the adolescent self-image*.

in school. However, it is difficult to identify the underlying causal pathway without further qualitative work on self-esteem.

*School belonging* is also positively correlated significantly with Overall EGRA ( $p < 0.001$ ), Overall EGMA ( $p < 0.001$ ), and percentage attendance per month ( $p < 0.001$ ). Linear regressions revealed that school belonging was a statistically significant predictor of Overall EGMA ( $R^2 = 0.031$ ,  $b = 0.038$ ,  $p < 0.001$ ), Overall EGRA ( $R^2 = 0.053$ ,  $b = 3.949$ ,  $p < 0.001$ ), and percentage attendance per month ( $R^2 = 0.074$ ,  $b = 0.097$ ,  $p < 0.001$ ). This finding indicates that higher school belonging results in improved literacy and numeracy and the level of attendance for girls.

Taken together, these findings collectively validate the project's assumption that if girls have higher academic self-efficacy, and have a positive attitude towards attending school, this will lead to improved attendance and improved learning outcomes in literacy and numeracy.

## **2. Increased attendance leads to higher grades.**

The level of attendance positively correlated significantly with Overall EGRA ( $p < 0.001$ ) and Overall EGMA scores ( $p < 0.001$ ). Furthermore linear regressions found that the level of attendance was a statistically significant predictor of Overall EGRA ( $R^2 = 0.04$ ,  $b = 9.661$ ,  $p < 0.001$ ) and Overall EGMA scores ( $R^2 = 0.077$ ,  $b = 0.157$ ,  $p < 0.001$ ). This validates the project's assumption that increased attendance at school is a predictor of learning outcomes in literacy and numeracy. It also indicates that participants receive a certain degree of quality instruction in school, as with increased attendance they are able to better perform in learning assessments.

## **3. Sexual and Reproductive Health is associated with School Attendance and Tiphunzire participants are significantly less sexually active**

Whether a girl is pregnant, has ever been pregnant, is married or living as married, or is sexually active is associated her attendance. Sexually active girls attend schools 29% fewer days than average, girls who have been pregnant attend 46% fewer school days on average and girls who have given birth attend, on average, 51% fewer schools days than non-mothers. Girls who are married or living with men as if married attend 23% fewer school days than their unmarried peers. T-test comparisons revealed these difference to be statistically significant ( $p < 0.05$ ).

There are no significant differences in the number of girls who are married or living with a man as if married, pregnant, have been pregnant, or have given birth between treatment and control schools. However, Pearson Chi-square tests show that participating in Girls Clubs reduces the likelihood of being sexually active ( $p < 0.05$ ). Even when the number of girls in these other sub-groups is relatively the same in treatment and control schools, there are significantly less sexually active girls in treatment schools compared to control schools (12.6% in treatment schools and 17.8% in control schools).

One AoC, discussed a case where they were able to successfully support a girl to stay in school even after having a miscarriage. She stated: "*[c]hange is there because those I encourage to re-enrol have done so, for example there is this girl, she has had a miscarriage, but she never stopped coming to school when she was pregnant and anyone who ridiculed her was dealt with by me. She has learnt a big lesson and I don't think she would repeat. I encouraged her not to stop coming to school*"<sup>48</sup>.

## **4. Girls who fear abuse/ are victims of abuse at school are less likely to attend school.**

In order to test this assumption we examined a mean score of safety from the Girls' SSQ in relation to the level of attendance. Bivariate correlations revealed that there is a statistically significant, positive correlation between these two variables, indicating that girls who feel safer attend school more frequently ( $p < 0.05$ ). However, a linear regression did not find that safety predicted school attendance.

This finding suggests that while feeling safe may be associated with attending school, the feeling of safety is not a predictor of attendance at a statistically significant level.

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<sup>48</sup> Focus Group Discussion with AoCs in Lilongwe (Mtemambalane School, June 5th, 2015)

The Midline Study also conducted a number of school and community safety mapping activities with marginalised girls. During these participatory sessions, girls, in groups of 3-6, were asked to collaboratively draw a map of their community and school identifying key landmarks. Girls were then asked to mark safe places with a green dot and discuss why they were safe and unsafe places with a red dot and discuss why they were unsafe. These sessions revealed that girls feel safer in school than they do in communities. A summary of our findings are shown in the table following.

**Table 22. School & Community Safety Mapping**

Place	Safe (high level of agreement)	Unsafe (high level of agreement)
The way to school	-	X
Bushes & Maize Fields	-	X
Girls' Classroom	X	-
Other Classrooms	-	X

Although girls feel safe in their classroom, many girls did not feel safe in other classrooms due to bullying. One girl stated "[t]he boys tease us when we are not by our teacher and some teachers' don't tell them no"<sup>49</sup>. Another girl said, "I feel safe by my teacher but sometimes I have to look for her during break time"<sup>50</sup>.

Girls all agreed that the way to school was unsafe because sometimes they had to leave home while it was still dark. One girl said that, "...old men sometimes shout and call for me on the way to school which makes me scared when I am alone"<sup>51</sup>. Many girls don't feel safe when they pass maize fields or bushes on the way to and from school because they have heard stories of men pulling girls into maize fields to abuse them<sup>52</sup>.

#### **5. While AoCs have the confidence and skills to engage parents and communities in supporting girls' education they need support to provide an effective service.**

In order to better understand the intervention from the perspective of the Agents of Change, AoC's conducted a self-administered survey during the Midline Study. Key findings are reported in the table following and discussed below in relation to this assumption.

**Table 23. Key Findings from AoC Self-Administered Survey**

Item	Response	Frequency (n = 37)
<b>Are you and the Girls' Club supported by your Head Teacher?</b>	Not at all	41.9%
	Very Little	30.2%
	Somewhat	0%
	Very Much	27.9%
<b>In general, do your fellow teachers support your work for TfaC?</b>	Not at all	48.8%
	Very Little	32.6%
	Somewhat	0%
	Very Much	18.6%
<b>How challenging has it been for you to engage the learners with literacy exercises in girls clubs?</b>	very challenging	39.5%
	a little challenging	14%

<sup>49</sup> Participatory Safety Mapping (Lilongwe). June 10<sup>th</sup>, 2015.

<sup>50</sup> Participatory Safety Mapping (Salima). June 9, 2015.

<sup>51</sup> Op. Cit. Lilongwe

<sup>52</sup> *ibid*

Item	Response	Frequency (n = 37)
<b>How challenging has it been for you to engage the learners with Sexual and Reproductive Health (SRH) exercises and discussions in girls clubs?</b>	Manageable	16.3%
	Easy/Not at all challenging	30.2%
	very challenging	34.9%
	a little challenging	20.9%
	Manageable	16.3%
<b>How challenging has it been for you to engage the learners with mathematic exercises in girls clubs?</b>	Easy/Not at all challenging	27.9%
	very challenging	39.5%
	a little challenging	25.6%
	Manageable	11.6%
	Easy/Not at all challenging	23.3%

A large percentage of AoCs felt they are not supported by the head teacher in their school (41.9%) or fellow teachers (48.8). Many AoCs report that the head teacher is often uninformed about their work in the school and that there needs to be better communication between TfaC and Head teachers to inform them and engage them in project activities. Some AoCs also reported that it was difficult for them to represent TfaC in schools and they would appreciate more communication between TfaC and the head teacher directly.

However, a number of AoCs also feel they get a lot of support from their Head teachers (27.9%). One AoC in an FGD in Lilongwe stated, *"For me GEC and the head teacher are supportive. They write letters to village heads when I want to hold a meeting, for instance notifying village head at Chibungo to come to school with an attached list of parents of girls in the club. When this comes from the chiefs it carries weight. The head teacher is very supportive"*<sup>53</sup>.

A number of AoCs further feel that their fellow teachers are hostile towards their work primarily because of jealousy. Whenever the AoCs in these schools raise issues regarding child protection or re-enrolment other teachers ask for incentives. One AoC explained, *"the problem in our villages is the word project, chiefs, people even PTA think its money. When they see that you had visitors they say allowances, the members of staff actually ask for Fanta"*<sup>54</sup>.

Focus Group discussions with AoCs further revealed a number of misconceptions about the project amongst parents and other stakeholders. One AoC in Lilongwe commented, *"people's thoughts on the project are when a girl has been taken under the project she will be supported till secondary school completion; she will be given books, uniform. There some girls that are not given books and uniform, the in-school girls, while out of school receive these things. They ask what level of education will the project support the girls. When we say the project is for three years they say, then it's a waste of time"*<sup>55</sup>. There was much agreement in the group with this statement.

A large percentage of AoCs also report having difficulty engaging girls in clubs with mathematics exercises (39.5%), literacy exercises (39.5%), and in discussions about sexual and reproductive health (34.9%). Many cite the need for a refresher training workshop on the teaching methods and approaches to addressing these issues in engaging ways. A refresher training workshop will be conducted by TfaC and these issues should be addressed through this forum.

<sup>53</sup> Focus Group Discussion with AoCs in Lilongwe (Mtemambalane School, June 5th, 2015)

<sup>54</sup> Focus Group Discussion with AoCs in Chikwawa (Mfera School, May 12<sup>th</sup>, 2015)

<sup>55</sup> Focus Group Discussion with AoCs in Lilongwe (Mtemambalane School, June 5th, 2015)

However, many AoCs in FGDs find that learners are curious to learn about sexual and reproductive health. One AoC in Chikwawa explained, *“When one is teaching such topics they are keen to listen. Some things they are not sure about so they ask questions. They ask to know what exactly happens for someone to get pregnant, they want details. They don’t want to just hear through sex, they want to know what sex is, and they ask questions... If you get shy you can never teach these topics, you cannot accomplish anything. When you open up they also open up, but once you are closed they will not tell you what they know”*<sup>56</sup>.

These findings indicate that AoCs have successfully managed to overcome implementation challenges but face some barriers in their work in schools, most notably through the lack of support of Head teachers and fellow teachers and misconceptions about the project’s aims amongst broader school stakeholders.

During KIIs, AoCs complained about the heavy workload. Running the clubs, checking attendance, doing the home visits, answering the surveys from TfaC, all in addition to their normal work as a teacher was perceived to be burdensome. Even while receiving an additional allowance, some perceive that the workload does not weigh up to the benefits. This is especially the case if there is only one AoC at the school. One AoC reported that the incentive to continue working as an AoC could therefore become quite low and the chance that people will drop out of the project is high, especially if an opportunity to work for another project arises, which offers a higher payment or a smaller workload.

TfaC recognises that the teaching profession in Malawi continues to face wide ranging challenges which lead to low motivation and low job satisfaction. These issues include unstable holidays, low salaries, unpredictable recruitment and transfers, and high pupil to teacher ratios. There is no data to verify the problems AoCs are facing are a direct result of the implementation of the project or whether they are endemic throughout the industry.

The project recognises that within the context of conservative rural communities and working with young female teachers as the key drivers of the project, project activities may be resisted. Therefore the success of the intervention is dependent on TfaC relationships with AoCs, and AoCs building relationships with the surrounding communities. There is no evidence that the processes are not occurring, only that they are not complete. TfaC notes the need for more strategizing and improved communication around the inputs of community sensitisation. The project recognises that AoCs deal with both high workloads and challenging community engagement.

To better understand AoC motivations and challenges, AoC refresher training and greater use of social media has allowed the project to focus on developing a better understanding the AoC experience. Workload has been identified as a key challenge for many of the AoCs. Therefore, the project continues to explore ways in which the existing model can be improved to maximise results without adding more responsibility to the individual AoC. Additionally, the project has begun to recognise outstanding achievement among AoCs and has implemented a motivations scheme for successful AoCs and to encourage all AoCs to complete project activities. Whenever possible, the project solicits feedback from AoCs on project activities. Through AoC refresher training, the use of motivations and recognising achievements, refining the project model to maximise results, and improved communication with AoCs, we anticipate community sensitisation of the project intervention to greatly improve.

Though the problems are well documented in the literature, and the sentiments portrayed by the AoCs, the project is now much more aware of the specific issues faced and has begun to implement strategies to build trust and relationships between TfaC and AoCs. Project staff has now been hired to be dedicated to communication with AoCs and district level stakeholder meetings will be organized to dispel project misconceptions and to encourage greater support from the school community level and to increase engagement between the project and the head teachers.

With regards to engaging of participants in literacy and numeracy activities the project has developed and distributed extensive lesson plan manuals and Study guides (through Holiday Clubs) to support participatory learning methodologies. Project curriculum incorporates feedback from AoCs, learners and

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<sup>56</sup> Focus Group Discussion with Mothers Group in Mfera Primary School (Mfera School, May 12<sup>th</sup>, 2015)

Malawi education specialists. To ensure comfort with the teaching material all numeracy and literacy materials are now translated into Chichewa. The facilitation of these new workshops will be a key focus for refresher training.

#### **6. AoCs can collaborate with school management structures to achieve common objectives.**

According to FGD carried out in Mfera Primary School, the project has successfully worked with the Mother's Group in Mfera Primary School to encourage young mothers to re-enrol and attend school. Young mothers face significant barriers to attending school due to the need to care for children during the day. One mother explained, "*[w]hen we accepted [this as a problem] we were willing...because there were a lot of girls who were not going to school, after giving birth they would just stay home. We saw that they lacked support*"<sup>57</sup>.

Another mother explained, "*[w]e sat down as a committee with the AoC and presented the issue to the head teacher... We would go village by village asking the village head to allow us to take every child not going to school to school. When they accepted we would go to every household looking for those that are not going to school and, if we find them, we would ask them why. Some were saying because they are poor, others because they do not have uniforms, [or] exercise books*"<sup>58</sup>.

The Mother's Group supports the young mothers by looking after the new-borns while they are at school and bringing the infants at break time for breast feeding. One participant explained "*[o]ne is eight months old, so we carry them on our backs as we do our chores and take care of them while our own children are in class until the mother comes to take the child home*"<sup>59</sup>. They also provide the infants with porridge and the mother's with maize meal.

When asked if there were any barriers for participating in the care group, one mother explained "*it would be wrong to choose [girls], whoever wants to can come but they have to be willing*"<sup>60</sup>.

The AoCs have also worked with the Mother's Group to help girls who are not mothers attend and enrol in school. One mother provided a recent example, "*[t]his other time in January the AoCs approached us to tell us there were some girls who were not attending school, they had visited the girls with no success so they left it to us. We visited them. Now they have written exams. We would visit the household and if we do not find the child or parent we would leave a letter notifying them*"<sup>61</sup>.

The mother's group and the AoC at Mfera are in constant communication to ensure girls continue to attend school. One mother stated, "*[w]e also come to school later on to find out if they have re-enrolled with the help of AoCs*"<sup>62</sup>. In cases where girls stop attending school, the Mother's Group waits to hear from the AoC and then visits the household again. The Mother's Group has worked with the chief and local authorities to ensure parents are punished if their girls do not attend school. A member of the Mother's Group explained, "*We are telling parents that if they do not send their child to school they will be fined a goat to the chief and also be taken to the police*"<sup>63</sup>.

The Mother's Group appreciates TfaC's work in their community because they feel girls need to hear about sexual and reproductive health and the importance of education from all stakeholders. A mother stated, "*I am grateful for the AoCs they talk to them and when you try to advise a child at home they tell you the TfaC madams already told them, they are helping!*"<sup>64</sup>.

By engaging with the Mother's Group and community stakeholders, TfaC invests in the sustainability of the project. Through community cooperation and commitment to the importance of education, girls are being provided with the necessary support to re-enrol and stay in school.

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<sup>57</sup> *Ibid.*

<sup>58</sup> *Ibid.*

<sup>59</sup> *Ibid.*

<sup>60</sup> *Op. cit.*, 26, p.40.

<sup>61</sup> *Ibid.*

<sup>62</sup> *Ibid.*

<sup>63</sup> *Ibid.*

<sup>64</sup> *Ibid.*

## 7. Parents prioritise education and access TfaC support for girls' to return to school but SRH topics such as contraception remain taboo.

Although Logframe indicators suggest that the project needs to re-address its approach to engaging parents and communities, a case study from Chatsala Listening Club demonstrates how the intervention's approach can create value and attitude change amongst parents.

The listening club at Chatsala Primary School in Lilongwe has 67 parents and community members. Participants gather once month to listen to Tisinthe! (Let's change), an interactive radio programme produced by TfaC that focuses on increasing awareness of sexual and reproductive health and rights to listeners, and includes a radio drama based on the challenges faced by children in Malawi.

Through high participation the club has improved the sexual and reproductive health knowledge of parents and community members and created increased awareness of the barriers facing girls in attending and achieving in school. A focus group with participants in the listening club highlighted a number of behaviour changes attributable to the project that reduce barriers to girls' education. One participant explained, *"I was one of those parents who believed when a girl becomes of age they should find a man and get married. I never used to pay much attention [to] my girls attending school because I felt they will end up like me, married and farmers. But now I do all I can so that my child attends school. I look for manual labour so that I buy soap for my girl to wash her uniform. If she needs books I have to buy and prepare food for her in good time so that when she knocks off from school she should find food already prepared"*<sup>65</sup>.

Participants agreed that the innovative approach of Tisinthe has changed their perceptions about girls' education and addressing sexual and reproductive health with their daughters. One parent stated, *"[f]or me it's the way the AoC manages the clubs, she seems to have real passion and interest in our girls; that made me think twice".* Another stated *"[l]istening to other parents participate on the radio programme and share their views has helped me realise that I can also change my thoughts on educating my children and have positive results someday. You know, when one calls-in you say 'Tisinthe', so if I do not change why do I waste my time coming here... the club has helped me open up about speaking [about] SRH issues to my children, both boys and girls. I speak to them that there are only two things that will come out of having sex, pregnancy and sexually transmitted diseases which when you get one your future is immediately cut"*<sup>66</sup>.

Before the listening club, many parents stated they did not mind if their daughter missed school but now, they are aware of the challenges girls face in school particularly relating to SRH. One mother stated, *"[b]efore the listening club it was traditional that when a girl becomes of age a parent would send the girl to neighbours or relatives houses to stay with them for some days to receive advice. Whatever was discussed there as a parent you had no way of knowing what information your child was given. Some were told that you are old enough to have sex or marry. A parent would just wonder a change in behaviour of a child after that initiation. But now things have changed. I am able to discuss any issues with my child"*<sup>67</sup>.

A number of parents however are reluctant to discuss contraception with their children. One father explained, to which there was unanimous agreement, *"[w]e do not talk to children about any contraception because that would be like telling the child that it is okay to have sex as long as you protect yourself from getting pregnant".* Another continued, *"[c]ontraceptives were introduced in Malawi for married people for purposes of child spacing or birth control. As much as times have changed and girls engage in sex, as parents, we can only advise them to abstain"*<sup>68</sup>. Despite, this taboo parents were able to identify change in their perceptions towards the importance of SRH for their daughters.

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<sup>65</sup> Focus Group with Listening Club Members in Chatsala (Chatsala Primary School, (June 4<sup>th</sup>, 2015)

<sup>66</sup> *Ibid.*

<sup>67</sup> *Ibid.*

<sup>68</sup> *Ibid.*

## **2.5 How scalable and sustainable are the activities funded by the GEC?**

### **2.5.1 What is the project's sustainability strategy?**

Developed with fund manager input, the Tiphunzire project has created a GEC leverage and sustainability tool. This sustainability strategy employs a range of activities that target Malawian national- and government-level, district- and community-level and INGO/International Donors.

Activities and targets include but are not limited to:

1. **National/Government:** Identify forums, particularly within the MoEST, where project good practice and successes can be profiled e.g. (1) conducting annual sectoral review meetings; (2) becoming part of learning networks; (2) identifying NGOs working in Malawi and in similar environments with a focus on girls' education who are interested in using participatory approaches to learning; (3) ensuring relevant stakeholders actively contribute through the Girls' Education Network, which TfaC chairs, and; (4) developing a toolkit including a film which provides practical examples of how the curriculum can be used by teachers and how the impact of the curriculum can be monitored and evaluated.
2. **District:** All project schools (225) are expected to have operational and high quality Child Protection Policies and Procedures i.e. a girls can report abuse and the case is followed up. Overall, 6500 teachers have attended AoC-led teacher trainings, 10 School Health and Nutrition (SHN) Coordinators are capacitated to support the ongoing implementation of the project after February 2017 and, AoC teachers have expressed their interest in sustaining the project after February 2017.
3. **Community:** (1) as part of project activities AoCs conduct outreach home visits by AoCs to parents and guardians.); (2) Community Listening Clubs and Community Radio Broadcasts promoting attendance of girls in school and giving information on the rights of all children to attend school have been produced; (3) termly Open Days promoting attendance at school, positive roles models of parents who support their girls to stay in school and to achieve, and awards given to people specifically supporting the project have been organized, and; (4) TfaC promotes relationship-building during community meetings, SMC meetings and Mothers' Groups including updates on project achievements, appreciation to the community, and recognition of support.
4. **INGO/International Donors:** Present findings identified INGOs and donors at strategic project points, i.e. post baseline, midline and during evaluation. This will be framed in the context of the INGOs' and donors own planning and strategies. Additionally, clear and tailored communication about the value the project adds to different stakeholders engaged in the project is fostered. Finally, TfaC has developed a toolkit including a film which provides practical examples of how the curriculum can be used by teachers and how the impact of the curriculum can be monitored and evaluated. The toolkit will also include budget and planning information.

### **2.5.2 To what extent has the project identified the pre-conditions for scaling up and /or sustaining its activities and results?**

Within the lifecycle of the GEC project, since baseline, the project has scaled up from 36 schools to 225, from 6 districts to 10 districts, including an expansion to over 300 AoC staff. The project conducted a baseline study prior to scale-up and another baseline study with new beneficiaries. Along monitoring data, these studies have provided the necessary evidence to mainstream TfaC methodologies across schools as a result of proper ground diagnosis.

### **2.5.3 How has the project strategically engaged with other organisations to achieve complementary effects?**

Tiphunzire has engaged with the MoEST and the Ministry of Gender at District level Education and Social Welfare Offices to coordinate work with the District Education Managers, SHN Coordinators and District Social Welfare Officers in all districts. The project continues to map other organisations working on girls'

education, child protection and school feeding programmes. Through a partnership with IRISE, a supplier of GEC project sanitary pads, IRISE staffs have visited TfaC for learning visits on TfaC methodology. Through the Girls Education Network, TfaC engages with relevant stakeholders in girls' education and continues to use this forum to share project status and activities.

#### **2.5.4 To what extent has the project leveraged additional investment?**

The project was initially contracted to raise an additional £382,243 of match funding. In January 2015 this was increased to £476,700 and we are currently on target to raise or exceed this amount of match funding. TfaC's match funding is provided by Christian Aid Malawi, an anonymous Trust, Comic Relief<sup>69</sup> and The Medicor Foundation<sup>70</sup>. The anonymous Trust have signalled their interest in continuing to support an education-based project in Malawi from 2017, in large due to the impact being made by the GEC project. The Medicor Foundation are also interested in continuing their support.

In addition we have developed a strong dissemination plan to share our midline and our endline findings, and our GEC film advocating for girls' education. Events are currently being planned in London, at the UKFIET conference in Oxford, and in Malawi, giving TfaC the opportunity to talk further with potential future funders. The dissemination of impact and the leverage of future investment is a key focus for the last eighteen months of the project and will be led by the MEL team, the Executive Director in London, the Country Director in Malawi, TfaC UK and TfaC Malawi trustees.

#### **2.5.5 What are your plans for delivering sustainable results?**

In Malawi, a bill was passed entitled the Marriage, Divorce and Family Relations Bill. Considerable discussion remains in the media and among project participants as it raises the legal marriage age to 18. However, the bill specifically states that that the Malawi constitution can override the bill and the marriage age of 15 remains legal at the constitutional level. At present, this has positively affected the project as it raises the profile of this issue and encourages open conversations. Anecdotally, with TfaC's renewed emphasis to increase enrolment of out of school girls, TfaC has been fielding more questions from AoCs about young married girls in their schools.

Nationally, the MoEST promotes their readmission policy at all schools. This policy encourages the reenrolment of girls who are pregnant, breastfeeding or who those who have dropped out of school due to do marriage or having children. This helps to create a more positive and welcoming environment in the school and prevents stigma and discrimination from teachers, which has been a challenge in many areas. TfaC's GEC Model School Competition helps to support this initiative by rewarding schools who create a supportive environment and allow mothers to breastfeed at school.

Due to the flooding in the Southern regions of Malawi during early 2015, the project anticipated significant drops in Girls' Club attendance, which may affect significant learning for girls if they are not consistently attending school will be addressed through careful monitoring. TfaC expects to see an increase in future, as the schools continue to reopen.

Furthermore, the National Child Protection Plan has recently been released by the government which will be incorporated into the child protection policies developed by the AoCs and their schools. Reinforcing and promoting the use of official government guidelines which will provide a platform on which the child protection in the areas covered by the project will be improved during and after the project.

#### **2.5.6 What are the lessons learned about the scalability and sustainability of the activities delivered?**

The project will endeavour to engage the wider school and community including Head Teachers as early as possible in the project cycle, as well as providing training for district level stakeholder meetings. These

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<sup>69</sup> For more information about Comic Relief, please visit: <http://www.comicrelief.com/>

<sup>70</sup> For more information about The Medicor Foundation, please visit: <http://www.medicor.li/en/>

stakeholders include the SHN co-ordinators and the District Education Managers as well as Heads Teachers and Chiefs.

This engagement increases the interaction and quality engagement with the school community, which includes the School Management Committees and Mother Groups. The project has also undergone substantial learning of marginalised girls' needs to sustainably re-enrol and, more importantly, to stay in school. This includes simple logistical solutions such as providing sanitary pads to facilitate attendance during menstruation and the provision of back-to-school packs. These engagements improve the knowledge base of local school structures affecting future prospects for child-friendly and gender-sensitive teaching.

The project has also works with a selected group of committed AoCs who are posted to rural schools where they can reach the most marginalised. Training these AoCs intensively at district level in key areas including SRH, gender inclusive learning, child protection as well as literacy and numeracy has also been a great success and the positive results shown in this report can trace part of the project's impact to the training provided.

The use of open days at school which includes the community has also given the project a platform to scale the project in a cost-effective manner, and as the project learns more about the needs of the community and the interactions between AoCs and wider society, the better position it is in to create large scale impact across intervention communities.

To improve implementation through the AoC network, TfaC recognises the need to evaluate the motivation of the AoC's participation in the project in order to be able to effectively continue the project's aims after its formal ending.

### 3. Conclusions

Tiphunzire has successfully designed and implemented an intervention that positively affected the lives of marginalized girls in rural Malawi. Findings show that 4.1 points in the EGRA test can be attributed to the activities of Tiphunzire. The project, however, did not find visible impact on the numeracy of both in-school and out-of-school girls or attendance of in-school girls.. However, the impact of the project in encouraging out-of-school girls to re-enrol in school cannot be understated. Sampling from within Tiphunzire's Girls' Clubs, we find that 92% of the out-of-school girls in our sample have successfully re-enrolled in school.

These results are driven by a theory of change whose assumptions have passed statistical testing. From this study's data, it is possible to tell that sexual activity and marriage are becoming increasingly unrelated and rates of sexual initiation during early teenage years are high among in-school girls and even higher for out-of-school girls. Although sexual activity does not necessarily result in lower learning scores, it does affect a girl's attendance to school. The same can be said for mothers, married girls and girls who have been pregnant. Given that a higher attendance leads to higher learning, the intervention's focus of improving the knowledge of sexual and reproductive health and rights has been legitimized according to multiple analyses. The emphasis of the project on improving the self-esteem and academic self-efficacy is also well placed, as the relationship between these psychological traits and learning outcomes, attendance and healthy SRH choices has clearly been established. Perhaps as a result, Tiphunzire participants are significantly less sexually active than their control counterparts.

There are, however, significant barriers to achieving better learning and improving the chances of being in school. According to our data, education is still a burden for the poorest households, which affects the chances for a girl to attend school. This is especially true when positive attitudes towards education and the rights of women are not present in parents and caregivers. AoCs manifested that traditional authorities are an especially useful mechanism in encouraging parents to send their daughters to school, as village heads are quick to encourage them to do so. Given that midline results fell short of planned targets in most parental domains, we consider this to be a particularly important finding. TfaC has by now designed implementation strategies to better engage communities in their support of girls' education as this may cause the greatest impact for girls belonging to the poorest households. The case study of Mfera, where the mother's group have been crucial in getting mothers back to school, reveal that the community offer valuable resources to tap onto.

## 4. Recommendations

1. A high proportion of the target population in treatment schools are non-readers. The project should work actively to engage this population through early reading strategies to ensure girls clubs remain inclusive and differentiated to different population needs. AoCs have reported that it is particularly challenging to engage non-readers as many of the literacy games are designed for girls who have at least some level of reading. TfaC would do well to design activities that target this group of girls specially.
2. A high proportion of AoCs have reported a lack of support from their head teacher and identified the need for improved project engagement with Head teachers. The project should work actively to engage Head teachers in project implementation and future consultations, thereby bolstering the credibility that AoCs need to engage the wider school community.
3. AoCs report a number of misconceptions amongst school and community stakeholders about project aims and approaches, particularly negative views towards the lack of material incentives. The project should actively engage surrounding communities during monitoring visits to ensure the project is understood by target communities. This is especially important as the project approaches its final stages to ensure the sustainability of activities.
4. There have been a number of reported cases of in-school girls dropping out of school in order to receive back to school packs from the project. The project should explore providing some incentives to in-school girls to ensure this does not become a widespread challenge to implementation.
5. TfaC may investigate what factors affect the incentive structure for AoCs and develop ways to reduce the workload of AoCs while still maintaining the same quality of delivery. The case study of Mfera showed that communities have often resources to tap onto, which can diminish the workload of the AoC while still bolstering impact. TfaC should seek more feedback from AoCs regarding this issue and make this a topic of discussion in the platforms provided for AoCs to share their experiences.
6. Contraception for young adolescents remains taboo in Malawian society as demonstrated by FGD with parents and guardians. While addressing contraception in schools can prove too controversial as abstinence is the preferred sexual education strategy, Tisinthe! remains an ideal medium to promote attitude change in this regard.
7. The dataset provided as part of this study represent a valuable diagnostic tool to reproduce learning outcomes and attendance scores at the school-level. This may provide an indication to TfaC staff of the schools that need the highest support, in addition to monitoring data. This is the case for Dedza, Chikwawa and Nkhotakota districts, where treatment schools performed worse than their control counterparts.

## Annex 1: Logframe

Output and Output indicators	Baseline Target (achieved)	Midline Target (planned)	Midline Target (achieved)	Variance between achieved & planned targets
<b>Output 1: Agents of Change run inclusive workshops (AoC training; Girls' Clubs; Listening Clubs; Holiday Clubs)</b>				
	# achieved	# planned	# achieved	Difference (%)
1.1 Percentage of AoCs who demonstrate ability to teach literacy, numeracy and life skills in participatory and interactive ways	%	90%	83%	-7%
1.2 Percentage of AoC with correct basic sexual and reproductive health (SRH) knowledge	%	85%	84%	-1%
1.3 Percentage of AoC with knowledge of girls' gender and sexual and reproductive health rights	%	82%	70%	-12%
1.4 Percentage attendance at AoC Girls' Clubs/ Holiday Clubs	%	60%	74%	24%
1.5 Percentage of girls who show improved self-confidence and self-efficacy (improved by at least 10% on previous score)	%	N/A	40%	N/A
<b>Output 2: Marginalised girls increase participation in co-educational environments (Girls' Clubs; Listening Clubs; Holiday Clubs)</b>				
	# achieved	# planned	# achieved	Number (%)
2.1 Percentage of club girls with awareness of their gender, sexual and reproductive health rights	%	70%	80%	10%
2.2 Percentage of club girls who believe they have the power to make decision in their own lives	%	40%	73%	33%
2.3 Percentage of club girls demonstrating the ability to confidently interact with boys in coed learning environments	%	75%	90%	25%
2.4 Percentage of club girls able to attend school during menstruation	%	65%	66%	1%
2.5 Percentage of club girls who	%	85%	89%	4%

<b>Output and Output indicators</b>	<b>Baseline Target (achieved)</b>	<b>Midline Target (planned)</b>	<b>Midline Target (achieved)</b>	<b>Variance between achieved &amp; planned targets</b>
report that they enjoy school				
<b>Output 3: Parents actively support girls' education (Community mobilisation and sensitisation; Open Days; Community Listening Clubs; AoC/ team home visits)</b>				
	# achieved	# planned	# achieved	Number (%)
3.1 Percentage of girls' club parents/ guardians who feel that it is equally valuable to invest in a daughter's education than a son's when funds are limited	%	85%	70%	-15%
3.2 Percentage of Listening Clubs attended by at least 30 community members every month	%	60%	14%	-46%
3.3 Percentage of girls' club parents / guardians with knowledge of girls' gender and sexual and reproductive health rights	%	73%	20%	-53%
3.4 Percentage of girls' club parents/guardians who feel that their daughter is as likely as their son to make use of her education after school	%	65%	44%	-21%
3.5 Percentage of girls' club parents/ guardians who report feeling comfortable discussing SRH issues with their daughters	%	50%	35%	-15%
<b>Output 4: Project schools are more safe and inclusive (CPP policy put in place; AoC training of teachers in inclusive learning environments and CPP)</b>				
	# achieved	# planned	# achieved	Number (%)
4.1 Percentage of AoC teachers with comprehensive knowledge of child abuse reporting mechanisms in school	%	80%	67%	-13%
4.2 Percentage of non-AoC teachers at intervention schools with positive attitudes towards girls' participation in class	%	68%	86%	18%
4.3 Percentage of club girls who feel equal to boys in classrooms	%	68%	82%	14%
4.4 Percentage of club girls reporting they feel safe at school	%	65%	94%	29%
4.5 Percentage of club girls able to identify a person in school that they could report abuse to	%	60%	48%	-12%

## **Annex 2: Outcomes Spreadsheet**

Click on the image below to access TfaC's latest M&E Framework:

## Annex 3: Midline Research Methodology

Midline level data was collected by external evaluation team mobilised by One South, LLC; an international development advisory firm with experience in cross-thematic impact evaluation. At the baseline level, TfaC had initially contracted another external evaluator. The change of evaluation teams occurred because the original evaluator failed to provide the necessary data to carry out a difference-in-difference methodology, including cohort tracking information for all participants and Oral Reading Fluency data for the year 1 cohort.

The baseline study was conducted between the 14<sup>th</sup> of November and the 16<sup>th</sup> of December 2013. For the midline, quantitative and qualitative data were collected between the 25<sup>th</sup> of May and 12 of June 2015, roughly corresponding to the midpoint of the project lifetime. The data was gathered for all schools of the Year 1 cohort in the districts of Salima, Nkhotakota, Chikwawa, Dedza and Lilongwe Rural (West and East).

Research Tools are outlined in table A2 below:

**Table A2. Research Tools and Modules of the Midline Study by Target Group**

Target Group	Research Tool	Research Modules
Marginalized Girls	Early Grade Reading Assessment (EGRA) – Chichewa Version 2011	<ul style="list-style-type: none"> <li>• Letter Name Knowledge</li> <li>• Initial Sound Awareness</li> <li>• Letter Sound Knowledge</li> <li>• Syllable Reading Fluency</li> <li>• Familiar Word Fluency</li> <li>• Unfamiliar non-word fluency</li> <li>• Oral Reading Fluency</li> <li>• Oral Reading Comprehension</li> <li>• Listening Comprehension</li> </ul>
	Early Grade Mathematics Assessment (EGMA) – Chichewa Version 2010	<ul style="list-style-type: none"> <li>• Oral Counting</li> <li>• Rational Counting</li> <li>• Number Recognition</li> <li>• Quantity Discrimination</li> <li>• Pattern Completion</li> <li>• Word Problems</li> <li>• Addition Questions (Level 1)</li> <li>• Addition Questions (Level 2)</li> <li>• Subtraction Questions (Level 1)</li> <li>• Subtraction Questions (Level 2)</li> </ul>
	Semi-structured Questionnaire for Girls	<ul style="list-style-type: none"> <li>• Cohort Tracking Information</li> <li>• Schooling</li> <li>• Reasons for stopping school or re-enrolling school</li> <li>• Caregiver Type</li> <li>• Project Exposure</li> <li>• Life Aspirations</li> <li>• Religiosity</li> <li>• Child Work and Child Labour</li> <li>• School Belonging</li> <li>• Academic Self-efficacy</li> <li>• Reading Affinity</li> <li>• Mathematics Affinity</li> <li>• Self-esteem</li> <li>• Feeling of Safety</li> <li>• Motivation (introjected vs. external)</li> <li>• Teacher Autonomy Support</li> <li>• Parental Autonomy Support</li> <li>• Parental Monitoring</li> </ul>

		<ul style="list-style-type: none"> <li>• Health and Special Needs</li> <li>• Sexual and Reproductive Health (KAP) Indicators</li> </ul>
	School Records: Attendance in a Calendar Month (February 2015)	<ul style="list-style-type: none"> <li>• Total School Days in the Calendar Month</li> <li>• Total Days Missed in the calendar month</li> </ul>
<b>Household of Marginalized Girls</b>	Household Survey	<ul style="list-style-type: none"> <li>• Cohort Tracking Information</li> <li>• Household Composition</li> <li>• Languages Spoken</li> <li>• Occupation and Level of Education</li> <li>• Family Structure</li> <li>• Poverty and Livelihoods</li> <li>• Intervention Exposure</li> <li>• Value of Education</li> <li>• Value of Girls' Education</li> <li>• Girl's Schooling</li> <li>• School Involvement</li> <li>• Dealing with Problems in School Items (PIS items)</li> <li>• Trust, Agency and Life-Satisfaction</li> <li>• School Engagement</li> <li>• Project Exposure (Tisinthe)</li> <li>• Sexual and Reproductive Health (KAP) items</li> <li>• Experiences with Violence and Abuse</li> <li>• Consent for Girls' Assessments</li> </ul>
<b>School-level Assessments</b>	School Checklist	<ul style="list-style-type: none"> <li>• Facilities Checklist</li> <li>• Gender Sensitivity Indicators</li> <li>• Child Protection Indicators</li> <li>• Enrolment Data</li> </ul>
	Agents of Change (AoC) Questionnaire (self-administered)	<ul style="list-style-type: none"> <li>• Deployment</li> <li>• Type of Support most Needed</li> <li>• School Support for Project Activities</li> <li>• Ease of Work</li> <li>• Reaching Beneficiaries</li> <li>• Challenges instituting Child Protection Policy</li> </ul>
<b>Qualitative Assessments (various Groups)</b>	School Mapping on Safety	Identify and categorize safe and unsafe places in communities and schools by degrees of safety through a participatory mapping exercise. In a second stage, each spaced is discussed separately to further an understanding of the underlying concept of 'safe' and 'unsafe' places for children and girls specifically.
	Focus Group Guides	A variety of FGD guides have been developed to engage girls, parents and communities in various topics. These not only to test assumptions, but also to triangulate quantitative findings.

**Data Verification and Validation.** After the collection of quantitative data we performed quality checks as part of the verification and validation process. These included:

- Range checks to ensure that all variables in the data has a valid range of values.
- Skip checks to verify whether skip rules and other filtering patterns were followed correctly by data collectors.
- Consistency checks to verify that the information provided to one question is consistent with the information provided for related questions
- Typographical checks to identify typographical mistakes occurring during data entry such as digit transposition.

- Label checks to ensure scales follow the appropriate coding method.

The analyses exposed in this report were processed using the standard package of SPSS statistics v. 20.

**Construction of EGRA Composite Measure.** Based on guidance from the Fund Manager and the absence of oral reading fluency data from the Y1 Baseline, we calculated an Overall EGRA score to measure literacy. The Overall EGRA Score was calculated, therefore, by weighting scores of individual subtasks as shown in the following table.

**Table A3: Weighting for EGRA Overall Score**

Subtask	Weight
<b>Letter Naming Knowledge</b>	8.334%
<b>Initial Sound Awareness</b>	8.334%
<b>Letter Sound Knowledge</b>	8.334%
<b>Syllable Reading Fluency</b>	8.334%
<b>Familiar Word Fluency</b>	8.334%
<b>Nonsense word reading fluency</b>	8.334%
<b>Oral Reading Comprehension</b>	40%
<b>Listening Comprehension</b>	10%

**Benchmarking.** Log-frame indicators and targets for Tiphunzire were set by Theatre for a Change after a thorough analysis and review of the perceived needs of communities and target beneficiaries.

In order to meet the research needs of the log-frame, we designed a number of quantitative measures to feed into the log-frame's outcomes. After the document and literature review and internal consistency analysis, this study selected the following indicators per log-frame benchmark:

**Table A5. Outcome Indicator and Proposed Measurements**

Outcomes	Logframe Output Indicator	Source
<b>Output 1: Agents of Change run inclusive workshops (AoC training; Girls' Clubs; Listening Clubs; Holiday Clubs).</b>	1.1 Percentage of AoCs who demonstrate ability to teach literacy, numeracy and life skills in participatory and interactive ways	Monitoring Data
	1.2 Percentage of AoC with correct basic sexual and reproductive health (SRH) knowledge	Monitoring Data
	1.3 Percentage of AoC with knowledge of girls' gender and sexual and reproductive health rights	Monitoring Data
	1.4 Percentage attendance at AoC Girls' Clubs/ Holiday Clubs	Monitoring Data
	1.5 Percentage of girls who show improved self-confidence and self-efficacy (improved by at least 10% on previous score)	Percentage proportion of girls who scored $\geq 4.00$ in a composite scale made from the Rosenberg Self Esteem Scale and Academic Self-efficacy items.
<b>Output 2: Marginalised girls increase participation in co-educational environments (Girls' Clubs; Listening Clubs;</b>	2.1 Percentage of club girls with awareness of their gender, sexual and reproductive health rights	Percentage proportion of girls who scored who are able to say no unwanted sex or use contraception if sexually active.

<b>Holiday Clubs).</b>	2.2 Percentage of club girls who believe they have the power to make decision in their own lives	Percentage proportion of girls who scored $\geq 4.00$ for the item "I have the power to make decisions for myself"
	2.3 Percentage of club girls demonstrating the ability to confidently interact with boys in coed learning environments	Percentage proportion of girls who feel they can participate in class in coed schools.
	2.4 Percentage of club girls able to attend school during menstruation	Percentage proportion of girls who have begun menstruating and feel that menstruation does not represent a problem when attending to school.
	2.5 Percentage of club girls who report that they enjoy school	Percentage proportion of girls who scored $\geq 4.00$ for the School Belonging Scale.
<b>Output 3: Parents actively support girls' education (Community mobilisation and sensitisation; Open Days; Community Listening Clubs; AoC/ team home visits).</b>	3.1 Percentage of girls' club parents/ guardians who feel that it is equally valuable to invest in a daughter's education than a son's when funds are limited	Percentage proportion of guardians who scored $\geq 4.00$ in a composite scale made from Items Q64, Q65 and Q68 of the HHS.
	3.2 Percentage of Listening Clubs attended by at least 30 community members every month	Monitoring Data
	3.3 Percentage of girls' club parents / guardians with knowledge of girls' gender and sexual and reproductive health rights	Percentage proportion of guardians who scored $\geq 4.00$ in a composite scale made from Items Q129-Q135 of the HHS.
	3.4 Percentage of girls' club parents/guardians who feel that their daughter is as likely as their son to make use of her education after school	Percentage proportion of guardians who scored $\geq 4.00$ in a composite scale made from Items Q66, Q67, Q68 and Q69 of the HHS.
<b>Output 4: Project schools are more safe and inclusive (CPP policy put in place; AoC training of teachers in inclusive learning environments and CPP)</b>	4.1 Percentage of AoC teachers with comprehensive knowledge of child abuse reporting mechanisms in school	Monitoring Data
	4.2 Percentage of non-AoC teachers at intervention schools with positive attitudes towards girls' participation in class	Percentage proportion of girls who scored teachers $\geq 4.00$ for "teachers at this school treat students fairly" and "teachers at this school treat girls fairly".
	4.3 Percentage of club girls who feel equal to boys in classrooms	Percentage proportion of girls who scored $\geq 4.00$ for equal participation items.
	4.4 Percentage of club girls reporting they feel safe at school	Percentage proportion of girls who scored teachers $\geq 4.00$ for school safety items (at school, on the way to school and on the way back from school).
	4.5 Percentage of club girls able to identify a person in school that they	Percentage proportion of girls who know they can report child abuse

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could report abuse to

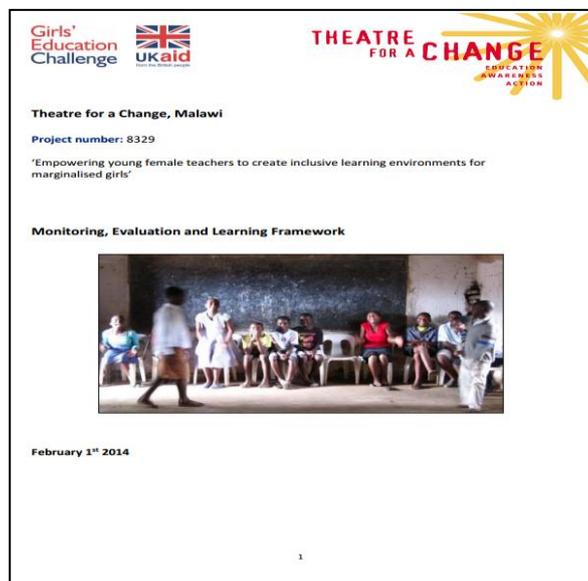
concerns and identified the teacher as  
point of reference.

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## Annex 4: M&E Framework

Click on the image below to access TfaC's latest M&E Framework:



## Annex 5: Summary of Quantitative Data

		Parameters - Results	Source	Notes
Sample size requirements	1	Significance level (alpha)	M&E Framework / Outcomes SS	0.05 (two-sided)
	2	Power (1 - beta)	M&E Framework / Outcomes SS	0.8
	3	Minimum detectable effect	M&E Framework / Outcomes SS	0.1994609
	4	Clustering applied	M&E Framework	No
	5	Assumed Intra-Cluster Correlation	M&E Framework	N/A
	6	Allocation ratio (between treatment and control group)	M&E Framework	1:1
	7	Minimum required sample size	M&E Framework	624
	8	Attrition buffer	M&E Framework	49%
	9	Sample size (total)	M&E Framework / Outcomes SS	942
	10	Sample size in treatment group	M&E Framework / Outcomes SS	471
	11	Sample size in control group	M&E Framework / Outcomes SS	471
	12	Sampling clusters	M&E Framework	Treatment Status, School, Enrolment Status, Standard at Assessment
	13	Number of sampling clusters	M&E Framework / Outcomes SS	4
	14	Number of sampling clusters in treatment group	M&E Framework / Outcomes SS	2
	15	Number of sampling clusters in control group	M&E Framework / Outcomes SS	2
	16	Number of girls per sampling cluster	M&E Framework / Outcomes SS	284 (in-school); (187 out-of-school)
Sample size ex-post	17	Sample size ex-post (total)	Dataset	827
	18	Sample size ex-post in treatment group	Dataset	452
	19	Sample size ex-post in control group	Dataset	375
	20	Number of sampling clusters ex-post	Dataset / Outcomes SS	4
	21	Number of girls who are substitution girls	Dataset	0
Target	22	Standard deviation of all scores at baseline	Dataset	Treatment Group Mean at Baseline (SD): EGRA (12.06); EGMA (20.47); Att. (41.12) Control Group Mean at Baseline (SD): EGRA (11.32); EGMA (17.19); Att. (39.89)
	23	Standard deviation of score changes for intervention group	Dataset / Outcomes SS	N/A (cross-sectional approach followed)
	24	Standard deviation of score changes for control group	Dataset / Outcomes SS	N/A (cross-sectional approach followed)
	25	Target	Outcomes spreadsheet	TBC (as consulted with FM due to lack of suitable baseline data for the calculation of benchmark targets)
Results	26	Achievement (beta)	Outcomes spreadsheet	5.1 pts (EGRA)
	27	Achievement in SD terms	Dataset	Lit.: 0 (Grade 6); 0 (Grade 7) Num.: 0 (Grade 6); 0 (Grade 7)
	28	Result	Outcomes spreadsheet	N/A
	29	p-value of simple OLS	statistical software	EGRA (p=0.001)
	30	p-value of simple OLS with clustered errors	statistical software	N/A
	31	p-value of OLS with additional controls and clustered errors	statistical software	N/A

## Annex 6: Independent Evaluator Declaration

**Name of Project:** The Tiphunzire Project

**Name of Independent Evaluator:** One South, LLC.

**Contact Information for Independent Evaluator:** One South, LLC. 1521 Concord Pike, #301, Wilmington, DE 19803, USA (+1 703 584 4081; [anavarrete@one-south.org](mailto:anavarrete@one-south.org) or [tambrose@one-south.org](mailto:tambrose@one-south.org))

**Names of all members of the evaluation team:**

- Andres Navarrete Berges, MSc.
- Tariq Tobias Omarshah, MSc.
- Dr. Marieke van Egmond

**Andres Navarrete Berges** hereby affirms that One South, LLC has no previous affiliation or relationship with the Tiphunzire Project (Theatre for a Change), Girls' Education Challenge Fund, PwC, Coffey, DFID or the stakeholders interviewed as a part of this evaluation.

**Andres Navarrete Berges** certifies that the independent evaluation has been conducted in line with the Terms of Reference and other requirements received.

Specifically:

- All of the quantitative data was collected independently (Initials: ANB)
- All data analysis was conducted independently and provides a fair and consistent representation of progress (Initials: ANB)
- Data quality assurance and verification mechanisms agreed in the terms of reference with the project have been soundly followed
- The recipient has not fundamentally altered or misrepresented the nature of the analysis originally provided by One South LLC (Initials: ANB)
- All Evaluation Manager (EM) guidance on data cleaning has been followed (Initials: ANB)
- All data has been uploaded to the EM's SharePoint system in the instructed shape and format (Initials: ANB)
- All child protection protocols and guidance have been followed (initials: ANB)
- Data has been anonymised, treated confidentially and stored safely, in line with the GEC data protection and ethics protocols (Initials: ANB)

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Andres Navarrete Berges

One South LLC

August 31<sup>st</sup>, 2015

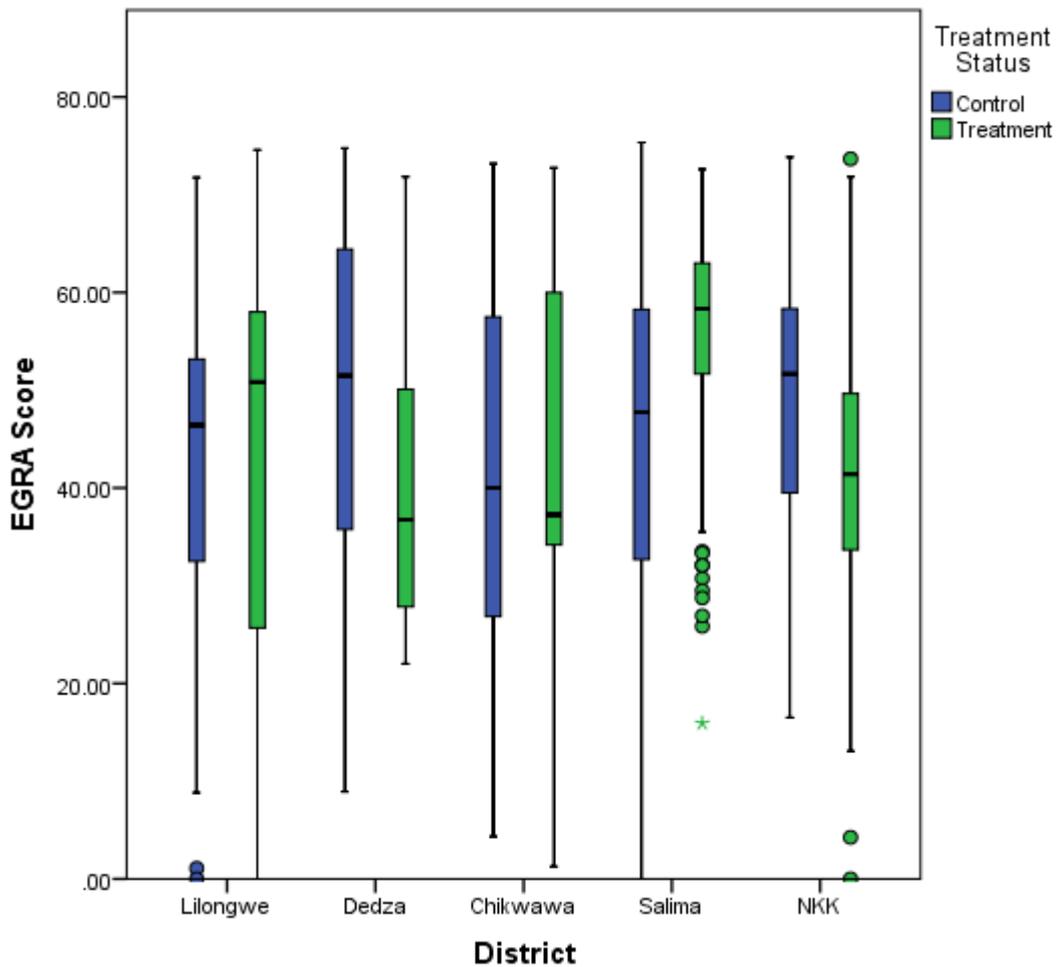
## Annex 7: Additional Figures and Tables- Impact

The following to figures aim to compare multi-level differences according to district and treatment status. The box plots below show the median scores for EGRA (Fig. A1) and EGMA (Fig. A2) (dark line in the centre of the boxplot), as compares them across treatment and control schools.

For literacy, it is possible to see that control schools outperformed treatment schools in Chikwawa, Nkhotakhota, and Dedza and at significant levels in Dedza and Chikwawa. For EGMA, the same occurs for Nkhotakhota and Dedza, also at significant levels.

Using midline data, TfaC addresses these differences through targeted monitoring in schools from these districts and tailored programming.

**Figure A1. EGRA Results by District at Midline (Treatment and Control)**



**Table A6: Summary EGRA Result Baseline vs. Midline**

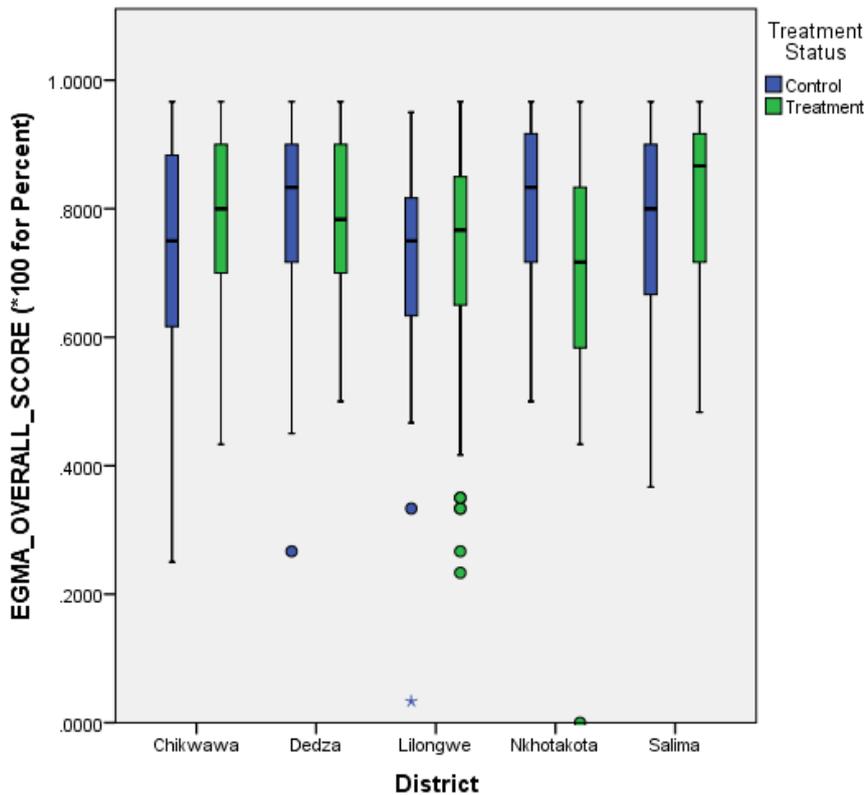
EGRA Subtask	Cohort Standard	Mean Score	Statistically significant difference on independent samples t-test?
Letter Naming Knowledge	5 (Baseline)	29.1	Yes (p < 0.001)
	6 (Midline)	47.74	
Letter Naming Knowledge	6 (Baseline)	34.03	Yes (p < 0.001)
	7 (Midline)	50.51	

<b>EGRA Subtask</b>	<b>Cohort Standard</b>	<b>Mean Score</b>	<b>Statistically significant difference on independent samples t-test?</b>
<b>Initial Sound Awareness</b>	5 (Baseline)	6.3	Yes (p < 0.001)
	6 (Midline)	7.89	
	6 (Baseline)	7.04	Yes (p < 0.001)
	7 (Midline)	8.19	
<b>Letter Sound Knowledge</b>	5 (Baseline)	7.2	No
	6 (Midline)	7.5	
	6 (Baseline)	7.27	Yes (p = 0.04)
	7 (Midline)	7.90	
<b>Syllable Reading Fluency</b>	5 (Baseline)	38.57	No
	6 (Midline)	48.94	
	6 (Baseline)	43.04	Yes (p = 0.01)
	7 (Midline)	52.48	
<b>Familiar Word Fluency</b>	5 (Baseline)	17.38	Yes (p < 0.005)
	6 (Midline)	33.48	
	6 (Baseline)	19.68	Yes (p < 0.005)
	7 (Midline)	34.62	
<b>Nonsense word reading fluency</b>	5 (Baseline)	14.27	Yes (p < 0.005)
	6 (Midline)	24.46	
	6 (Baseline)	17.45	Yes (p < 0.005)
	7 (Midline)	27.59	
<b>Oral Reading Fluency</b>	5 (Baseline)	N/A	N/A
	6 (Midline)	40.36	
	6 (Baseline)	N/A	N/A
	7 (Midline)	41.54	
<b>Oral Reading Comprehension</b>	5 (Baseline)	53.9%	Yes (p < 0.005)
	6 (Midline)	72.82%	
	6 (Baseline)	53.80%	Yes (p < 0.005)
	7 (Midline)	77.92%	
<b>Listening Comprehension</b>	5 (Baseline)	61%	Yes (p < 0.005)
	6 (Midline)	79.91%	
	6 (Baseline)	65.42%	Yes (p < 0.005)
	7 (Midline)	82.34%	

### Numeracy

For numeracy, it is possible to see that control schools outperformed treatment schools in Nkhotakhota and Dedza at significant levels.

**Figure A2: EGMA Overall Score by District at Midline**



## **Annex 8 - Evaluation History**

The first baseline for Tiphunzire was conducted in December 2013 by the original external evaluators. Due to concerns raised by TfaC regarding the quality of the work, particularly at the reporting stage the relationship between TfaC and the external evaluators broke down.

Due to this the original data that was collected was withheld from TfaC and when it was eventually sent (the paperwork to TfaC Ghana and the electronic data to TfaC Malawi) there were a lot of mistakes in the coded data which were missing unique codes for the participants in the study.

The external evaluator has since failed to respond to any request from TfaC regarding the data quality and coding. Therefore TfaC were not able to recover the unique Ids of girls which has meant that at midline our new external evaluator has had to change strategy from the planned difference in difference technique because they were not able to track individual girls. They will now use a more cohort based approach, which analyses results of the groups as a whole at baseline and at midline.

Fortunately, due to the project scale up TfaC and the new external evaluator conducted an additional baseline in 2014 which means that we will have full tracking going towards the endline in June 2016 and we could therefore follow the original strategy of analysis between midline and endline.