

Malawi Violence Against Women and Girls Prevention and Response Programme

COVID-19 Advocacy Strategy

Implementation Year 1: 1st May 2019-31st May 2020

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Executive Summary

The Tithetse Nkhanza (TN) Programme has developed and adopted an Advocacy Strategy for the Covid-19 pandemic period. The Advocacy Strategy aims to specify what TN wants to achieve through advocacy during the Covid-19 pandemic and how this will be done, including broad goals and detailed objectives and strategies. The strategy will guide TN's work to ensure that TN and its partners and stakeholders are more intentional, strategic and result-oriented with respect to the integration of Violence Against Women and Girls (VAWG) in the broader national response to Covid-19 interventions, as well influencing policy decisions on VAWG prevention and response by key duty bearers during the Covid-19 pandemic immediately and after.

The strategy targets relevant government ministries and members of different committees set up by government for the Covid-19 response. The strategy also targets the judiciary. It will be used for the duration of the Covid-19 pandemic and viewed as a living document and updated based on changed global and local trends.

The Advocacy Strategy has been written through the collaborative effort of all TN staff and has primarily been drawn from TN's main advocacy strategy (in progress) which was drawn from an all-inclusive-stakeholder consultative process. With the onset of the Covid-19 pandemic, TN's advocacy efforts have had to shift to respond to the rapidly changing context.

The development of the strategy has included a strong focus on TN's comparative advantages with respect to unparalleled skills, access and technical expertise on VAWG, particularly TN's strong focus on adaptation and learning informed by a careful analysis of the operating environment through regular gender and inclusion and political economy analysis.

The strategy seeks to inform TN's work of influencing for inclusion/integration of VAWG in the Covid-19 response at all critical levels, leveraging the influence of all key stakeholders, and building opportunities for collaboration with stakeholders through advocacy.

Under the overarching goal of maintaining VAWG prevention and response on the political agenda (action and funding) through the political shifts of Covid-19, and seizing opportunities where possible to advance TN's programme agenda, the strategy focuses on five Objectives:

1. **GBV services are designated essential** during Covid-19 and adequately funded.
2. **Equal representation of women in decision making** in the outbreak preparedness and response at national and local levels creates space for action on VAWG and related gender issues.
3. **Protection measures remain available and accessible** (e.g. protection orders and ensuring compliance with protection orders) with appropriate practice directions in place and clear disability social inclusion plans.
4. **GBV response is integrated into the public health response; and local and national support systems for women and girl survivors of violence are strengthened** to be responsive in the context of the national Covid-19 emergency.
5. **VAWG prevention remains on the agenda** in the national and local Covid-19 preparedness and response plans.

In addition to providing a useful overview of the context in which TN is working and the VAWG prevention and response work that is being carried out during the pandemic, the advocacy strategy serves as a concrete roadmap to achieving TN's overall goal, outputs and outcomes. It outlines our key advocacy objectives during the Covid-19 pandemic and highlights examples of the specific activities that TN will undertake to achieve the objectives.

Given the rapidly changing context, in relation both to the Covid-19 outbreak and the political situation in Malawi, the Tithetse Nkhanza Covid-19 advocacy strategy will be reviewed and adapted as necessary on a monthly basis.

1. Background

1.1. Introduction to The Tithetse Nkhanza Programme

The Tithetse Nkhanza programme is funded by the UK Department for International Development (DFID) and delivered by a consortium of Coffey, Social Development Direct and Plan International. The programme runs from November 2018 to January 2025, split into an initial inception period (November 2018-April 2019), and then a two-phase implementation period. The first phase of implementation (from May 2019-November 2021) will see the programme test intervention pilots for potential scale-up in Phase two.

The programme's objective is to reduce the prevalence of violence against women and girls and improve the justice system for women and girls living with violence in Malawi. It will do this by achieving the following outputs:

- Output 1: Formal and informal justice services have capacity and knowledge to handle VAWG cases in line with protocols and laws.
- Output 2: Men and women duty bearers have the knowledge, skills and attitudes to prevent and respond to VAWG.
- Output 3: Local level mechanisms in place in target areas to support VAWG survivors to access justice and related support services.
- Output 4: Men and women, boys and girls have the knowledge, skills and attitudes to prevent and respond to VAWG.

The programme will work at the national level in Malawi, and at the district level, initially in three locations: Lilongwe, Karonga and Mangochi. Based on learnings in phase one, the programme will likely scale up to other districts and areas in phase two.

Prevalence of VAWG has been high and persistent in Malawi. For instance, according to the MDHS of 2016, 38 percent of ever-partnered women aged 15-49 years experienced intimate partner physical and/or sexual violence at least once in their lifetime. The programme realises that VAWG contravenes women and girls' rights and undermines the country's development with increasing national and international evidence of the costs of GBV at individual, family, community and national levels. The economic costs of VAWG include the reduced economic earning power of women and girls and increased costs of providing services for survivors of violence. The impediments of changing the situation remain many and these include various critical policy issues on VAWG both from the prevention and the response components. These need to be addressed using critical mass around influencing and advocacy. Furthermore, there is need to strengthen alliance building and collaboration to capitalise on synergies in responding to priority VAWG issues for advocacy in Malawi.

It is against this background that the programme, under its national engagement interventions, proposed the development of its own advocacy strategy to guide actions around championing key critical issues around prevention and response to VAWG. It will also, among others, contribute to strengthening network and alliance building in order to achieve synergies with other like-minded institutions with the aim of achieving strategic objectives through the optimal use of resources.

With the arrival of the Covid-19 pandemic, the programme's advocacy efforts have had to shift to respond to the changing context. This strategy document is intended to provide guidance on the efforts that will be made by Tithetse Nkhanza in influencing and advocacy around VAWG issues in Malawi during and immediately after the Covid-19 pandemic. It will target relevant government ministries and members of different committees set up by government for the Covid-19

response, as well as the judiciary. It will be used for the duration of the Covid-19 pandemic and viewed as a living document and updated monthly based on changed global and local trends.

1.2. Situation analysis: Covid-19 and the impact on women and girls in Malawi

On 20th March 2020, the government of Malawi declared a national emergency in response to the Covid-19 pandemic. Experience from past public health emergencies, and emerging evidence from the Covid-19 outbreak in China and Europe, shows that the Covid-19 pandemic is likely to have a significant impact on VAWG and on the health, wellbeing and status of women and girls more broadly, which is sustained beyond the duration of the outbreak.¹

A Covid-19 outbreak in Malawi brings increased risk of domestic violence, while barriers to accessing support also rise. Children will face particular protection risks, including being separated from their caregivers. An outbreak will exacerbate known drivers of intimate partner violence and domestic violence such as increased stress at the household level, and social distancing or self-isolation makes it harder for women and girls to access support. Evidence from elsewhere suggests women and girls with disabilities are likely to face a double impact; firstly, they may be at higher risk of contracting Covid-19 and experiencing poorer health outcomes as a result, whilst they are also at greater risk of experiencing violence, both at home and in healthcare settings.

Just as there is expected to be an increase in GBV as a result of Covid-19, there is a risk that safeguarding incidents – violence, abuse, exploitation and harassment against both children and adults perpetrated by staff, contractors and volunteers working on the Covid-19 response and existing programmes – may increase. This is due to the increased vulnerability of women and girls as a result of the changing context, changing modalities for programme delivery, and an increase in emergency programming.

Economic shocks as a result of Covid-19 will also put vulnerable women and girls at increased risk of abuse and exploitation as public health emergencies can have a tremendous, sustained impact on livelihoods. This is especially true for women and girls who are most marginalised due to disabilities, women or child-headed households, and sex workers. Increased deprivation can leave vulnerable women and girls exposed to exploitation and abuse, including by duty bearers, especially where security and justice services have an increased role in society during the context of an emergency. Child marriage may also rise as a coping mechanism.

Responding to an epidemic can divert resources away from GBV and SRHR services, if these are seen as ‘non-essential’, leading to increased morbidity and mortality from GBV and, for example, rising maternal mortality rates. In addition, social norms that put a heavy caregiving burden on women and girls are likely to cause their physical and mental health to suffer and impede their access to education, livelihoods, and other critical support.

There is increased risk of workplace violence in the health sector due to the serious stress that a pandemic places on patients, their relatives and other healthcare workers. There is not yet data on the gendered nature of violence in Covid-19, but research before the epidemic found that most violence is targeted at female nurses in emergency departments with long waiting times, in isolated places at patients’ homes, or in geriatric or psychiatric departments. There is a risk that frontline staff working on GBV prevention and response might face violence.

1.3. Political context

The Malawi government developed a Covid-19 National Preparedness and Response Plan and has continued to implement a combination of both containment and delay strategies. The High Court of Malawi sustained an injunction that was granted to the Human Rights Defenders Coalition and partners over a 21-day lockdown that was to commence on Saturday 18th April 2020, as ordered by the Government. The injunction was, among others, granted on the basis that the Government of Malawi had not put in place necessary measures to cushion the most vulnerable groups during the lockdown.

¹ Tithetse Nkhanza covid-19 policy position paper
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The measures the government has put in place include closure of schools and universities, restrictions of public gatherings, rules on social distancing, quarantine measures of all persons with confirmed positive tests, tracing of exposed persons, hand washing measures, limiting use of public transport and implementation of remote working policies. Most importantly the President of Malawi constituted a Special Cabinet Committee to be the highest structure for coordination and oversight of the national response to Covid-19. On 28th April 2020, the Cabinet Committee on Covid-19 was reconstituted into the Presidential Taskforce on Covid-19, with more members co-opted into the structure. This was to make it more inclusive and for the committee to enjoy a wider public support and garner more buy-in from people for compliance of the committee's directions, including precautionary measures. An emergency cash transfer programme for one million people and small business was also launched on the same day.

However, these efforts of containing the spread of Covid-19 have been hampered by many factors including: widespread national strikes by frontline workers demanding for provisions of personal protective equipment and risk allowances in all facilities; the injunction against the lockdown and political campaigns ahead of fresh presidential elections that did not pay due regard to required social distancing practices. On 27th June 2020, Malawi elected a new president. This change of leadership may lead to some potential shifts and opportunities as well as the need to revisit the advocacy strategy.

2. Goal and Objectives of the Advocacy Strategy

Goal: Maintaining VAWG prevention and response on the political agenda (action and funding) through the political shifts of Covid-19, and seizing opportunities where possible to advance TN's programme agenda.

Advocacy objectives:

- 1. GBV services are designated essential** during Covid-19 and adequately funded.
- 2. Equal representation of women in decision making** in the outbreak preparedness and response at national and local levels creates space for action on VAWG and related gender issues.
- 3. Protection measures remain available and accessible** (e.g. protection orders and ensuring compliance with protection orders) with appropriate practice directions in place and clear disability social inclusion plans.
- 4. GBV response is integrated into the public health response; and local and national support systems for women and girl survivors of violence are strengthened** to be responsive in the context of the national Covid-19 emergency.
- 5. VAWG prevention remains on the agenda** in the national and local Covid-19 preparedness and response plans.

3. Operational Framework of the Advocacy Strategy

This section provides an overview of the strategies that will be employed to reach these advocacy objectives.

3.1. Designation of GBV services for women and girls as essential

Objective

In the context of the public health response, Presidential Taskforce on Covid-19 should **designate GBV services for women and girls as essential and ensure adequate funding**. This involves ensuring GBV services are understood as lifesaving. This would ensure that, in the event of a lockdown, GBV workers would be considered key workers and would be able to continue working, and that women and girls would be allowed to leave their homes to seek help.

Why is our objective not already in place?

Due to ongoing social norms that devalue women and girls, and that accept GBV, there is insignificant political pressure on the Presidential Taskforce to classify the provision of critical support services for GBV survivors as 'essential services'. Additionally, there is a trend towards instrumentalising women's rights through broader strategic objectives (i.e. "gender equality is a smart business strategy") which dilutes the intrinsic value of defending women's rights, bodies, and voices.² This has led to GBV being treated as an after-thought and not given the stand-alone attention that it deserves, which further results in de-prioritising GBV services for funding.

Strategy

Table 1 gives an easy-reference overview of the strategy to reach this objective. Further details are provided below.

Table 1: Overview of Objective 1 Strategy

Target	Power holder/ ally/ opponent	Approach to apply	Key message
Presidential Taskforce	Powerholder	Lobbying – public and private calls for action	Women and girls are at increased risk of experiencing gender-based violence during Covid-19 and will experience greater barriers to accessing support. GBV services during this time will be lifesaving. The Presidential Taskforce must therefore designate GBV services for women and girls as essential services and allocate adequate funding to service providers. The Presidential Taskforce should further clearly instruct local and national officials enforcing the lockdown that women and girls who have experienced or are at risk of violence are free to move to seek safety and support.
Minister of Gender, Child Development and Community Development	Ally	Lobbying – public and private calls for action	Women and girls are at increased risk of experiencing gender-based violence during Covid-19 and will experience greater barriers to accessing support. GBV services during this time will be lifesaving. The Minister of Gender, Child Development and Community Development is a leader for women at risk of violence. The Minister

² Violence against Women and Girls. A Primer for African Women's Organisations

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			should use influence with the Presidential Taskforce to ensure that women and girls who have experienced or are at risk of violence, are free to move to seek safety and support in the event of a lockdown. The Minister of Gender should further ensure that GBV specialists are able to continue to work through all stages of the pandemic, and that GBV services are adequately funded.
Protection Cluster members GBV sub-cluster	Ally	Collaboration	Women and girls are at increased risk of experiencing gender-based violence during Covid-19 and will experience greater barriers to accessing support. The Protection Cluster must coordinate to allocate resources effectively and efficiently for the delivery of GBV services for women and girls, and must collaborate in advocacy efforts to influence the Presidential Taskforce to designate GBV services as essential, that they are provided adequate funding, and that women and girls who have experienced or are at risk from violence should be free to move to seek safety and support in the event of a lockdown .
DODMA	Ally	Collaboration and private and public lobbying	Women and girls are at increased risk of experiencing gender-based violence during Covid-19 and will experience greater barriers to accessing support. GBV services during this time will be lifesaving. DODMA must use its influence with the Presidential Taskforce to designate GBV services for women and girls as essential, ensure they are adequately funded, and promote that women and girls who have experienced or are at risk from violence should be free to move to seek safety and support in the event of a lockdown.
Ministry of Health	Ally	Collaboration and private and public lobbying	Women and girls are at increased risk of experiencing gender-based violence during Covid-19 and will experience greater barriers to accessing support. GBV services during this time will be lifesaving. The Ministry of Health must use its influence with the Presidential Taskforce to designate GBV services for women and girls as essential, ensure they are provided adequate funding throughout the Covid-19 response, and advocate that women and girls who have experienced or are at risk from violence should be free to move to seek support in the event of a lockdown. The Ministry of Health should also collaborate with the Ministry of Gender in ensuring that GBV services are consistently available to women and girls during a potential lockdown.

Target power holders and approaches to apply:

It is within the mandate of the **Presidential Taskforce** to set policy regarding the Covid-19 response. The Presidential Taskforce on Covid-19 therefore has ultimate power to classify support services for women and girl survivors of GBV as essential.

Due to the numerous issues under the consideration of the Presidential Taskforce, and given that GBV against women and girls is not a priority amongst voters generally, the Presidential Taskforce will fail to prioritise support services for women and girl survivors of GBV unless it is made politically beneficial for them to do so. TN will therefore undertake direct **public and private lobbying** of the taskforce, calling attention to the evidence base that demonstrates that there is likely to be increasing incidences of GBV against women and girls in the event of a lockdown.

Allies and approaches to apply:

Minister of Gender | The Minister of Gender has not only demonstrated a personal affiliation to reducing the prevalence of, and improving support to survivors of, GBV against women and girls, it is also within the mandate of her ministry. As such it is politically beneficial for her to publicly address this issue. The Minister of Gender has become a close ally of the Tithetse Nkhanza programme.

Through **private and public lobbying** of the Minister, Tithetse Nkhanza, through the Team Leader, will call attention to the evidence base that demonstrates that there is likely to be increasing incidences of GBV against women and girls in the event of a lockdown.

Protection Cluster members | The mandate of the Protection Cluster is to coordinate and direct work being undertaken by numerous agencies on social protection issues, including those related to GBV against women and girls. The Protection Cluster is co-led by the Ministry of Gender and UNICEF and comprises institutions such as national and international NGOs and agencies, state institutions such as the Malawi Police Service, UN agencies, and donor agencies.

Tithetse Nkhanza, in **collaboration** with other members, will use its technical expertise in GBV response to develop and share evidence on how Covid-19 puts women and girls at more risk of violence. It will draw on how other countries are responding to ensure that GBV response is designated as essential. TN will also influence members in using global best practices on GBV response during this emergency. In collaboration with other cluster members TN will influence the adoption of various GBV protocols for the different institutions and the development and mainstreaming of the Rapid Gender Analysis report.

DODMA | The Department of Disaster Management Affairs is the Government of Malawi's agency responsible for coordinating and directing the implementation of disaster risk management programmes in order to improve and safeguard the quality of life of Malawians, especially those vulnerable to and affected by disasters. DODMA is the secretariat for the top-level committee of disaster management, which is chaired by chief secretary and includes Principal Secretaries of various ministries. DODMA has the mandate of declaring which services are essential during times of emergencies. With the onset of Covid-19, Tithetse Nkhanza has had to forge new partnerships with government institutions and other organisations that the programme would not directly work with ordinarily, and DODMA is one of them.

Through **private and public lobbying and collaboration**, Tithetse Nkhanza will initiate strategic engagement with DODMA to influence the designation of GBV services as essential and the development and inclusion of safeguarding and social inclusion measures in the national covid-19 response plans and government institutions.

Ministry of Health | This is the ministry with the mandate of leading the response to Covid-19 and the prevention of further infections. The ministry also has the mandate to determine what restrictions should be put in place. With the onset of Covid-19, Tithetse Nkhanza has had to forge new partnerships with government institutions and other organisations that the programme would not directly work with ordinarily, and this ministry is one of them.

TN will **privately and publicly lobby** the ministry to ensure that GBV services are treated as essential and that key messages issued by the ministry to communities include GBV messages. TN will also influence the use of the different protocols on handling GBV.

3.2. Women in decision-making roles

Objective

Equal representation of women in decision making in the outbreak preparedness and response at national and local levels, and dedicated time to discuss the impact of the outbreak on women and girls, creates space for action on VAWG and related gender issues.

Why is our objective not already in place?

Despite the provisions in the Gender Equality Act that calls for at least 60:40 representation of women in decision making positions, appointments made by the President over the years in decision making spaces have not taken these provisions into account. Historically, women have been side-lined in decision making positions because of the entrenched system of patriarchy. The women’s movement has been advocating for this to change and this objective adds to those efforts.

Strategy

Table 2 gives an easy-reference overview of the strategy to reach this objective. Further details are provided below.

Table 2: Overview of Objective 2 Strategy

Target	Power holder/ ally/ opponent	Approach to apply	Key message
President	Powerholder	Persuasion	The Gender Equality Act calls for at least 60:40 representation of women in decision making positions. Women’s voices in key spaces leading the Covid-19 response will be vital to ensure that women’s issues, including gender-based violence, are given due recognition. As a #heforshe Champion, the President should ensure that the key committees leading the Covid-19 response include 50% women representatives, and there is dedicated, scheduled time within these committees to review the specific impact on women and girls throughout the response.
OPC	Ally	Lobbying	The Gender Equality Act calls for at least 60:40 representation of women in decision making positions. Women’s voices in key spaces leading the Covid-19 response will be vital to ensure that women’s issues, including gender-based violence, are given due recognition. Use influence with the President to advise that key committees leading the Covid-19 response include 50% women representatives and there is dedicated, scheduled time within these committees to review the specific impact on women and girls throughout the response.

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DODMA	Ally	collaboration	The Gender Equality Act calls for at least 60:40 representation of women in decision making positions. Women’s voices in key spaces leading the Covid-19 response will be vital to ensure that women’s issues, including gender-based violence, are given due recognition. Use influence with the President to advise that key committees leading the Covid-19 response include 50% women representatives and there is dedicated, scheduled time within these committees to review the specific impact on women and girls throughout the response.
Protection cluster members	Ally	Collaboration	The Gender Equality Act calls for at least 60:40 representation of women in decision making positions. Women’s voices in key spaces leading the Covid-19 response will be vital to ensure that women’s issues, including gender-based violence, are given due recognition. Collaboratively advocate that the President should ensure key committees leading the Covid-19 response include 50% women representatives and there is dedicated, scheduled time within these committees to review the specific impact on women and girls throughout the response.

Target power holders:

The President | The President is constitutionally mandated to appoint persons in high level offices that are affiliated to Government, such as the Presidential Taskforce as the highest steering structure for the National Covid-19 response. The president is a #HeForShe Champion and has the opportunity to demonstrate this role by ensuring equal representation of women in leadership at the highest levels, and through time dedicated to discussing the impact of the epidemic on women and girls in the highest decision-making spaces.

Tithetse Nkhanza will **privately lobby** the President, and his close allies, to encourage him to building 50% representation for women into these key committees.

Allies:

OPC | The Office of the President and Cabinet ensures that communication to the President through its office is not derailed and helps follow up on requests made to the President from time to time. TN will engage this office through **private lobbying** to the President pertaining to equal representation of women in the Presidential Taskforce.

DODMA | This is an institution that is responsible for coordinating and directing the implementation of disaster risk management programmes in the country. TN will **privately lobby** DODMA to use its influence to ensure equal representation of women in steering committees at both national and district levels in the fight against the pandemic.

Protection cluster members | The Protection Cluster is co-led by the Ministry of Gender and UNICEF and comprises intuitions such as national and international NGOs and agencies, state institutions such as the Malawi Police Service, UN agencies, and donor agencies. TN will leverage the ‘strength in numbers’ aspect to **work collaboratively** with other protection cluster members to advocate for equal representation of women in all decision-making structures.

3.3. Judicial protection measures for survivors of VAWG remain available and accessible

Objective

The Judiciary should ensure protection measures remain available and accessible, (e.g., protection orders and ensuring compliance with protection orders) and that there are best practice directions in place to ensure uniformity and compliance so as to enable VAWG survivors to access courts in relation to urgent matters that focus on domestic violence and child-protection cases

Strategy

Table 3 gives an easy-reference overview of the strategy to reach this objective. Further details are provided below.

Table 3: Overview of Objective 3 Strategy

Target	Power holder/ ally/ opponent	Approach to apply	Key message
The Chief Justice	Power holder	Lobbying and persuasion	Women and girls are at increased risk of experiencing gender-based violence during Covid-19 and will experience greater barriers to accessing support. Emergency protection measures could be lifesaving during the Covid-19 outbreak and must remain accessible at the court for women and girls facing different forms of violence. Cases involving the safety, protection and well-being of children and women facing violence must be prioritised during the pandemic.
Malawi Law Society	Ally	Persuasion/ lobbying/collaboration	Women and girls are at increased risk of experiencing gender-based violence during Covid-19 and will experience greater barriers to accessing support. Emergency protection measures could be lifesaving during the Covid-19 outbreak. Practice Directions submitted by the Malawi Law Society to Judiciary on 'court operations during the pandemic' must specifically provide for the prioritisation of the hearing of cases involving the safety and protection of VAWG survivors and children.
Registrar of the Supreme and high courts and the Judiciary	Ally	Collaboration	Women and girls are at increased risk of experiencing gender-based violence during Covid-19 and will experience greater barriers to accessing support. Emergency protection measures could be lifesaving during the Covid-19 outbreak. Guidelines submitted by the TN programme to the judiciary on prioritisation of VAWG cases during the pandemic should be widely circulated by the office of the Registrar to all courts across the country. The Judiciary should ensure that all courts are consistently applying the guidelines for provision of protection to VAWG survivors during the pandemic.

Target power holders and approaches to apply:

The Chief Justice | The Chief Justice is appointed by the President with the endorsement of parliament. He is the head of the judiciary and holds the legal authority over all the courts. Tithetse Nkhanza has built a good relationship with the Chief Justice, including having a Technical Legal Advisor who sits within the judiciary at the Blantyre High Court. He has already demonstrated willingness and action to work with Tithetse Nkhanza on access to justice for women and girls who experience violence.

Because of Covid-19, courts have slowed their operations and there is anecdotal evidence showing some GBV cases being turned away. Through **private lobbying and persuasion**, building on pre-existing trusted relationships, Tithetse Nkhanza will engage the office of the Chief Justice to ensure that women facing violence and child protection related cases are treated as a priority.

Allies:

Registrar of the Supreme and High Courts and the judiciary in general | The registrar oversees administration of the judiciary thus the Registrar holds operational authority of the Judiciary, including all courts and their judicial officers. Tithetse Nkhanza has been working with the judiciary through the registrar's office. The TN Technical Legal Advisor sits at the judiciary as well. Tithetse Nkhanza also works in collaboration with the Malawi judicial development department of the judiciary responsible for all donor programmes.

Leveraging the positive relationship that exists between the registrar and the programme, TN will **privately lobby** the registrar to ensure that there are enforced guidelines for the handling of GBV cases for the Malawi judiciary for the Covid-19 period. TN will also **privately lobby** for an electronic case management system that includes monitoring the progress of GBV cases in TN's target areas. Normally, TN does not procure hardware for government partners but to ensure that its ask is embraced by the judiciary, TN will procure PPE for the courts to ensure that cases are held in safe environments.

Malawi Law Society | The society is an umbrella organisation of all lawyers in Malawi and it is a membership organisation which provides legal services that foster advocacy and the rule of law. MLS is Tithetse Nkhanza's partner through the SOF and some members of the programme are part of the association.

Through **collaboration**, TN will work with the Malawi Law Society to influence the inclusion of GBV services and justice delivery within the Covid-19 practice directions.

Opponents:

Other donor funded programmes if there is no coordination of efforts. The need to meet donor targets by competing programmes can create a competitive rather than collaborative environment, thus frustrating advocacy efforts. Additionally, different donors may have different advocacy priorities that can overstretch the judiciary in terms of which groups and cases to prioritise. For instance, some donors may want to prioritise wildlife cases or other more significant priorities like cases on killings of people with albinism. Tithetse Nkhanza will continuously scan the operating environment to remain up to date on competing priorities put to the Judiciary. As these arise, Tithetse Nkhanza will seek **to collaborate** with other agencies, finding areas of intersection in objectives.

3.4. GBV response is integrated into the public health response and local and national support systems are strengthened

Objective

GBV response is integrated into the public health response and local and national support systems for women and girl survivors of violence are strengthened to be responsive during the emergency. In the event of a lockdown or any other measures that restrict movement during Covid-19, women and girls who have experienced violence can leave their house to escape abuse without being subject to any type of sanctions and limitations for breaching Covid-19 lockdown or restriction measures.

Why is our objective not already in place?

Covid-19 is an unprecedented development both at global and national levels and, as such, there were no specific Standard Operating Procedures on how survivors of VAWG would be treated in the event of lockdown or other movement restrictions. Global evidence shows that during emergencies women and girls are at increased risk because of restrictions on movement and reduced access to support services.

Strategy

Table 4 gives an easy-reference overview of the strategy to reach this objective. Further details are provided below.

Table 4: Overview of Objective 4 Strategy

Target	Power holder/ ally/ opponent	Approach to apply	Key message
Presidential Taskforce	Powerholder	Persuasion and lobbying	<p>Women and girls are at increased risk of experiencing gender-based violence during Covid-19 and will experience greater barriers to accessing support. GBV services during this time will be lifesaving. The Presidential Taskforce should integrate GBV into the public health response to Covid-19 in the following ways:</p> <ul style="list-style-type: none"> • Frontline public health workers should be trained to identify and refer GBV cases • Local GBV service providers should be provided with PPE, and SOPs for Covid-19 • Additional funding should be provided to GBV service providers, statutory and community • All public health messaging related to Covid-19 should include guidance to women and girls who have experienced or are at risk of violence on how to seek safety and support
Police	Ally	Lobbying	<p>Women and girls are at increased risk of experiencing gender-based violence during Covid-19 and will experience greater barriers to accessing support. GBV services during this time will be lifesaving. The Police should ensure that their frontline workers are trained to identify and refer GBV cases, and that any public health messaging</p>

			produced by the police include information for women and girls who have experienced or are at risk from violence on how to seek safety and support.
Community policing structures	Ally	Collaboration	Women and girls are at increased risk of experiencing gender-based violence during Covid-19 and will experience greater barriers to accessing support. GBV services during this time will be lifesaving. Community policing structures should ensure that their frontline workers are trained to identify and refer GBV cases, and that any public health messaging produced or broadcast through community police structures include information for women and girls who have experienced or are at risk from violence on how to seek safety and support.
Protection Cluster	Ally	Collaboration	<p>Women and girls are at increased risk of experiencing gender-based violence during Covid-19 and will experience greater barriers to accessing support. GBV services during this time will be lifesaving. Protection Cluster members should collaboratively advocate that the President should integrate GBV into the public health response to Covid-19 in the following ways:</p> <ul style="list-style-type: none"> • Frontline public health workers should be trained to identify and refer GBV cases • Local GBV service providers should be provided with PPE, and SOPs for Covid-19 • Additional funding should be provided to GBV service providers, statutory and community • All public health messaging related to Covid-19 should include guidance to women and girls who have experienced, or are at risk of, violence, on how to seek safety and support <p>Protection Cluster members who are producing and/or broadcasting public health messaging should include information for women and girls who have experienced, or are at risk from, violence on how to seek safety and support</p>
Community leaders	Ally	Collaboration	Women and girls are at increased risk of experiencing gender-based violence during Covid-19 and will experience greater barriers to accessing support. GBV services during this time will be lifesaving. Community leaders should seek support from Women’s Rights Organisations or local GBV service providers to refer GBV cases.

Target power holders and approaches to apply:

Presidential Task Force | The taskforce has the mandate to set policy regarding the Covid-19 response. The Presidential Taskforce on Covid-19 therefore has ultimate power to classify support services for women and girl survivors of GBV as essential. Due to the numerous issues under the consideration of the Presidential Taskforce, and given that GBV against women and girls is not a priority issue amongst voters generally, the Presidential Taskforce will fail to prioritise support services for women and girl survivors of GBV unless it is made politically beneficial for them to do so. TN will therefore undertake direct **public and private lobbying** of the taskforce, calling attention to the evidence base that demonstrates that there is likely to be increasing incidences of GBV against women and girls in the event of a lockdown.

Allies and approaches to apply:

Police | The Malawi Police Service protects public safety and the rights of persons in Malawi including women and girls. As such, during Covid-19, it could either initiate development of its own SOPs or support SOPs being developed for their operations. It is therefore an institution that TN will **publicly and privately lobby** for the adoption and enforcement of SOPs that make special considerations for women and girls who may experience violence during the Covid-19 period. The Malawi Police Service is already a TN partner under the SOF.

Protection Cluster | TN will work **collaboratively** with members of the Protection Cluster to input into the draft SOPs for the operations of the police during Covid-19. TN will work to strengthen the provisions in the Police SOPs for special consideration for women and girls who may experience violence during the Covid-19 emergency.

Community Policing Structures | Community policing structures work under the direction of the Malawi Police Service as they link the communities to the police through identification and reporting of cases of abuse and exploitation, which include GBV. TN will **support** community policing structures in the implementation of the adopted police SOPs during the Covid-19 period.

3.5. VAWG prevention stays on the agenda

Objective

In the context of the public health response, VAWG prevention should stay on the agenda for the duration of the emergency.

Why is our objective not already in place?

During emergencies, the focus shifts significantly to response. While this is important, it is still crucial to ensure that VAWG prevention remains on the agenda because it is a proven way to tackle harmful social norms that lead to violence. It is also important to note that during emergencies, women and girls' rights are the first to be sacrificed, and women and girls incur extra burdens of domestic work and risk of VAWG. Maintaining VAWG prevention programming ensures that VAWG is not normalised, although its impact may not be immediate.

Strategy

Table 5 gives an easy-reference overview of the strategy to reach this objective. Further details are provided below.

Table 5: Overview of Objective 5 Strategy

Target	Power holder/ ally/ opponent	Approach to apply	Key message
Ministry of Gender	Powerholder	Persuasion and lobbying	Women and girls are at increased risk of experiencing gender-based violence during Covid-19 and will experience greater barriers to accessing support. The Minister of Gender, Child Development and Community Development is a leader for women at risk of violence. The Minister should ensure that VAWG prevention budgets and programming are maintained throughout the Covid-19 response. The Minister should further ensure that VAWG prevention messages are included alongside Covid-19 public health messages, and should ensure that the Ministry of Gender effectively and efficiently coordinate VAWG prevention activities delivered by partners.
DODMA	Ally	Lobbying and Collaboration	Women and girls are at increased risk of experiencing gender-based violence during Covid-19 and will experience greater barriers to accessing support. DODMA should include safeguarding and social inclusion measures in the Covid-19 response, and should include VAWG prevention messages alongside Covid-19 messages
Protection cluster	Ally	Collaboration	Protection Cluster members must maintain VAWG prevention budgets and programming, and should include VAWG prevention messages alongside Covid-19 messages

Target power holders and approaches to apply:

Ministry of Gender | The Minister of Gender has not only demonstrated personal affiliation to reducing the prevalence of, and improving support to survivors of, GBV against women and girls, it is also within the mandate of her ministry. Additionally, the Ministry has the mandate to coordinate all GBV prevention efforts by different programmes and organisations across the country. The Minister of Gender has become a close ally of the Tithetse Nkhanza programme.

Through **private and public lobbying** of the Minister, Tithetse Nkhanza, through the Team Leader, will call attention to the evidence base that demonstrates the importance of maintaining VAWG prevention programming to keep tackling harmful social norms that lead to VAWG, and including VAWG prevention messages alongside the Covid-19 and VAWG response messages.

Allies:

DODMA | The Department of Disaster Management Affairs is the Government of Malawi’s agency responsible for coordinating and directing the implementation of disaster risk management programmes in order to improve and safeguard the quality of life of Malawians, especially those vulnerable to and affected by disasters. DODMA is the secretariat for the top-level committee of disaster management, which is chaired by the chief secretary and includes Principal Secretaries of various ministries. During Covid-19, Tithetse Nkhanza has had to forge new partnerships with government institutions and other organisations that the programme would not directly work with ordinarily, and DODMA is one of them.

Through **lobbying and collaboration**, Tithetse Nkhanza will initiate strategic engagement with DODMA to influence the development and inclusion of safeguarding and social inclusion measures in the national Covid-19 response plans and government institutions. TN will work on influencing the inclusion of VAWG prevention messages alongside the Covid-19 messages.

Protection Cluster members | The mandate of the Protection Cluster is to coordinate and direct work being undertaken by numerous agencies on social protection issues, including those related to GBV against women and girls. The Protection Cluster is co-led by the Ministry of Gender and UNICEF and comprises of intuitions such as national and international NGOs and agencies, state institutions such as the Malawi Police Service, UN agencies, and donor agencies.

Tithetse Nkhanza, in collaboration with other members, will **use its technical expertise in VAWG prevention programming** to share evidence on how Covid-19 puts women and girls at more risk of violence and the importance of ensuring that the root causes of VAWG continue to be tackled. Thus, TN will work on influencing the inclusion of VAWG prevention messages alongside Covid-19 messages.

4. Action plan

#	OBJECTIVE	ACTIVITIES	Responsible	TF
1	GBV services are designated essential during Covid-19 and adequately funded	Participate in high level meeting of the National Disaster Preparedness and Relief Committee (NDPRC)	TN TL	May
		Organise a meeting with DODMA on integration of gender issues generally, and violence against women and girls' issues specifically in the national response to the Covid-19 pandemic	TN TL	May
		Organise bilateral meeting with the Ministry of Gender to share evidence on the gendered impact of Covid-19	TN TL	May
		Development of CVSUs Covid-19 protocols and referral pathway document and adoption by protection cluster	TN Justice Lead	May
		Participate in the health promotion cluster meetings led by the Ministry of Health to influence messaging	TN Comms Advisor	April-May
		Participate in the Protection cluster meetings	TN Technical Leads	April onwards
		Develop relationships with the new President and other ministers (where relevant)	TN TL	July
2	Equal representation of women in decision making in the outbreak preparedness and response at national and local levels creates space for action on VAWG and related gender issues	Organise GBV sub-cluster meeting to develop a petition on equal representation of women in Covid-19 policy spaces	TN and GBV sub-cluster	April
		Develop and submit communique to the President with key asks on equal representation of women in Covid-19 Policy spaces	TN	April
		Follow up on communique submitted to the President through OPC	TN	May
		Develop relationships with the new President and other ministers (where relevant)	TN TL	July

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3	Protection measures remain available and accessible (e.g. protection orders and ensuring compliance with protection orders) with appropriate practice directions in place and clear disability social inclusion plans	Participate in Taskforce meetings coordinated by the Law Society to draft the practice directions that will ensure that courts remain accessible during Covid-19	TN TLA & Justice Lead	June
		Development of a case management tracking system, adoption of the system by the judiciary and orientation for court clerks on the system.	TN TLA	May-June
4	GBV response is integrated into the public health response; and local and national support systems for women and girl survivors of violence are strengthened to be responsive in the context of the national Covid-19 emergency	Participate in the development of the Rapid Gender Analysis to inform response plans for all clusters in the Covid-19 response	TN TL	May
		Participate in the protection cluster meetings to influence adoption of the referral pathways document by the Ministry of Gender	TN TL & Technical Leads	April onwards
		Review of police protocols during covid-19 to ensure a survivor-centred approach	Justice Lead	May
		Develop relationships with the new President and other ministers (where relevant)	TN TL	July
5	VAWG prevention remains on the agenda in the national and local Covid-19 preparedness and response plans	Organise meeting with DODMA to influence the development and inclusion of safeguarding and social inclusion measures in the national covid-19 response plans and government institutions.	TN TL	May
		Organise bilateral meeting with the Minister of Gender to lobby for maintenance of VAWG prevention messages in the Covid- 19 ministry response.	TN TL	April onwards
		Participate in the health promotion cluster to influence the inclusion of VAWG prevention messages alongside Covid-19 messages.	TN Comms Advisor	April onwards
		Participate in protection cluster meetings	TN TL and Technical Leads	April onwards
		Develop relationships with the new President and other ministers (where relevant)	TN TL	July