

Uplifting Lives of Children through Integration of Savings Groups and CCFLs Models: A Case Study from Kamwendo Area Programme



Acknowledgements

These case study was written and prepared by World Vision staff implementing health and nutrition and food security projects in Kamwendo Area Programme, Mulanje. Special thanks to Patricia Khruza Development Facilitator for MNeCH, George Kachiwala, Development Facilitator, MHSFR, Khwima Mkhara, Co-ordinator for MHSFR and Samson Semu, Manager for Mulanje and Phalombe Districts for the coordination.

Last but not least, World Vision– South Zone expresses its gratitude to all the participants in the case studies writing process for their willingness to share their experiences, information, and challenges through the documentation of this case study.

Compiled and packaged by Charles Kabena.

Contact us at:
World Vision Malawi– South Zone
P. O Box 2050,
Maselema, Blantyre

Acronyms

ADC	Area Development Committee
CCFLS	Community Complementary Feeding and Learning Sessions
ECD	Early Childhood Development
FY	Fiscal Year
HSA	Health Surveillance Assistant
M&E	Monitoring and Evaluation
MNeCH	Maternal, New born, Child Health
MUAC	Mid, Upper, Arm-Circumfrence
MHSFR	Malawi Household Food Security and Resilience
NGO	Non Governmental Organisation
NRU	Nutrition Rehabilitation Unit
SG	Savings Group
SGP	Savings Group Promoter
VDC	Village Development Committee
VHC	Village Health Committee
WVM	World Vision Malawi



Project	Maternal, New born and Child Health (MNECH) and Malawi Household Food Security and Resilience (MHSFR)
Sector	Health and Food Security
Time Frame	2003-2018
Beneficiaries	30, 391 people (including 8, 300 children, and 5, 260 adults)
Location	T/A Mkanda, Mulanje
Donor	World Vision Germany
Outcome	3, 000 households are food secure and economically empowered
Approach	Empowering Communities

CONTEXT

Kamwendo community stands sandwiched between Chiradzulu and Phalombe districts in the north and south east, respectively. Often dry, the community is approximately 60 km north east of Blantyre City. Some 15 years ago, in 2002, hunger hit Kamwendo community and some surrounding parts. Being in a rain shadow, many people did not produce adequate food to last all year round. As such it was hard for people to save money and do meaningful development activities in their households. This resulted in prevalence of malnutrition among children as the food insecurity resulted in inadequate dietary intake.

World Vision started working in the area in 2003 with an aim of joining efforts with the people and government in giving children a future, full of hope and optimism through a food security project which emphasised on empowering communities economically. There were also other initiatives in education and health.

“We welcomed the World Vision in this area because we saw them as a ladder to our graduation out of poverty; as leaders then, it was a heart breaking seeing people without food or suitable means to access some, Said GVH Kamwendo. “I recall the year 2002 when we did not produce enough food and as a leader families could flock to my house for help. With the coming of WV, I knew the situation would change,” continued GVH Kamwendo. Ironically, the Area Programme was named after his village.

Activities

Saving money has never been an easy thing. For the poorest and most vulnerable around the world, saving money can be nothing but a mere illusion. Among those who live on \$1.25 a day or less are normally characterized by insufficient and irregular income, high vulnerability to shocks, chronic food insecurity, and poor health. In Kamwendo, life was the same for many people. For many of them, living in these conditions, there were no insurance programs to fall back on in the event of an emergency as it is in other developed countries. When disasters struck, as it did in the 2002-2003 drought induced food crisis, it was a precarious situation.

“Families that owned a goat or chicken were forced to sell by circumstances we prevailed in”, recalls Village Headman Kamwendo of the 2002 hunger. By then, there were no institutions to offer credit or hope. Each family suffered and children, often at the receiving end of all the suffering, met their fate. How could anyone save money in a situation like this?



A child captured going through a MUAC test

World Vision rolled out the Savings Group methodology (SG) in 2013. Through this, groups of individuals pool their money together through share buying



The organisation further bought Cash Chests for cash safety which were distributed to Savings Promoters by then known as VSL agents and subsequently given to 33 groups formed later. World Vision over the past three years has trained 17 Savings Group Promoters in SG methodology, small scale enterprise set up and financial literacy. The promoters have been able to mobilize and organize people into groups of 10 to 25 people and provide constant coaching of SG members in the AP.

Communities observed the benefits that the first groups leaped from participating in SGs and the following year 2014, the groups increased to 58 and to 159 in 2017. On average, a share is now going at 300 Kwacha (USD 0.42). Currently, they have MK51, 999, 840 (USD72, 222) in savings. Group members issue out soft loans to each other to facilitate small scale businesses, buy medicines or send children to school as well as improve nutrition status of children in their households as are able to access food not grown in the area.

“The Savings Group has given us hope and dignity, it’s rare to find people being in a state of desperation today”, says Fabiano, a Promoter. “In the past, we used to borrow money from other people which always came with exorbitant interests”, he said before further explaining that failure to settle such loans brought humiliation to families. “They would come and take away everything in the house so you stayed with nothing” A total of 2, 883 individuals including 2, 650 women are participating in SGs.

Children motivated to make savings

Savings group models have instilled a sustainable culture of savings in Kamwendo AP. Sixteen (16) in school children begun Savings group on their own after capacity building in backyard garden in 2016. The 16 children were geared to find a solution help out guardians with school needs such as writing materials and uniforms. As part of Capacity building the children were trained in Savings Group Model, business management and financial literacy by Savings group Promoters and Child Protection workers.



Tiyese children’s group shared MK200, 000 (USD278) at the end of the first cycle in August

“When we shared our Savings in August last year as our first cycle, I kept the money because I did not know what to do right away, I had multiple need”, says Bakhita, a 13 year old girl. “I realised then that

my desire was to have a good uniform and my mother helped me buying one”. Today, in Mwala village alone, there are three SGs that are entirely for school going children.

Community Complementary Feeding and Learning Sessions

Mwala Village in the AP has been one of the communities where food is not scarce but surprisingly, cases of malnutrition emerged most from the communities in FY15.

Apart from the Food security project in Kamwendo, World Vision is implementing MNECH project which facilitated the roll out of Community Complementary Feeding and Learning Sessions (CCFLS) model. This is an initiative that is owned by the community and facilitated by care group volunteers who report to care group promoters. The initiative contributes to prevention and management of malnutrition among under-five children by enrolling both children with moderate malnutrition, even those well-nourished. Prior to enrolment into CCFLS, children are weighed and their MUAC is also measured. All pregnant mothers are also enrolled in the project to ensure that they remain healthy and the child born is also healthier.

Marrying Savings and Care Groups to fight Malnutrition

The care groups carry out counselling sessions to households and they are able to identify cases of malnutrition among children. In Mmwala village, 10 Care group volunteers embraced the CCFLS model. However, they could barely keep up mobilising parents to contribute money towards buying supplementary foods for the feeding sessions. This is where the care group promoter, Mr Fabiano, who is also an SG promoter mobilised his six SGs into participation in CCFLS. These groups used their resources from their social fund to buy non-local food items such as cooking oil for feeding sessions. The SGs are organised in such a way that they have allocated days of meeting, every group meets to buy shares according to SG methodology once in a day and after going through the SG transaction, they go into cooking and feeding session locally known as *Masanje*.

Unlike in the previous years where all cases of malnutrition were referred to Mlomba Health Centre, the initiative has promoted management of malnourishment cases in the community. A total of 71 children were admitted in CCFLS in 2016 of which 11 were identified as underweight and malnourished. In 2017, the groups have admitted and graduated 38 children of whom four were identified as moderately malnourished. Children are drawn even from non-SG members.

“Before World Vision introduced initiatives on malnutrition, we never knew that there was an invisible hunger (malnutrition) that was killing our children”, said Margret, a care group volunteer and Chairperson of Mwala Savings Group.



The initiative was rolled out in Mwala and all 23 villages in in Kamwendo after it was noted that under nutrition often led to admission at Mulanje District Hospital NRU, a district hospital, 58 Km from Kamwendo AP . For many families, this was a drain on the family's scarce financial resources.

“Staying at the hospital for so long demanded a lot of money, but we had no choice because we wanted our children to get well”, says Patricia, a member of the Care Group.

Celebrating MNECH & MHFSR integration

- **35** SGs with participation of 41 care group volunteers conducting CCFLS in the AP
- **1, 174** under five children in enrolled and graduated in CCFLS including 10 acute malnutrition cases.
- **288** children identified to have static weight enrolled and graduated



Challenges and Solutions

During the lean months of 2016, SGs had challenges sustaining supply of materials for CCFLS; however WV supported the groups with six treadle pumps for irrigation which they are using.

Conclusion and Recommendations

Interventions that are implemented in a holistic approach lead to sustainable development as communities are able to see and understand how our work is one. Often times, we scatter our energy and resources when by doing things the other way round, we can achieve real measurable impact in bringing change to children's lives.



CCFLS session in progress. Children are given six food groups