



REPUBLIC OF MALAWI
MINISTRY OF YOUTH DEVELOPMENT AND SPORTS

**National Plan of Action for Scaling up SRH and HIV
Prevention Initiatives for Young People**

“Foundations for Safe Guarding Malawi’s Future”

2008-2012

April 2008

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Foreword

Various interventions that target young people have been implemented in Malawi in the past decade. However, despite these efforts, the need for a harmonized national plan that addresses issues that concern young people has never been greater. The youth of Malawi face an unrelenting and increasing threat from HIV/AIDS. This National Plan of Action for Young People in Malawi attempts to close this gap, and is a milestone in efforts to ensure that practical steps are taken to ensure that the rights of young people are respected and fully met within Malawi.

The purpose of the plan is to pull together all and harmonize all the major initiatives to prevent HIV, within the framework of the Paris Declaration and Malawi Growth and Development strategy. Well coordinated efforts by government and its development partners are likely to yield enduring results, and the limited resources available can go a longer distance. The ground has been largely prepared for acceleration and joint programming. This plan thus provides a framework and overarching coordination mechanism, in line with the youth sectors accountabilities under the National Three Ones structure, for harmonizing, consolidating and aligning the exiting policies, plans and strategies of the responsible sectors related to young people and HIV and SRH.

This plan of action will facilitate the effective participation of young people and ensure a multi-sectoral response which meets the diverse needs of young people, both female and male, in urban and rural areas. It will address the diverse needs of youth who need to easily access and utilize SRH and HIV information, skills and services. The coordination mechanisms have been designed to enable all national institutions, civil society organizations, youth groups and donors to scale up, harmonize and intensify SRH and HIV prevention-related programs being implemented in Malawi. The plan is designed as a dynamic document that will be under constant review in line with changes in the environment.

Young people are often referred to as “*Leaders of Tomorrow*”, but we know that, as one scholar said, “*Leaders are made, not born*”. I therefore sincerely request every Malawian, along with our development partners, to take an extra step towards ensuring that the various projects and programs outlined in this Plan are implemented in a coordinated and effective manner. We owe this to Malawi, and particularly to our youth.

As one scholar observed, “*There is a time when we must firmly choose the course we will follow, or the relentless drift of events will make the decision*”. **This** NPA-YP (2008-2012) should for us signal a departure from the business as usual approach, we should embrace change and learn to think in other terms. The young people of Malawi have chosen the course they consider effective in terms of SRH and HIV prevention, let us rally behind them and commit ourselves to walk that course.

It is with great pride that I present this National Plan of Action for Young People in Malawi.

Honorable Minister of Youth Development and Sports

List of Abbreviations

AIDS	Acquired Immune Deficiency Syndrome
ARP	Alternative Rites of Passage
ARV	Anti-Retrovirals
BCC	Behavioral Change Communication
BCI	Behavioral Change Intervention
CACC	Community AIDS Coordinating Committee
CBO	Community Based Organization
CDC	Centers for Disease Control
CEDAW	Convention on the Elimination of Discrimination Against Women
CHAM	Christian Health Association of Malawi
CO	Country Office
CRC	Convention on the Rights of the Child
CST	Country Support Team
CSW	Commercial Sex Worker
DACC	District AIDS Coordinating Committee
DEM	District Education Manager
DHMT	District Health Management Team
DHO	District Health Office
DSWO	District Social Welfare Office
EC	European Commission
EMIS	Education Management Information System
FBO	Faith Based Organization
FSW	Female Sex Workers
GIS	Geographic Information System
HIV	Human Immunodeficiency Virus
HMIS	Health Information Management System
HTC	HIV Testing and Counseling
ICPD	International Conference on Population and Development
IGA	Income Generating Activity
LSD	Livelihood Skills Development
LSE	Life Skills Education
MDD	Music, Dance and Drama
MDG	Millennium Development Goals
MDHS	Malawi Demographic Health Survey
MGDS	Malawi Growth and Development Strategy
MIE	Malawi Institute of Education
MoE	Ministry of Education
MoGCS	Ministry of Gender and Community Services
MoH	Ministry of Health
MoI	Ministry of Information
MoJ	Ministry of Justice

MoJ	Ministry of Justice
MoYDS	Ministry of Youth Development and Sports
MYPG	Meaningful Youth Participation Guidelines
NAC	National AIDS Commission
NAF	National Action Framework
NAMISA	National Media Institute of Southern Africa
NGO	Non-Governmental Organization
NPA	National Plan of Action
NPA-YP	National Plan of Action for Young People
NPO	National Program Officer
NYCoM	National Youth Council of Malawi
OVC	Orphans and Vulnerable Children
PAC	Post Abortal Care
PMTCT	Prevention of Mother to Child Transmission
SDP	Service Delivery Points
SMC	School Management Committees
SRH	Sexual Reproductive Health
STI	Sexually Transmitted Infection
SWAPs	Sector Wide Approaches
TA	Traditional Authority
TA	Technical Assistance
TWG-YP	Technical Working Group on Young People
UN	United Nations
UNCT	United Nations Country Team
UNGASS	United Nations General Assembly on HIV and AIDS
VCT	Voluntary Counseling and Testing
VTI	Vocational Training Institutions
WGHA	Women, Girls and HIV/AIDS
YAC	Youth Action Committee
YCBDA	Youth Community Based Distributing Agents
YFHS	Youth Friendly Health Services
YLO	Youth Led Organization
YOMIS	Youth Management Information System
YSO	Youth Serving Organization
YTC	Youth Technical Committee

Acknowledgements

The National Plan of Action for Young People (NPA-YP) in Malawi is an important document for the Government of Malawi and represents a major stride towards improving the sexual reproductive health of young people (10-24 years) and protecting them from HIV.

This NPA-YP (2008-2012) is a culmination of material, physical and financial contributions provided by many stakeholders committed to transform the lives of young people in Malawi. Therefore, sincere gratitude goes to various sectoral ministries, youth serving organizations, youth led organizations, individual young people (YSOs) including Ministry of Health (MoH), Ministry of Gender and Community Services (MoGCS), National AIDS Commission (NAC), international and local Non-Government Organizations and individuals for their inputs towards this NPA-YP.

Special thanks are also extended to members of the National Steering Committee on young people and Technical Working Group for Young People (TWG-YP) for their involvement in Rapid Assessment, Analysis and Action Planning (RAAAP) which led to the development of this NPA-YP. The efforts of the NPA drafting committee: Joseph Sinkhala, Wilfred Lichapa, Robert Ngaiyaye, Juliana Lunguzi, Kennedy Warren, Izeduwa Derex-Briggs, Joyce Mphaya, Patrick Chakholoma, Asha Muhammad and Alfred Dzilankhulani are also sincerely acknowledged. A debt of gratitude is also owed to Simon Mphisa PhD, for his guidance and editorial work.

Further acknowledgement goes to the Ministry of Youth Development and Sports (MoYDS) for the leadership, commitment and technical guidance provided during the development of this plan. Finally, United Nations Population Fund (UNFPA) and United Nations Children Fund (UNICEF) the technical and financial support towards the development, final print and launch of this NPA-YP.

The official launch of this document by Government also demonstrates the high level commitment and support towards this NPA-YP.

Executive Summary

This plan is the culmination of collaborative effort by youth development stakeholders, and provides a framework for improving the sexual reproductive health of young people, and protecting them from HIV. The plan provides a framework and overarching coordination mechanism, in line with the accountability of the youth sector under the National Three Ones structure as it relates to young people and HIV and SRH. The plan seeks to facilitate the participation of young people in the acceleration of a multi-sectoral response that addresses diverse needs of young people, female and male, urban and rural; advantaged and disadvantaged. The coordination mechanisms proposed in the plan are designed to assist all national institutions, civil society organizations, youth groups and donors to scale up and intensify SRH and HIV prevention-related programs being implemented in Malawi. The plan consists of five sections: background, policy and programming, goals and guiding principles, institutional framework and monitoring and evaluation. A detailed list of likely activities and budgets is proposed.

The overall goal of the National Plan of Action is improved sexual and reproductive health and prevention of new HIV infections among young people aged 10-24 in Malawi. The plan is organized around six strategic objectives. The first strategic objective seeks to create an enabling and supportive policy environment for addressing SRH and HIV Prevention for young people. It focuses on harmonizing relevant legislation and policies, and ensuring compliance with the same. Objective two seeks to increase knowledge and skills towards adoption of safer sexual practices among young people and emphasizes efforts to increase access to SRH BCC activities and materials and to improve the delivery capacity of YSO and YLO.

Strategic objective three seeks an improvement in access to quality YFHS and increased demand for services. This will be achieved through the improvement of M&E systems and delivery capacity of YSO and YLO. Strategic objective 4 focuses on the integration of livelihood skills development and SRH initiatives. Strategic objectives 5 and 6 are concerned with strengthening the coordination of SRH and HIV prevention initiatives, which in turn will lead to increased capacity to sustain evidence based programmes.

The Guiding Principles of the NPA emphasise issues of rights for children and adolescents, including rights based and gender sensitive programming that gives pride of place to youth participation and ownership. Cognisance is taken of the dynamic programming environment, the need for transparency and accountability in addressing issues of youth, and the need for discrimination in favor of special groups –orphans, young people with disabilities, teen mothers, youth living with HIV, commercial sex worker and young people on the street and youth in conflict with the law.

It is noted that the successful implementation of the plan rests with the leadership of the Ministry of Youth Development and Sports (MoYDS), the timely inputs of other ministries, notably the following: Health, Education, Science and Technology, Children and Women's Affairs, Labor, Information and Justice. Theme based task forces are proposed to address specific technical issues. The MoYDS is challenged to enhance its capacity to deliver on its leadership role.

Section One: Background

1.1 Introduction

The purpose of the plan is to pull together all major ongoing HIV prevention results and by harmonize and aligning the efforts of the key sectors and partners accelerate joint actions to ensure the achievement of the results. This plan will provide a framework and overarching coordination mechanism, in line with the youth sectors accountabilities under the national 3 Ones structure, for harmonizing, consolidating and aligning the exiting policies, plans and strategies of the responsible sectors related to young people and HIV and SRH. Further, the plan of action will facilitate the meaningful participation of young people in the response and ensure an accelerated and differentiated multi-sectoral response which meets the diverse needs of young people, both female and male, urban and rural and less advantaged and advantage who all require access to and the capacity to utilize SRH and HIV information, skills and services. It is expected that the coordination mechanisms within the plan will assist all national institutions, civil society organizations, youth groups and donors to scale up, harmonize and intensify SRH and HIV prevention-related programs being implemented in Malawi

The MoYDS, as the ministry responsible for youth will have the accountability under this plan to ensure the harmonization of the efforts, facilitate the participation of young people in the response and facilitate the creation of an enabling environment for scaling up and accelerating HIV and SRH interventions by the key line ministries with and for young people.

1.2 The Need for a Harmonized Plan

It is undeniable fact that to-date, various interventions that target young people have been implemented in Malawi. However, the need for a harmonized national plan for young people has been greater than before:

- a. Sectors are responding and there are many policies, plans and strategies developed by various sectors which have a focus on HIV and SRH and young people, but within these polices, plans and strategies there are a number of similar actions which need to be harmonized and aligned to ensure an accelerated response and to reduce duplication of efforts, in support of one national response.
- b. Many of the existing plans and strategies have not articulated how they will work ‘with’ young people as partners in the response. Young people can be critical partners for creating an enabling environment for the implementation of these strategies, creating demand for the services and products and, young people have a key role in assisting in the delivery of the interventions. For example, young people living with HIV could provide substantial post test counseling, treatment literacy, care, support and referral assistance to the national counseling and testing service.
- c. Addressing the HIV prevention and SRH needs of young people is not the responsibility of one sector. For example, the health and education sectors have key HIV prevention interventions for young people, and their efforts need to be harmonized, to ensure consistency in messages, to ensure economies of scale are achieved and to ensure that young people participate as partners in their responses. The RAAAP findings found that there were many opportunities for the

duplication of efforts among partners who are trying to ensure that young people have access to and utilize HIV and SRH information, skills and services. For example, a number of plans and strategies are all trying to increase demand for HIV prevention services, and therefore there is a need to harmonize these efforts to ensure scale and cost-effectiveness. The RAAAP therefore, suggests that to ensure a more accelerated, harmonized and complementary response, there is a need to bring together under one plan of action the efforts of the different sectors.

1.3 Development Process for the NPA-YP

1.3.1 Rapid Assessment, Analysis and Action Planning

In order to ensure that the NPA-YP was based on the current SRH and HIV status of Malawian youth and status of programming aimed for them, the Government, through Ministry of Youth Development and Sports (MoYDS) commissioned a Rapid Assessment, Analysis and Action Planning on SRH and HIV Prevention for Young People aged 10-24 in Malawi (RAAAP). The findings of the RAAAP, along with other findings from other sources have been used in the development of this NPA-YP. Additionally, the RAAAP findings will provide the key benchmark against which progress will be measured.

1.3.2 Other consultations

The development of the NPA-YP was also enriched through participatory consultations with a wide array of stakeholders including government departments, National AIDS Commission, young people, traditional and religious institutions, NGOs, CBOs, academia, development partners, and networks of youth led organizations, and young people themselves including those living with HIV and AIDS or other SRH-related problems.

Consultations included reviews of drafts, integration of comments and relevant scientific evidence, accommodating lessons learned and taking into account public health principles. The final draft was then costed taking into account the size of the population to be served, the scale of the program to be implemented.

The development of NPA-YP began in November 2006 and was completed in June 2007 (Appendix 1).

Section Two-Policy and Programming Context

This National Plan of Action responds to Malawi government's national, regional and international policies, programs and commitments to improve the health and wellbeing of young people in the country. This NPA is anchored around the policies, programs and local and international commitments described below.

2.1 International Commitments

The Millennium Development Goals: This NPA-YP will contribute towards Millennium Development Goals 1, 2, 3, 4, 5, 6 and 8.

UN General Assembly Special Session on HIV and AIDS (UNGASS): Declaration of commitment on HIV and AIDS. This NPA-YP will support the achievement of universal access to HIV prevention, treatment, care and support among young people in Malawi.

Convention on the Rights of the Child (CRC) and Convention on All forms of Discrimination against Women (CEDAW): The World has recognized the importance of gender equality. The Convention on the Rights of the Child (CRC) sets forth provisions that include civil rights and freedoms, family environment, basic health and welfare, education, leisure and cultural activities and special protection measures for all children. The Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) sets down rights for women, of freedom from discrimination and equality under the law.

2.2 Regional Commitments

SADC Protocol on Health (2004): This protocol contains three important articles¹ which are crucial to sexual and reproductive health. The protocol urges harmonization of policies aimed at prevention and control of HIV and AIDS and STI.

2.3 National Commitments

The RAAAP noted that a number of plans have complementary objectives. For example the efforts to increase knowledge (the BCC strategy) and utilization of youth friendly services (the YFHS Standards) both aim to create an enabling environment for young people to access information and services.

Supportive Environment

The National Youth Policy (2006): The overall goal of the Youth Policy is to provide a framework that guides youth development and implementation of all youth programs through promotion of SRH of young people. Ten strategies are identified, including the need to scale up HIV prevention interventions for young people; promoting access to youth friendly reproductive health services among all young people; sustaining SRH and HIV prevention information in schools; discouraging sexual practices that promote the spread of STIs including HIV and AIDS; promoting programs on gender equity and equality, male involvement, and girls' and young women's empowerment to reduce HIV transmission. The policy also calls for a

¹ Articles 10, 16 and 17

review of existing laws and enactment of specific legislation access to SRH and HIV prevention services.

Malawi HIV and AIDS National Action Framework (2005-2009): The NAF is a component of the “Three Ones”. The aim of NAF is to reduce the spread of HIV in the general population and in high-risk subgroups. The NAF clearly articulates objectives for promoting, supporting and scaling up HIV and AIDS protective interventions specifically designed for young people; reducing the vulnerability of Malawians to HIV infection, especially girls and women; strengthening socio-cultural values and practices that prevent the spread of HIV; and promoting safer sex practices among the high-risk groups and in high-risk settings..

The National Standards for Youth Friendly Health Services (2006) outlines standards for ensuring conducive environment for the provision of youth friendly services that the Ministry of Health in Malawi is mandated to enforce. It is expected that even for this plan the Ministry will be the convening partner.

Malawi Growth and Development Strategy (2005): The MGDS lays the foundation for the country’s pro-poor investment strategies and recognizes the high cost and impact of HIV and AIDS and preventable diseases such as tuberculosis (TB) and malaria on the skilled human resource base which in turn affects the productive sectors that drive the economy including farming, mining, agriculture and the service sectors. The strategy recommends partnerships between the public and private sector to curb the HIV threat and invest in the development of skilled youth and workforce through vocational training and modern technology. However, issues related to youth development are not articulated, and it is one of the aims of this plan to assist in the integration of youth issues into the MGDS when it is revised.

2.3.1 Information

The Rapid Assessment, Analysis and Action Planning highlighted key gaps in young people’s knowledge in SRH and HIV and AIDS. When comparisons are made between the age categories, a higher percentage of the 15-19 year old adolescents (more than 96 percent) had heard about HIV and AIDS, compared with about 91 percent among the 12-14 year old adolescents (Munthali *et.al.*, 2006). However, despite this universal knowledge, some young people still do not know modes of HIV transmission (e.g. substantial proportion of adolescents during the RAAAP mentioned sharing food, mosquito bites and witchcraft as ways through which the HIV virus can be transmitted) and others still have misconceptions about HIV in general and condom use in particular. Common misconceptions include the following: one can visually identify someone with AIDS, condoms have holes through which HIV can pass and urinating after sex is a contraceptive. Similarly, due to peer pressure, some young people do not abstain or use condoms. There are also misconceptions such as “if you use a condom you will not sire children (*sudzabereka*)”.

2.3.2 Skills

Findings from Rapid Assessment, Analysis and Action Planning showed that there are limited opportunities for out of school youth, hence the need for livelihood skills. However, both in and out of school youth need prevention skills including risk avoidance and reduction skills especially for young girls. Ministry of Education and Ministry of Youth Development and Sports have in place a programme that attempts

to address this gap. However, these institutions need to be brought together as young people in school spend more time out of school and that there are some young people at high risk, e.g. secondary school girls, which need innovative peer education responses, best delivered by the MoYDS and NYCoM, to participate in the response across the sectors and to have the capacity for SR health seeking behavior and skills for risk avoidance and risk. The NAF seeks to increase coverage and mutual reinforcement of life skills education in schools, colleges and community using the Life Skills Working Group coordination mechanism.

2.3.3 Services

National Standards for Youth Friendly Health Services (2006): these were developed to provide a supportive environment for the delivery of young people's health services that meet their needs. The standards guide various implementing partners so that services provided are in line with the minimum health package defined for various categories of health services. Unfortunately, experiences shared during the RAAAP show that the standards are not being adhered to by most of the service providers due to poor facilities, equipment and in some cases general laxity. This plan seeks to urge Ministry of Health to uphold these standards.

The National Condom Strategy (2005): aims to increase access to high quality condoms to Malawians, under the leadership of the Ministry of Health. Despite this, there is low access to condoms among young people particularly in rural areas. It is expected that through the harmonization called for in this national plan of action, some of the issues will be addressed, since the success of this strategy is fundamental to the success of this plan.

The Behavioral Change Interventions (BCI): strategy outlines two reasons for the high increase in SRH and HIV/AIDS- sick young people resort to getting over the counter medications or assistance from a traditional healer instead of visiting the health facility and when some of them visit Traditional Birth Attendant (TBA) for delivery and do not regularly attend antenatal clinic. Failure to go for antenatal clinic and get the necessary advice and care results in young mothers opting to deliver at a TBA where emergency obstetric services are not offered, resulting in maternal complications such as fistula, and in some cases loss of life of the mother as well as the baby. It should be noted that maternal death for young women below the age of 19 constitute almost 50 percent of the maternal complications as well as maternal deaths and neonatal morbidity and mortality.

National Plan of Action for Orphans and Vulnerable Children (2005-2009): The overarching goal of the this plan of action is to build and strengthen family, community and government capacity to scale up response for the survival, growth, protection and development of orphans and other vulnerable children, by the end of 2009." The plan of action aims to comprehensively address most of the challenges faced by OVCs, and thus has some overlaps with this plan. OVCs that fall into the category of young people (558,000 between the 10-18 years) are likely to benefit from the interventions under this NPA-YP.

Road Map for Accelerating the Reduction of Maternal and Neonatal Mortality and Morbidity in Malawi (2005): The road map's goal is to accelerate the reduction of maternal and neonatal morbidity and mortality services towards the achievement of

the Millennium Development Goals. The two objectives of the Road Map are (i) to increase the availability, accessibility, utilization and quality of skilled obstetric care during pregnancy, childbirth and postnatal period at all health care delivery systems; and (ii) to strengthen the capacity of individuals, families, and communities, civil society organizations to improve maternal and neonatal health. Given that adolescent pregnancies constitute about 25 percent of all births and 20 percent of the deaths and because many of these adolescents are HIV positive, the NPA will address individual, community and civil society education aspect of maternal mortality including prevention of early, forced and arranged marriages; early and unwanted pregnancies; unsafe abortions; prevention of HIV infections among young women; promotion of HIV counseling and testing; prevention of mother to child transmission; positive living; treatment literacy; and the importance of prenatal and postnatal care as well as skills attendance at birth for young females. This will be done mostly within the YFHS component of the program.

Women, Girls and HIV/AIDS: Program and Plan of Action (2005-2010): This program of action was developed based on the understanding that women and girls in Malawi are considered to be more vulnerable to HIV and AIDS than men and boys. Among others, the program of action aims at improving young people's access to gender sensitive information and skills necessary for preventing HIV transmission.

Findings from the RAAAP showed that access to condoms is one of the main challenges young people of Malawi face. Respondents during the RAAAP reported occasional shortage of condoms in most urban and rural health providers. Occasional shortage of free condoms from the providers meant that young people have to buy condoms from shop outlets. Given that most young people are unemployed and do not have access to economic opportunities, most of them failed to use condoms because either they could not afford them or they felt shy to buy a condom at shop outlets. These findings related to poor services among young people in general and condoms in particular justifies the need for this plan to on improving services related to SRH and HIV prevention among young people. However, improvement of health delivery will require the participation of young people to ensure the services meet their needs. Further, improvement of the services is likely to increase demand which will need to be properly managed by responsible partners.

2.4 Status of SRH and HIV among Young People in Malawi: Key Findings and Programming Implications

Data on the prevalence of HIV among young people is well documented in the Malawi Demographic Health Survey (2004) and National Adolescents' Study (2006). Due to the overwhelming data available from literature on prevalence of the epidemic, the survey did not collect fresh data in these areas during the RAAAP field visits. Most of data in this section was drawn from literature reviews as appropriately referenced. In Malawi, there is a lot of research on HIV prevalence and related issues. However, the RAAAP preferred to use nationally recognized documents by the National Statistical Office, National AIDS Commission (NAC), Malawi's Ministry of Health and other reputable institutions.

Malawi is one of only 10 countries in sub-Saharan Africa which has an adult HIV prevalence rate of over 10 percent. According to the 2004 MDHS, 12 percent of the population age 15-49 in Malawi is living with HIV/AIDS. HIV prevalence among women is higher for women than for men (13 percent compared with 10 percent). Peak prevalence is 19 percent for women and men age 30-34, with 18 percent for women and 20 percent for men. Women start getting infected with HIV at a much younger age than men, with the prevalence of young women 15-19 years of age at 3.7 percent compared to 0.4 percent among young men of the same age group. The data demonstrates a substantial jump in HIV prevalence rates, of 5 percent between young women in the 15-17 age group and the 18-19 age group, which strongly suggests the need to prioritize the focus of HIV prevention interventions and SRH services on young women who are close to the age of sexual initiation, to ensure they clearly understand their risk of HIV infection, and have the relevant information, skills and services to reduce their risk of HIV infection. Among the 15-17 age groups, the 2004 MDHS data indicates that approximately 20 percent of young women are having sexual intercourse, and of these 20 percent, approximately 60 percent are having sex with a regular partner. Among the 23-24 age groups, approximately 65 percent are having sexual intercourse, with over 97 percent of these women stating that this sex is with an in union or regular partner.

Age Group	Females	Males
15-17	1.3	0.7
18-19	6.3	0.0
15-19	3.7	0.4
20-22	11.2	4.2
23-24	16.8	3.4
20-24	13.2	3.9

Table 1: HIV prevalence (MDHS 2004)

There is also higher prevalence among young women who are in union than those who are having sexual intercourse with non regular partners, which suggests the need for a differentiated HIV prevention response for young women, which clearly explains the relative risk of HIV infection based on

Females	HIV Prevalence Among Young Women in Union	HIV Prevalence Among Young Women Not in Union
15-17	4.4	0.6
18-19	6.7	5.8

Table 2: UNICEF ESARO MDHS Analysis 2007

types of relationships. Over time, HIV prevalence rates among young women in the 20-24 age group who continue to have non regular partners becomes substantially higher than those who are in union, which suggests the need to continue to focus prevention information and skills development on the promotion of consistent condom use and the reduction of multiple and concurrent partnerships. In terms of the focus on the HIV prevention response, only 2.8 percent of the young women in the 23-24 age group reported having sex with a non regular partners. This strongly suggests the need to scale up the promotion of counseling and testing as a social norm among young people, especially those who are in an in-union relationship. The data also strongly suggests that due to higher levels of background HIV prevalence, there should be a priority focus on urban centers as infection rates substantially higher among young women in union within this context.

Females	Urban HIV Prevalence rates Among Young Women in Union	Rural HIV Prevalence Among Young Women in Union
15-17	12.3	2.8
18-19	9.2	6.4
20-22	22.5	8.7
23-24	21.5	13.8

Table 3: UNICEF ESARO MDHS Analysis 2007

Both the MDHS and the HIV and Syphilis Sero-Survey and National HIV Prevalence Estimates Report 2005 suggest that a wide range of young women are vulnerable to HIV infection. In the and Syphilis Sero-Survey and National HIV Prevalence Estimates Report 2005 the highest level of HIV prevalence was found among women who had secondary and post-secondary education. The data presented below is

from all of the women in the survey, and being sentinel surveillance data it has been derived through a convenience and selected sample which makes it difficult to apply nationally to all women in Malawi. The 2004 MDHS also found higher HIV prevalence among

Education	Total Sampled	HIV+	% IV+	95% CI
None	1102	197	17.9	15.7-20.3
Std 1-5	2600	418	16.1	14.7-17.6
Std 6-8	3161	487	15.4	14.2-16.7
Form 1-2	856	167	19.5	16.9-22.4
Form 3-4	675	143	21.2	18.2-24.5
Post Secondary	18	6	33.3	13.3-59.0
Other	6	1	16.7	0.4-64.1
TOTAL	8418	1419	16.9	

Table 4: HIV Prevalence by Level of Education Attained

women with secondary education (15.1 percent) compared to those with no education (13.6 percent) and primary Std 1-4 (12.3 percent). Further cross tabulation of the MDHS data, conducted recently by the UNICEF Regional Office for Eastern and Southern Africa, found that among young women 20-24 the data was very similar, with HIV prevalence rates of 15.7 percent among young women with secondary education versus 14.4 percent among young women with no education. What seemed more significant was that among young women 15-19 there was zero HIV prevalence among those with no education while the prevalence rate was 4.9 percent among women who had standard 5-8 education. These findings strongly suggest the need for much more differentiated focus in the content and approach to delivering risk reduction information and skills to young women in schools. It also suggests a need for a substantial focus on young women in secondary schools. A similar differentiated response is also required around underlying vulnerability. The data strongly suggests that HIV infection is taking place still among young women who have access to resources. Additional cross tabulation of the MDHS data demonstrated that among young women 15-19 the highest level of HIV prevalence was among women from the middle wealth quintile (6.9 percent) followed by those from the next highest wealth quintile (4.9 percent). Prevalence was zero percent among the poorest wealth quintile. In the 20-24 age group, the wealthiest quintile had the highest HIV prevalence (21 percent), followed by the next highest wealth quintile at 16.4 percent. HIV prevalence among young women 10-24 in the lowest wealth quintile was 10.4 percent. Although the cell size was rather small, this data does strongly suggest a much more complicated context for programming to reduce vulnerability among young women in Malawi. It could suggest that young women have expectations of material need beyond their basic needs, which may lead to the engagement in multiple

and/or concurrent sexual relationships with inconsistent condom use, to meet these desired needs.

Some knowledge level indicators are quite high among young people in Malawi, but comprehensive HIV knowledge levels are still quite low. Among young people 15-19 only 21.1 percent of females and 34.6 percent of young males had comprehensive HIV knowledge. This data is a combination of 5 indicators – the knowledge of two transmission routes and 3 misconceptions. Even among teachers, who are seen as a major channel for HIV prevention education, only 44.5 percent of females and 46.8 percent of male teachers had comprehensive knowledge levels (MBSS 2006). Although it is correct that knowledge alone is not sufficient for behavior change, achieving high levels of comprehensive knowledge around HIV is a required output for young people to understand their risk of infection, to seek risk reduction skills and to acquire the capacity to apply risk avoidance or risk reduction behaviors. As this data is only measuring 5 basic facts about HIV, one could probably agree that it does not actually reflect knowledge, and that young people in Malawi probably require a much higher level of awareness around a large number of HIV related topics and issues, for example and treatment literacy.

Access to Services – Lessons from the National HIV Testing Week: Using mass media and interpersonal communication, over a 3 week period, the Ministry of Health and partners, raised awareness about counseling and testing services as part of a national counseling and testing week. During the week, of 17th - 22nd July 2006, 41 percent of the 96,845 people who came for testing were young people in the 15-24 age groups. This is strong evidence that Malawi has counseling and testing services which are accessible and acceptable to young people. It also demonstrates an effective local behavioral and social change communication (BSCC) capacity for generating demand and use of HIV services. The HIV prevalence rate was 5.6 percent among the 15-24 age groups who came for testing, with young women having a prevalence rate of 7.3 percent compared to 2.5 percent for young males. As this group had the lowest HIV prevalence rate among all the groups which came out for testing, this finding does suggest that Malawi still faces an on-going challenge around ensuring that the BSCC interventions focus on increasing young people's understanding of their relative risk of HIV infection, in order to increase the uptake of the service by young people who have frequently engaged in unprotected sexual intercourse.

As accepting attitudes to HIV are also very low in Malawi, with less than one third of 15-19 females and males having accepting attitudes on all four measures, this would seem to suggest some other areas for increasing knowledge levels, if young people would not like an HIV teacher to teach them, would not like to care for a family member living with HIV, buy food from an HIV positive vendor or disclose the HIV status of a family member. As Malawi has the demonstrated capacity to substantially increase the number of young people coming for HIV counseling and testing services it would be important to ensure that there is an equally strong focus on reducing stigma and providing services for young people living with HIV as part of the services.

At a minimum, to achieve a decline in new HIV infection, young people have only three options. One is to abstain from sexual intercourse completely. The 2004 MDHS data indicates that among young girls 15-17, approximately 32.1 percent of them had experienced sexual intercourse in the previous 12 month period and among young women 23-24 years of age, the proportion had increased to 94.1 percent of these

women reporting sexual intercourse over the past 12 month. The rates are even higher for young men, and this suggest that among all young people 15-24, there needs to be a differentiated messaging to reflect their risk behaviors.

The second major focus of prevention messages is the promotion of sexual intercourse within the context of a regular or in-union relationship (the B of being faithful). A comparison of the partners among young women indicate that among the 32.1 percent of young women 15-17 who were having sex, 80.5 percent of these young women had had sex with a non regular partner. In the 23-24 age groups, only 12.8 percent of the 94.1 percent who had been sexually active indicated that they were having sexual intercourse with a non-regular partner. When HIV prevalence cross tabulations are applied to these women the rate of infection is approximately four times higher among the age group 15-19 who are having sex with a regular partner compared (4.4 percent verses 0.6 percent). This picture is quite different among the older age group, where HIV prevalence is 25.8 percent among the small number of 23-24 who are still have non-regular partners compared to 15.4 percent among those with regular partners. This data suggests that young people require a substantial mix of information around the risk involved in sexual relationships, including the different types of partnerships, regular, multiple and concurrent. The infectiousness of the virus, linked to geographic hotspots and issues related to risk and the background prevalence in the age group of their sexual partners. It also highlights the need to strengthen sexual communication in relationships and the continued promotion of counseling and testing as well as mutual fidelity in regular partner relationships.

The MDHS data among young people strongly demonstrates the protective effect of condom use, with both regular and non-regular partners having substantially lower HIV prevalence, if they reported condom use at last sex. This effect does wear off over time, if young women continue to have non-regular partners and do not practice consistent condom use. The MDHS also suggests that there is no strong enabling environment for condom use, with less than half of adult male and female respondents not supportive of condom use being taught to 12-14 year old students. The RAAAP clearly found that both accessibility and acceptability of condom remains a critical issue for young people in Malawi.

2.4.1 Sexual and reproductive health

Strengthened HIV prevention responses need to be viewed as an opportunity for the integration of interventions which increase access and use of SRH information, skills and services. As HIV is transmitted primarily through sexual intercourses in Malawi, this link is very clear. In addition, meeting young people's SRH needs is a right in itself, and this is especially important among young people, especially young women in rural areas, who not only lack access to information, have limited reproductive options but also lack access to acceptable services.

2.4.2 Some critical SRH and HIV Issues

Inadequate SRH and HIV information on different risk groups and vocations: For planning purposes, there isn't adequate information on SRH and HIV issues affecting different risk groups and vocations (e.g. street youth, married adolescents). Consequently, programme targeting of youth according to their grouping and vocations hasn't been consistent with the various risk-taking behaviors and vocations.

Verticalization of SRH and HIV: In Malawi, SRH and HIV have generally been addressed as two separate issues and yet they are highly linked. This verticalization has contributed towards ineffective interventions been planned and implemented.

Limited scale of activities: Most interventions in SRH have been minor components of bigger projects and therefore issues of SRH have not been comprehensively addressed.

High rates of STIs: Seventeen percent (17.2 percent) of female and 14.2 males between the ages of 15-24 reported having symptoms of STIs including genital discharge and sores or ulcers. Considering that many STIs are asymptomatic especially with young females, this could be just the tip of the iceberg with many more infected with STIs. If we use STIs as a proxy for unprotected sex, it means that more young people could become infected with HIV if STIs rates especially those with genital sores, many more young people could be infected.

Early marriage and childbearing exposes young females to HIV/AIDS and to maternal and child morbidity and mortality (maternal mortality and morbidity, HIV).

Unsafe abortion among young women exposes them to health risks including HIV. Many young women's pregnancies are being provoked by unqualified providers or quacks and this may be exposing them to HIV infection.

Low risk perception of SRH and HIV/AIDS problems among young people: The belief that most young people perceive themselves not to be vulnerable especially when having teenage relationships contributes to high HIV infections due to the increase in trans-generational sex.

Pupils with special learning needs: In Malawi's schools, there are many pupils with special learning needs that this NPA would need to target and include as well. According to Education Management Information System (EMIS, 2005), 42 586 representing 1.3 percent of children enrolled in primary schools in 2005 had special learning needs. Out of this, 18 656 representing 43.8 percent had hearing needs, 8 440 representing 19.8 percent had physical needs while 15 490 representing 36.4 percent had visual needs. In Malawi's secondary schools, there were a total 2 711 pupils with special learning needs (657 hearing, 556 physical and 1 498 visual).

Section Three: Goal, Objectives and Guiding Principles

3.1 Overall Goal of the NPA-YP

The overall goal of this National Plan of Action for Young People (NPA-YP) is improved sexual and reproductive health and prevention of new HIV infections among young people aged 10-24 in Malawi

3.2 Strategic Objectives and Objectives

3.2.1 Strategic Objective 1: Improved policy environment SRH and HIV Prevention programmes for Young People. The desired key outcomes are:

- ✦ SRH and gender-related policies and laws harmonized, revised, and/or formulated and enforced
- ✦ Increased understanding and commitment for SRH and gender related issues, policies, laws, policies and programs at all levels
- ✦ Increased support for scaling up and sustainability of SRH and HIV prevention programs

3.2.2 Strategic Objective 2: Enhanced skills for adoption of safer sexual practices among young people aged 10-24. Desired key outcomes are as follows:

- ✦ Increased access to SRH BCC activities and materials
- ✦ Supportive environment for SRH BCC created in homes and schools
- ✦ Improved YSO and YLO capacity to deliver and manage BCC activities

3.2.3 Strategic Objective 3: Increased utilization of youth friendly sexual and reproductive health services. The following are the expected key outcomes:

- ✦ Increased accessibility to quality YFHS services
- ✦ Environment for YFHS services improved, creating increased demand
- ✦ M&E systems for YFHS
- ✦ Improved YSO and YLO capacity to deliver sustainable YFHS

3.2.4 Strategic Objective 4: Increased accessibility of integrated SRH and livelihood skills development (LSD) tertiary institutions. The following are the expected key outcomes:

- ✦ Integration of SRH and BCC activities into livelihood skills development programs
- ✦ Increased access to livelihood opportunities by vulnerable youth

3.2.5 Strategic Objective 5: *Programming and* Coordination for SRH and HIV prevention strengthened. The following are the desired key outcomes:

- ✦ Youth participation structures established or strengthened at all levels
- ✦ Evidence based programming for HIV prevention
- ✦ SRH and HIV/AIDS programming monitored and evaluated

3.2.6 Strategic objective 6: Strengthened institutional capacity to sustain evidence-based SRH and HIV prevention programs. The desired key outcomes are:

- Strengthened management information systems and improved use of data for decision making at all levels including club level
- Improved human resource capacity and management
- Improved sustainability mechanisms established at all levels

3.3 Guiding Principles

The implementation of this Plan will be guided by the following key principles:

- SRH is a right for all children and adolescents and should be provided as a holistic package.
- Rights based programming with emphasis on youth rights
- Gender sensitivity and accessibility to all young people
- Youth participation and ownership
- Capacity building: Capacity building is central to the success of this NPA. Institutional capacity building will ensure effective management and coordination of SRH issues among young people. Capacity development of professionals, youth leaders, community and others who work with youth is imperative for success.
- Coordination and collaboration among all stakeholders
- The NPA was developed and will be implemented within the framework of national (e.g. MGDS) and global (MDGs) goals
- There shall be transparency, accountability and good governance in the provision of SRH services to youth in Malawi
- Dynamism of SRH issues affecting youth: The NPA is cognizant of the dynamism of SRH issues affecting youth in Malawi and shall be implemented in a manner that will embrace emerging issues and challenges.
- Positive discrimination for special groups: In line with the National Youth Policy, the NPA shall earmark the following social groups for special attention: orphans, young people with disabilities, youth living with HIV, teen mothers, vulnerable adolescent girls (commercial sex workers (CSWs), young people on the street and youth in conflict with the law.

Section Four: Institutional Framework

4.1 Institutional Arrangements

4.1.1 National level

The Ministry of Youth Development and Sports (MoYDS) will provide overall leadership and will be accountable for implementing, monitoring and coordination of the NPA.

Sectoral Ministries (Health, Women and Children, Information, Education, Justice and Labour): The sector ministries will implement specific and specialised interventions that fall within their mandate as these pertain to youth and adolescents. These areas are outlined in the activities plan.

National Steering Committee on Youth Issues: Chaired by the Principal Secretary in MoYDS, the Committee comprises Principal Secretaries, Directors and representatives from key youth serving organizations including government ministries, UN and other development partners. The National Steering Committee will oversee and advise on key policy issues related to the implementation of this NPA-YP. The Steering Committee will mobilise financial and human resources.

Technical Working Group on Young People (TWG-YP): The TWG-YP comprises relevant technical experts from sectoral ministries UN agencies, donor agencies and international and local NGOs. The TWG-YP will meet monthly and is directly responsible for the effective operationalisation of the Plan. The TWG-YP will be assisted by Task Forces. The formation of the Task Forces, each responsible for specific areas in the NPA-YP. Each task force will constitute itself at the first meeting.

Development Partners: Partners will provide support in line with their priorities and mandates.

4.1.2 District Level

The Youth Technical Committee, under the leadership of an elected chairperson will coordinate and monitor the work of the youth serving organizations. The District Youth Office will act as focal point, under the direction of the District Youth Officer.

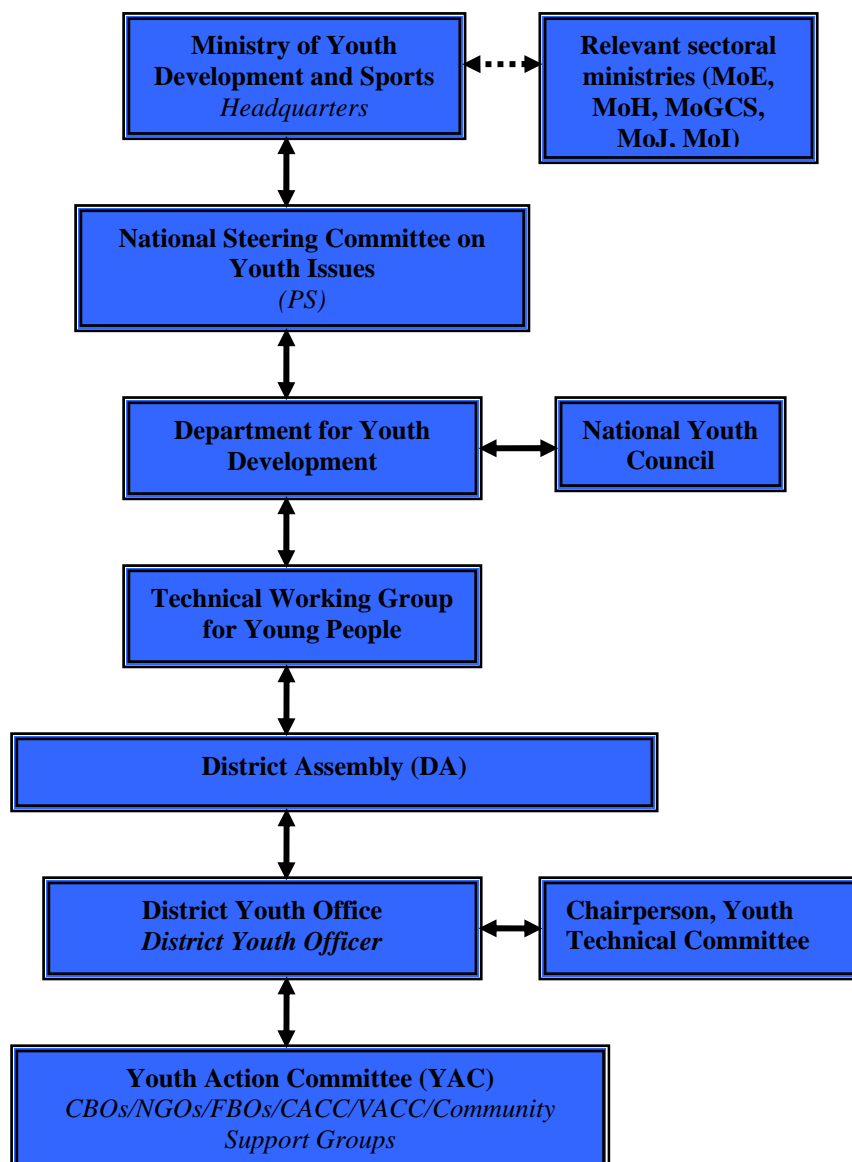
4.1.3 Community Level

Youth Action Committee (YAC) will coordinate all youth related work at community level. YACs will comprise youth serving and youth led organizations at field level.

4.2 Reporting and Accountability

Youth serving organizations (YSO) will be accountable to MoYDS but will report directly to the donor on progress made on implementation of specific activities in line with the NPA. The YSO will submit financial statements and reports to acquit funding received.

Figure 1: Institutional Framework for implementation of NPA-YP (2008-2012)



Section Five: Monitoring and Evaluation, Summary Indicators and Activities Plan

5.1 Monitoring and Evaluation

Monitoring and evaluation of this NPA will be coordinated at national, district and community levels. The Planning Unit of MoYDS in collaboration with the TWG-YP will be responsible for developing an M&E Plan which will provide a comprehensive plan for monitoring and evaluation. YSOs and YLOs will submit reports to donors in line with stipulated formats and time frames and also send reports to MoYDS through the respective DYOs for the purposes of monitoring. Section 5.2 provides indicators

which will guide the development of specific M&E plans at the various levels. All data will be age and gender desegregated.

5.2 Summary of NPA Impact and Outcome Indicators

NPA Program Goal	Indicator
Improved Sexual and Reproductive Health and Prevention of New HIV Infections Among Young People aged 10-24 in Malawi	<ul style="list-style-type: none"> ■ % of young people who are HIV infected by age group, gender, and residence ■ Syphilis prevalence among pregnant young women by age category and residence ■ % of HIV-infected infants born to young women by age group ■ Contraceptive prevalence ■ % who are married by age 18 ■ Delayed sex debut from age 15 for both male and female young people² ■ % giving birth by age 18 ■ School enrolment ratio

Objective	Indicators
Objective 1.1: SRH and gender-related policies and laws harmonized, revised, and/or formulated and enforced	<ul style="list-style-type: none"> ■ # of laws reviewed, revised ■ # of laws enacted ■ # of violations reported ■ # of convictions reported
Objective 1.2: Increased understanding and commitment for SRH and gender-related issues, policies, laws and programs at all levels	<ul style="list-style-type: none"> ■ % of stakeholders with accurate knowledge about SRH related laws and policies ■ % of parents supporting sexuality education and services for young people
Objective 1.3: Increased support for scaling up and sustainability of comprehensive SRH and HIV prevention programs	<ul style="list-style-type: none"> ■ # of youth networks and coalitions implementing SRH programs ■ # of networks for young people ■ Amount of resources mobilized for SRH and HIV prevention in the past 12 months by type of organization and district ■ # of youth organizations with SRH programs ■ # of community members supportive of SRH and HIV programs
Objective 2.1: Increased access to SRH BCC activities and materials for adoption of safer sexual behaviors	<ul style="list-style-type: none"> ■ % of sexually active respondents who had sex with a non-regular partner with the previous 12 months (by gender, residence and marital status) ■ % of young people reporting consistent use of condoms during sexual intercourse with a non-regular sexual partner by gender, residence and age ■ Median age at first sex among 15-24 year old (by gender and residence) ■ % of young people age 15-24 who had sex with more than 1 partner in the previous 12 months by age (15-19, 20-24), gender and residence ■ % of young people age 10-24 who correctly identify ways of preventing sexual transmission of HIV and who reject major misconceptions about HIV transmission by gender and residence ■ % of young people 10-24 exposed to SRH, HIV and gender related media campaigns ■ % of young people 10-24 exposed to life-skills based SRH and HIV education in previous 12 months (by gender, district and category of school youth) ■ % of young people expressing accepting attitudes towards people living with HIV/AIDS by gender and level of education ■ % of schools providing life skills based BCC
Objective 2.2: Supportive environment for SRH BCC	<ul style="list-style-type: none"> ■ % of homes and schools supportive of SRH BCC ■ % of youth reporting that homes are supportive of SRH BCC

² In Malawi, 15 percent of women age 15-24 and 14 percent of men age 15 have had sex by age 15 (MDHS, 2004)

Objective	Indicators
created in homes and schools	<ul style="list-style-type: none"> ■ % of youth reporting that schools are supportive of SRH BCC
Objective 2.3: Improved YSO and YLO competence to design, implement, monitor, document and sustain BCC activities	<ul style="list-style-type: none"> ■ # of YSOs and YLOs trained in design, implementation, monitoring, documentation and sustainability of BCC activities ■ % of YSOs and YLOs competent to design, implement, monitor, document and sustain BCC activities
Objective 3.1: Increased accessibility of quality YFHS	<ul style="list-style-type: none"> ■ # of condoms distributed to young people age 15-24 in last 12 months by type and district ■ # of condoms distributed by social marketing agencies to youth age 15-24 years in last 12 months by type of outlet, district and type of condom ■ % of pregnant women aged 15-24 that have been tested in the past 12 months (by age group 10-24 and district) ■ % of HIV positive mothers provided with 3-months alternative infant feeding in the past 12 months by age group (10-24) and by district ■ % of pregnant women offered PMTCT who are referred for care services in the past 12 months by age group and district ■ % of pregnant young women who have been counseled in PMTCT, tested and received sero-status results in the past 12 months by age group (10-24), type institution (private, public) and district ■ % of HIV positive pregnant young women receiving complete course of ARV prophylaxis to reduce the risk of mother to child transmission (by type of provider, district and age (10-24)) ■ % of young women with STIs who have been diagnosed, treated and counseled according to national management guideline by gender and age ■ # of young people with STI seen at health facilities in the past 12 months (by type of case, new case or referred partner) by district and gender ■ # of HTC clients tested for HIV at HTC sites and receiving their results in the past 12 months by age (10-14, 15-19, 20-24) by district and gender ■ % of young people who have been tested for HIV in the past 12 months by age (10-14, 15-19, 20-24) by district and gender ■ % of HIV positive HTC youth who are referred to care and support services in the past 12 months by age, district and gender ■ # of young people enrolled HIV/AIDS organizations in the past 12 months by gender, district and age (10-14, 15-19, 20-24) ■ % of young people detected with TB who have successfully completed their TB treatment by gender, district and type of TB ■ % of young people receiving ARV therapy by age (10-14, 15-19, 20-24), gender and by type of health facility ■ % of young people coming for PAC services, with pregnancy, receiving contraception and referred for other services
Objective 3.2: Supportive environment for YFHS improved	<ul style="list-style-type: none"> ■ # of SRH and HIV service providers supportive of and integrated YFHS ■ % of youth clients expressing satisfaction with YFHS
Objective 3.3: Increased demand for YFHS	<ul style="list-style-type: none"> ■ % of youth accessing YFHS by type of service, sex and age group (10-14, 15-19, 20-24)
Objective 3.4: Functional systems for monitoring, supervising and evaluating YFHS established for public and private facilities and outreach activities	<ul style="list-style-type: none"> ■ % of facilities and outreach activities with functional systems for monitoring and, supervising and evaluating YFHS
Objective 3.5: Improved YSO and YLO competence to deliver and sustain quality YFHS	<ul style="list-style-type: none"> ■ # of YSOs and YLOs able to deliver and sustain YFHS interventions

Objective	Indicators
interventions	
Objective 4.1: Enhanced capacity for integrating SRH BCC activities into livelihood skills development programs	<ul style="list-style-type: none"> ■ # of LSD institutions implementing SRH and HIV prevention programs within 12 last month periods ■ # of young people attending LSDs that access SRH and HIV prevention BCC programs ■ # of LSD institutions' staff trained in SRH BCC ■ # of LSDs offering YFHS ■ # of youth in LSD programs using condoms consistently ■ # of LSD students postponing sexual initiation
Objective 4.2: Increased access to SRH and HIV prevention information, skills & services among youth attending livelihood development programs	<ul style="list-style-type: none"> ■ # of livelihood programs providing SRH and HIV prevention information, skills and services ■ # of young people accessing SRH and HIV prevention information, skills and services ■ # of young people accessing livelihood programs
Objective 4.3: Improved environment for youth livelihood skills development and integrating SRH into livelihood programs	<ul style="list-style-type: none"> ■ # of YSOs advocating for youth livelihood development programs ■ # of LSD graduates followed up by LSD institutions ■ # of LSD graduates getting jobs or starting their own businesses one year after graduation
Objective 4.4: Vulnerable young people's access to livelihood opportunities increased	<ul style="list-style-type: none"> ■ # of vulnerable youth accessing livelihood opportunities increased by type of livelihood opportunity and by location
Objective 5.1: Coordination mechanism at the national, district, community and sectoral ministry levels established and/or strengthened	<ul style="list-style-type: none"> ■ Effective coordination mechanisms in place at national, district and community levels ■ # of coordination meetings carried out per year by sectoral ministries TWG, YTCs and YACs ■ List of coordination issues discussed and addressed
Objective 5.2: Youth participation structures (national, district, community, organizational) established and functional	<ul style="list-style-type: none"> ■ National MYPG developed and operational ■ # of YSOs, YLOs, government departments implementing MYPG ■ # of youth meaningfully involved and contributing by category of youth, residence, gender, and type of organization ■ # of youth networks established at TA, district and regional levels ■ % of ADCs with YAC sub-committee) ■ # of YAC sub-committees trained on monitoring skills and use of monitoring tools at district and national levels ■ # of MYPG monitoring activities undertaken within the past 12 month period
Objective 5.3: Increased access to and utilization of SRH and HIV prevention program information and evidence	<ul style="list-style-type: none"> ■ # of staff members and young people trained in documentation and dissemination skills as well as on evidence-based programming ■ # of organizations with documentation plans ■ # of case studies documented within the past 12 months ■ # of national youth conferences organized every 24 month period ■ A national resource centre for information and evidence on SRH, HIV prevention, gender, human rights and youth development established and operational
Objective 5.4: SRH and HIV/AIDS programming monitored and evaluated	<ul style="list-style-type: none"> ■ # of YSO programs externally evaluated over the past 36 month period ■ # of YSOs using the computerized YOMIS ■ # of YSOs reporting against comprehensive national indicators on SRH and HIV/AIDS ■ # of YSOs with an annual or project life monitoring and evaluation plan ■ # of YSOs staff trained in monitoring and evaluation ■ # of periodic youth related programming reviews conducted by type

Objective	Indicators
Objective 6.1: Strengthened management information systems and improved use of data for decision making	<ul style="list-style-type: none"> ■ Strengthened management information systems in place and functional ■ Adequately trained M& E Officers in place ■ List of organizations with the management information system ■ % of staff in sectoral ministries reporting awareness and use of MIS
Objective 6.2: Improved human resource and management capacity for MoYDS	<ul style="list-style-type: none"> ■ # of vacant key positions in MoYDS and other sectoral ministries filled ■ # of people trained in management of youth programs ■ DYO position upgraded to PO level or higher ■ Strategic plan for MoYDS in place and functional
Objective 6.3: Improved organizational and programming sustainability mechanisms established	<ul style="list-style-type: none"> ■ Sustainability mechanisms in place and functional

5.3 Activities Plan 2008-2012

NPA Program Goal	Indicator
Improved Sexual and Reproductive Health and Prevention of New HIV Infections Among Young People aged 10-24 in Malawi	<ul style="list-style-type: none"> ■ % of young people who are HIV infected by age group, gender, and residence ■ Syphilis prevalence among pregnant young women by age (15-19, 20-24) and residence ■ % of HIV-infected infants born to young women by age group (15-19; 20-24) ■ Contraceptive prevalence ■ % who are married by age 18 ■ Delayed sex debut from age 15 for both male and female young people ■ Percentage giving birth by age 18 ■ School enrolment ratio

Strategic Objective 1: Enabling and supportive policy environment improved for Addressing SRH and HIV Prevention Programs for Young People						
Objective 1.1		Indicators		Means of Verification		Critical Assumptions
SRH and gender-related policies and laws harmonized, revised, and/or formulated and enforced		<ul style="list-style-type: none"> ■ # of laws reviewed ■ # of laws enacted ■ # of violations reported ■ # of convictions reported 		<ul style="list-style-type: none"> ■ Policy documents ■ Malawi Police reports ■ Survey reports ■ Program reports 		<ul style="list-style-type: none"> ■ MoYDS to take leadership and prioritize the process ■ Development Partners will be willing to support the policy review process ■ Collaboration between stakeholders
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)	
Sub-objective 1.1.1: Strengthened capacity for SRH, HIV prevention and gender policy and law formulation	1. Train staff of relevant ministries and YSOs in advocacy strategies and lobbying skills and human rights issues	<ul style="list-style-type: none"> ■ Staff of sector ministries and YSOs skilled in advocacy 		MoYDS, NYCoM, MoE, MoH	186, 934.49	

Strategic Objective 1: Enabling and supportive policy environment improved for Addressing SRH and HIV Prevention Programs for Young People					
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
	2. Develop a policy advocacy plan targeting members of parliament, law enforcement agents, faith community and community leaders	<ul style="list-style-type: none"> ■ Advocacy plan developed 	Jan-June 2008	MoYDS, MoGCS, NYCoM, MoH, MoE, UNCT, NAC, YSOs	17, 060.80
	3. Conduct advocacy campaign with Parliamentary Committees (Committee on Health, Legal Affairs and Social Services)	<ul style="list-style-type: none"> ■ # of advocacy campaigns undertaken ■ # of parliamentarians lobbied and supporting new legislation ■ # of laws passed by parliament 	On-going	MoYDS, MoGCS, NYCoM, MoH, MoE, UNCT, NAC, YSOs	22, 768.88
Sub-objective 1.1.2: Policies and laws harmonized, amended and/or enacted (e.g. Livelihoods Guidelines, MDGS, NAF)	4. Review all existing laws related to SRH, HIV prevention, drugs, gender and cultural practices	<ul style="list-style-type: none"> ■ Policies and laws reviewed ■ Linkage of SRH and HIV prevention seen in policies 	Jan-June 2008	MoYDS, Law Commission, MoJ, MoGCS, MoYDS, MoH, MoE, UNCT	60, 279.43
	5. Draft amendments and new legislation based on identified gaps, revisions of laws, policies and literature	<ul style="list-style-type: none"> ■ Policies and laws amended ■ New laws developed and enacted 	Jan-June 2008	MoYDS, Law Commission, MoJ, MoGCS, MoYDS, MoH, MoE, UNCT	191, 252.57
	6. Organize meetings and media events for draft policies, amendments, and/or new legislation at national and grassroots level	<ul style="list-style-type: none"> ■ # of meetings organized ■ # of media events organized ■ Level of support for laws and policies 	Jan-June 2008	YSOs, MoYDS, NYCoM, YLOs, FBOs, Cultural institutions, MoGCS	6, 971.29
	7. Develop, print and distribute issue-specific fact sheets on SRH and HIV/AIDS, human rights, substance abuse, poverty and unemployment for youth overall and as part of SRH advocacy kit	<ul style="list-style-type: none"> ■ Fact sheets developed ■ 10, 000 fact sheets printed and distributed 	Jan-Dec 2009	MoYDS, NYCoM, YSOs, FBOs, MoGCS	28, 319.09

Strategic Objective 1: Enabling and supportive policy environment improved for Addressing SRH and HIV Prevention Programs for Young People					
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
	8. Present amendments, new legislation and/or policies to the Cabinet for approval	<ul style="list-style-type: none"> ■ Harmonized policies and laws adopted and enacted 	Jan-Dec 2009	MoJ, MoGCS, MoYDS, MoH, NAC, Parliament	MoYDS ORT
Sub-objective 1.1.3: Law enforcements agents supportive and enforcing SRH and gender-related laws and policies	9. Conduct trainings of different cadres of law enforcement agents on youth vulnerability to HIV, gender violence, harmful practices and SRH related problems and their rights under the national laws and policies	<ul style="list-style-type: none"> ■ # of different cadres of law enforcement agents (e.g. police, magistrate, court clerks, child protection, social service, prison guards) trained ■ % of law enforcement agents with skills to enforce laws and policies for young people ■ % of enforcing agents committed to enforce policies and laws ■ # of convictions after law enforcers are trained 	On-going	MoYDS, MoJ, MoGCS, Law Commission YSOs	2, 266, 260.00
	10. Implement advocacy plan at national, district and community levels	<ul style="list-style-type: none"> ■ Advocacy plan implemented at national, district and community levels 	Jan-Dec. 2008		YAC and YTC ORT
Sub-objective 1.1.4: Sector ministries policies and practices harmonized with national youth related policies and laws	11. Review all sector ministry policies and identify any gaps with new laws, policies	<ul style="list-style-type: none"> ■ # of sectoral ministry policies with integrated youth issues or concerns 	Jan-Dec. 2008	MoYDS, MoGCS, Law Commission	Covered under #4
	12. Revise relevant sector ministry policies and practices to be consistent with new laws, policies and issues	<ul style="list-style-type: none"> ■ Sectoral ministry policies revised 	Jan-Dec. 2008	MoYDS, MoGCS, Law Commission	Covered under #4
	13. Print and distribute SRH and youth related sectoral policies to district government offices	<ul style="list-style-type: none"> ■ SRH and youth related sectoral policies printed and distributed to district government offices 	Jan-Dec. 2008	MoYDS, MoGCS, NYCoM	MoYDS ORT

Strategic Objective 1: Enabling and supportive policy environment improved for Addressing SRH and HIV Prevention Programs for Young People					
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
Objective 1.2		Indicators	Means of Verification		Critical Assumptions
Increased understanding and commitment for SRH and gender-related issues, policies, laws and programs at all levels		<ul style="list-style-type: none"> ■ % of stakeholders with accurate knowledge about SRH related laws and policies ■ % of parents supporting sexuality education and services for young people 	<ul style="list-style-type: none"> ■ Survey report ■ MDHS ■ YFHS quarterly updates 		<ul style="list-style-type: none"> ■ MoYDS, will take leadership to coordinate ■ Capacity of MoYDS to coordinate ■ Financial resources mobilized and available
Sub-objective 1.2.1: Faith and community leaders supportive of youth rights and enforcement of laws and policies	14. Orient YACS and YTCs in advocacy and SRH and HIV/AIDS advocacy plan for young people	<ul style="list-style-type: none"> ■ 336 YAC and YTC members receive orientation in advocacy, SRH and HIV/AIDS advocacy plan 	Jan-Dec 2009	MoYDS, MoGCS, NYCoM, YSOs, NAC, UNCT, MIAA	225, 871.46
	15. Organize national religious leaders conference to review policies, programs and training curricula of religious schools in relation to SRH, HIV prevention, some cultural practices and gender issues	<ul style="list-style-type: none"> ■ # of religious leaders' conferences organized ■ # of resolutions by religious institutions ■ # and names of religious institutions with reviewed policies, programs and school curricula 	Jan-Dec 2009	MoYDS, MoGCS, NYCoM, YSOs, NAC, UNCT, MIAA	46, 317.10
	16. Target different cultural institutions with SRH/HIV interventions (traditional leaders, traditional healers, Namkungwi's, Angaliba and marriage counselors)	<ul style="list-style-type: none"> ■ 3, 000 people from different cultural institutions targeted (100 per TA) 	Jan-Dec 2009	MoYDS, MoGCS, NYCoM, YSOs, NAC, UNCT, MIAA	No budget, part of daily routine work for YACs (YAC advocacy activity)

Strategic Objective 1: Enabling and supportive policy environment improved for Addressing SRH and HIV Prevention Programs for Young People					
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
	17. Review cultural practices of each cultural group that have an impact on SRH and HIV and identify positive and negative practices(including which harmful practices to eliminate or promote)	<ul style="list-style-type: none"> ■ SRH and HIV, gender related cultural practices reviewed by cultural groups ■ # of positive and negative cultural issues identified by cultural group 	Jan-Dec 2009	TA, Advocacy Coalition, MoYDS, MoGCS, NYCoM, YSOs, NAC, UNCT	85, 620.86
	18. Provide grants for planning and review of advocacy activities to YACs and YTCs	<ul style="list-style-type: none"> ■ Amount of grants provided to religious and TA coalitions ■ # of advocacy activities implemented ■ # of educational materials distributed and used 	Jan-Dec 2009	MoYDS, MoGCS TAs, Advocacy Coalition, NYCoM, YSOs, NAC, UNCT	506, 057.14
Sub-objective 1.2.3: Increased media support and reporting on SRH issues, rights, laws and policies, gender and cultural practices	19. Train media networks on SRH, gender, rights, laws and policies related advocacy	<ul style="list-style-type: none"> ■ # of media personnel trained ■ # of media houses supported ■ # of media houses regularly reporting on SRH and HIV prevention related issues 	Jan-Dec 2009	MoYDS, TWG-YP, NAMISA	11, 331.30
	20. Identify and supply literature for media network resource centers based at NAMISA offices (1 in Lilongwe and another in Blantyre)	<ul style="list-style-type: none"> ■ 2 media resource centers established ■ # of journalists accessing and using information from resource centers 	Jan-Dec 2009	MoYDS, Media networks, NAMISA	Covered under MoYDS ORT
	21. Conduct periodic listener ship and readership surveys and revise as appropriate	<ul style="list-style-type: none"> ■ 2 of listener ship and readership surveys conducted ■ # of revisions done 	Jan-Dec 2009	MoYDS, MoGCS, UNCT	50, 000.00

Strategic Objective 1: Enabling and supportive policy environment improved for Addressing SRH and HIV Prevention Programs for Young People					
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
Objective 1.3		Indicators	Means of Verification	Critical Assumptions	
Increased support for scaling up and sustainability of comprehensive SRH and HIV prevention programs		<ul style="list-style-type: none"> ■ # of youth networks and coalitions implementing SRH programs ■ # of networks for young people ■ Amount of resources mobilized for SRH and HIV prevention in the past 12 months by type of organization and district ■ # of youth organizations with SRH programs ■ # of community members supportive of SRH and HIV programs 	<ul style="list-style-type: none"> ■ Program Reports ■ Survey reports 	<ul style="list-style-type: none"> ■ Supportive political will ■ MoYDS has the capacity to provide leadership 	
Sub-objective 1.3.1: Strengthened capacity of YSOs and YLOs for SRH advocacy	22. Orient existing media networks on SRH and HIV including facilitation of development of their TORs	■ Advocacy capacity assessment completed	Jan-Dec 2009	MoYDS, TWG-YP, NYCoM, YSOs, YLOs	85, 620.86
	23. Identify new organizations to implement SRH and HIV prevention activities as members of the coalition	■ # of new coalition members recruited and implement SRH activities	Jan-Dec 2009	MoYDS, NYCoM, YSOs	ORT
	24. Distribute policy documents to all DYOs, YTC and other district level sectoral ministries	■ Policy documents distributed to DYOs, YTC and other district level sectoral ministries	On-going		ORT
	25. Conduct resource mobilization ToT for YSOs and YLOs including proposal writing	■ # of ToT's conducted at national, district and community level	Jan-Dec 2009	MoYDS, NYCoM, , NAC, UNCT, YSOs, YLOs	85, 620.86
	26. Carry out resource mobilization activities	■ Resource mobilization activities carried out	On-going	YSOs and YLOs	0.0

Strategic Objective 2: Increased Knowledge and Skills towards Adoption of Safer Sexual Practices among Young People aged 10-24							
Objective 2.1		Indicators		Means of Verification		Critical Assumptions	
Increased access to SRH BCC activities and materials for adoption of safer sexual behaviors		<ul style="list-style-type: none"> ■ % of sexually active respondents who had sex with a non-regular partner with the previous 12 months (by gender, residence and marital status) ■ % of young people reporting consistent use of condoms during sexual intercourse with a non-regular sexual partner by gender, residence and age (15-19, 20-24) ■ Median age at first sex among 15-24 year old (by gender and residence) ■ % of young people age 15-24 who had sex with more than 1 partner in the previous 12 months by age (15-19, 20-24), gender and residence ■ % of young people age 10-24 who correctly identify ways of preventing sexual transmission of HIV and who reject major misconceptions about HIV transmission by gender and residence ■ % of young people 10-24 exposed to SRH, HIV and gender related media campaigns ■ % of young people 10-24 exposed to life-skills based SRH and HIV education in previous 12 months (by gender, district and whether in school or out of school youth) ■ % of young people expressing accepting attitudes towards people living with HIV/AIDS by gender and level of education ■ % of schools providing life skills based BCC 		<ul style="list-style-type: none"> ■ Survey report ■ MDHS 		Young people will participate in SRH BCC activities	
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)		
Sub-objective 2.1.1: Scale up LSE for in-school young people	1. Reprint and distribute existing LSE materials to all schools	<ul style="list-style-type: none"> ■ # of LSE materials revised and printed by type and by school level 	Jan-Dec 2009	MoYDS, MIE, MoE, NAC, MoGCS, TWG-YP, UNCT	517, 500.00		
	2. Train all LSE teachers in all schools	<ul style="list-style-type: none"> ■ # teachers trained in LSE ■ % of schools with trained LSE teachers 	Jan-Dec 2009	MoYDS, MIE, MoE, NAC, MoGCS, TWG-YP, UNCT	2, 578, 457.14		
	3. Strengthen MIE to coordinate LSE	<ul style="list-style-type: none"> ■ 2 vehicles procured ■ 2 laptops procured ■ 1 photocopier procured 	Jan-Dec 2009	MoYDS, MIE, MoE, UNCT, NAC	62, 035.14		

Strategic Objective 2: Increased Knowledge and Skills towards Adoption of Safer Sexual Practices among Young People aged 10-24					
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
	4. Monitor and review teaching of LSE in all schools	■ Teaching of LSE monitored and reviewed and lessons learnt used to make improvements	On-going	MoYDS, MIE, MoE, NAC, MoGCS, TWG-YP, UNCT	18, 519.29
	5. Support establishment of Guidance and Counseling framework	■ Guidance and Counseling framework supported and established	Jan-Dec 2011	MoYDS, MIE, MoE, NAC, MoGCS, TWG-YP, UNCT	75, 000.00
	6. Review and print Guidance and Counseling materials	■ Guidance and Counseling materials reviewed and printed	Jan-Dec 2011	MoYDS, MIE, MoE, NAC, MoGCS, TWG-YP, UNCT	75, 621.43
	7. Conduct a ToT on Guidance and Counseling to Primary Education Advisors (PEA)	■ 600 PEAs trained in Guidance and Counseling	Jan-Dec 2011	MoYDS, MIE, MoE, NAC, MoGCS, TWG-YP, UNCT	3, 392, 163.90
	8. Refresh or train teachers in Guidance and Counseling	■ 13, 000 teachers in Guidance and Counseling	Jan-Dec 2011	MoYDS, MIE, MoE, NAC, MoGCS, TWG-YP, UNCT	1, 074, 626.20
	9. Provide technical assistance for scaling up Guidance and Counseling	■ Technical assistance in Guidance and Counseling provided	Jan-Dec 2011	MoYDS, MIE, MoE, NAC, MoGCS, TWG-YP, UNCT	600, 000.00
	10. Monitor and review provision of guidance and counseling	■ Provision of guidance and counseling monitored and reviewed and lessons learnt used to make improvements	Jan-Dec 2011	MoYDS, MIE, MoE, NAC, MoGCS, TWG-YP, UNCT	185, 914.29

Strategic Objective 2: Increased Knowledge and Skills towards Adoption of Safer Sexual Practices among Young People aged 10-24					
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
	11. Conduct SRH, HIV and GBV prevention, gender and human rights needs assessment in tertiary education institutions (TEIs)	<ul style="list-style-type: none"> Needs assessment conducted 	Jan-Dec 2011	MoYDS, MIE, MoE, NAC, MoGCS, TWG-YP, UNCT	75, 000.00
Sub-objective 2.1.2: Scaled up LSE for out of school and vulnerable young people	12. Develop, print and distribute minimum package of LSE and other BCC support materials for different categories of out of school youth	<ul style="list-style-type: none"> Minimum LSE and supportive BCC materials for different categories of vulnerable youth developed , printed and distributed Counseling guide content agreed upon 	Jan-Dec 2010	MoYDS, MIE, MoE, NAC, MoGCS, TWG-YP, UNCT	2, 942, 400.00
	13. Provide minimum package to out of school most at risk youth in their localities	<ul style="list-style-type: none"> 3, 640, 000 LS session provided to most at risk youth by category in the past 12 months # of other BCC supportive education activities provided to most at risk youth by category in the past 12 months # of most at risk youth aged 10-24 exposed to life skills education in the past 12 months 	Jan-Dec 2010	MoYDS, MIE, MoE, NAC, MoGCS, TWG-YP, YSOs, UNCT	20, 800, 000.00
	14. Train EDZI TOTO leaders, including at risk young people	<ul style="list-style-type: none"> 15, 000 club leaders trained 	Jan-Dec 2010	MoYDS, MIE, MoE, NAC, MoGCS, TWG-YP, UNCT, YSO	3, 105, 000.00
	15. Establish networks for young people in each TA	<ul style="list-style-type: none"> Networks of young people in each TA established 	Jan-Dec 2010	MoYDS, MIE, MoE, NAC, MoGCS, TWG-YP, UNCT, YSO	114, 450.00

Strategic Objective 2: Increased Knowledge and Skills towards Adoption of Safer Sexual Practices among Young People aged 10-24					
Sub-objectives	Key Activities	Outputs and targets	Jan-Dec 2011	Responsible Partners	Estimated Budget 2008-2012 (US\$)
	16. Select sub-group of graduates and train them in leadership, advocacy, gender and human rights and LS facilitation	<ul style="list-style-type: none"> ■ # of graduates trained in leadership. Advocacy, gender and human rights and LS facilitation 	Dec-Jan 2009	MoYDS, NYCoM, MoE, MIE, NAC, MoGCS, TWG-YP, UNCT, YSO	195, 700.00
	17. Scale up minimum package and outreach through LS facilitators for most at risk youth	<ul style="list-style-type: none"> ■ # of LS outreaches by facilitators ■ # of most at risk youth (by category) reached through LS education and outreach ■ # of young people adopting positive behaviors (e.g. abstinence, consistent condom use, reduced sexual concurrent partners, avoidance of drug use, testing for HIV and getting results, participating in PMTCT) by age, residence, school level and sex. 	On-going	MoYDS, NYCoM, MoE, MIE, NAC, MoGCS, TWG-YP, UNCT, YSO	204, 450.00
Sub-objective 2.1.3: Scale up LSE for young people in work places	18. Organize stakeholders meetings with work place management and solicit their commitment to support SRH work place programs	<ul style="list-style-type: none"> ■ # of meetings with workplace management organized by type of workplace ■ # of workplaces showing commitment to provision of SRH and HIV prevention to young people in their workplace 	Jan-Dec 2008	MoYDS, NYCoM, MIE, NAC, MoGCS, TWG-YP, UNCT, YSO, Development Partners	20, 000.00
	19. Carry out LSE for young people in work places	<ul style="list-style-type: none"> ■ LSE carried out for young people 	On-going	MoYDS, MoE, NAC, MoGCS, TWG-YP, UNCT, YSO, Development Partners	669, 653.57

Strategic Objective 2: Increased Knowledge and Skills towards Adoption of Safer Sexual Practices among Young People aged 10-24					
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
Sub-objective 2.1.4: Improved and expanded SRH peer education activities	20. Train peer educators from various youth categories (in and out of school) in SRH, HIV prevention, gender and human rights, advocacy and peer education, condom distribution skills	<ul style="list-style-type: none"> ■ # of peer educators selected and trained by category ■ # of peer educators by age (15-19, 20-24) adopting positive sexual and reproductive health behaviors by age, sex, residence (e.g. abstaining from sex, using condoms consistently, testing their HIV status and getting their results, using dual contraception, avoiding concurrent sexual partners, avoiding drugs, refuting GBV and harmful sexual practices) 	Jan-Dec 2009	MoYDS, MoH, DHOs, MoE, YSOs, FBOs, YLOs, NYCoM,	175, 242.86
	21. Equip trained peer educators with BCC materials, videos, brochures on laws and policies, male and female condom demonstration models, management information forms	<ul style="list-style-type: none"> ■ # of trained peer educators equipped with BCC materials ■ # of peer educators returning completed peer contact forms 	Jan-Dec 2009	MoYDS, MoH, DHOs, MoE, YSOs, FBOs, YLOs, TAs, NYCoM, DYOs	300, 000.00
	22. Implement peer outreaches including condom distribution activities for various groups of young people	<ul style="list-style-type: none"> ■ # of peer education outreaches carried out ■ # of materials distributed ■ # of condoms distributed by type ■ # of youth contacted by peer educators 	Jan-Dec 2009	MoYDS, MoH, MoE, YSOs, YSOs, YLOs, TAs, NYCoM	114, 107.14

Strategic Objective 2: Increased Knowledge and Skills towards Adoption of Safer Sexual Practices among Young People aged 10-24					
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
	23. Conduct regular supervision of peer educators	<ul style="list-style-type: none"> ■ # of peer outreaches carried out ■ # materials distributed ■ # of condoms distributed by type ■ # of youth contacted by peer educators 	Jan-Dec 2009		49,314.29
	24. Develop an incentive package for peer educators and peer graduates on prospects for advancement and employment	<ul style="list-style-type: none"> ■ Incentive package in place ■ # of peer education graduates employed as youth workers; ■ # of PE graduates linked with livelihood and educational opportunities 	Jan-Dec 2009	MoYDS, MoH, DHOs, MoE, YSOs, FBOs, YLOs, TAs, NYCoM	-
	25. Organize periodic peer educators review meetings and refresher courses to identify emerging issues in SRH and HIV, gender and human rights	<ul style="list-style-type: none"> ■ # review meetings and updates held with peer educators by category of youth ■ List of issues, questions, misconceptions addressed ■ # of refresher courses 	Jan-Dec 2009	MoYDS, MoH, DHOs, YSOs, FBOs, YLOs, TAs, NYCoM, DYOs	487,274.64
Sub-objective 2.1.5: Increase access to information on gender and legal literacy	26. Integrate gender equity and equality and prevention of GBV, harmful cultural practices, rights and ways to access YFHS into minimum package of LSE	<ul style="list-style-type: none"> ■ Gender, human rights, GBV prevention, and harmful practices issues integrated into BCC minimum package for all categories of youth ■ List of issues being addressed in youth programs ■ # of young people knowledgeable about gender equality, their rights, negative cultural practices, access to services.) 	Jan-Dec 2009	MoYDS, MoGCS, UNCT, NAC	0.00

Strategic Objective 2: Increased Knowledge and Skills towards Adoption of Safer Sexual Practices among Young People aged 10-24					
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
	27. Train selected number of youth network members as paralegals and introduce them into the community and law enforcement agencies	<ul style="list-style-type: none"> ■ # of youth network members trained as paralegals by category of youth ■ # of trained paralegals knowledgeable about young people's rights under Malawian laws and policies and ways youth can access justice in their communities 	Jan-Dec 2009	MoYDS, MIE, MoE, NAC, MoGCS, TWG-YP, UNCT, YSO, Development Partners	50, 000.00
	28. Provide technical and financial support to the work of paralegals in the community including linking them with pro bono legal services to cases of violations identified	<ul style="list-style-type: none"> ■ # of violations and complaints of youth rights reported to paralegals ■ # of victims referred to Victim support units ■ # of youth rights violation cases taken to court ■ # of convictions ■ # of cases mediated ■ # of paralegals advocating for youth rights ■ # of rape cases referred for post exposure prophylaxes and emergency contraception 	Jan-Dec 2009	MoYDS, MoGCS, TWG-YP, UNCT, YSO, Development Partners	ORT
	29. Document reported cases of violations of youth rights and related convictions	<ul style="list-style-type: none"> ■ % of young people (10-14, 15-19, 20-24) reporting violations of their rights ■ # of cases of violations reported and documented 	Jan-Dec 2009	MIE, MoE, NAC, MoGCS, TWG-YP, UNCT, YSO,	ORT
Sub-objective 2.1.6: Young women's skilled in GBV prevention strategies	30. Train young women in GBV prevention strategies	<ul style="list-style-type: none"> ■ # of young women trained in GBV prevention strategies 	Jan-Dec 2010	MoYDS, NAC, MoGCS, TWG-YP, UNCT, YSO	50, 000.00

Strategic Objective 2: Increased Knowledge and Skills towards Adoption of Safer Sexual Practices among Young People aged 10-24					
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
Sub-objective 2.1.7 Increased access to alternative rites of passage (ARP) program among youth undergoing traditional initiation in selected communities	31. Develop alternative rites of passage manual for young initiates in Malawi to include positive aspects of initiations and SRH, HIV prevention, gender and human rights education.	<ul style="list-style-type: none"> ■ Alternative rites of passage manual developed ■ # of TAs and Counselors involved in the manual development ■ List of negative practices identified for elimination ■ List of positive practices identified for promotion 	Jan-Dec 2010	MoYDS, MIE, MoE, NAC, MoGCS, TWG-YP, YSO, YLOs	25, 000.00
	32. Organize alternative rites of passage program for initiates in different communities	<ul style="list-style-type: none"> ■ # of alternative rites of passage programs organized by community ■ # of initiates (10-24) exposed to alternative rites of passage program in the past 12 months by community and by sex. 	Jan-Dec 2010	MoYDS, MIE, MoE, NAC, MoGCS, TWG-YP, YSO, YLOs	YAC ORT
	33. Organize Alternative Rites of Passage graduates into a support and advocacy network	<ul style="list-style-type: none"> ■ # of ARP graduate networks formed ■ # of ARP members in each network ■ # of ARP networks formed 	Jan-Dec 2010	MoYDS, MIE, MoE, NAC, MoGCS, TWG-YP, YSO, YLOs	MoYDS ORT
Sub-Objective 2.1.8 Increased exposure to BCC and edutainment activities using mass and folk media	34. Conduct media listener ship, viewer ship and readership survey of current media houses (TV, print and electronic media) and BCC programs targeting youth	<ul style="list-style-type: none"> ■ Listener ship, viewer ship and readership survey conducted 	On-going	MoYDS, NAMISA, TWG-YP, UNCT, NAC, YSOs, NYCoM	30, 000.00

Strategic Objective 2: Increased Knowledge and Skills towards Adoption of Safer Sexual Practices among Young People aged 10-24					
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
	35. Carry out media content analysis of SRH, HIV prevention, gender, human rights and cultural related content in media programs and identify quality and content gaps	<ul style="list-style-type: none"> ■ Media content analysis conducted ■ Detailed list of gaps identified 	On-going	MoYDS, MoGCS, NAMISA, MoE, NAC, TWG-YP, YSO, YLOs	30, 000.00
	36. Develop scale up plan for mass media program for young people based on analysis.	<ul style="list-style-type: none"> ■ Mass media scaling up plan developed 	Jan-Dec 2009	MoYDS, MIE, MoE, NAC, MoGCS, TWG-YP, YSO, YLOs	25, 289.07
	37. Provide financial support to media houses to produce interactive and thematic BCC programs for young people	<ul style="list-style-type: none"> ■ # of radio, TV and print programs on SRH, HIV prevention, gender and human rights produced and number of hours aired in the past 12 months (by type of media) ■ # of themes addressed in last 12 months ■ # of programs re-run in community radios and local languages 	On-going	MoYDS, MIE, MoE, NAC, MoGCS, TWG-YP, YSO, YLOs	1, 058, 571.40
	38. Organize media listener ship, readership and viewer ship groups among the various vulnerable youth networks	<ul style="list-style-type: none"> ■ # of youth listener ship, readership and viewer ship groups organized by category of youth, gender and residence ■ # of youth in each group ■ List of issues identified by youth during feedback incorporated into program ■ # of youth groups interviewed for media programs 	On-going	MoYDS, NYCoM, NAC, MoGCS, TWG-YP, YSOs, YLOs	124, 285.71

Strategic Objective 2: Increased Knowledge and Skills towards Adoption of Safer Sexual Practices among Young People aged 10-24					
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
	39. Coordinate media program themes on BCC and advocacy activities of YSOs and YLOs for maximum impact	<ul style="list-style-type: none"> ■ # of coordinated BCC and advocacy issues/themes organized in the past 12 months ■ # of youth reporting exposure to media programs in the past 12 months 	Jan-Dec 2009	MoYDS, NAC, MoGCS, TWG-YP, YSO, YLOs	20, 745.96
	40. Feature BCC programs in the media	<ul style="list-style-type: none"> ■ # of features of BCC programs by media types ■ # of young people exposed to BCC through the media ■ List of feedback issues received from audiences 	On-going	MoYDS, NAC, MoGCS, TWG-YP, YSOs, YLOs	40, 000.00
	41. Equip 300 groups with equipment which includes uniforms, drums and PA systems	<ul style="list-style-type: none"> ■ 300 groups equipped with equipment 	Jan-Dec 2009		39, 557.14
	42. Equip 300 groups with sport and recreational materials to integrate SRH activities in sports	<ul style="list-style-type: none"> ■ 300 groups equipped with sport and recreational materials 	Jan-Dec 2009	MIE, MoE, NAC, MoGCS, TWG-YP, YSO, YLOs	69, 642.86
	43. Organize story telling contest against GBV and HIV and prevention	<ul style="list-style-type: none"> ■ # of story telling contests held ■ # of winning stories ■ # of winners sponsored to tell their stories in schools, communities and radio 	Jan-Dec 2009	MoYDS, TAs, YSOs, YLOs, Traditional Artists?	2, 314, 285.7

Strategic Objective 2: Increased Knowledge and Skills towards Adoption of Safer Sexual Practices among Young People aged 10-24					
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
Sub-objective 2.2.1 Increased parent-child communication on SRH and HIV prevention issues in the homes and communities	44. Review existing SRH, HIV and drug abuse prevention, parent-child communication materials	<ul style="list-style-type: none"> Parent-child communication materials reviewed 	Jan-Dec 2009	MoYDS, MoE, MoGCS, YSOs, PTAs, YLOs, FBOs, TAs,	23, 464.11
	45. Provide support for development of parent child communication manual and guide and how o communicate Q&A PCC guide	<ul style="list-style-type: none"> Updated parent-child communication manual developed, printed, and distributed to parents and peer educators 	Jan-Dec 2009	MoYDS, MoGCS, , PTAs, TAs, UNCT	62, 464.10
	46. Train PCC ToTs within PTAs, organized women's and men's groups, religious groups and associations	<ul style="list-style-type: none"> 13, 000 PTA ToTs and SMC members trained in PCC skills 	Jan-Dec 2009	MoYDS, MoE, MoGCS, YSOs, PTAs, YLOs, FBOs, TAs	77, 907.14
	47. Establish a network of concerned parents against GBV	<ul style="list-style-type: none"> # of concerned fathers against GBV networks established # of sub-groups of PCC formed and functional 	Jan-Dec 2009	MoYDS, MoE, MoGCS, YSOs, PTAs, YLOs, FBOs, TAs	42, 668.57
	48. Supervise and support parent peer education within their membership and in the communities	<ul style="list-style-type: none"> # of parents reaching other parents with PCC skills 	Jan-Dec 2009	MoYDS, YSOs, PTAs, YLOs, FBOs, TAs,	MoYDS ORT

Strategic Objective 2: Increased Knowledge and Skills towards Adoption of Safer Sexual Practices among Young People aged 10-24					
Objective 2.3		Indicators	Means of Verification		Critical Assumptions
Improved YSO and YLO competence to design, implement, monitor, document and sustain BCC activities		<ul style="list-style-type: none"> ■ # of YSOs and YLOs trained in design, implementation, monitoring, documentation and sustainability of BCC activities ■ % of YSOs and YLOs competent to design, implement, monitor, document and sustain BCC activities 	<ul style="list-style-type: none"> ■ Program reports ■ Survey reports 		<ul style="list-style-type: none"> ■ MoYDS will be committed and provide the required leadership ■ Development partners will be committed to provide technical assistance
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
Sub-objective 2.3.1 Staff of YSOs and YLOs (leaders) trained in BCC	49. Staff of YSOs and YLOs trained in BCC and RBM and participatory learning	■ BCC Programming capacity of YSOs YLOs assessed	Jan-Dec 2009	MoYDS, MIE, NAC, MOGCS, TWG-YP, YSO, YLOs, UNCT, Development Partners	204, 450.00
	50. Document lessons learned and best/promising BCC practices identified	■ BCC training manual adapted	Jan-Dec 2009	MoYDS, MIE, MoE, NAC, MOGCS, TWG-YP, YSO, YLOs	125, 000.00
	51. Disseminate results of the evaluations and best practices	■ National BCC TOT carried out and established	Jan-Dec 2009	MoYDS, MIE, MoE, NAC, MoGCS, TWG-YP, YSO, YLOs	13, 011.43
	52. Provide grants to YSOs and YLOs to reach communities with BCC	■ # of YSO staff and youth leaders trained in BCC strategies and skills	Jan-Dec 2009	MIE, MoE, NAC, MoGCS, TWG-YP, YSO, YLOs	-

Strategic Objective 3: Increased Utilization of quality youth friendly sexual and reproductive health services			
Objective 3.1	Indicators	Means of Verification	Critical Assumptions
Increased accessibility of quality YFHS	<ul style="list-style-type: none"> ■ # of condoms distributed to young people age 15-24 in last 12 months by type and district ■ # of condoms distributed by social marketing agencies to youth age 15-24 years in last 12 months by type of outlet, district and type of condom ■ % of pregnant women aged 15-24 that have been tested in the past 12 months (by age group 10-24 and district) ■ % of HIV positive mothers provided with 3-months alternative infant feeding in the past 12 months by age group (10-24) and by district ■ % of pregnant women offered PMTCT who are referred for care services in the past 12 months by age group and district ■ % of pregnant young women who have been counseled in PMTCT, tested and received sero-status results in the past 12 months by age group (10-24), type institution (private, public) and district ■ % of HIV positive pregnant young women receiving complete course of ARV prophylaxis to reduce the risk of mother to child transmission (by type of provider, district and age (10-24)) ■ % of young women with STIs who have been diagnosed, treated and counseled according to national management guideline by gender and age (10-14, 15-19 and 20-24) ■ # of young people with STI seen at health facilities in the past 12 months (by type of case, new case or referred partner) by district and gender ■ # of HTC clients tested for HIV at HTC sites and receiving their results in the past 12 months by age (10-14, 15-19, 20-24) by district and gender ■ % of young people who have been tested for HIV in the past 12 months by age (10-14, 15-19, 20-24) by district and gender ■ % of HIV positive HTC youth who are referred to care and support services in the past 12 months by age, district and gender ■ # of young people enrolled HIV/AIDS organizations in the past 12 months by gender, district and age (10-14, 15-19, 20-24) ■ % of young people detected with TB who have successfully completed their TB treatment by gender, district and type of TB ■ % of young people receiving ARV therapy by age (10-14, 15-19, 20-24), gender and by type of health facility ■ % of young people coming for PAC services, with pregnancy, receiving contraception and referred for other services 	<ul style="list-style-type: none"> ■ MDHS ■ Survey reports 	<ul style="list-style-type: none"> ■ No national condom stock-outs ■ No test kits stock-out ■ ARV continue to be accessible ■ No adverse media reporting on SRH Political and community support ■ Donor partners' support to the program ■ Attrition of young people will be minimized

Strategic Objective 3: Increased Utilization of quality youth friendly sexual and reproductive health services					
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
Sub-objective 3.1.1 YFHS SRH institutionalized into existing pre- and in- service training programs for health providers	1. Review current curricula of basic and post basic health providers (medical and nursing schools and health education students) and identify strength and gaps	■ Basic and post basic curricula for health providers (medical, nursing and health education) reviewed	Jan-Dec 2009	MoYDS, MIE, NAC, UNCT, Development Partners	18, 668.57
	2. Train tutors and lecturers from health training schools in the use of training materials including development of ready to use power point presentations, handouts, video and other supportive readings and materials; research and practical assignments for students	■ # of tutors oriented in use of interactive and ready to use materials for health provider schools	Jan-Dec 2009	MoYDS, MoH, NAC, UNCT, Development partners, University of Malawi Mzuzu University	77, 785.71
Sub-objective 3.1.2 Improved attitudes and competence of service delivery teams to provide quality YFHS	3. Develop a scaling up plan for national YFHS including number of health facilities (public and private) to be transformed per year and number of service providers to be trained and/or oriented per year	■ YFHS scaling up plan developed	Jan-Dec 2009	MoYDS, MoH, NAC, UNCT, Development partners, YSOs, YLO	0.00
	4. Train national and district level ToT to implement training plan based on scaling up plan—training to include knowledge building, attitude change and skills building components in SRH and HIV prevention BCC and youth rights, counseling, testing, treatment and referral services as per minimum package	■ # of national and district level TOTs trained and competent to deliver quality trainings	Jan-Dec 2009	MoYDS, MoH, NAC, UNCT, Development Partners	174, 642.86
	5. Train service providers for the different health facilities as per minimum YFHS package scaling up plan	■ # of service providers trained in YFHS per year	Jan-Dec 2009	MoYDS, MoH, NAC, UNCT	1, 222, 500.00

Strategic Objective 3: Increased Utilization of quality youth friendly sexual and reproductive health services					
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
	6. Train young people and adult CBDAs in YFHS including SRH, HIV prevention, gender, human rights and drug use, prevention of GBV and harmful cultural practices	<ul style="list-style-type: none"> ■ # of adult and youth CBDAs trained in SRH, gender, human rights and YFHS ■ # of YFHS facilities providing services 	Jan-Dec 2009	MoYDS, MoH, NAC, YSOs, UNCT, Development Partners, NYCoM, Human Rights Commission	3,321,308.57
	7. Orient all staff of health facilities in YFHS, young people's rights and their roles and responsibilities in supporting them	<ul style="list-style-type: none"> ■ # of staff of targeted health facilities oriented in YFHS in the past 12 months 	Jan-Dec 2009	MoYDS, MoH, NAC, YSOs, UNCT, Development Partners, NYCoM	296,228.57
Sub-objective 3.1.4 Improved facility environment and procedures	8. Procure and provide all drugs, supplies, equipment required for provision of minimum package for each facility according to scaling up plan	<ul style="list-style-type: none"> ■ All service delivery points equipped with appropriate drugs/supplies and equipment for minimum package 	On-going		0.00
	9. Conduct certification exercise for YFHS	<ul style="list-style-type: none"> ■ Biannual certification visits conducted 	On-going	MoYDS, MoH, YSOs, NAC, UNCT	43,000.00
	10. Develop and equip providers with appropriate job aids and tools to assist in delivery of quality services youth to include YFHS and client rights wall charts, a pocket guide for counseling and treating various categories of vulnerable young people	<ul style="list-style-type: none"> ■ Appropriate job aids developed and available in all health facilities ■ Health providers oriented in the use of job aids ■ # of service providers reporting use of job aids 	Jan-Dec 2009	MoYDS, MoH, YSOs, NAC, UNCT, NYCoM and Development Partners	5,121,494.29

Strategic Objective 3: Increased Utilization of quality youth friendly sexual and reproductive health services					
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
Sub-objective 3.1.5 Improved access to quality YFHS by young people	11. Provide quality youth friendly health services to young people through static health facilities (public, private)	<ul style="list-style-type: none"> ■ # of static SDPs providing YFHS by type of facility, residence, and owner (public or private) during the last 12 months ■ # of service providers delivering services by type of facility, residence, and owner during the last 12 months ■ # of young people by age (10-14, 15-19, 20-24), sex, type of service accessed, and type of facility ■ # of materials distributed by type ■ # of condoms distributed by type 	On-going	MoYDS, NYCoM, MoH, YSOs, FBOs	0.00
	12. Provide quality youth friendly service through mobile, non traditional service delivery agents (such as barber shops, hair saloons, market stalls) and outreach services (street, house to house by youth and adult CBDs) targeting especially vulnerable youth such as street vendors, petty traders, commercial sex workers, bus conductors, truck drivers, street youth	<ul style="list-style-type: none"> ■ # of YCBD providing service by age, gender and residence ■ # of non traditional service distributors serving youth providing minimum YFHS ■ # of young people by age sex, type of service accessed, and type of mobile service ■ # of materials distributed by type, gender and age ■ # of condoms distributed by type, gender and age 	On-going	MoYDS, MoH, YSOs, YLOs, Young People	3, 045, 714.29

Strategic Objective 3: Increased Utilization of quality youth friendly sexual and reproductive health services					
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
	13. Conduct coordination meetings to share experiences and best practices	<ul style="list-style-type: none"> ■ # of experience sharing and myth-bursting meetings organized in the past 12 months ■ Q&A information sheet developed based on difficult questions and myth raised ■ # of health providers improving services as a result of sharing experiences 	On-going	MoYDS, NYCoM, MoH, DHOs, YLOs, DYO	4, 210, 400.00
Sub-objective 3.1.6 Increased availability of support services for young people	14. Develop a referral system and related contact persons for health services not available in each service delivery point including for emergencies, PAC, ARV, TB prevention & treatment, PMTCT	<ul style="list-style-type: none"> ■ Referral list and contact persons developed for each facility ■ # of service providers using referral system 	Jan-Dec 2009	MoYDS, DYO, MoH, DHOs, YLOs,	195, 600.00
	15. Train on provide psychosocial support for young people living with HIV/AIDS	<ul style="list-style-type: none"> ■ Young people living with HIV/AIDS provided with psychosocial support 	Jan-Dec 2011	MoYDS, MoH, service providers, YSOs	489, 000.00
Objective 3.2		Indicators	Means of Verification		Critical Assumptions
Supportive environment for YFHS improved		<ul style="list-style-type: none"> ■ # of SRH and HIV service providers supportive of and integrated YFHS ■ % of youth clients expressing satisfaction with YFHS 	<ul style="list-style-type: none"> ■ Exit interview reports ■ Survey reports ■ Program reports 		<ul style="list-style-type: none"> ■ Continued commitment from Development Partners ■ Political and community commitment and support

Strategic Objective 3: Increased Utilization of quality youth friendly sexual and reproductive health services					
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
Sub-objective 3.2.1 Increased support for YFHS among teachers, guardians and the community leaders	16. Conduct participatory learning and action (PLA) at the community level to engage parents, guardians and community leaders on issues affecting young people in their communities, inform them about available YFHS services and solicit their support	<ul style="list-style-type: none"> ■ # of communities where PLA was conducted in support of SRH and YFHS ■ # of community resolutions and actions used to improve services ■ # of parents/guardians allowing their children to use services and participate in BCC and peer education activities 	Jan-Dec 2009	MoYDS, NYCoM MoH, YSOs, YLOs, Media, Concerned Parents'	60,000.00
Objective 3.3		Indicators	Means of Verification		Critical Assumptions
Increased demand for YFHS		<ul style="list-style-type: none"> ■ % of youth accessing YFHS by type of service, sex and age group (10-14, 15-19, 20-24) 	<ul style="list-style-type: none"> ■ MDHS ■ Survey reports ■ Program reports 		MoYDS will provide the necessary leadership
Sub-objective 3.3.1 Increased information about YFHS available to young people	17. Conduct community mobilization and sensitization activities targeting schools, religious institutions and community health festivals in the schools and communities	<ul style="list-style-type: none"> ■ # of health festivals conducted in primary, secondary and tertiary school settings by health facility and district ■ # of health providers and teachers participating in festivals ■ # of young people exposed to health festival messages ■ # of educational materials distributed during health festival 	Jan-Dec 2009	MoYDS, MoE, MoH, health providers, teachers/patrons/matrons, YSOs, YLOs	45,000.00

Strategic Objective 3: Increased Utilization of quality youth friendly sexual and reproductive health services					
Sub-objectives	Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
	18. Develop and print targeted BCC educational materials relevant for the delivery of the minimum package of services to include a set of videos for waiting room, client rights, wall chart, booklets for young people, other posters and brochures aimed at addressing the drivers of HIV/AIDS epidemic such risk of multiple and concurrent partnerships and intergenerational sex, importance of HTC, PMTCT, etc.	<ul style="list-style-type: none"> ■ Minimum set of educational materials developed and distributed to facilities ■ # of YFHS sites equipped with minimum set of educational materials 	Jan-Dec 2009	MoYDS, MoE, MoH, MIE, YSOs, YLOs, FBOs	6, 075, 291.43
Objective 3.4		Indicators	Means of Verification		Critical Assumptions
Functional systems for monitoring, supervising and evaluating YFHS established for public and private facilities and outreach activities		<ul style="list-style-type: none"> ■ % of facilities and outreach activities with functional systems for monitoring and, supervising and evaluating YFHS 	<ul style="list-style-type: none"> ■ Program reports 		<ul style="list-style-type: none"> ■ Willingness of private sector to support YFHS ■ Political will and commitment ■ Development partner support sustained
Sub-objectives	Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
Sub-objective 3.4.1 Functional health management information system strengthened to capture data for young people	19. Create disaggregated database for young people in each facility	<ul style="list-style-type: none"> ■ Disaggregated database created 	Jan-Dec 2009	MoYDS, NYCoM, MoH, NAC, NSO, UNCT, DHO	408, 107.14
	20. Conduct monitoring of provision YFHS	<ul style="list-style-type: none"> ■ Provision of YFHS provided 	On-going	MoYDS, MoH, NYCoM, NAC, NSO, UNCT, DHO	129, 600.00
	21. Train young people in conducting client satisfaction survey	<ul style="list-style-type: none"> ■ Young people conducting client satisfaction survey trained 	Jan-Dec 2009	MoH, NSO	782, 400.00

Strategic Objective 3: Increased Utilization of quality youth friendly sexual and reproductive health services					
Sub-objectives	Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
	22. Conduct periodic client satisfaction survey (mystery client visits to YFHS clinics, exit interviews and periodic facility assessments and re-assessments using YFHS criteria to monitor compliance, improvements and/or regressions)	<ul style="list-style-type: none"> ■ # of client satisfaction surveys carried out ■ List of issues identified from survey ■ # of improvements made on regressions 	On-going	MoYDS, TWG-YP, MoH, UNCT, YTC, Young people	480, 000.00
	23. Evaluate and document data and issues related to YFHS to improve and update program on continuous bases	<ul style="list-style-type: none"> ■ YFHS related issues identified and documented 	On-going	MoYDS, TWG-YP, YTC, MoH, NAC	480, 000.00

Strategic Objective 4: Increased accessibility of integrated SRH & livelihood skills development (LSD) institutions for vulnerable young people					
Objective 4.1		Indicators	Means of Verification	Critical Assumptions	
Enhanced capacity for integrating SRH BCC activities into livelihood skills development programs		<ul style="list-style-type: none"> ■ # of LSD institutions implementing SRH and HIV prevention programs within 12 last month periods ■ # of young people attending LSDs accessing SRH and HIV prevention BCC programs ■ # of LSD institutions' staff trained in SRH BCC ■ # of LSDs offering YFHS ■ # of youth in LSD programs using condoms consistently ■ # of LSD students postponing sexual initiation 	<ul style="list-style-type: none"> ■ Annual reports ■ Training reports ■ Service statistics 	<ul style="list-style-type: none"> ■ Willingness of proprietors and instructors to provide space for YFHS ■ Willingness and support of Development Partners ■ MoYDS able to provide the necessary leadership 	
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
Sub-objective 4.1.1 Viable livelihood skills and local artisans identified	1. Conduct a assessment of locally specific livelihood skills development programs, skill sets, marketability of those skills in the current job market	■ Livelihood skills development programs assessed	Jan-Dec 2010	MoYDS, MoH, NAC, UNCT, NGOs, Development Partners, LSD Institutions, TEVETA	51, 930.00
	2. Sensitize gate keepers and all key stakeholders	■ Gate-keepers sensitized	Jan-Dec 2010	MoYDS, MoH, NAC, UNCT, NGOs, TEVETA, Development Partners	8, 161.29
	3. Identify and recruit local artisans to train identified young people	■ 168 local artisans identified	Jan-Dec 2010	MoYDS, MoH, NAC, UNCT, NGOs, TEVETA, YLOs, Development Partners	0.00
	4. Orient local artisans on training skills	■ 168 local artisans receive orientation	Jan-Dec 2010	MoYDS, MoH, NAC, UNCT, NGOs, TEVETA, YLOs, Development Partners	6, 844.00
	5. Draft and sign Memorandum of Understanding (MOU) with local artisans	■ MOU drafted and signed	Jan-Dec 2010	MoYDS, MoH, NAC, UNCT, NGOs, TEVETA, YLOs, Development Partners	0.00

Strategic Objective 4: Increased accessibility of integrated SRH & livelihood skills development (LSD) institutions for vulnerable young people					
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
	6. Procure training materials (grants to support wear and tear of artisan tools and basic training materials)	<ul style="list-style-type: none"> Training materials procured and distributed 	Dec-Jan 2010	MoYDS, MoH, NAC, UNCT, NGOs, TEVETA, YSOs and YLOs	180,000.00
Sub-objective 4.1.2: Young people identified and trained and supported as entrepreneurs	7. Provide vocational, business management and entrepreneurship training	<ul style="list-style-type: none"> 7,000 trained young people provided with business management and entrepreneurship training 	Dec-Jan 2010	MoYDS, MoH, NAC, UNCT, NGOs, TEVETA, YSOs and YLOs	110,445.54
	8. Provide business advisory services to young people trained in livelihood skills	<ul style="list-style-type: none"> 7,000 trained young people provided with business advisory services to young people 	On-going	MoYDS, MoH, NAC, UNCT, NGOs, TEVETA, Development Partners	0.00
	9. Provide honoraria to local artisans	<ul style="list-style-type: none"> 7,000 trained young people provided with honoraria 168 local artisans provided with honoraria 	On-going	MoYDS, MoH, NAC, UNCT, NGOs, TEVETA, YSOs and YLOs	1,716,000.00
	10. Provide start-up capital and resources to young people trained in livelihood skills	<ul style="list-style-type: none"> 7,000 trained young people provided with start-up capital and resources 	Jan-Dec 2010	MoYDS, MoH, NAC, UNCT, NGOs, TEVETA, YSOs and YLOs	200,000.00
	11. Conduct bi-annual review	<ul style="list-style-type: none"> Bi-annual reviews conducted 	On-going	MoYDS, MoH, NAC, UNCT, NGOs, TEVETA, YSOs and YLOs	0.00
Objective 4.2		Indicators	Means of Verification		Critical Assumptions
Increased access to SRH and HIV prevention information, skills & services among youth attending livelihood development programs		<ul style="list-style-type: none"> # of livelihood programs providing SRH and HIV prevention information, skills and services # of young people accessing SRH and HIV prevention information, skills and services # of young people accessing livelihood programs 	<ul style="list-style-type: none"> Program reports Survey reports 		<ul style="list-style-type: none"> Organizations implementing livelihood programs will have the will to integrate SRH and HIV prevention information in their programs

Strategic Objective 4: Increased accessibility of integrated SRH & livelihood skills development (LSD) institutions for vulnerable young people					
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
Sub-Objective 4.2.1 Minimum BCC and YFHS package provided to formal and informal LSD students	12. Provide minimum BCC package including life skills education to LSD students as designed	<ul style="list-style-type: none"> Minimum BCC package including life skills training, video shows and other activities provided to LSD students at national and district levels 	On-going	MoYDS, LSD institutions, TEVETA, YSOs, YLOs, NYCoM	500,000.00
	13. Establish a peer education and YCBDA program within LSD institutions	<ul style="list-style-type: none"> Peer education/YCBDA established in LSD institutions 	Jan-Dec 2009	MoYDS, LSD institutions, TEVETA, YSOs, YLOs, NYCoM, MoYDS	20,000.00
	14. Compile and provide daily and monthly service statistics forms to peer educators for recording their activities as well as BCC materials and referral forms	<ul style="list-style-type: none"> Peer educators provided with daily and monthly service statistics forms and BCC materials and referral forms 	On-going	MoYDS, LSD institutions, TEVETA, YSOs, YLOs, NYCoM	ORT
	15. Provide counseling and condoms through YFHS corners established in LSD institutions	<ul style="list-style-type: none"> Counseling and condoms provided to youth through YFHS corners 	On-going	MoYDS, LSD institutions, TEVET, YSOs, YLOs, NYCoM	0.0
	16. Establish referral system for SRH and social services for young people accessing livelihood programs	<ul style="list-style-type: none"> Referral system of health and social services established; Linkages established with social services and referral cards prepared 	Jan-Dec 2009	MoYDS, LSD institutions, TEVET, YSOs, YLOs, NYCoM,	20,000.00

Strategic Objective 5: Coordination for SRH & HIV Prevention Programming and Partnership Strengthened					
Objective 5.1		Indicators	Means of Verification	Critical Assumptions	
Coordination mechanism at the national, district, community and sectoral ministry levels established and/or strengthened		<ul style="list-style-type: none"> ■ Effective coordination mechanisms in place at national, district and community levels ■ # of coordination meetings carried out per year by sectoral ministries TWG, YTCs and YACs ■ List of coordination issues discussed and addressed 	<ul style="list-style-type: none"> ■ Minutes of meetings of coordinating agencies ■ Program reports 	<ul style="list-style-type: none"> ■ Partners will be willing to take part in the coordination ■ Continued commitment of YAC volunteers 	
Sub-objectives	Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
Sub-objective 5.1.1 SRH coordinating staff and/or committees strengthened	1. Review the staffing requirements (numbers, job descriptions and qualifications) of the various SRH coordinating offices in relation to current mandate and plans to scale up	■ Staffing and job descriptions of all coordinating offices reviewed and recommendations drawn and implemented	Jan-Dec 2008	MoYDS, NYCoM, MoH, MoE, NAC, MoGCS	0.00
	2. Fill key vacant positions in coordinating offices	■ Key vacant positions in coordinating offices filled	Jan-Dec 2008	MoYDS, NYCoM, MoH, MoE, NAC, MoGCS	MoYDS ORT
	3. Organize seminar to review job descriptions of coordination staff at national and district levels to discuss modalities for working together, sharing information and reporting to the right channels	■ Coordinating mechanisms and job descriptions reviewed and consensus reached at national and district levels	Jan-Dec 2008	MoYDS, NYCoM, MoH, MoE, NAC, MoGCS	14, 001.43
	4. Support Technical Working on Young People at national level	■ Technical Working Group on Young People supported at national level	Dec-Jan 2009	MoYDS, NYCoM, MoH, MoE, NAC, MoGCS	93, 142.86

Strategic Objective 5: Coordination for SRH & HIV Prevention Programming and Partnership Strengthened					
Sub-objectives	Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
Sub-objective 5.1.2 Regular coordination and joint planning meetings initiated and supported	5. Organize workshops to update coordinating staff on their roles and responsibilities according to developed ToRs	<ul style="list-style-type: none"> ■ Workshop to update coordinating staff organized 	Jan-Dec 2008	MoYDS, NYCoM, MoH, MoE, NAC	34, 579.29
	6. Organize regular coordinating and joint planning meetings at national, district and local level for SRH, HIV prevention and youth development related organizations (once per quarter) and ad hoc ones for special activities such as World AIDS Day celebrations	<ul style="list-style-type: none"> ■ Minimum of quarterly coordinating and joint planning meetings organized at national and district levels ■ # of joint work plans developed at district levels ■ # of joint events planned in the work plans ■ #of ad hoc meetings organized as agreed on joint annual work plans by SRH committees and SRH coalitions and networks 	On-going	NYCoM, MoYDS, MoH, MoE, NAC	0.00
Objective 5.2	Indicators	Means of Verification		Critical Assumptions	
Youth participation structures (national, district, community, organizational) established and functional	<ul style="list-style-type: none"> ■ National meaningful youth participation guidelines developed and operational ■ # of YSOs, YLOs, government departments implementing youth involvement guidelines ■ # of youth meaningfully involved and contributing by category of youth, residence, gender, and type of organization ■ # of youth networks established at TA, district and regional levels ■ No. YAC sub-committees established (or % of ADCs with YAC sub-committee) ■ # of YAC sub-committees trained on monitoring skills and use of monitoring tools at district and national levels ■ # of MYPG monitoring activities undertaken within the past 12 month period by different YSOs; 	<ul style="list-style-type: none"> ■ Meeting reports; ■ MYPG guidelines ■ Annual reports 		<ul style="list-style-type: none"> ■ YSOs and YLOs will be willing to use MYPGs 	

Strategic Objective 5: Coordination for SRH & HIV Prevention Programming and Partnership Strengthened					
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
Objective 5.2.1 Youth capacity in coordination, advocacy and leadership strengthened	7. Develop a national meaningful youth participation guidelines which spell out modalities for involving youth by government and non governmental agencies	■ National meaningful youth participation guidelines (MYPG) developed	Jan-Dec 2009	NYCoM, MoYDS, MoH, MoE, DHMT, NAC, NGOs	10, 890.00
	8. Organize stakeholders meeting and share youth involvement guidelines (MYPG) for adoption and implementation by all	■ MYPG shared with all relevant stakeholders for adoption	Jan-Dec 2009	NYCoM, MoYDS, MoH MoE, DHMT, NAC, NGOs, YLOs	7, 778.57
	9. Establish or strengthen YACs to support work of NYCoM, MoYDS and coordinating committees (national, district and TA levels)-YACs to be identified from youth networks and YSOs	■ YAC and YTCs established at national, district and TA levels	Jan-Dec 2008	NYCoM, MoYDS, MoH, MoE, DHMT, NAC, NGOs	192, 857.14
	10. Establish or strengthen YTCs to support work of NYCoM, MoYDS and coordinating committees (national, district and TA levels)	■ YTCs established or strengthened	Jan-Dec 2008	NYCoM, MoYDS, MoH, MoE, DHMT, NAC, NGOs	48, 000.00
	11. Convene quarterly best practice conference to share best practices	■ Best practices conferences held, outputs documented and circulated	On-going	MoYDS, NYCoM, MoH, MoE, DHMT, NAC, NGOs	1, 285, 714.30
Objective 5.3	Indicators	Means of Verification		Critical Assumptions	
Increased access to and utilization of SRH and HIV prevention program information and evidence	<ul style="list-style-type: none"> ■ # of staff members and youth trained in documentation and dissemination skills as well as on evidence-based programming ■ # of organizations with documentation plans ■ # of case studies documented within the past 12 months ■ # of national youth conferences organized every 24 month period ■ A national resource centre for information and evidence on SRH, HIV prevention, gender, human rights and youth development established and operational 	<ul style="list-style-type: none"> ■ Training reports ■ Documentation workshop reports ■ Case study reports ■ National youth conference reports ■ Annual reports 		<ul style="list-style-type: none"> ■ Political will and commitment ■ Development partner support sustained 	

Strategic Objective 5: Coordination for SRH & HIV Prevention Programming and Partnership Strengthened					
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
Sub-objective 5.3.1 Strengthened capacity and processes for disseminating program information and evidence	12. Train relevant staff from YSOs, YLOs and coordination office in documentation and dissemination skills including identification of lessons learned and best practices and utilization of program information and evidence for programming	<ul style="list-style-type: none"> ■ YSOs and YLOs and staff of coordinating offices trained in documentation and dissemination skills and evidence-based programming ■ YSOs, YLOs and coordination offices trained in advocacy and message development skills 	Jan-Dec 2010	NYCoM, MoYDS, YSOs, YLOs,	104, 544.00
	13. Conduct national bi-annual SRH and HIV prevention and youth development conferences to share latest information on youth issues, laws, policies, programs and best practices in collaboration with Universities of Malawi and Mzuzu	<ul style="list-style-type: none"> ■ National youth conference organized every two years ■ List of case studies and best practices shared ■ 	On-going	NYCoM, MoYDS, NAC, UNCT, Development partners	622, 285.71
	14. Conduct district bi-annual SRH and HIV prevention and youth development conferences to share latest information on youth issues, laws, policies, programs and best practices in collaboration with Universities of Malawi and Mzuzu	<ul style="list-style-type: none"> ■ District youth conference organized every two years ■ List of case studies and best practices shared ■ 	On-going	NYCoM, MoYDS, NAC, UNCT, Development partners	3, 260, 000.00
	15. Develop and launch a youth friendly website to allow YSOs, YLOs and researchers access information related to young people	<ul style="list-style-type: none"> ■ Youth friendly website developed and launched 	Dec-Jan 2009	NYCoM, MoYDS, NAC, MoH, MoE, UNCT	30, 857.14

Strategic Objective 5: Coordination for SRH & HIV Prevention Programming and Partnership Strengthened					
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
Sub-Objective 5.3.2: Database of YSOs and YLOs in Malawi established	16. Establish a database of all YSOs and YLOs in Malawi including CBOs, national and international NGOs, FBOs, cultural institutions, Vocational training institutions, universities, media houses, relevant departments in ministries	<ul style="list-style-type: none"> ■ Database of YSOs and YLOs established at the national level and by districts 	Jan-Dec 2009	MoYDS, NYCoM, , NAC, MoH, MoE, Development Partners, UNCT, NGOs, YLOs	16, 000.00
Sub-Objective 5.3.3 YSOs and YLOs informed on new SRH, HIV prevention, gender, human rights and youth development related issues through newsletters and list-serves	17. Publish quarterly newsletter including summaries of the latest research, programming events, evaluation reports etc. and send to YSOs, YLOs either electronically or as hardcopies for those agencies without internet access	<ul style="list-style-type: none"> ■ # of YSOs and YLOs submitting articles for publication ■ Quarterly newsletter published and shared with YSOs ■ YSOs informed about joint advocacy events through quarterly newsletter ■ # of YLOs and young people reading quarterly newsletter 	Jan-Dec 2009	MoYDS, NYCoM, YSOs, YLOs	374, 285.71
Objective 5.4	Indicators	Means of Verification		Critical Assumptions	
SRH and HIV/AIDS programming monitored and evaluated	<ul style="list-style-type: none"> ■ # of YSO programs externally evaluated over the past 36 month period ■ # of YSOs using the computerized YOMIS ■ # of YSOs reporting against the comprehensive National SRH and HIV/AIDS prevention indicators ■ # of YSOs with an annual or project life monitoring and evaluation plan ■ # of YSOs staff trained in monitoring and evaluation ■ # of periodic youth related programming reviews conducted by type 	<ul style="list-style-type: none"> ■ Quarterly and annual reports ■ Service statistics ■ Periodic review reports by coordinating bodies ■ External evaluation reports ■ Training reports ■ Reports of program reviews 		<ul style="list-style-type: none"> ■ Political will and commitment ■ Development partner support sustained 	

Strategic Objective 5: Coordination for SRH & HIV Prevention Programming and Partnership Strengthened					
Sub-objectives	Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
Sub-objectives 5.4.1 M&E capacity strengthened at national, district, community and Sectoral ministerial levels	18. Conduct an M&E capacity assessment of YSOs, YLOs, relevant government departments and coordinating offices at all levels based on their mandate and the ME needs within their organizations	■ M&E capacity assessment conducted	Jan-Dec 2009	MoYDS, NYCoM, MoH, MoE, NAC, UNCT, Development partners, YSOs	10,000.00
	19. Hire a critical mass of evaluation staff and place them in strategic positions such as in coordination offices	■ A critical # of M&E specialists hired or upgraded and placed in strategic offices	Jan-Dec 2009	MoYDS, NYCoM, MoH, MoE, NAC, UNCT, Development partners, YSOs	MoYDS ORT
	20. Train selected numbers of staff from Sectoral Ministries on M&E based on the identified need and related M&E course designed. This should include understanding of the national youth management information system, and the comprehensive evaluation indicators and analysis and use of service statistics	■ M&E Trainings conducted as per M&E plan	Jan-Dec 2009	MoYDS, MoE, NAC, UNCT, Development Partners, YSOs	30,000.00
Sub-objective 5.4.2 Computerized youth management information systems (YOMIS) established	21. Develop a computerized youth management information systems (YOMIS) to include indicators from all youth sectors	■ YOMIS established	Jan-Dec 2009	MoYDS, NYCoM, MOH, MoE, NAC, UNCT, Development Partners, YSOs	10,000.00
	22. Equip all the coordinating offices and the key YSOs with computers with YOMIS and train their staff on how to input data, analyze, report on it and use it for program improvements	■ YSOs, sectoral ministries and coordinating offices equipped with computers and YOMIS software and its use	Jan-Dec 2009	MoYDS, NYCoM, MoH, MoE, NAC, UNCT, Development Partners, YSOs	Costed under Strategic Objective #6

Strategic Objective 5: Coordination for SRH & HIV Prevention Programming and Partnership Strengthened					
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
Sub-objectives 5.4.3 Comprehensive SRH and HIV/AIDS, gender, human rights and youth development M&E framework and indicators developed and data sources identified	23. Develop a comprehensive M&E framework and indicators and identify data sources	<ul style="list-style-type: none"> ■ Comprehensive M&E framework and indicators developed; ■ Data sources identified for each indicator 	Jan-Dec 2008	MoYDS, NYCoM, MoH, MoE, NAC, UNCT, Development Partners, YSOs	5,000.00
	24. Integrate the M&E Framework and the management information system	<ul style="list-style-type: none"> ■ M&E Framework and data sources integrated 	Jan-Dec 2008	MoYDS NYCoM, , MoH, MoE, NAC, UNCT, Development partners, YSOs	MoYDS ORT
	25. Integrate the M&E Framework into the M&E Training courses for YSOs' staff	<ul style="list-style-type: none"> ■ M&E Framework and indicators integrated into training course for staff of YSOs 	Jan-Dec 2008	MoYDS, NYCoM, MoH, MoE, NAC, UNCT, Development partners, YSOs	MoYDS ORT
Sub-objective 5.4.4 SRH M&E Plan formulated and implemented	26. Provide technical and financial assistance to all YSOs to develop their organizational M&E plans	<ul style="list-style-type: none"> ■ YSOs develop M&E plans for their program 	Jan-Dec 2008	MoYDS, NYCoM, MoH, MoE, NAC, UNCT, Development partners, YSOs	50,000.00
	27. Monitor the implementation of national and organizational M&E plans at all levels	<ul style="list-style-type: none"> ■ YSOs programs monitored and evaluated as planned contributing to the national YOMIS 	Jan-Dec 2008	MoYDS, NYCoM, MoH, MoE, NAC, UNCT, Development partners, YSOs	50,000.00

Strategic Objective 5: Coordination for SRH & HIV Prevention Programming and Partnership Strengthened					
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
	28. Conduct periodic surveys of youth-serving organizations' programs to monitor evolution of youth programming at the national and district levels (number of organizations serving youth, coverage of programs, categories of youth most/least served, quality of strategies used, whether programs have been evaluated, effectiveness of programs, resources allocated to programs etc.)	■ Periodic survey of youth programs conducted (every three years)	On-going	MoYDS, NYCoM, MoH, MoE, NAC, UNCT, Development Partners, YSOs	480, 000.00
	29. Conduct periodic SRH and HIV prevention media content analysis to monitor quantity, quality and effectiveness of media programs and changes in public opinion on young people and gender issues	■ Periodic SRH related media content analysis conducted (every 3 years)	On-going	MoYDS, NYCoM, MoH, MoE, NAC, UNCT, Development Partners, YSOs	50, 000.00
	30. Conduct periodic review of public expenditure on youth issues (by district and national) in general and for specific vulnerable sub-groups including orphans, street kids, commercial sex workers, pregnant and parenting teens	■ Conduct periodic review of public expenditure on SRH and HIV prevention and overall youth development issues	On-going	MoYDS, NYCoM, MoH, MoE, NAC, UNCT, Development Partners, YSOs	60, 000.00
	31. Institutionalize periodic youth surveys to review trends in SRH, HIV prevention, gender, human rights and youth development status and issues in MoYDS.	■ Periodic youth status survey conducted (every five years)	On-going	MoYDS, NYCoM, MoH, MoE, NAC, UNCT, Development Partners, YSOs	MoYDS ORT
	32. Conduct periodic public opinion polls on parent child communication on sexuality and HIV prevention related issues	■ Periodic public opinion polls conducted on parent child communication and sexuality issues	On-going	MoYDS, NYCoM, , MoH, MoE, NAC, UNCT, Development Partners, YSOs	10, 000
	33. Identify and train M&E Officers in line ministries (Coordinating Offices), YLOs and YSOs dealing with youth issues	■ M&E Officers identified and trained	Jan-Dec 2008	MoYDS, NYCoM, , MoH, MoE, NAC, UNCT, Development Partners, YSOs	30, 000.00

Strategic Objective 6: Strengthened institutional capacity to sustain evidence-based SRH/HIV prevention programs					
Objective 6.1		Indicators	Means of Verification		Critical Assumptions
Strengthened management information systems and improved use of data for decision making		<ul style="list-style-type: none"> ■ Strengthened management information systems in place and functional ■ Adequately trained M& E Officers in place ■ List of organizations with the management information system ■ % of staff in Sectoral Ministries reporting awareness and use of management information system 	<ul style="list-style-type: none"> ■ Management information system ■ Reports ■ Available data for activities for young people 		<ul style="list-style-type: none"> ■ Political will and commitment ■ Development partner support sustained ■ MoYDS to provide the necessary leadership
Sub-objectives	Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
Sub-objective 6.1.1: Management information needs assessed	1. Assess management information needs for the SRH program and stakeholders	■ Management information needs for SRH program and stakeholders assessed	Dec-Jan 2008	MoYDS, MoE, MoGCS, NYCoM, NAC, UNCT	17,081.50
Sub-objective 6.1.2: YOMIS established and key personnel trained	2. Establish management information system (YOMIS) at national level in key sectoral ministries, addressing issues identified from the needs assessment	■ YOMIS established or reviewed at national level in key sectoral ministries	Dec-Jan 2008	MoYDS, MoE, MoGCS, NYCoM, NAC, UNCT	1,071.43
	3. Train key personnel in sectoral ministries on documentation and management information, including use of MIS system for program planning, implementation and evaluation	■ Key personnel in sectoral ministries on documentation management information, including use the management information system	Dec-Jan 2008	MoYDS, MoH, MoE, MoGCS, NYCoM, NAC, UNCT,	20,743.01

Strategic Objective 6: Strengthened institutional capacity to sustain evidence-based SRH/HIV prevention programs					
Sub-objectives	Key Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2018 (US\$)
	4. Develop M&E framework for the NPA	■ M&E framework for the NPA developed	Dec-Jan 2008	MoYDS, MoE, MoGCS, NYCoM, NAC, UNCT	3, 750.00
	5. Procure computers and accessories	■ Computers and accessories procured	Dec-Jan 2008	MoYDS, MoE, MoGCS, NYCoM, NAC, UNCT	46, 285.71
	6. Procure vehicles for lead institutions	■ Vehicles for lead institutions procured	Dec-Jan 2008	MoYDS, MoE, MoGCS, NYCoM, NAC, UNCT	275, 000.00
	7. Orient district based officers from sectoral ministries	■ District based officers from sectoral ministries oriented	Dec-Jan 2008	MoYDS, MoE, MoGCS, NYCoM, NAC, UNCT	57, 061.21
	8. Develop Geographic Information System (GIS) map on on-going SRH and HIV programs and interventions and maintain it for planning	■ GIS map on on-going SRH and HIV programs and interventions developed	Dec-Jan 2008	MoYDS, MoH, NYCoM, NAC, UNCT, Consultant	12, 500.00
	9. Train YSOs and YLOs on documentation of lessons learnt and best practices based on identified training needs	■ YSOs and YLOs trained in documentation of lessons learnt and best practices carried out	Dec-Jan 2008	MoYDS, MoE, MoGCS, NYCoM, NAC, UNCT	119, 500.79
Objective 6.2	Indicators	Means of Verification	Critical Assumptions		
Improved human resource and management capacity for MoYDS	<ul style="list-style-type: none"> ■ # of vacant key positions in MoYDS and other sectoral ministries filled ■ # of people trained in management of youth programs ■ DY0 position upgraded to PO level or higher ■ Strategic plan for MoYDS in place and functional 	<ul style="list-style-type: none"> ■ Program reports 	<ul style="list-style-type: none"> ■ Management of key sectoral ministries willing to fulfill vacant positions or upgrade positions where necessary 		

Strategic Objective 6: Strengthened institutional capacity to sustain evidence-based SRH/HIV prevention programs					
Sub-objectives	Activities	Outputs and targets	Time Frame	Responsible Partners	Estimated Budget 2008-2012 (US\$)
Sub-objective 6.2.1 Strengthened human resource capacity for improved SRH and HIV in Sectoral Ministries	10. Lobby Department for Human Resource Management and Development (DHRMD) for the recruitment of key vacant posts in Sectoral Ministries at national and district level (MoYDS, MoGCS and MoE) and upgrading of DYO positions	<ul style="list-style-type: none"> ■ Department for Human Resource Management and Development (DHRMD) lobbied in recruitment of key vacant posts in sectoral ministries at national and district levels (MoYDS, MoGCS and MoE) ■ Key vacant posts in sectoral ministries filled ■ DYO positions upgraded 	Dec-Jan 2009	MoYDS, MoGCS, MoE, NYCoM, UNCT	ORT
	11. Orient newly recruited staff in sectoral ministries on the NPA and other related youth information	<ul style="list-style-type: none"> ■ Newly recruited staff in sectoral ministries oriented on the NPA and other youth related information ■ # of meetings conducted 	Dec-Jan 2009	MoYDS, MoGCS, MoE, NYCoM, UNCT	ORT
Objective 6.3		Indicators	Means of Verification		Critical Assumptions
Improved organizational and programming sustainability mechanisms established		<ul style="list-style-type: none"> ■ Sustainability mechanisms in place and functional 	<ul style="list-style-type: none"> ■ Workshop reports ■ Program reports 		<ul style="list-style-type: none"> ■ MoYDS willing to take leadership ■ Development Partners willing to provide support
Sub-objective 6.4.1: draw lessons learnt for future improved programming and sustainability of YACs	12. Assess challenges and opportunities for sustainability of SRH/HIV programs and projects isolating lessons learnt	<ul style="list-style-type: none"> ■ List of challenges and opportunities for sustainability of SRH programs and projects 	Jan-Dec 2008	MoYDS, DYO, YAC, YTC	17, 081.50
	13. Assess reasons why previous YACs formed in around 2000-2002 in selected districts were not sustained beyond the project phase	<ul style="list-style-type: none"> ■ List of reasons for failure of YACs in 2000-2002 	Jan-Dec 2008	MoYDS, DYO, YAC, YTC	ORT
TOTAL BUDGET FOR 5 YEARS (US\$)					82, 868, 415.27

Summary of NPA Budgeted Funds by Strategic Area

Strategic Area	Total NPA Budgeted Funds (US\$)
Strategic Objective 1: Enabling and supportive policy environment improved for Addressing SRH and HIV Prevention for Young People.	3,689,351.64
Strategic Objective 2: Increased knowledge and skills towards adoption of safer sexual practices among young people aged 10-24.	42,258,773.08
Strategic Objective 3: Increased utilization of quality youth friendly sexual and reproductive health services.	26,676,741.43
Strategic Objective 4: Increased accessibility of integrated SRH and livelihood skills development (LSD) tertiary institutions	2,813,380.83
Strategic Objective 5: Coordination for SRH and HIV prevention programming and partnership strengthened.	6,879,936.15
Strategic objective 6: Strengthened institutional capacity to sustain evidence-based SRH and HIV prevention programs.	550,232.14
	82, 868, 414.27

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ANNEXES

Annex 1: Road Map for Development of NPA for Scaling up SRH and HIV Prevention Program for Young people in Malawi

Activity	Person Responsible	Time Frame
1. Briefing Meeting with CO staff and Receiving Resource Materials	AM, NPO HIV/AIDS	Nov. 5, 2006
2. Review national strategies, policies, research on SRH and HIV/AIDS among young people in Malawi	AM	Nov. 6, 2006
3. Identify Issues to be addressed in the NAP and Categorize them into Themes	AM AM/NPO/Rep	
4. Meet with Representative		
5. Meet with National Consultant, Review SOW and Assign roles and Responsibilities	AM/NPO/Consultant	
6. Draft a draft Outline for NPA	AM	
7. Complete and circulate zero draft of NPA	AM	Jan. 23, 2007
8. Review zero draft of NPA	Drafting Team	March. 16, 2007
9. Review Draft with NPO and Consultant	AM	June 2007
10. Present Draft in the First Consultative Meeting (TWGYP)	AM/Consultant	July 2007
11. Incorporate comments from Consultative Meeting	Consultant	July 2007
12. Forward Draft NPA to Consultant	Consultant	July 2007
13. Review and revise draft NPA and submit to Consultant for further work	AM	July 2007
14. Submit good quality draft to CO and CST	Consultant	August 2007
15. Collect information for costing of NPA	Consultant/CO	August 2007
16. Draft cost estimate for NPA	Consultant	August 2007
17. Organize Costing Meeting (3 days) to complete costing exercise	TWGYP/Drafting Committee/CST /Consultant/Other	September 2007
18. Complete costing of NPA	AM/Consultant	September 2007
19. Review Indicators for NPA	TBD	October 2007
20. Organize National Consultation on draft costed NPA	TWGYP/Drafting Committee/AM	
21. Final Consultation on costed NPA	Consultant/CO/CST	
22. Incorporate comments and submit final costed NPA-YP	Consultant	
23. Submit final copy for editing and Printing	AM/NPO HIV	
24. Organize fundraising meeting with donors	NPO/UNCT	