



Programmatic Evaluation of a Nonprofit Community-Based Development Project: *Evidence from Malawi Children's Village (MCV), Mangochi District*

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BACKGROUND

Malawi Children's Village is a community-based, nonprofit organization that was founded by former Peace Corps volunteers in 1996. The organization has become an integral part of the Mangochi community.

MCV PROGRAMS

❖ *Orphan & Vulnerable Children (OVC) Rehabilitation:* MCV identifies and cares for very young children orphaned by the HIV/AIDS epidemic, as well as other vulnerable children in the surrounding 38 rural villages. MCV provides nutritional and developmental support to children and education/financial support to their families in the hopes of returning OVC to their families after the rehabilitative period (0-3 years).

❖ *Grace Secondary School:* MCV planned and built a secondary school for local young people to attend. The school teaches a full curriculum, including science, English, and mathematics, and enrolls MCV-affiliated OVC and other local teens.

❖ *Health Clinic:* MCV opened a small clinic to provide health care to children in the nutritional rehabilitation program who were 'not thriving', but soon expanded to provide basic health services to MCV staff, volunteers, teachers, and families/caretakers of OVC in the community. MCV also started a malaria prevention program, providing locals with chemically treated bed nets. The clinic is staffed by two nurses.

❖ *Development Projects:* MCV spearheaded efforts to cultivate gardens, build shallow wells, fish ponds, and irrigation programs, and improve nutrition and sanitation in the community. The MCV program has also established a food and seed bank.

❖ *Education:* MCV workers train villagers to act as peer educators and OVC caretakers in the community. MCV also educates the community about HIV/AIDS transmission, sexually transmitted infections, and prenatal health. MCV offers a trade/skills school, teaching sewing, automotive mechanics, information technology, carpentry, and film-making to help achieve sustainable economic growth in Malawian villages.

OBJECTIVES

- To collect all health clinic records, create an electronic database for storage, clean and analyze the data, and report on utilization/disease patterns among patients.

- To review administrative records and conduct interviews to evaluate MCV's programmatic efforts and make recommendations for future endeavors.



METHODS for EVALUATION

- Locate medical records for the health clinic and nutritional surveys in the rehabilitation center.
- Create a simple, easy-to-use database for electronic medical record-keeping at MCV, train MCV staff how to enter data, and begin entering clinic/nutritional data.
- Create a mixed quantitative and qualitative instrument to track and monitor the health and well-being of older OVC who have graduated from MCV rehabilitation.
- Interview Mr. Sibale (director of MCV), administrators, the head nurse, and supporting MCV staff/volunteers to determine what inadequacies and gaps exist in care, what needs are unmet, which costs are fixed and variable, what inefficiencies may exist, and the perceived success of the health clinic, nutritional program, and malaria prevention program.
- Based upon analysis of these data and key informant interviews, make recommendations to MCV board members and stakeholders about areas for potential improvement and more cost-effective strategies to maximize responsible use of scarce resources.

RESULTS

Figure 1. Follow-up of OVCs: Statistics from MCV 2001-2004 Annual Surveys

	2001	2002	2003	2004
Total OVC in surveyed villages	2688	3283	2893	2514
OVCs with babies and/or pregnant	23	13	21	66
Dead	25	32	25	14
Transferred out of village/Missing	363	273	339	274
Gone to work	9	11	5	27
Married	100	105	122	106
Not in school	746	1033	697	391
In school	1574	1804	1875	1868
Under 5 years old	325	413	310	227
New MCV registrations	369	644	207	234

CONCLUSIONS

MCV's clinic serves approximately ten patients a day; services could be expanded to incorporate patients beyond those affiliated with MCV. Considering the very limited availability of health care facilities in this district, MCV could be an important bridge in the coverage gap in Mangochi. However, lack of medication and incomplete examination/poor diagnosing patterns may affect quality of care received at MCV. MCV currently works with over 3,000 orphans and vulnerable children in the Mangochi area. Ensuring that the programs developed by MCV are well-designed, properly managed, and cost-effective is an important task in such a resource-poor setting.

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