COIDA PROJECTS AND WHY WE DO WHAT WE DO

EDUCATION – under this thematic area, we work towards promoting education for girls and other vulnerable groups. Studies conducted in our catchment area indicate that 21.6% of 6-29 year olds have never attended school even though the primary trajectory for accessing productive resources is for people to first of all acquire an education. Most of children who enroll in standard one, a significant proportion drop out of school before they reach standard five. For instance, with a survival rate of 62.7%, implying that 28.3% did not reach standard 5 out of which the majority are girls. After dropping out of school, their future, safety and health are not guaranteed.

CHILD HEALTH – under this theme, we work with pregnant women and mothers of under five children. The main problem identified in the area is a damaging cycle of malnutrition and

disease among under five children mainly due to over dependence on maize and poor diversity of other foods in the diet. The impact of HIV on child mortality and morbidity has further complicated interventions on malnutrition. Evidence shows that 1 in every 8 children in Malawi die before their fifth birthday due to highly preventable diseases such as malaria, malnutrition, pneumonia and diarrhea. Geographdistance. lack of



Stakeholders discussing child and women rights

knowledge and perceived disparities in social status make the cost of health care prohibitive for many, despite the fact that government health care if free.



COMMUNITIES IN DEVELOPMENT <u>A</u>CTIVITIES

the Executive Director, Communities in Development Activities (COIDA), P.O Box 58, Luwerezi, Mzimba www.coida.org

ABOUT COIDA

Communities in Development Activities (COIDA), is a local Non-governmental organization based in Mzimba district in northern part of Malawi. It is a duly registered with Council for Non-governmental organizations of Malawi (CONGOMA) and was established and legally mandated in 2004 to facilitate and implement sustainable community based development programs. The organization is well known in the northern region of Malawi where it operates in 10 Traditional Authorities in Mzimba and 1 Traditional Authority in Nkhata-Bav.

COIDA's mission is to facilitate empowerment of local communities in realization of improved living standards and achievement of socio-economic development in Malawi; while its vision for change is to see a self-reliant community with improved livelihoods.

COIDA Board Chairperson

Francina Lusungu Nyirenda has an Executive Masters in Business Administration. She boost of over 12 years management experience working in Not for Profit Making organizations. She is the managing Director of a family business in hospitality. Contact: 00265881019488, nyirendaf71@gmail.com

COIDA Executive Director

Patrick Jonathan Mwale has a Post Graduate Certificate in Sustainable Development. He has 10 years management experience in NGO management and Development. As a 4 years Chairperson of CON-GOMA north, Patrick acquired significant networking and lobbying experience at National and regional level. Contact: 00265888583265, pjcmwale@hotmail.com

COIDA Programs Manager

Edward Manyiwaka Nkhata has a BA in Education Humanities. He taught at Chayamba Secondary school for 5 years before joing National Initiative for Civic Education, NICE as District Civic Education Officer for Mzimba in 2006. Edward joined COIDA in January 2017. Contact: 00265884271307, nkhataem@gmail.com



COMMUNITIES IN DEVELOPMENT ACTIVITIES

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....COIDA PROJECTS AND WHY WE DO WHAT WE DO

WATER & SANITATION – under this theme we work with schools and communities to ensure that they have better access to safe drinking water and sanitary facilities like toilets, bathrooms and change rooms for adolescent girls in schools. Access to clean water remains an enormous challenge in rural communities of Malawi. According to the National Statistical Office, 33% of Malawi's population have no access to clean water and only 27% of the population have access to improved sanitation. It is also estimated that about 25% of schools lack access to protected water supply while 50% of the health facilities in rural areas do not have proper water supply and sanitation facilities. The waste management system in most urban centers are in poor state such that waste management has become a problem. And although Ministry of Health and District Assemblies conduct public health education, personal hygiene continues to deteriorate.

For i n stance in most urban a n d rura areas people have resortdumpi n g rubbish any. where.



HIV/ and AIDS - under this theme we work with people with disabilities and support groups of people living with the virus. Poverty and lack of opportunities for people with Disabilities (PWD) in our targeted districts put many PWDs in danger of contracting the HIV virus. This is as a result of little or no specific activities targeting people with disabilities, lack of capacity, financial support to start or boost their businesses. The other problems being faced by people with disabilities in the area include lack of awareness that will reduce gender norms and inequalities amongst the PWDs and their community and enhance recognition from the health clubs, VDC, village health committees to take up their health issues or referrals to the district hospitals and other health facilities. Currently, Mzimba has a total of 39.149 people with disabilities: 3.426 of whom are in TA Mabilabo. According to 2013 Community Based Rehabilitation Program Annual Report by MACOHA, people with disabilities are often unable to access healthcare services; this is not about just the physical access to buildings, but also access to information, care, support and critical services like VCT. In most cases, long distances to health facilities, bar people with disabilities from accessing health promotion, health assessment and treatment.

EXUAL REPRODUCTIVE HEALTH – under this theme, we work with single teen mothers, married adolescents, youths living with HIV and AIDS, in school and out of school youths. Access to Sexual and Reproductive Health (SRH) information and services still remain a challenge among many adolescents in the catchment area. Many adolescents lack access to the most basic sexual reproductive health information and health care services are difficult for young people to access, especially more vulnerable rural based adolescents. Family and community members, and even health care staff, often prevent young people from obtaining these services or fail to protect their privacy and confidentiality; deterring young people from using these services. Additionally, with unplanned pregnancies, the girl assumes responsibility, and is disproportionately affected by the ensuing consequences: dropping out of school, early marriage and child birth, risk of pregnancy related complications and possible death.

COIDA work: 2011 to Dec 2016

COIDA has over 10 years' experience in implementing youth and community based development projects. It has qualified personnel in the field of rural and community development, project planning, monitoring and evaluation, environmental management, climate change and adaptation, disaster risk reduction, micro credit, marketing and publicity as well as financial and human resource management. At project area, COIDA works hand in hand with different stakeholders like Local Leaders, Officers from the District Council, Youth, Education, Community Development, Health, Agriculture, Social Welfare and other like-minded NGOs.

Through partnership with SIMAVI, ILO/IPEC, USA PEPFAR, Plan International, Firelight Foundation and Methodist Relief and Development Fund, COIDA has successfully implemented several projects within Mzimba district in Youth empowerment, child protection, water and sanitation, environmental management, climate change adaptation and mitigation, economic empowerment (Village Savings and loans), marketing, sexual and reproductive health, and cross cutting issues (gender, HIV/AIDS and rights based approaches). Under ICS progression project, COIDA managed 60 UKV volunteers between April 2016 to December 2016. Tilitonse Fund funded COIDA to implement a 12-month Governance and accountability project.



COIDA 2011 to 2017 Projects Profile

Name of project / activity	Donor and Con- tact Person	Grant amount in US\$	Contract period
Water and Health: com- munity sus- tainable water as a gateway to primary health for all projects	SIMAVI (martine.jeths@simav i.nl)	186,206.90	2011 - 2014
Kumazga chinunu – breaking the silence in HIV/AIDS	National Aids Commission of Malawi (mkandawiref@aidsmalawi.org)	40,000.00	2011 - 2013
Creating child labour	ILO/IPEC (ndalama@ilo.org)	86,206.90	2011 -2012
Strengthen- ing child protection systems in Mzimba district	PLAN International (esther.chirwa@plan- international.org)	253,091.62	2011 - 2015
Tikolelaneko – lets join hands	Firelight Foundation (aili@firelightfoundat ion.org)	51,724.14	2010 - 2014
Tose Pamoza	Methodist Relief Development Fund (MRDF) – jonesm@methodistch urch.org	124,137.93	2008 - 2013
PEPFAR- USA Embas- sy	Kasongafc@state.gov and or ka- songaf@gmail.com	10,000	2016
Progressio ICS project		29,000,000	2016-2017
Tikol- eraneko: Governance and Account-	alex@malawi.net Tilitonse Fund	67,700,000	2016-2017
Global Giving		5,000	2012

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