



HEALTH, POPULATION, AND NUTRITION

Over the last two decades, Malawi has achieved dramatic gains in many health indicators by focusing on the improved delivery of essential health services. Malawi is one of a few sub-Saharan African countries that achieved Millennium Development Goal (MDG) 4 for child survival by 2015. The Government of Malawi (GoM) reduced maternal mortality by 53 percent between 1990 and 2013 and increased the contraceptive prevalence rate from 7.4 in 1992 to 42 percent in 2010. With U.S. support, Malawi has reduced the number of HIV/AIDS deaths by 73 percent and the number of new HIV infections by 41 percent since 2003.

These broad gains, however, mask important realities and structural dynamics in Malawi's health system that must be addressed if the advances of the past two decades are to continue. With a total fertility rate of 4.4 contributing to explosive population growth, Malawi's population is likely to more than double by 2050. Such growth has the potential to slow or reverse the progress of many development gains achieved to date.

Malawi has a high unmet need for family planning services (19 percent), with acute needs among young people. Close to one million people in the country live with HIV, with approximately 34,000 new infections each year. Even with the gains in child health, 37 percent of Malawian children suffer from chronic malnutrition. Malawi is a high-burden malaria country with an incidence rate of 332 cases annually per every 1,000 people and approximately 4.8 million episodes of malaria per year. Over a third of established positions in the health sector are vacant, and there is a perpetual shortage of qualified health workers in facilities across the country. Such tremendous health challenges, combined with constrained economic resources and marginalized women and youth, place a significant burden on the health system.

PROGRAM SUMMARY

HIV/AIDS: USAID continues to invest in high-impact HIV prevention, treatment, and care activities. In coordination with the President's Emergency Plan for AIDS Relief (PEPFAR) resources, USAID's HIV investments provide direct service delivery at prioritized facilities in high HIV burden districts as well as technical assistance and capacity building to the GoM's National HIV/AIDS program through: a) provision of HIV case finding, care, and treatment services, b) behavioral and biomedical prevention interventions, c) community-based assistance to orphans and vulnerable children and adolescent girls and young women, and d) focused health systems strengthening to accelerate HIV epidemic control in Malawi.

MALARIA: U.S. Government President's Malaria Initiative (PMI) activities focus on strengthening National Malaria Control Program interventions such as increasing the supply of long-lasting insecticide-treated bed nets; supporting prompt effective malaria treatment for uncomplicated and severe malaria cases at both the community and health facility levels; providing preventive services to pregnant women; indoor residual spraying; and supporting improved health commodity management.

MATERNAL, NEONATAL, AND CHILD HEALTH (MNCH): USAID invests in quality-of-care interventions to sustain gains in maternal and child health and to accelerate reductions in maternal and neonatal morbidity and mortality. MNCH interventions are also designed to increase community involvement in the treatment and care of common childhood diseases and reduce the incidence of waterborne diseases.

FAMILY PLANNING AND REPRODUCTIVE HEALTH: USAID works with Malawi's Ministry of Health (MoH) to encourage comprehensive and efficient programming of resources that contribute to the contraceptive supply and provide high-quality, sustainable, voluntary family planning and reproductive health services.

NUTRITION: USAID invests in nutrition activities for women and children, with a focus on the first 1,000 days of life from conception to age two. Both USAID and the GoM fight stunting and other forms of malnutrition through dietary diversification, lasting community empowerment, and the integration of health services.



TUBERCULOSIS (TB): USAID supports the National Tuberculosis Control Program's vision of a tuberculosis-free Malawi and actively works to reduce the morbidity, mortality, and transmission of TB until the disease is no longer a public health problem.

HEALTH SYSTEMS STRENGTHENING: USAID promotes health systems strengthening by bolstering national efforts to improve human resources for health, supporting universal coverage of essential health services for all Malawians, and helping the GoM manage an uninterrupted supply of health commodities in the country's communities and public health facilities.

WATER SANITATION AND HYGIENE (WASH): USAID works closely with the MoH and Ministry of Agriculture, Irrigation, and Water Development to improve access to and provision of quality WASH services.

IMPACT

- Helped the GoM reduce under-five stunting nationwide from 47 percent to 37 percent between 2010 and 2016.
- Reduced, in partnership with the GoM, malaria prevalence among children under five from 33 percent in 2014 to 24 percent in 2017.
- In 2017, USAID provided six million malaria treatments (75 percent of Malawi's needs) and more than six million rapid diagnostic tests (half of the national need). USAID also provided over 800,000 long-lasting insecticide-treated nets to 1.6 million pregnant women and children under the age of one.
- Increased the number of women with skilled assistance during childbirth from 55 percent in 1992 to 90 percent in 2015/16.

IMPLEMENTING MECHANISMS/PARTNERS

Activity Name	Total Estimated Cost	Implementation Period	Implementing Partner
President's Malaria Initiative Vector Link Project	US \$26.5 million	September 2017 – September 2022	Abt. Associates
4Children	US \$2.8 million	September 2014 – September 2019	Catholic Relief Services
Inter-Agency Agreement	US \$2.7 million	April 2015 – September 2020	Centers for Disease Control and Prevention
Human Resources for Health 2030	US \$7 million	September 2015 – August 2020	Chemonics
Global Supply Chain Management System	US \$1.7 million	January 1, 2016 – December 31, 2021	Chemonics
Tiwalere II	US \$19 million	July 2016 – July 2021	Feed The Children
Health Communications for Life (HC4L)	US \$24.7 million	September 2016 – September 2021	FHI 360
Linkages	US \$15.6 million	June 2014 – June 2019	FHI 360
One Community	US \$39 million	December 2015 – December 2020	Johns Hopkins University (JHU)
Challenge TB	US \$23 million	September 2014 – September 2019	KNCV Tuberculosis Foundation
Organized Network of Services for Everyone (ONSE) Health	US \$92.9 million	November 2016 – November 2021	Management Sciences for Health (MSH)
Health Policy +	US \$2.2 million	August 2015 – August 2020	Palladium International, LLC
Project SOAR	US \$1.3 million	September 2014 – September 2019	Population Council
Support for Int'l Family Planning Organizations (SIFPO II)	US \$24 million	April 2014 – April 2019	Population Services International
EQUIP Health	US \$48.4 million	August 2016 – September 2019	Right to Care
Orphans and Vulnerable Children (OVC) and Child Health Deaths	US \$6 million	July 2010 – September 2020	UNICEF
ONSE Impact Evaluation	US \$4 million	July 2014 – June 2019	University of North Carolina
Malawi Scholarship Program	US \$14.3 million	October 2012 – September 2019	World Learning
AIDSFree	US \$4.8 million	October 2017 – September 2019	John Snow Research & Training Institute, Inc.
Technical Assistance Support Contract 4 (TASC 4)	US \$4.9 million	May 2018 – May 2019	Population Services International
Technical Support to PEPFAR Programs (TSP)	US \$48 million	March 2016 – March 2021	Baylor University
Optimizing HIV Services for Epidemic Control (OHSEC)	US \$18 million	March 2019 – February 2021	Partners in Hope
Breakthrough Action	US \$850,000	October 2018 – September 2020	Johns Hopkins University (JHU)