



MATERNAL, NEONATAL, AND CHILD HEALTH

With U.S. Government support, the Government of Malawi provided vaccinations for over 660,000 children in 2017; malaria prevalence has dropped significantly; and the maternal mortality rate has dropped by 53 percent between 1990 and 2013.

Malawi's mothers and children face a variety of difficult challenges, including unmet need for family planning services, with particularly 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 gains in child health, 37% of Malawian children suffer from chronic malnutrition and high rates of malaria infection. Such tremendous health challenges combined with constrained economic resources place a profound burden on the health system.

Program Summary

U.S. Government agencies work with the Government of Malawi's Ministry of Health (MoH) to ensure a Maternal, Neonatal and Child Health (MNCH) focus in district and central level health activities. Working closely with the MoH, the UN, other donors, and local stakeholders, U.S. Government investments, including malaria and HIV funds, delivered significant impact in 2017 to support mother and child health.

USAID's global Maternal, Neonatal and Child Health (MNCH) goal is ending preventable child and maternal deaths in a generation. To do this, USAID integrates high-impact, evidence-based practices into activities that address vital MNCH issues in households, communities, and health facilities. In 2017, USAID's Helping Babies Breathe interventions resuscitated over 5,000 newborns. Since 21 percent of newborn deaths are caused by infection, we funded interventions that provided nearly 1,800 newborns with antibiotic treatment. Lastly, USAID supported Kangaroo Mother Care (KMC) – a simple, low-cost method of increasing newborn survival, particularly for low-birth-weight and preterm infants. With U.S. Government support, the Government of Malawi achieved Millennium Development Goal 4 – reduce child mortality by two thirds – ahead of the 2015 target year.

Through community outreach, the U.S. Government increased knowledge and awareness regarding health issues to increase healthy behaviors. U.S. agencies fought cholera through multiple interventions, including through cholera outbreak surveillance, training service providers, providing cleaning supplies for infection prevention and control, and running road-side campaigns and mobile, rural cinema campaigns in cholera-prone districts reaching an estimated 34,634 people.

In 2006, only 25% of children slept under a treated mosquito net, whereas 68% did in 2017 – contributing to a decline in malaria prevalence in children from 33 percent to 24 percent between 2010 and 2015. Thanks in part to U.S. Government health investments since 2006, Malawi achieved a 48 percent reduction in childhood mortality. Since 2011, CDC and USAID through PEPFAR have helped Malawi pioneer Option B+, preventing transmission of HIV from pregnant women to their children by providing universal access to HIV treatment to all HIV-positive pregnant and breastfeeding women. Other U.S. Government investments in the health sector have helped dramatically increase skilled assistance during childbirth from 55% in 1992 to 90% in 2015-16.

