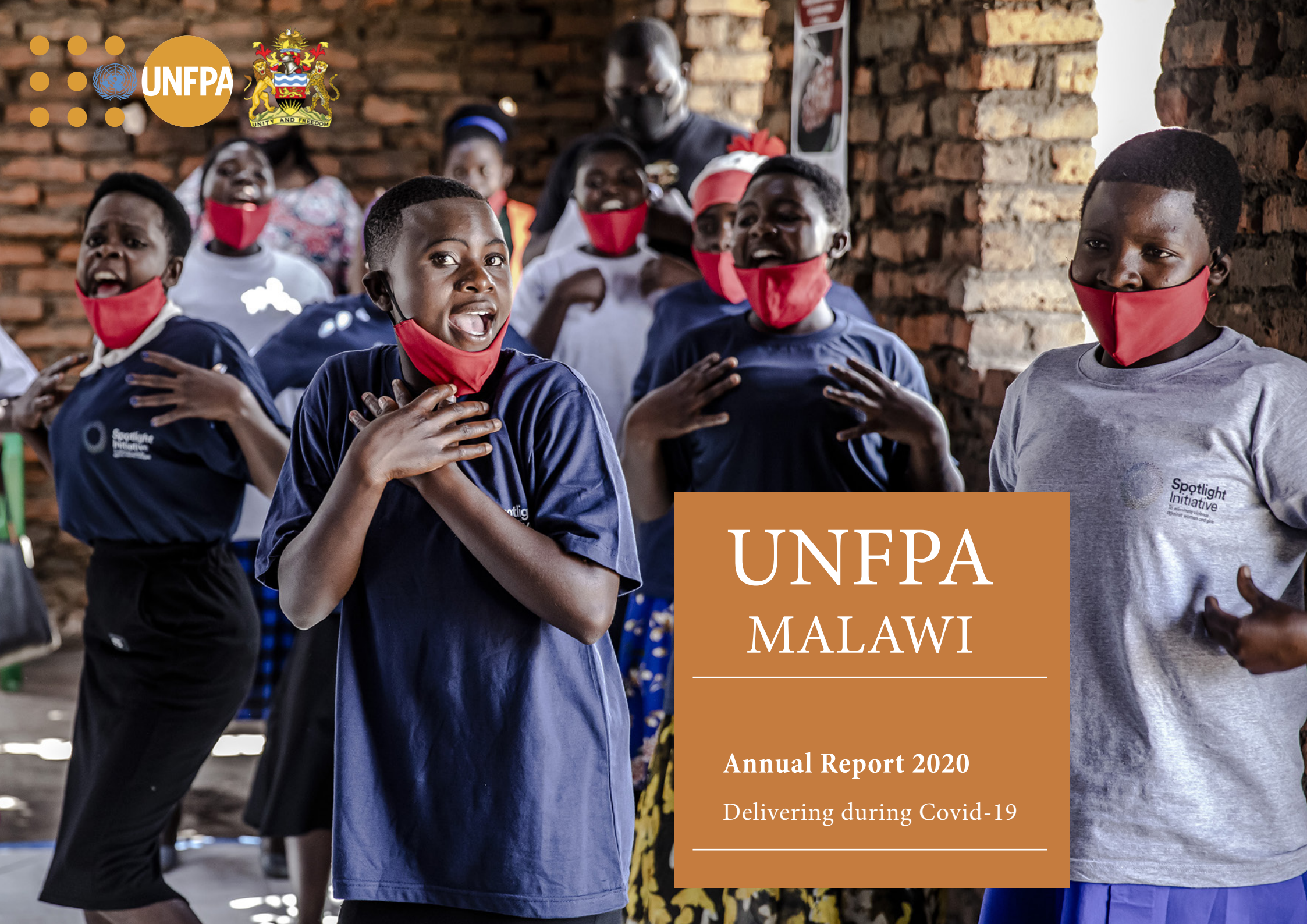




UNFPA



UNFPA MALAWI

Annual Report 2020

Delivering during Covid-19

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Annual report 2020

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UNFPA is the United Nations sexual and reproductive health agency. Our mission is to deliver a world where every pregnancy is wanted, every childbirth is safe and every young person's potential is fulfilled.

Ending unmet need for family planning

UNFPA works with governments and partners to promote universal access to quality, integrated sexual and reproductive health services. UNFPA also promotes comprehensive sexuality education and youth leadership, which empower young people to exercise autonomy, choice and participation with regard to their sexual and reproductive health and rights.

Ending preventable maternal death

UNFPA partners with governments and others to strengthen health systems, train health workers, educate midwives and improve access to the full range of reproductive health.

Ending gender based violence and harmful practices

UNFPA works to prevent and respond to gender based violence through its work with policymakers, justice systems, health systems and humanitarian partners. UNFPA also focuses on eliminating harmful practices, child marriage, and helps to engage men and boys to advance gender equality.



UNFPA MALAWI

Annual Report 2020

Delivering during Covid-19

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OUR KEY RESULTS IN 2020

- **A sustained high of 1,190,650 couple years of protection.**
- **A total of 385,525 adolescents and youth aged between 10-24 accessed integrated sexual and reproductive health services.**
- **20,000 young people were reached through mobile clinics or door-to-door accessing family planning, cervical cancer screening and HIV testing and counselling services.**
- **256,282 women who have utilized maternal and newborn health services during Covid-19.**
- **33 health facilities have mechanisms in place for the treatment of pregnant women during Covid-19 in line with protocols and guidelines that are aligned to World Health Organization standards.**
- **75,600 safe births were attended by skilled health personnel.**
- **90 percent of pregnant women including adolescents attending antenatal care in the target facilities attended all their scheduled visits during the Covid-19 period.**
- **182,727 women of childbearing age including pregnant women and adolescents accessed advice and counselling from a specialized hotline service.**
- **114,917 men and boys involved in referral and information sharing about Covid-19.**
- **61,690 youths trained in mentorship and leadership in the areas of gender based violence or comprehensive sexuality education.**
- **14 housing and population census thematic reports are now completed providing a comprehensive nationwide analysis of population dynamics.**
- **A smart census dissemination platform almost complete ready for launch in 2021.**



I AM A MENTEE
Thupi Langa
Moyo Wanga
Tugob Langa
Gisukho Chaga

I AM A MENTEE



My Body
My Life
My Future
I Decide

I AM A MENTEE

My Body
My Life
My Future
I Decide

I AM A MENTEE



My Body
My Life
My Future
I Decide

FOREWORD

The past year was one of the most challenging we have witnessed as a global community in our lifetime. Covid-19 has attacked the very heart of our societies threatening our families, communities and way of life. One after another, countries were forced to lock down their economies, societies and limit public life in an effort to protect lives and ensure health sectors were not overwhelmed.

Although Malawi has not registered the same high levels of infection as witnessed in some neighbouring countries, the impact of the virus is profoundly damaging, and the pandemic is not over. We must remain vigilant.

In 2021 the spectre of the pandemic still haunts us. Whilst vaccines are becoming available these are yet to be widely administered in the African continent and Malawi, as is the case for the other countries across the continent, remains at high risk.

It is in this respect that reporting on our achievements in 2020, is profoundly shaped by our responses and the measures that were put in place, to protect the public during the pandemic.

As a consequence of the pandemic and the limited access to public life there are increases in child marriages and teen pregnancies recorded in 2020. The closure of schools has meant almost an entire year of education was lost without access to online digital tools and community learning resources. The levels of inequality experienced by women and adolescent girls has deepened during this period.

Inequality has also become increasingly evident in terms of access to tools such as the Internet that many in the developed world turned to as an alternative to physical access to services that was not an option for Malawian women and adolescents, particularly those in rural areas, because of the digital divide.

Despite these enormous challenges in 2020 our results remained resilient in the face of Covid-19. Responding to early signs of the pandemic UNFPA in Malawi swiftly developed a strategy for ensuring young women and adolescent girls, and their sexual and reproductive health and rights were not left behind.

Our partnership with the Ministry of Health and UN agencies ensured pregnant women continued to have safe access to basic maternal and newborn health services during Covid-19. Key protocols for pregnant women were implemented and equipment and safe delivery spaces created that are instrumental in our efforts.

We also Covid-19-proofed our programming to ensure activities were safe both for partners and beneficiaries. This meant a quick learning curve for UNFPA staff and all of our partners. Not only did we supply personal protective equipment and plan our activities with social distancing, we also ensured safe, secure and appropriate safeguards were in place at all times.

On a final level we also ensured continuity of our programming. In 2020 we adapted our working and communications environment to virtual platforms as far as possible ensuring programme delivery. The challenges women and adolescent girls experience in attaining their sexual and reproductive health and rights were not diminished during the pandemic. Evidence suggests on the contrary they were under increased pressure. I am proud that our staff and partners faced this challenge with the determination and commitment it requires.

A highlight for the UNFPA in 2020 was the visit of our director for the Eastern and Southern Africa region who attended the inaugural meeting of Malawi's national steering committee of the ICPD+25. This was for me personally a stark reminder that despite the obstacles that arise, our mandate and support for the empowerment of women and adolescent girls and young people- their sexual and reproductive health and rights- are more urgent than ever.

The dedication shown by healthcare workers in Malawi and throughout the world during this period is a true source of inspiration to us all.



Won Young Hong
UNFPA Resident Representative
Malawi



SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS

INCREASING CHOICE AND FAMILY PLANNING

Ensuring access to family planning commodities of choice and improving the quality of service provision 385,525 women of reproductive age received family planning commodities. There were 107,004 additional users of modern contraceptives in 2020. Employing the Marie Stopes tool, it is estimated 1,800 maternal deaths, were avoided.

In 2020, 2.45 million vials of Depo Provera contraceptives were purchased for distribution that will provide supplies until 2022. A further 82,000 implants were also procured for distribution.

Commodities are World Health Organization prequalified and undergo pre-shipment tests and inspections for quality assurance. To ensure commodities are efficiently managed, UNFPA conducts quarterly spot checks in the warehouses and biannual spot checks in all the 28 districts, to track commodities through regular physical inventory.

SAFER BIRTHS

A total of 12,650 registered births were delivered in the target health facilities, of which 91 percent, were attended by skilled birth attendants. UNFPA continued to support pre and in-service training of professional midwives and equipment and supplies were procured and distributed to health facilities to support comprehensive and basic emergency obstetric care services.

OBSTETRIC FISTULA REPAIRS

In 2020, a total of 75 fistula cases were identified, and in collaboration with the Ministry of Health, successfully repaired. The fistula patients were treated by 24 health professions that received training and orientation sessions supported by UNFPA.

YOUTH FRIENDLY HEALTH SERVICES

As a result of Covid-19 there was a significant reduction of visits to the youth friendly health services in 2020. Despite this 385,000 young people accessed youth friendly services through the static health facilities. Nine new centres were also rehabilitated. To assess the impact of the reduced numbers the Reproductive Health Directorate of the Ministry of Health was supported to carry out an assessment that examined the impact of Covid-19 on the delivery of youth friendly health services. Findings of the assessment will shape future guidelines and strategies in the context of the pandemic.

To ensure continuity of services and in response to the reluctance of communities to travel during Covid-19, outreach and mobile clinics provided services with support from the programme. Our partners also safely worked door-to-door distributing key family planning information and health services. Mobile clinics were visited by nearly 13,000 young people where they accessed a range of family planning services. The door-to-door campaign also reached out to visit another 7,200 in communities. To further strengthen services, UNFPA has procured six vehicles that will act as mobile clinics, to access remote areas in Dedza, Salima and Mangochi.

IMPROVING ACCESS TO EVIDENCE

In partnership with the Ministry of Health and its central monitoring and evaluation department data was collected on the impact of Covid-19 on pregnant women and youths in three districts. This key data will be analyzed and inform forward looking policies and UNFPA programming.

The 198 area development committee members were also coached on Covid-19 prevention measures allowing them to reach out to their communities. An estimated 120,000 individuals were reached by these committees delivering information on Covid-19 prevention, news of contingency plans for health services and the location of the nearest health facility for communities to access.

The UNFPA also supported the Government of Malawi to convene a national consultation on the baselines and indicators aligned to the SADC sexual and reproductive health and rights score card and to take stock of progress made in meeting the Sustainable Development Goals and the Maputo Declaration.

HIV AWARENESS

In partnership with the Family Planning Association of Malawi UNFPA supported cervical cancer awareness campaigns and screenings among women living with HIV in three districts- Nkhata bay, Mulanje and Mangochi. A total of 4,050 women were reached with HIV testing and counselling and family planning information and services and 147 were screened for cervical cancer.

KEY RESULTS

- A sustained high of 1,190,650 couple years of protection.
- Estimated 1,800 maternal deaths averted.
- A total of 385,525 adolescents and youth aged between 10-24 accessed integrated sexual and reproductive health services.
- 20,000 young people were reached through mobile clinics or door-to-door accessing family planning, cervical cancer screening and HIV testing and counselling services.
- 120,000 individuals reached by area development committee members with key Covid-19 and family planning messages.



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Norwegian Ministry
of Foreign Affairs



STORY

YOUNG PEOPLE HAIL REPRODUCTIVE HEALTH SERVICES DURING COVID-19

INCREASING CHOICE AND FAMILY PLANNING

In early April 2020 Pilirani Davies heard on the news that cases of Covid-19 were increasing, and she feared for the worst. Pilirani had just given birth and was planning to visit her local health centre to access family planning services. The news that Covid-19 was spreading rapidly made her nervous about the visit.

“I was not sure if it would be safe to go to the health centre as it was always crowded,” says the 19-year-old. “I heard that the risk of contracting the virus in crowded places is high.”

ENSURING CONTINUITY OF SERVICES DURING THE PANDEMIC

Pilirani was the youngest in a family of nine that had taught her the hard lessons of growing up in a large and impoverished family. She wants a different life for her child. Her quest for a better life gave her the confidence to finally visit the health centre even considering the risks of Covid-19 she had heard about.

“As soon as I arrived at the clinic, I was told to stand one metre apart from other visitors,” says Pilirani who is from Nyachikadza village in Nsanje. “Those who came after me were given numbers to wait their turn so that the family planning session was not crowded.”





When her turn arrived, Pilirani went through a counselling session where she was told of the different methods available for family planning. The one which caught her attention was a three month self-administrable option, called Sayana press.

“I immediately chose this method as it was very convenient,” she explains. “It allowed me the option of not having to attend the clinic as I would be injecting myself hence avoiding large groups of people.”

FAMILY PLANNING SERVICES FOR ALL

Despite fears that sexual reproductive health and family planning services could be disrupted due to the Covid-19 response, Pilirani and many women in Malawi have continued to have access to these services and are able to freely plan for the healthy development of their families.

“I do not want to become pregnant now,” says Pilirani. “I want my child to grow up healthy. If I can have a few children, I can manage to get them not only a good life but a good education too.”

MISINFORMATION DERAILING THE COVID-19 FIGHT

In Nsanje located at the southern tip of the country, most people seem to have heard of Covid-19 and are taking precautions to stop it spreading. In markets and other places where people gather, it is now a common sight to see people wearing home-made fabric face masks to protect from the virus.

Dorica Zuze, from Disenti village in Nsanje, a mother of five, is taking advice from health workers on the virus seriously. Dorica says she immediately stopped attending large gatherings when she heard that Malawi had reported a first case of Covid-19.

“I have a young baby and I knew that I had to listen to advice from health workers to protect myself and my family from the disease,” she says.

For the 35-year-old farmer her main worry was whether their local health centre would still offer family planning services. Her fears were justified. Recent research by UNFPA shows that many governments across the world are diverting funds meant for sexual reproductive health and family planning to the Covid-19 fight.

Against this current Malawi has stepped up efforts to ensure continuity of family planning services in the country to ensure women like Dorica continue having access to family planning services and commodities.

“I had planned to have only four children but I relaxed on family planning and ended up giving birth again,” she says.

BRIGHT FUTURE FOR WOMEN AND GIRLS

After giving birth last year, Dorica has embraced family planning. Initially, she was on oral contraception pills, however, she switched her method to long term methods as the environment has changed due to Covid-19.

“I stay far from the hospital and meet a lot of people when coming to access family planning services,” she says, adding, “This puts me at risk of getting the virus. I have, instead, chosen a three-year implant.”

This method is readily available at Dorica’s local health centre, thanks to the Tsogolo Langa programme. And now her focus is on the future.

“I need to regain my strength after having five children,” she says. “When my three-year implant expires, I will surely come back again to have another long term implant, possibly for five years.”

Joseph Scott, UNFPA Malawi



FACTBOX

UNFPA approach to family planning during Covid-19 includes:

- An increased use of telehealth for counselling and advisory services.
- Ensuring stocks and inventory is maintained at adequate levels to avoid stock outs.
- Prepare and distribute information on how to access contraceptives and family planning services.
- Increase availability of contraceptives by reaching out to clients in a Covid-19 safe manner.

GENDER EQUALITY AND YOUTH: EMPOWERING WOMEN AND GIRLS

Our joint programming with UN agencies and regional initiatives continue to scale up support to gender equality and the empowerment of women and girls. The UNFPA delivers across three programmes including the Spotlight Initiative, Safeguarding Young People and the Joint Programme on Girls' Education.

Areas to support the empowerment of women and girls include tackling the threats to adolescent girls and harmful practices, inadequate protection against sexual and physical violence and a lack of awareness of their sexual and reproductive health and rights. It also targets young people increasing awareness and access to crucial services such as family planning, comprehensive sexuality education and information to empower young women and girls to make informed choices about their lives.

COMBATting VIOLENCE AGAINST WOMEN AND GIRLS

In 2020 mentorship sessions for 435 lead mentors across the six districts supported by the Spotlight Initiative started the process of creating a core of young women with knowledge and assertive skills able to negotiate and challenge harmful practices and gender based violence in communities and provide advice to women and girl survivors.

At the end of the year these lead mentors, working with our six partner civil society organizations, had trained 11,440 mentees in leadership and safe spaces as well as highlighting issues of sexual and reproductive health and rights. A mentorship manual was also produced for the programme to ensure common approaches and this is translated into vernacular languages to ensure wide access to communities.



Regular multisectoral coordination meetings on the essential services package for survivors of gender based violence with officers from Spotlight districts including social welfare, gender, health, police and magistrates were convened throughout 2020. The Malawi Police reviewed the in service curriculum to include a module on the essential services package policing protocols and standards that is now approved. Police master trainers are trained in the new provisions and providing training for their peers nationwide. One stop centre service teams also reviewed their standards and protocols to incorporate the essential services package as part of the rollout strategy.

Mapping of referral pathways and the development of a directory of gender based violence services in communities is finalized. Case follow-up to ensure women and girls receive integrated support services continued and 3,790 women survivors received services such as health, psychosocial and justice support and sexual and reproductive health services. 102 survivors accessed judicial services that resulted in 71 convictions for offenders.

The Tithandizane helpline supported people to report cases of gender based violence and facilitated referrals, counselling and psychosocial support. 4,860 gender based violence related incidents were reported through the helpline that provided linkages to support services for 2,140 cases.

Broadcasting and mobile airtime support was provided to the Ministry of Gender, Children, Disability and Social Welfare which helped sustain remote responses to gender based violence cases during Covid-19. An online information management system also developed with this ministry that will allow for improved tracking of reported cases of gender based violence and support the work of departments within the police, social welfare and health sector was also finalized.

COMPREHENSIVE SEXUALITY EDUCATION

555 teachers were trained in comprehensive sexuality education and 12,300 girls and boys participated directly in empowerment programmes raising awareness of sexual and reproductive health and rights. In six areas 55 girls and 17 boys were rescued from child marriages through community based prevention actions.

A review of the learner re-admissions policy was finalized and a total of 8,000 copies distributed down to school level to increase awareness of this policy and strengthen systems and processes for re-admitting girls that drop out of school due to pregnancies and early marriages. A further 3,500 copies are prepared for delivery in 2021.

In partnership with the Ministry of Education special needs teachers were trained using an on-line comprehensive sexuality education course. The trained teachers have improved capacities to deliver life skills in their schools, which will lead to improved learner knowledge and health-seeking behaviour for sexual and reproductive health and rights.

A diverse group of 87 youth lead facilitators were trained in comprehensive sexuality education to cascade the package to the grassroots level. Over 30,000 boys and girls were reached with key messages in the targeted programme areas. The adolescents are now equipped with sexuality information that will assist them to make informed choices about their sexual health.



5,250 adolescents and youth aged between 10- 24 years completed a six-month mentorship programme on comprehensive sexuality education in Salima, Dedza and Mangochi strengthening their skills to resist early marriage, practice protective sexual behaviour and enhance their social and economic assets.

Refresher training was also conducted for 68 mentors in parent-child sexuality communication strengthening engagement between parents and children in discussing sexual and reproductive health issues. A total of 120 safe space mentorship sessions were conducted reaching out to 3,000 adolescents.

REACHING OUT TO COMMUNITIES

Radio and social media campaigns ran throughout 2020. Highlighted issues of gender based violence and Covid-19 provided the central messages in a campaign that included social media, bulk SMS messages reaching 10,000 individuals, radio programmes airing across 12 radio stations including community stations and an interactive radio programme to provide support for the mental health of young people during Covid-19.

INCREASING ACCESS FOR PERSONS WITH DISABILITIES

95 service providers from six districts attended training by disability institutions in gender based violence. They also received training in basic sign language and the development of sign language visual aids for use in health service points. An assessment mapping disability access to health facilities in 67 health centres was also completed, and in response to the findings, construction to improve access based on the recommendations will commence in 2021.



KEY RESULTS 2020

- **435 lead mentors trained 11,440 mentees in leadership and safe spaces targeting gender based violence as well as highlighting issues of sexual and reproductive health and rights.**
- **12,300 girls and boys participated directly in empowerment programmes raising awareness of their sexual and reproductive health and rights.**
- **5,250 adolescents and youth aged 10 to 24 completed a six-month mentorship programme on comprehensive sexuality education.**
- **Across all programmes 61,690 youths trained in mentorship and leadership in the areas of gender based violence or comprehensive sexuality education.**



Norwegian Ministry
of Foreign Affairs



Schweizerische Eidgenossenschaft
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Confederazione Svizzera
Confederaziun svizra

Swiss Agency for Development
and Cooperation SDC







STORY

COMMUNITIES STEP UP EFFORTS TO END HARMFUL PRACTICES: THE INSPIRING STORY OF TILIMBIKE SAFE COMMUNITY SPACE IN MALAWI

“Now I know that I have the right to quality education, the right to freely express my opinion and that early marriage is not a solution – thanks to the safe space, because it has made me aware of my human rights,” said Alinat Fackson, 17, who received mentoring at Tilimbike Safe Community Space.

“Girls, let’s stay in school and focus on our education,” she advises her peers.

Alinat is from Chiludzi village in Dowa. One of 16 adolescent girls and young women who are part of the mentorship programme at the Tilimbike Safe Community Space, run under the Spotlight Initiative, she has renewed hope for achieving her full potential as she now understands how to make informed decisions about the future she wants.

The Spotlight Initiative targets the most at-risk groups with focused efforts to eliminate violence against women and girls, including sexual and gender based violence and harmful practices such as child marriage.

Getting adolescent girls and young women out of vulnerable spaces, where their rights and choices are limited or not accessible, is the cornerstone of these mentorship sessions, as Ricksani Alice, 19, who was married at a young age, describes:

“Due to safe space sessions, I’ve come to realize that early marriage is not a good thing as one can easily get childbirth complications associated with early childbirth, such as fistula or maternal deaths,” says Ms. Alice.

In the mentorship sessions, girls are taught life skills and about their human rights including sexual and reproductive health and rights, and how to refrain from negative social behaviour. These have brought positive results for the community, as the girls become able to speak out and challenge negative social norms that drive harmful practices, such as gender based violence, child marriage and teenage pregnancy.

“With this mentorship programme, I can proudly say girls are becoming change-makers and they will reach their full potential,” says Twambilire Kayuni, Programme Coordinator, Girls Empowerment Networks.

WORKING COLLECTIVELY TO END GENDER BASED VIOLENCE AND HARMFUL PRACTICES

Addressing community members from Chizungu village in Traditional Authority Dzoole, Dr. Julitta Onabanjo, UNFPA Regional Director for East and Southern Africa, explains there is a need for all community members – including cultural and religious leaders, district officials, men and boys – to work together to ensure an end to gender based violence and harmful practices.

“The decisions that men take affect women, and it’s important that they treat us [women] as equals. We want to hold hands together to make Malawi a better place,” she says.

“My humble request to the mentees today borders on three important things, as I ask them to be a sister’s keeper and ensure that there is no teenage pregnancy, no gender based violence and no child marriage. But they can only do that if the community enables them to do that,” continued Dr. Onabanjo.

Senior Chief Traditional Authority Dzoole agrees. “We’re determined to keep girls in school so we can have educated adolescent girls and young women in our community, who will contribute to the prosperity of this area,” he adds.

Senior Chief Dzoole commends all those involved in the Spotlight Initiative for giving adolescent girls and young women a voice, as well as the ability to call out perpetrators of gender based violence, as more girls now understand the reporting channels if they experience violence.

“Let us work together to end violence against women. We are ready to make this a reality,” agrees Council Chair, Martin Luka Phiri.

MENTORSHIP SESSIONS HELP PREVENT TEENAGE PREGNANCY AND CHILD MARRIAGE DURING COVID-19

To ensure that adolescent girls and young women are safe from the negative impact of Covid-19, including increased risk of early marriage or teenage pregnancy, the mentorship sessions are providing an effective model for prevention of these harmful practices.

“During Covid-19 there were zero teenage pregnancies and zero child marriages of girls and young women that UNFPA supports as mentees proving that girls are able to make decisions over their bodies and over their lives, and also determine what their future will be,” stresses Beatrice Kumwenda, UNFPA Gender Programme Officer and focal point for the UN joint Spotlight Initiative.

As many adolescent girls and young women found themselves at home due to school closures, as a result of lockdown measures, safe community spaces provided many of the mentees with an opportunity to interact with their peers.

“I am happy to see that the girls are on the right track and they must continue to stay put,” said Mr. Ivo Hoefkens, Head of Cooperation of the European Union Delegation to Malawi.

Mentorship sessions, covering 360 mentors across the focus districts of Dowa, Ntchisi, Mzimba, Nkhatabay, Machinga and Nsanje, are creating a cadre of 7,000 young women with knowledge and assertiveness skills, who are able to challenge harmful practices that fuel gender based violence in the communities, and provide advice to women and girls, especially survivors of gender based violence.

Derick Nyasulu, Communications Specialist- ESARO, UNFPA



POPULATION AND DEVELOPMENT

In partnership with the National Statistical Office and based on the adoption of the SDGs and the African Agenda 2063, UNFPA support strengthens access to the collection and analysis of population data and improves accessibility and data use for evidence based decision making.

Reliable population and socio-economic information systems are crucial in identifying key development challenges within the goals and pinpointing priorities, specific areas for engagement or areas lagging behind for targeted efforts.

Strengthening the generation and use of evidence including population statistics disaggregated by age and sex and better employing evidence in the public policy process and using it for accountability purposes is central to our commitment to support good decision making and implementation of social and economic policies going forward for Malawi.

TRANSFORMING DATA INTO ANALYSIS

From a target of 17 thematic reports planned during the post census period, 14 are now completed providing the government and decision makers a comprehensive analysis of population dynamics and demographics. A range of thematic topics are covered in the reports including population projections, demographics, education and access to basic services.

These reports provide unprecedented access to analysis and data on population dynamics in Malawi. To deepen these insights and localize the data collected by the population and housing census 32 district monographs are being developed employing consultative and workshop-based approaches.



The National Statistical Office has also conducted working sessions to develop 193 constituency level reports. Geographic Information System polygons for all the constituencies in Malawi are now aligned with enumeration areas and matched with location data from the census. This step will enable the presentation of constituency-level data through geospatial maps. For the first time communities and members of parliament will be able to access parliamentary constituency level development data, opening opportunities for communities to engage in unprecedented ways with their representatives.

ICT INNOVATION PAVING THE WAY FOR A SUSTAINABLE DATA ENVIRONMENT

A fully integrated digital platform for census data management, the smart census dissemination platform, is 85 percent complete with all hardware installation and configuration and customization completed. This system will revolutionize the planning and delivery of future population and housing census and population data delivery providing a wide range of innovative functions as well as a digital window for accessing data related to population dynamics.

Following a feasibility study, ICT equipment was procured to allow hosting of this platform. This included an upgrade of the Local Area Network, upgraded hardware and support for the data localization activity. Installation and configuration of the servers as well as the design interface and functionality are now completed. A mobile version is also in the final stages of development.

Key ministries and development partners also met to shape the National Statistical System Strategic Plan in 2020 with UNFPA support. A key outcome was agreed to develop the machinery of coordination to support a single national statistical system. Actions agreed include clearly defining the coordination of activities to be performed by the new planning and coordination unit aimed at strengthening the coordination mechanism and structures.



KEY RESULTS

- 14 of the 17 housing and population census thematic reports are now completed providing a comprehensive nationwide analysis of population dynamics.
- A smart census dissemination platform almost complete ready for launch in 2021.
- Key coordination meetings supported to provide for policy discussion on further developing a single national statistical system.



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STORY

FAMILY PLANNING SERVICES DURING THE COVID-19 PANDEMIC



Two years ago, Isabel Kapeya from Mose village in Mulanje juggled running a busy household with farming. In 2018, despite her busy life, she also volunteered for a community role that would change her life.

“I heard that our health centre was recruiting people to become community based distribution agents in their communities,” says the 32-year-old. “I had long wanted to do something for my community and after being successful in the interviews, and then training, I have never looked back.”

With support from UNFPA, Isabel has attended additional training in sexual reproductive health and rights and communication skills, which helps her to better serve the community. Although her role is on a voluntary basis, Isabel says she has never missed an appointment with her clients.

This dedication has paid dividends. In 2020 her efforts were recognized by her local health centre as she was named an outstanding agent. Also, her name is now known in every corner of her community.

“Everywhere I go, women stop to greet me. It makes me feel special,” says Isabel. “Most of them thank me for the services and support on family planning and how it has helped them to improve their lives. Hearing good stories like these gets me going every day.”

As an agent Isabel’s role is to provide counselling to clients in their homes on family planning and supplying them with a chosen method. For methods that require the specialized skills of a nurse, medical doctor or clinical officer, Isabel refers her clients to the nearest clinic.

MOVING CLOSER TO COMMUNITIES

According to Isabel, the past four months were the most challenging since she became a community based distribution agent. She says the Covid-19 has created a sense of fear in many and now communities would rather seek family planning services in their villages rather than attending potentially crowded health centres.

“I have had many young people visiting my home asking for either information or family planning commodities,” she says. “This, sometimes did not go down well with their parents as they thought my services were encouraging waywardness.”

Although uptake of family planning has improved over the years, there are still myths that when young people use contraceptives, they will not be in a position to give birth in the future. The work of Isabel has been especially important as adolescent girls are spending more time away from school and remain in their homes during the pandemic. By being in the community she is far more accessible to anyone that needs advice or access to contraceptives.

Despite the threat of the virus Isabel also remains hopeful “Now that there is much idle time many young girls are becoming pregnant. This has forced many parents to rethink their earlier stance,” she says, “They now understand that my role is to help their children have a better future by assisting them make informed decisions about the use of contraceptives.”

CONTINUITY OF SERVICES DURING COVID-19

Although most of her work is delivered out of her home Isabel also travels to remote villages to ensure family planning services are available to a wider community. This travelling she says does have risks as she interacts with many people. But the importance of family planning she believes does not simply stop in the face of a pandemic.

“Although I have protective gear to protect me from Covid-19, sometimes I feel that I may be over exposing myself to the virus,” she says. “The demand for family planning has risen so much and I have no choice but to increase the frequency of my visits to my communities.”

Joseph Scott, UNFPA Malawi



FACTBOX

- Malawi has a high unmet need for family planning, which is currently at 23 percent as well as a high birth rate of 136/1000 among adolescents.
- Since schools were closed from March 2020 onwards due to a spike in the number of Covid-19 cases Malawi has recorded an increase in teenage pregnancies.
- Isabel is supported in her work by the 2gether4SRH joint UN programme, which is funded by the Swedish Government. UNFPA ensures increased access to contraceptives for women and adolescent girls by supplying family planning commodities and providing technical support.

RESPONDING TO THE COVID-19 CRISIS

In partnership with ministries and UN agencies our rapid response to the Covid-19 pandemic supports continuity of maternal and neonatal health services in facilities across the districts. As part of the Malawi Government Covid-19 response plan through the Reproductive Health Department in the Ministry of Health the support provides pregnant women access to basic maternal and newborn health services during the Covid-19 pandemic.

This includes developing protocols and guidelines established to ensure compliance of facilities for the treatment of pregnant women, strengthening continuity of maternal and newborn care services including CEmONC-comprehensive emergency obstetric and newborn care-and increasing access to information, support and referral systems for pregnant women and newborns.

CLEAR PROTOCOLS AND GUIDELINES ARE KEY TO SAVING LIVES

Covid-19 specific maternal neonatal health service guidelines were developed together with UNFPA, World Health Organization and the Ministry of Health for medical professionals to follow in the healthcare of pregnant women. 1,500 copies of these guidelines were distributed to healthcare facilities across Malawi. A further 50,000 copies of guidelines for the treatment of pregnant women during Covid-19 were distributed. These allowed consistent implementation of procedures to reduce exposure and risk for pregnant women across Malawi.



A total of 33 out of a target of 46 health centres supported have fully functional mechanisms in place for both the treatment of pregnant women and safe antenatal and birth facilities. These were supported by 151 specialized birth attendants to bolster their capacity.

Virtual training in partnership with the Association of Malawian Midwives, the Association of Obstetrics and Gynaecologists and the Nurses Council of Malawi was also supported to ensure consistent implementation of the guidance across health institutions.

ENSURING CONTINUITY OF CARE

To provide safe CEmONC services hospital equipment including 3 ventilators, 10 anaesthesia machines, 20 patient monitors, 10 ultra sound machines, 56 doppler foetal heart machines, 10 vacuum extraction machines, 20 infant scales, 30 suction machines and 100 hand operated resuscitators for infants were provided to treatment centres.

Equipment was also provided to focal personnel at four central hospitals, five zonal offices and six districts across Malawi- Mzimba, Karonga, Mulanje, Zomba, Mangochi and Thyolo- to enable continuity of services monitoring by providers and to access information on care during the Covid-19 pandemic.

Almost 60,000 pieces of personal protective equipment were procured for healthcare professionals in the Covid-19 treatment CEmONC and Basic Emergency Obstetric and Newborn Care- BEmONC- service centres including makeshift taps and sinks to promote handwashing practices.

Strengthening continuity of maternal and newborn care services including CEmONC refurbishment of safe delivery areas in six facilities will be completed in 2021 that will further strengthen our response. Also to aid recovery in the regions affected by cyclone Idai in 2020 equipment was also supplied to nine districts for CEmONC including reproductive health and midwifery kits, delivery beds and sterilizers.

STRENGTHENING REFERRALS AND INFORMATION SHARING

A radio campaign supported has included promoting referrals and 114,917 men and boys were involved in referral and information sharing on Covid-19. A specialized hotline also received calls from 182,727 women and adolescents sharing vital information and providing counselling with experienced operators providing expert advice.

The Ministry of Health in coordination with UNFPA has also established a reporting mechanism for Covid-19 pregnant women in the national situation report for more accurate information dissemination, follow up, visibility and response. This supported the Public Health Institute of Malawi surveillance unit capture data from all 45 testing sites.

PUBLIC OUTREACH

A series of 16 programmes were aired on 14 different radio and television stations throughout the Covid-19 pandemic highlighting referral pathways and information on sexual and reproductive health and rights. To increase community reach 50 male champions were selected to promote women and adolescent girls and their access to health services as part of the action plans from the HeForShe Barbershop toolbox.

KEY RESULTS

- 33 health facilities have mechanisms in place for treatment of pregnant women during Covid-19 in line with protocols and guidelines that are aligned to World Health Organization standards.
- 75,600 safe births were attended by skilled health personnel during Covid-19.
- 90 percent of pregnant women including adolescents attending antenatal care in the target facilities attended all their scheduled visits during the Covid-19 period.
- 256,282 women utilized maternal and newborn services during Covid-19.
- 182,727 women of childbearing age including pregnant women and adolescents accessed advice and counselling from a hotline service.
- 114,917 men and boys involved in referral and information sharing on Covid-19.

STORY

YOUNG PEOPLE LEAD THE CHARGE ON CLIMATE CHANGE AND POPULATION GROWTH IN MALAWI

Just 85 kilometres south of Malawi's capital, the impact of global warming is abundantly clear. Hunger is becoming increasingly common due to famine caused by unfavourable rainfalls and poor harvests, because of changing weather patterns.

Adding to the problem is the mushrooming population of a nation that holds land as paramount, as it is the main source of livelihoods. In the past decade alone, the population has grown from 13 million to 18 million people. As land size per person has reduced, virgin land was annexed.

In Dedza, trees were cut down to make way for new inhabitants, exposing the land to soil erosion. Almost 80 percent of the district's land now lies bare and prone to degradation, making it unsuitable for cultivation.

The problem has not gone unnoticed by the young people who stand to inherit it. They have been galvanized to act.

"It is imperative that as young people we should be at the forefront to help save the planet from being uninhabitable, as the future belongs to us," says Charles Chingwalu.





In Senior Chief Kachindamoto's area in Dedza district, young people have formed the Kachindamoto Youth Network made up of 51 youth advocacy groups that aim to tackle the climate crisis as well as the unprecedented population boom. Mr. Chingwalu is the network chairman.

"We discuss how the population boom puts enormous pressure on resources such as land and the environment, as many people are forced to cut down trees as they look for new land to cultivate and feed their families," he says.

Because the network members understand how a population boom puts pressure on the environment and exacerbates the existing problem, they are taking a two-pronged approach – advocating for action on the climate crisis as well as championing sexual and reproductive health and rights, with support from UNFPA.

Network members share accurate information on climate change and they are taking action. In 2019 they planted almost 22,000 trees. This year, they have germinated 1,500 trees – a lower figure due to Covid-19 restrictions – in readiness for the 2020-2021 rainy season.

They also share information on how access to sexual and reproductive health services, such as family planning, is essential to managing population growth trajectories to reduce the pressure that human beings exert on the environment.

"We encourage each other, as young people, to access sexual and reproductive health services such as condoms and contraceptive methods to prevent teen pregnancy, as well as the spread of HIV and other sexually transmitted infections," says Mr. Chingwalu. Fighting child marriage and encouraging adolescents to focus on their education are critical elements of their campaign.

"With the right information on sexual and reproductive health issues, a lot of adolescent girls and boys appreciate the need to stay in school and not get married at an early age or have unplanned children," says Flora Francisco, a member of the Kachindamoto Youth Network.

As more young people gain access to the right information, the majority will make informed choices about their future – to complete their education, marry and bear children when they are ready, while also understanding how their actions have an impact on climate change, the network members believe.

"The more young people engage in early marriage and have unplanned children, the more we put pressure on our scarce natural resources," says Ms. Francisco.

BUILDING CLIMATE-RESILIENT HEALTH SYSTEMS

Disasters induced by climate change typically disrupt the provision of essential services, including sexual and reproductive health services such as family planning and HIV treatment and prevention. In March 2019, Cyclone Idai caused havoc in Malawi's Mangochi district.

"Many parts of Mangochi district were submerged under water. We had to use the services of a helicopter to reach areas that were not accessible by road to provide sexual and reproductive health services, such as condoms, as a family planning method and for prevention of HIV and STIs, as well as peer education and HIV-related services," says Treazer Masauli, Senior Health Surveillance Assistant at Mangochi district hospital.

His health surveillance team discusses the dangers of teenage pregnancy, early marriage and the population boom with young people.

"Due to poverty, adolescent girls might be forced to get married but we advise them that getting married is not a solution, as they might face challenges not only while giving birth but also in terms of raising the child."

With Covid-19 lockdown measures restricting people's movement, health surveillance teams were instrumental in ensuring continued access to sexual and reproductive services, as well as raising awareness about Covid-19 preventive measures set by the World Health Organization.

“We have been doing routine health services in communities to share information about the pandemic as we reached communities with essential health services, including sexual and reproductive health services, as well as information on climate change,” says Mr. Masauli.

However, community members need a well-coordinated approach to fully understand the interlinkages around climate change and access to sexual and reproductive health and rights.

“To ensure that community members are reached with holistic and streamlined messages around climate change, sexual and reproductive health and rights, and agriculture, there is a need for development actors within the communities to work together and ensure good coordination,” says Boyd Nkonjera, Senior Health Surveillance Assistant at Mangochi district hospital.

“At least many community members are aware of the dangers of a population boom, and can attest to how hard it is for them to acquire resources, such as land,” he adds.

Derick Nyasulu, Communications Specialist- ESARO, UNFPA

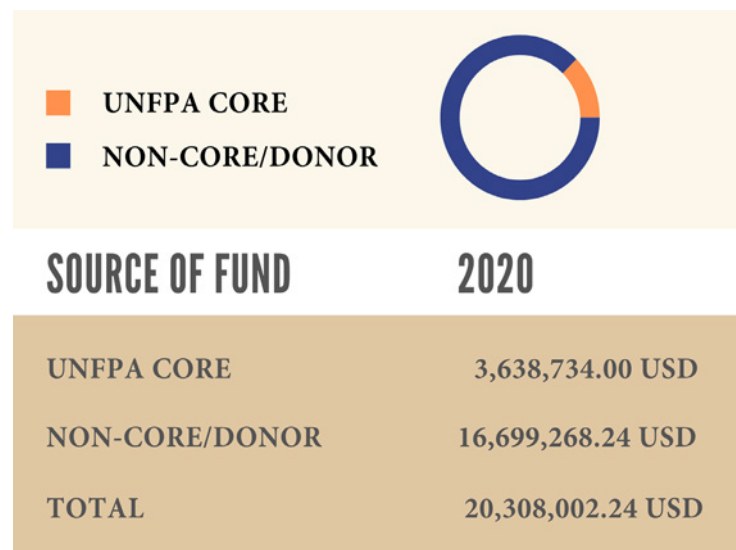
FACTBOX

In 2019 a symposium was held on the theme Sexual and Reproductive Health and Rights, Gender and Climate Change Resilience organized by UNFPA in Pretoria, South Africa. The participants’ call for action included:

- Expanding investments in sexual and reproductive health and rights and gender equality to build climate resilience at the individual and community level.
- Strengthening climate-resilient health systems to deliver and sustain universal sexual and reproductive health.
- Ensuring health and protection of rights and all forms of violence in the context of climate-related impacts, migration and displacement.
- Improving climate-related vulnerability assessment through population and health data.
- Empowering young people into climate action.

MANAGEMENT SNAPSHOT

RESOURCE DELIVERY 2020



DONORS AND PARTNERSHIPS, 2020

UNFPA PROGRAMMES	FUNDING SOURCES/ DONORS IN 2020
SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS	EUROPEAN UNION, ICELAND, KOREA INTERNATIONAL COOPERATION AGENCY, KFW FEDERAL REPUBLIC OF GERMANY, NORWAY, SWEDEN, SWITZERLAND, FOREIGN, COMMONWEALTH AND DEVELOPMENT OFFICE UK, GOVERNMENT OF MALAWI, MINISTRY OF HEALTH, UN MULTI-PARTNERSHIP TRUST FUND, UNFPA
GENDER EQUALITY AND YOUTH: EMPOWERING YOUNG PEOPLE	EUROPEAN UNION, KOREA INTERNATIONAL COOPERATION AGENCY, NORWAY, SWISS DEVELOPMENT COOPERATION, UN MULTI-PARTNERSHIP TRUST FUND, UNFPA
POPULATION AND DEVELOPMENT	ICELAND, NORWAY, FOREIGN, COMMONWEALTH AND DEVELOPMENT OFFICE UK, UNFPA
RESPONDING TO THE COVID-19 CRISIS	KFW AND FEDERAL REPUBLIC OF GERMANY, UNICEF, UN MULTI-PARTNERSHIP TRUST FUND, UNFPA
PROGRAMME COORDINATION AND ASSISTANCE AND PROGRAMME SUPPORT	UNFPA



KEY PARTNERS IN 2020

STATE MINISTRIES AND DEPARTMENTS

Ministry of Finance, Economic Planning and Development, Ministry of Health and Population, Ministry of Gender, Children, Disability and Social Welfare, Ministry of Youth, Sports and Labour, Ministry of Education, National Statistical Office.

LOCAL AUTHORITIES

Chiradzulu District Health Office, Dedza District Assembly, Mangochi District Health Office, Mchinji District Assembly, Mulanje District Assembly, Nkhatabay District Assembly, Salima District Assembly.

NON STATE ACTORS

Action Aid Malawi, Amref Health Africa, Banja La Mtsogolo, Family Planning Association of Malawi, Girls Empowerment Network, GOAL Malawi, Malawi Girl Guides Association, Native Youth Development, Ntchisi Youth Development, Youth Net and Counselling.

POLICY ENGAGEMENT

The UNFPA actively engaged Malawi's new administration that took office in June 2020 which policy-wise has prioritized investing in health, promoting gender equality and empowerment of young people. We also deepened our engagement with key policy makers and influencers including members of parliament and the first lady on key issues such as supporting adolescent girls in rural communities, the promotion of menstrual health, youth empowerment, and tackling harmful practices including violence against women and child marriage.

To strengthen the ICPD+25 national response a high level panel was convened to establish a framework for roles and responsibilities particularly in relevant ministries for a tracking and reporting framework for the commitments. This included mechanisms to be agreed, identification of priorities for actions from the 10 commitments made by Malawi at the Nairobi Summit; and where required programmatic adjustments.

THE WAY FORWARD



Managing the threat of Covid-19 will continue to remain a priority during 2021. Although a range of vaccines are now being manufactured the sheer size and scale of the pandemic means distribution globally of these will take time. Whilst combatting the pandemic, ensuring our programming is Covid-19-proofed and providing opportunities for young women and adolescent girls and young people and their sexual and reproductive health and rights will continue to be a priority for UNFPA Malawi.

PIPELINE PROJECTS

A number of new projects commenced in 2020/21 that further strengthens continuity of our existing programming.

The first of these is supported by the Korea International Cooperation Agency and is a USD6.6 million project directly improving the sexual and reproductive health and rights of 216,000 teenage mothers and adolescent girls in the central region of Malawi by providing mentoring, health support services and vocational training for these beneficiaries.

A further programme starting in 2021 is the third phase of the UN Joint Programme on Girls' Education that is entitled 'Learning for All in Malawi' supported by USD40 million funded by Norway. The third phase will focus on consolidating the results of the previous phases effectively delivering practical solutions at school level to ensure young adolescents and girls are not left behind. UNFPA's output in the project will once again be comprehensive sexuality education, combatting teen pregnancy and supporting girls that drop out of school to return. At the same time it will further strengthen engagement of boys, men, parents and community members.

Another joint UN programme strengthening the health system for equitable health and nutritional outcomes as part of the Umoyo Wathu Programme has also commenced that is supported by the UK Foreign, Commonwealth and Development Office with funding of USD9.2 million. UNFPA will focus on developing and scaling-up an integrated care pathway for primary and secondary healthcare facilities and on improving the quality of contraception, pregnancy, delivery, including emergency obstetric and newborn care, services.

In partnership with the European Union the Spotlight Initiative too is expected to enter a second phase in 2021 after a successful first period. The mentors and safe spaces created with support of UNFPA will continue to provide girls and young adolescents increased protection against gender based violence and support sexual and reproductive health and rights across the target districts.

Finally, in 2021 UNFPA as a co-chair of the UN Data Group, we will pursue areas that support increased coordination and integration of data systems including civil registration, administrative data and population statistics collection. The initiative will build on the existing three data pillars to develop increased inter-operability assisting policymakers to utilize data more effectively and ensure disparate data streams converge to support a single national framework for accessing data.

LESSONS LEARNT

Covid-19 has dominated 2020 and it is in the area of emergency response key lessons learnt are related. In our planning we were able to rapidly adjust to the Covid-19 situation in an unpredictable and in many respects unprecedented period. Major lessons, however, were learnt in the process of planning and delivering our response.

COVID-19 IS NOT BUSINESS AS USUAL

The primary challenge posed by the pandemic was how to manage the already under-resourced and overstretched capacity of the national health sector and healthcare infrastructure to be able to absorb the potentially enormous stress on the system of the crisis. This has demonstrated once again the need for a more resilient, adaptable and agile national health service capable of absorbing unpredictable shocks.

The framework of the national recovery plan and the timely response of the Government of Malawi to the pandemic with the National Covid-19 Preparedness and Response Plan have outlined a clear policy level response. At the same time, however, the capacity of the sector is not designed to meet the enormous level of strain of a national pandemic.

This meant key Covid-19 response strategies for pregnant women and women and girls to access sexual and reproductive health could not always be developed within existing capacity and required significant procurement and prioritization. These procurement processes in partnership with the Government of Malawi could be burdensome and time consuming. This led to delays in procurement in a market of scarcity.

Not only were Covid-19-specific commodities in low supply such as personal protective equipment but also regular supply chains and transport infrastructure for family planning commodities were affected as global and local supply chains and the transport of commodities slowed down mirroring economic shutdowns. In future it is imperative that a margin of surplus stock for non-perishable health commodities is factored into risk level monitoring.

A further challenge in this response was the speed at which decision making and procurement processes could be accelerated during the start of the pandemic. Virtual consultations over key intervention sites with government departments were crucial to the delivery of the emergency response. At the same time, however, it also required considerable time and planning in the face of a growing crisis.

INCREASED PRESSURE ON THE MOST VULNERABLE

Policy responses to Covid-19 and the closure of public spaces and institutions such as schools has had a profound impact on the most vulnerable. Women and adolescent girls were largely confined to their households with restricted access to public life and the informal and formal support structures that they depend upon.

Increases in child marriages and teen pregnancies were recorded and the closure of schools has meant almost an entire year of education was lost without access to online digital tools and community learning resources. In this respect, the emergency response models to tackle the pandemic require novel approaches that also have stronger outreach and protection mechanisms to support the most vulnerable communities confined to households and at greater risk.



SERVICE DELIVERY DIGITALIZATION

Related to this last point the move to a virtual working environment was also a key change in 2020. Whilst many tasks were conducted online and using virtual tools supporting continuity, this highlighted the vital importance of new ways of engagement especially for networked based activities.

Technology is a complementary tool rather than a replacement for our working environment is one of the key lessons learnt in 2020. Technological solutions and flexible models for engaging with communities are extremely promising but will require investment and a period of time to be fully adopted. New more flexible and remote services using digital technologies can play a crucial role in taking pressure off the healthcare system and empowering communities with the promotion of advice and self-care services. This can improve services, and although it cannot replace physical interactions with and within communities, there is a crucial place for innovative technical solutions.

It is therefore important to accelerate the rollout of digital technology. The possibilities including more emphasis on self-care, information and remote health counselling that employs digital platforms were introduced during this pandemic and in the future we need to scale this up to an increased number of areas. At both demand and supply levels digital can be a game changer.

At the same time engaging with communities at all levels also remains crucial and this requires a strong physical presence and engagement in the field. Communities engaging their local leaders face-to-face to hold them accountable and resolve issues have assisted in accelerating implementation and coordination of activities. Empowering communities with skills and knowledge to do things for themselves gives them a sense of control of their lives from physical learning.

As a result, UNFPA needs to continue strengthening youth engagement to support digital innovation in the delivery of services. Whilst the virtual world has many merits, it is the physical world that our work impacts, and in many respects, it is the networked communities that we work with which make a difference.

DATA SAVES LIVES

The pandemic has also created increased demand for data and data driven solutions. Rapidly evolving patterns in the spread, testing, deaths and recoveries of Covid-19 cases requires “fast” data to remain relevant. The National Statistical Office and UNFPA primarily utilize “slow” data for example censuses, surveys, annual population estimates, which can be too static to inform decision-making in rapidly changing environments such as pandemics but can also be employed to inform response strategies, priorities and plans.

In this respect, we have learnt how important it is to have access to joined up data systems that can utilize a range of presently disparate data platforms able to respond to real time emergencies where time and information can be the critical differences between life and death.

INEQUALITY REMAINS A HUGE CHALLENGE

On a final note. And perhaps the most important lesson learnt. The profound inequality between Malawians, especially the most vulnerable including women and adolescents and people with physical disabilities has widened during Covid-19. On nearly every indicator of inequality: in poverty, education, healthcare and access to services and information platforms such as the Internet the inequality faced by women and girls is deepening and widening.

The pandemic has affected the livelihoods of the poor harder, it disproportionately impacts on their communities’ welfare, and it risks leaving the most vulnerable women and young girls in a state of destitution. It is therefore crucial that our work continues to target the most vulnerable in the coming period as we assist communities tackle the remaining period of the pandemic and then recovery to support these communities to become more resilient even in the face of this pandemic. It is as a result that a human rights based approach with a central gender lens on problems that tackle discrimination and promote social inclusion remain a cornerstone of UNFPA programming.



STORY

DOOR-TO-DOOR FAMILY PLANNING SERVICES

Chenjerani Frog from Mulanje grew up with a dream of becoming the first medical doctor in his village. After finishing his secondary education, Chenjerani applied for medical school, but he was not admitted. He also tried nursing but still, with no luck.

“I have always wanted to be a doctor,” says Chenjerani, a father of two. Although not realizing his dream yet he is however, helping serve his community as a community based distributing agent.

Chenjerani, who is a full time farmer, says he knew nothing about being an agent until he attended a meeting organized by health staff from his local clinic. During the meeting, the health staff said there were opportunities for volunteers to serve the community.

This caught Chenjerani’s attention. He knew that agents worked as health workers and, this opportunity afforded him the chance to be one. The next day he set off to the health centre to collect application forms for the post.

“I was shortlisted and passed the interviews,” says Chenjerani. “I then went for a two week course that introduced me to many things about family planning and working with communities. “This was the first time in my life to be awarded a certificate,” he proudly explains.

REACHING OUT TO REMOTE COMMUNITIES

After the training, Chenjerani did not waste any time as he hit the ground running. Within a few weeks, he had established a reputation beyond his village. His passion for the job also saw the newly recruited agent making personal sacrifices to ensure more people accessed family planning.

“I have a motorcycle, which I bought with proceeds from my farm and I use it to reach people in distant areas,” he says. “The bike has also helped me to reach areas that are inaccessible by foot as our area is mountainous.”

The passion which drives Chenjerani is noticed by his community. Odetta Ngulama says she has been Chenjerani’s client for the past two years and feels he is the best in his field.

“Every time I miss my appointment, he makes sure to visit me the following day,” says the mother of four. “If it was not for him, I could have had an even larger family, which I could not manage to take care of. I owe it to him.”

Before the Covid-19 pandemic hit Malawi, Chenjerani also reached out to his constituency through social gatherings such as weddings.

“I would ask the organizers for a few minutes to talk about family planning. However, with the new restrictions, it is no longer possible,” he says. “People are now wary of attending large gatherings as they fear contracting the virus.”





The changing circumstances due to Covid-19 meant that Chenjerani had to innovate. He saw an opportunity in religious institutions. Current Covid-19 restrictions allow for not more than 100 people to congregate, meaning a small potentially ready audience.

“Some religious leaders were not for the idea as they do not allow use of family planning commodities in their institutions,” he reflects, adding, “To gain access to the congregations, I had to explain that there are also natural family planning methods for religions that do not allow contraceptives.”

TACKLING CHALLENGES POSED BY COVID-19

Despite the success with religious institutions, Chenjerani says he still favours one to one meetings as they allow people to ask questions and find out more about family planning and make informed decisions.

“I get people following me home to receive more information or in some instances asking for condoms,” says Chenjerani. “Many people want family planning to be a private matter, which is why they are shy to ask questions in public gatherings.”

Like other health workers, Chenjerani’s work puts him at high risk of contracting Covid-19. However, with support from UNFPA, he is well equipped with personal protective equipment and Chenjerani makes sure that his communities observe Covid-19 prevention practices as stipulated by the authorities.

“Individuals coming for services at my place have to wash their hands before entering the compound,” he says. “They should also wear a face mask. It is important that I observe these measures so that I protect myself and my clients.”

Joseph Scott, UNFPA Malawi





UNFPA Malawi

Results Achieved 2020



Ensuring rights and choices for all since 1969

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