



UNFPA
MALAWI

Annual Report 2021

Accelerating the Three Zeros

THREE ZEROS by 2030

Ending unmet need for family planning

Ending preventable maternal death

Ending gender-based violence and harmful practices

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Annual report 2021

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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.



UNFPA MALAWI

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Accelerating the Three Zeros



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OUR KEY RESULTS IN 2021

- 360,114 additional users of modern family planning methods.
- 1,435,040 adolescents and young people reached with sexual and reproductive health and rights services.
- 248 women living with obstetric fistula received treatment.
- 85 percent of health facilities in UNFPA focus districts now provide emergency obstetric care.
- 1,325,629 couple years of protection from users of all modern family planning methods in 2021.
- An estimated 18,850 maternal deaths avoided.
- Ante-natal care visits between week 0-12 increased by 14 percent from 17,716 to 20,757.
- 68,960 women and girls accessed services through safe spaces including sexual and reproductive health, psychosocial support and counselling for survivors of sexual and gender-based violence.
- 23,640 women and girls are participating in safe space mentorship programmes.
- 709 child marriages were followed up resulting in 60 percent of these being annulled.
- 1,945 vulnerable girls referred from safe spaces to support services.
- 841,000 youths were reached with different types of youth friendly health services including information about family planning and HIV prevention.
- 28 district development plans employed census data and baselines for the new cycle of development plans.
- The Malawi Data Dissemination Platform was launched and for the first time integrates all key survey data related to population in one platform online and on mobile devices.
- 32 district and 193 constituency level reports were published with an analysis of local level statistics.



FOREWORD

The year 2021 was a period of continued global insecurity fuelled by Covid-19. We are now in our third year of the pandemic and learning to live with Covid-19 still appears to be far off on the horizon for much of the globe. With only 4.5 percent of the population fully vaccinated, levels of protection remain very low in Malawi.

It is, however, hopefully a sign of relief that our world health experts are starting to indicate we may be seeing some light at the end of the tunnel. The wider and long-term impact of the pandemic on women, adolescent girls and young people should not, however, be underestimated. It has affected the economy, livelihoods and social life in profound ways.

I am proud to say that UNFPA and our partners in Malawi have demonstrated remarkable flexibility and resilience to live with Covid-19. There has inevitably been some impact on our programming, but after a period of adjustment, 2021 witnessed a return to full programme delivery.

Our results in 2021 highlight the continued challenges of maintaining the gains in sexual and reproductive health and rights for women, adolescent girls and young people in the face of strained public resources allocated to the health sector and continued instability during the threat of a pandemic.

All of our programmes have mainstreamed Covid-19 prevention measures that have mitigated against contagion. As importantly, these also helped overcome fears that facilities such as health centres could be hotspots for the spread of the virus. With these measures in place, our support for the sexual and reproductive health and rights of women and girls continues to have an impact.

We have also expanded the safe space programmes to Dedza, Ntchinji and Lilongwe districts in 2021. These provide opportunities for girls and young women to discuss issues affecting decisions about their bodies and lives. Key to the agenda in these spaces is to combat sexual and gender-based violence, highlight issues around sexual and reproductive health and rights and gender inequality. The girls participating in these safe spaces build mutual support networks for them to lead changes and respond to a wide range of challenges collectively.

The support for safe births and fistula repair, as well as youth empowerment programmes to provide improved opportunities for vulnerable teenagers and health and referral system strengthening schemes are also all demonstrating strong results.

In 2022, a new dynamic period for UNFPA will start with the introduction of a new corporate strategic plan for the period 2022-2025. This plan's primary aim is to accelerate the three transformative results: accelerating the attainment of ending the unmet need for family planning, ending preventable maternal deaths; and the final one ending gender-based violence and harmful practices.

UNFPA Malawi will accelerate by innovative strategies the attainment of our key outcomes. We will also increase strategic focus on leaving no one behind and the continued urgency in reversing gender inequality and discrimination against women.

To ensure the country programme continues to be context driven, we have concluded a wide-ranging review of our strategies that will accelerate the delivery of the three transformative results.

This has ensured that our programming is fully aligned with the agenda outlined in Malawi 2063 and the 10-year implementation plan's development targets, especially those on universal access to sexual and reproductive health and rights.



Won Young Hong
UNFPA Resident Representative
Malawi



SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS

INCREASING CHOICE FOR FAMILY PLANNING

In 2021 there are 360,000 additional users of modern contraceptives, which includes 123,000 young people aged between 10-19 years old. A total of 1,325,629 couple years of protection from users of all modern family planning methods was achieved in 2021, leading to 18,850 maternal deaths being avoided.

During this period, the availability of modern contraceptives and access in hard-to-reach areas was maintained. With support from UNFPA the Ministry of Health distributed family planning commodities including 7.1 million vials of Sayana Press and Depo Provera. A further 180,000 implants were administered. 396,735 male and female condoms were also distributed through regular clinics and a pool of community-based distribution agents.

Despite disruptions to supply chains, 95 percent of service delivery points managed to maintain the functional logistical management information system. A service delivery point survey in 2021 identified a 76 percent increase in the number of facilities offering at least three modern family planning methods from 2018–2021.

STRENGTHENING ACCESS TO INTEGRATED SERVICES

Eight family planning rooms in health centres were renovated, improving access to family planning services and providing women and girls with access to improved facilities in Mangochi district.

To maintain sexual and reproductive health and rights support services during Covid-19, outreach strategies were strengthened. UNFPA-supported mobile clinics increased the reach of these services to remote communities, providing family planning and maternal care services, HIV testing facilities and access to key commodities.

144 community-based distribution agents made 60,480 visits during the year to provide family planning advice and supply commodities to ensure access to these key services was not reduced during the Covid-19 pandemic period.

A total of 287 health workers were trained in Sayana Press, immediate post-partum family planning methods of intrauterine devices and implants, as well as community-based family planning commodity distribution services.



SAFER BIRTHS

Continuity of care with a focus on the provision of quality maternal and newborn health services was strengthened with the opening of a new operating theatre in Lilongwe district and the provision of essential equipment for the safe delivery of newborns in five districts.

Four operating theatres were rehabilitated in Lilongwe, Dedza and Mangochi. Two maternity wards in Mulanje were also renovated, providing an improved and safer environment for pregnant women to give birth. These will improve the quality of delivery for 5,700 women each year, including the ability to carry out caesarean sections.

As part of the overall rehabilitation of theatres, 80 staff were trained on emergency obstetric care protocols and 179 health workers were trained in post-abortion care. To encourage teenagers to attend antenatal and postnatal care in Dedza and Mchinji districts, transport to healthcare facilities was also supported.

OBSTETRIC FISTULA REPAIR AND RE-INTEGRATION SUPPORT

248 women living with obstetric fistula were repaired. 21 health staff in districts, including clinicians, anaesthetists and nurses also received training to build capacity for obstetric fistula management.

Rehabilitation works in 2021 included the renovation of the old maternity wing at Mangochi district hospital. This facility now has capacity to provide services for fistula repairs with 70 women annually expected to receive support in this district.

The fistula and gender-based violence ambassadors trained by UNFPA have assisted to identify fistula cases that will receive treatment in 2022. To widen their outreach, bicycles were procured for each of the 60 ambassadors trained in 2021.

100 fistula survivors received support for their full reintegration into social and economic life. This included the distribution of sewing machines and solar units, helping these women earn independent incomes.

KEY RESULTS

- **360,114 additional users of modern family planning methods.**
- **1,435,040 adolescents and young people reached with sexual and reproductive health and rights services.**
- **248 women living with obstetric fistula received treatment.**
- **85 percent of health facilities in UNFPA focus districts now provide emergency obstetric care.**
- **1,325,629 couple years of protection from users of all modern family planning methods in 2021.**
- **An estimated 18,850 maternal deaths avoided.**
- **Ante-natal care visits between week 0-12 increased by 14 percent from 17,716 to 20,757.**



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STORY

MOBILE CLINICS REACHING OUT TO WOMEN IN REMOTE COMMUNITIES

Approximately 300 young women are sitting huddled together in a queue under the shade of a large tree in a small village 15 kilometres off the main road down a dusty dirt track in Mangochi district.

These women have arrived to attend the weekly clinic for check-ups on their new born babies. Nurses and health assistants check the babies' vital statistics, including for vaccinations, nutrition, and growth. To encourage monitoring, their health passports are stamped to record progress.

This district has the highest birth rate in Malawi. On average, women have 5.5 children each. The population is also very young, and 80 percent, according to the 2018 census, is below the age of 35.

After having their babies checked, the mothers, as part of the goal to integrate sexual and reproductive health services more fully into health services, are also visiting a mobile clinic for family planning parked up next to the tree.

As it prepares to open, the nurses and health assistants lead the visiting mothers in a song highlighting the benefits of family planning in the community.

This mobile clinic travels around the district, linking up with the static clinics for mothers and babies to assist in providing essential family planning services. Each week it covers about 200 kilometres, most of which is away from the main road down dirt tracks in more inaccessible villages.

The critical mass of women that congregate at these clinics provides a perfect opportunity for the family planning teams to reach out with advice and, when requested, family planning commodities.

Nurse Asidaya Chitakunye who manages the family planning team, explains, “Most locations are very far from the health centre and these women struggle to reach our facilities. It could take an entire day for a woman to reach the main clinic that is 30 kilometres away.”

According to the nurse, such a long journey discourages regular attendance, and by bringing family planning to the village, a huge amount of time and travel is saved. This would amount to about 50 days of travel for the 50 women attending a family planning session that morning, or a combined travel distance of 1,500 kilometres. Time that these women who run the household and, in many cases, also manage small family farms can ill afford.

It is not just a question of saved time. The van is equipped with a private consultation room and a range of family planning commodities are readily available. The environment respects the privacy of women that seek assistance to plan for future families.

Eliza Mangulenje is 19 years old and visiting the family planning team after getting her baby checked over. She had her first baby four months ago.

She recalls her first visit to the mobile clinic. “It was quite difficult to relate to the idea that families can be planned. So many of my friends are having babies. The nurse, however, explained to me the options, so I am now able to understand the importance of the choices I have at the clinic.”



The father of Eliza's baby, like many men in the district, works in South Africa. He sends some money to look after the baby now and again, according to Eliza but she has not seen him since the child was born. The pregnancy was unplanned after having unprotected sex. It has disrupted her plans to complete her education. She also has another partner now and has an active sex life.

Eliza now has plans to complete her education. "After having my first child, I would now like to return to school to complete secondary studies" she explains. "I would like to become a teacher, and this means I need to continue to plan how my family develops in the coming years, which means I will continue to use family planning."

Zione Alike is also attending the family planning mobile clinic. "I came to the last meeting at the mother and baby clinic and I decided to visit the family planning team after advice from the other mothers." She has never discussed having a family before with her partner and although she is delighted with her baby daughter wants to have a pause on growing her family until they are in a stronger financial position.

Zione has chosen to have a contraceptive injection that provides three years of protection from unwanted pregnancy. "The injection is the best method for me as it means I do not have to keep on returning to the clinic or worry about forgetting to use other methods." She continues "My husband wants to be an entrepreneur and we have a small business maintaining boats used for fishing at the lake."

The mobile clinic has made a big difference to Zione's life. She realizes she can make a better life for her family by planning how she would like to build her family and by spending some time investing in creating a home and a reliable family income before having more children.

Her target is in five years to have more children when she thinks the family will be in a strong position to provide for a healthy future for the children.

With the support of the mobile family clinic, both Eliza and Zione are able to access a range of information and products that assist them make informed choices about their sexual and reproductive health and rights.

By delaying their plans for a few years, they have given themselves a much better platform for their future families and have all the support they need to realize these plans.



GENDER EQUALITY AND YOUTH: EMPOWERING WOMEN AND GIRLS

Women and adolescent girls continued to access UNFPA-supported safe spaces. These provide vulnerable young women access to a range of support services including weekly mentorship sessions.

These spaces work to empower women and girls to develop strategies and assertive skills to negotiate and challenge the harmful practices that fuel sexual and gender-based violence in communities. Girls and women learn how to challenge negative social norms that promote harmful practices such as sexual and gender-based violence, child marriage and teenage pregnancies.

Safe spaces also offer a supportive and safe environment within communities to report and access quality essential services for survivors of harmful practices.

COMBATting VIOLENCE AGAINST WOMEN AND GIRLS

During this year, 68,960 women and girls accessed services through safe spaces including sexual and reproductive health, psychosocial support and counselling. This included 23,640 girls and young women attending the safe space mentoring programme gaining new skills and strategies to target sexual and gender-based violence.

709 child marriages were followed up resulting in 60 percent of these being annulled. The girls were returned to school. Communities and local leaders were instrumental in reversing these harmful practices in communities.



Increased engagement of key institutions targeting violence against women and girls was strengthened with training of service providers in the police, judiciary, and health and social welfare services on sexual and gender-based violence.

Access was also improved for 873 survivors in six districts because of a community fund supporting vulnerable individuals to take legal action, or access welfare services. These funds also assisted with transport allowances to ensure women and girls were able to reach services from remote areas.

There was also increased demand for justice and 2,964 cases of sexual and gender-based violence were concluded in courts. 1,945 of these cases were referred by safe space mentorship participants and 480 mentees have put violence in their homes in the spotlight by reporting cases to their safe space mentors.

A further 682 girls have sought help after experiencing abuse. And eight legal clinics and community courts supported increasing awareness of existing legislation on sexual and gender-based violence.

As a result of investing in girls through the safe space mentorship programme, 29,463 traditional leaders have now been enlisted to support the mentors to resolve issues highlighted in safe spaces. This has witnessed increased engagement of men in community sensitization meetings to encourage men and boys to be change agents to raise awareness of family planning and gender-based violence and other harmful practices. In 2021, a total of 18 traditional practices were identified for modification to address harmful practices.

COMPREHENSIVE SEXUALITY EDUCATION

A pool of 228 teachers and school management committee members participated in sexual and reproductive health and rights dialogue sessions highlighting strategies to reach learners with special education needs. A further 310 teachers were oriented on the use of braille for teaching comprehensive sexuality education. 3,000 students also have increased access to comprehensive sexuality education following training for 50 teachers.

The digitalized application designed specifically for the teaching of comprehensive sexuality education was uploaded to 810 tablets in 27 schools in Dedza, Mangochi and Salima districts, where 40 teachers were also trained in the use of the application.

1,376 adolescent girls and young women with disabilities were able to access family planning and sexual and reproductive health as a result of disability assistive devices and training by service providers, because services now include sign language and disability friendly structures.



YOUTH FRIENDLY HEALTH SERVICES

Approximately 841,000 young people were reached with different types of youth-friendly health services, including information about family planning and sexual and reproductive health and rights.

Online, a further 64,305 young people accessed the TuneMe page to receive information and tailored messaging for girls and young women. A radio series on ending unintended pregnancies was produced that highlighted debate on family planning issues. A series of 24 radio programmes aired on community radio stations covering topics such as sexual and reproductive health and providing information on the availability of services in the area.

Dialogue and theatre group sessions were attended by 35,000 community members that highlighted positive perceptions on the rights and empowerment of teen mothers and adolescent girls and sexual and reproductive health and rights issues.

346,727 young people accessed youth-friendly health facilities. With a further 79,100 girls and boys also benefitting from mobile clinics supplying integrated sexual and reproductive health services including family planning.

To further strengthen responses, 207 service providers were trained in the provision of youth-friendly health services. A further 35 data entry clerks received training to improve data collection from these centres on service provision. To improve quality, an accreditation exercise to assess the degree of compliance with the youth-friendly health service policies was conducted.

Maintenance and building repairs were made to 13 boys' clubs that will provide forums to strengthen boys' involvement in supporting sexual and reproductive health and rights. These clubs have 35 members each and a total of 455 boys are reached in club sessions following the small-scale repairs that had previously rendered these facilities unusable.



KEY RESULTS

- **68,960 women and girls accessed services through safe spaces including sexual and reproductive health, psychosocial support and counselling.**
- **23,640 women and girls participated in safe space mentorship programmes in 10 districts.**
- **709 child marriages were followed up resulting in 60 percent of these being annulled.**
- **1,945 vulnerable girls referred from safe spaces to support services including psychosocial support, counselling, family planning and health services.**
- **841,000 youths were reached with different types of youth friendly health services including information about family planning and sexual and reproductive health.**



Norwegian Ministry
of Foreign Affairs



Schweizerische Eidgenossenschaft
Confédération suisse
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Confederaziun svizra

Swiss Agency for Development
and Cooperation SDC





STORY

DIGITAL TOOLS SUPPORTING GIRLS' SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS

Until last year, the students at Eliya Chimthengo Primary School in Dedza had never heard of digital learning. Their studies were conducted with one or two old and worn textbooks shared amongst a class of 60. Often, there would be only 3 or 4 in a class. Teaching is basic, with teachers instructing on a chalk board without visual prompts or the stimulation of creative teaching materials.

This changed in 2020 with the launch of a digital learning platform in schools. This e-learning system aims to ensure that adolescent girls and boys at her school have access to sexual reproductive health and rights. It is supported with information on available services crucial to their development as young adults.

As in other areas of Malawi, adolescent girls in Dedza district are negatively impacted by sociocultural norms and harmful traditional practices in their area, and the risk of harm is high.

In Malawi, 25 percent of young girls aged 15 to 19 have children. 40 percent will have given birth before reaching the age of 18.

However, this is changing with UNFPA support and by engaging girls early, it is changing the decisions young girls make about their sexual and reproductive health and rights.



Students from grades six to eight are now learning comprehensive sexuality education to prevent them from dropping out of school due to early pregnancy.

Access to digital content and devices has excited many students at the school. Cynthia Kachepa, is one of the students taking part in the sessions.

“From the information I got through the lessons, I am now able to make decisions about my life and my body,” she says. “In addition, I have also learnt a lot about how to take care of my body as I grow up and how to keep it clean during my period.”

Esnart Lyton also sings the praises of the digital learning forum. “For me, the most important thing I learnt is how to avoid unplanned pregnancies. I wish we had more girls in the area taking part in this course as the problem is very big in this community,” she says.

Apart from girls, many boys are also taking part in the digital learning classes. One of the boys is 16-year-old Macdonald Oliyeri.

“Some boys my age are already married. It could have been the same for me if it was not for this course,” he says. “It has opened my eyes and helped me stay focused on my education.”

The early success of the pilot in 26 schools has led to plans to scale up the initiative to another 20 schools in 2022. This will result in more young girls and boys being able to access information on their sexual and reproductive health and rights. And access to this content will help protect them from harmful practices that threaten their healthy development into adulthood.



POPULATION AND DEVELOPMENT

Key phases of the population and housing census were completed on time and with a highly consensual and inclusive approach from the National Statistical Office. In 2021, the final batch of social and economic reports based on the census data were completed, closing a cycle of reporting that makes available unprecedented population data and analysis.

INCREASING THE AVAILABILITY OF DATA ANALYSIS

To localize the data collected by the population and housing census, 32 district level reports were produced employing consultative and workshop-based approaches. The reports are a detailed analysis of district-level population statistics.

In each district, a corresponding report gives a summary of the population size and growth, fertility and mortality rates, literacy and education, economic situation, water and sanitation, and a comparison to national-level findings. Detailed statistical tables are annexed to the reports.

For the first time in Malawi, a total of 193 parliamentary constituency level reports were also published from the census data. These reports include socio-demographic characteristics of the population, household size, population density and sanitation. They grant voters and members of parliament access to a set of unique data at constituency level that will supply elected officials with evidence to shape parliamentary constituency priorities and assist in their analysis of the national budget.

These are also evidence to inform the demarcation of parliamentary boundaries in 2021 to ensure these reflect the international standard principle of population weight in establishing these boundaries. The reports were launched at an event in the parliament on 30 November 2021.



THE MALAWI DATA DISSEMINATION PLATFORM

The Malawi Data Dissemination Platform was launched and is now fully operational online and on mobile handheld devices with support of the project, which provided technical assistance through five consultants to develop and tailor specifications for the platform.

This platform, for the first time, integrates all key survey data related to population and demographics into one platform that allows users a wide range of functionality to employ this data, track trends over time and cross correlate across issues and different surveys.

40 percent of the SDG and 35 percent of the 2063 Malawi indicators can be tracked employing the platform providing government ministries, departments and agencies access to unprecedented levels of data on population and evidence.

INFORMING DECISION MAKING THROUGH DATA

Data from the 2018 census is being employed across government ministries, departments and agencies. At government level, data and thematic reports were used as the primary evidence base for the flagship Malawi development plan and targets outlined in Malawi 2063. A 10-year implementation plan baselines and targets are all developed based on census population data.

Other key policy documents to include census data include: The Ministry of Economic Planning and Development used population projection data to establish the number of food-insecure people in 2021/2022 through the Malawi Vulnerability Assessment Committee. The 2018 population and housing census data in combination with civil registration data was used by the Ministry of Agriculture to determine the number of beneficiaries for affordable farm inputs.

In conjunction with civil registration data, census data was also used to validate voter registration by the Malawi Electoral Commission in 2019 and 2020 and populate electoral maps for the 193 constituencies with the total eligible voter population. Census data at traditional authority level, including the number of households per enumeration area was used to inform the Cyclone Idai response in 2019 by the Department of Disaster Management Affairs.

According to the Ministry of Local Government, all 28 district development plans employed census data. Baselines for the new cycle of development plans will further employ population data.

To promote data usage, staff from the National Statistical Office also now have advanced knowledge and skills in techniques of data visualization, writing for social media, and media relations following a series of training sessions supported by the United Kingdom's Office of National Statistics in 2021.

STRENGTHENED CO-ORDINATION FOR STATISTICS

Two steering committee meetings were supported to enhance coordination of the National Statistical System in 2021. Through these meetings, two products were developed including the Guidelines for Certifying Official Statistics, and a Code of Ethics and Conduct for Official Statistics.

In consultation with the National Statistical Office and 22 ministries, departments and agencies, a compendium of statistical concepts and definitions promoting compliance to international and national standards across the statistical units in the National Statistical System was produced.

KEY RESULTS

- **28 district development plans employed census data and baselines for the new cycle of development plans.**
- **The Malawi Data Dissemination Platform was launched and for the first time integrates all key survey data related to population in one platform online and on mobile devices.**
- **40 percent of SDG and 35 percent of Malawi 2063 indicators are tracked on the Malawi Data Dissemination Platform.**
- **32 district and 193 constituency level reports were published with an analysis of local level statistics.**



STORY

SUSTAINABLE LIVING WINS OUT OVER CHILD MARRIAGE



When Catherine Mkandawire was a child of 13 years of age, she was at real risk of being married. It was only when village elders intervened that her parents backtracked and changed their minds. The real risk of her being a child bride made a lasting impression on this young girl.

Today Catherine is now a confident 28-year-old that is a youth champion passionate about advocating for youth empowerment and climate change.

In this role she is a leader in the Nkhatabay district youth network working with her peers to protect girls from child marriage. She believes the best way to do this is by promoting economic empowerment for the most vulnerable girls.

“Most young people, especially girls, lack so many things. This makes them easy targets for exploitation. For young people to be safe they need to be able to make their own decisions and this requires access to opportunities” she explains.

Catherine sees a strong link also to the environment and believes in Malawi livelihoods, climate change and sexual reproductive health and rights are all interrelated.

She adds, “More extreme weather due to the destruction of our environment and cutting down of trees brings hunger to communities. With parents unable to feed their children young people are exposed to high levels of risk including in their own behaviour.”

“That’s why I decided that I should lead in not only protecting the environment, but earning a living from it to motivate my peers to preserve our natural resources.”

Catherine started by planting 2,500 pine trees at the foot of a mountain close to her home. In addition, she now operates beehives, a well-stocked fish pond and a banana plantation on family land. Generally, households would use such land for subsistence farming but by diversifying the land use a small and much more sustainable set of activities are now reaping rewards.

“Each hive produces 20 litres of honey every week. I have ready customers and I am always running out of stock,” she says. “The fish pond provides water for the bees. Also, the area around the ponds has a wide variety of wild flowers that provide nectar for the bees. So, everything is linked to each other.”

In a month, Catherine takes home about USD300 from honey she sells. She uses part of the money for salaries for her five employees, school fees for her siblings and support for her ageing parents. As her business grows, so is the interest in environmental conservation by the youths in the area.

“At first, people were sceptical of this project, but when they saw how it is working to conserve the environment, more youths are coming to learn from me. Even the chief from our area is impressed and he donated some land for the youths to expand the forestry project,” she explains.

Every Saturday, Catherine runs what she calls ‘climate talks’ with fellow youths in the village. The talk is about environment conservation and climate change. She uses this as an entry point to reach out to engage the youths on sexual reproductive health issues.

“Before I started this initiative, charcoal burning was destroying our forests,” says Catherine. “But now with many youths doing sustainable activities, there is hope that our forests will survive. I’m also particularly happy that many young people I trained are now getting an income, with some paying for their own school fees.”



PROTECTING SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS IN EMERGENCY SETTINGS

SUPPORTING DISASTER PREPAREDNESS AND RESILIENCE BUILDING

With support from UNFPA the Ministry of Health completed the alignment of the policy framework in Malawi to tailor the International Minimum Initial Service Package to local needs and strengthening emergency responses. This package includes services for sexual and reproductive health in crisis situations and is a series of crucial, lifesaving activities required to respond to the needs of affected populations during a humanitarian crisis.

Four rapid response teams in three districts that include 15 members in each with a range of medical expertise, coordinators and social welfare workers were trained in the prevention of sexual exploitation and abuse with a focus on the management of health emergencies.

A further 188 members of the humanitarian and area civil protection committees were trained in sexual and gender-based violence responses. This has followed the training of 230 community and faith leaders that highlighted their roles and responsibilities in preventing and addressing gender-based violence, teenage pregnancies and child marriages in humanitarian settings.

As part of strengthening disaster preparedness, UNFPA also procured 7,000 dignity kits for adolescent girls and young women for future emergencies.



COVID-19 PROOFING OUR RESPONSES

With the support of the SDG Acceleration Fund, UNFPA in 2021 ensured continued access for women and adolescent girls to key services during the Covid-19 pandemic. This included maintaining access to their sexual and reproductive health and rights as well as support services targeting sexual and gender-based violence.

Rehabilitation of two major operating theatres was concluded in 2021 for safe births and emergency treatment for pregnant women in two districts of Nsanje and Mulanje, improving access for 33,700 new mothers to safe deliveries during Covid-19.

As part of the policy to ensure continuity of sexual and reproductive health services during Covid-19 this fund also supported a pool of 22 mobile outreach clinics that reached out to communities. During the year 2,328 clients attended these mobile outlets to receive family planning and maternal and neonatal health services.

Mentorship schemes for women and girls also continued with the support of UNFPA and over 2,000 young women and girls participated in mentoring sessions learning key skills to target sexual and gender-based violence in communities and promoting their own sexual and reproductive health and rights during Covid-19.

KEY RESULTS

- In collaboration with the Ministry of Health the policy framework for Malawi was aligned to the International Minimum Initial Service Package in 2021 that will strengthen emergency responses.
- 7,000 dignity kits for adolescent girls and young women are available for future emergencies.
- Rehabilitation of two major operating theatres concluded for safe births and emergency treatment for pregnant women in two districts of Nsanje and Mulanje improving access for 33,700 new mothers to safe deliveries during Covid-19.

STORY

ENSURING QUALITY MATERNAL HEALTH DURING THE COVID-19 PANDEMIC

Mzenga health centre is located about 57km from Mzuzu City. It is the single government facility in the area that offers integrated health services to 42,000 residents over a wide catchment area. The services include maternal healthcare, cervical cancer screening, support for survivors of gender-based violence, and HIV testing. These services both help communities access better services and provide core services closer to those that need them.

COVID-19 IMPACT ON MATERNAL SERVICES

Since the Covid-19 pandemic started, the health centre has, however, witnessed a decrease in the number of women coming in for antenatal services. Fear of contracting the virus has made many expectant women stay at home.

“It has been a worrying scenario,” says Gomezgani Mapa, a nurse midwife technician at the health centre. “Most of the deliveries we have been attending came late, but we are fortunate that we did not encounter any deaths of mother or child.”



IMPROVED SERVICES FOR EXPECTANT WOMEN

“At the peak of the pandemic, we could attend to fewer than 20 deliveries a month, but the numbers have risen again, and now we are delivering almost 30 babies a month,” says Mapa.

So far, Mzenga health centre has not registered a Covid-19 positive case. This has boosted the confidence of many expectant women to return for maternal services at the health centre.

Tamala Nyirenda, 24, is one of the expectant women who is now attending an antenatal session at the health centre. Tamala says she had stopped coming to the centre after learning that Covid-19 cases in the country were on the increase.

When she resumed antenatal classes, she found a better and improved environment.

“In the past, we would just come to the antenatal clinic and go home,” she says. “Now, we can also access services such as HIV testing and cervical cancer screening.”

Another client who is happy with the services is 20-year-old Jane Phiri from Chigoli village, who had a successful delivery at the maternity ward.

“I was anxious since this was my first child, but the health staff were always there for me and I delivered my child without any problems,” she says.

SAFEGUARDING PATIENTS AND HEALTH STAFF FROM COVID-19

Personal protection equipment has played a crucial role in both stopping the spread of the virus as well as building confidence amongst expectant mothers. Special efforts were made during the distribution process, to ensure that health centres with maternity wards were prioritized in the partnership.

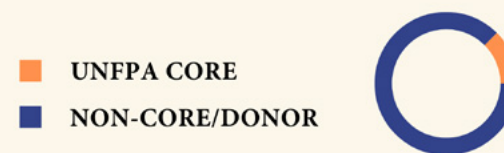
The availability of this equipment, coupled with strengthened screening of clients as they enter the facility premises, has been a major transformation at clinics. It is simple, affordable, and effective,” explains Juliana Lunguzi, Sexual Reproductive Health and Rights Coordinator for UNFPA.

“This has helped the facility to record no Covid-19 cases during the peak of the pandemic. That is a major achievement in Malawi and expectant mothers who rely on these services are reassured when they see these measures returning. This is absolutely crucial to the health of these women and babies,” she adds.



MANAGEMENT SNAPSHOT

RESOURCE DELIVERY 2021



SOURCE OF FUND	2021
UNFPA CORE	2,560,734.58 USD
NON-CORE/DONOR	10,877,256.07 USD
TOTAL	13,437,990.65 USD

DONORS AND PARTNERSHIPS, 2021

UNFPA PROGRAMMES	DELIVERY 2021, USD	FUNDING SOURCES/ DONORS IN 2021
SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS	5,553,244.86	CANADA, EUROPEAN UNION, GERMANY, ICELAND, NORWAY, SWEDEN, SWITZERLAND, UNITED NATIONS FUND FOR INTERNATIONAL PARTNERSHIPS, UNFPA, UNITED KINGDOM
GENDER EQUALITY	3,428,042.01	CANADA, EUROPEAN UNION, ICELAND, REPUBLIC OF KOREA, UNFPA
YOUNG PEOPLE	3,025,285.80	REPUBLIC OF KOREA, NORWAY, SWITZERLAND, UNFPA, UNITED NATIONS FUND FOR INTERNATIONAL PARTNERSHIPS
POPULATION AND DEVELOPMENT	1,187,548.49	GERMANY, ICELAND, NORWAY, UNITED KINGDOM, UNFPA
PROGRAMME COORDINATION AND SUPPORT	243,879.48	UNFPA

KEY PARTNERS IN 2021

Ministry of Health, Ministry of Education, Ministry of Youth and Sports, Ministry of Gender, Community Development and Social Welfare, Ministry of Finance and Economic Affairs, National Planning Commission, Malawi Human Rights Commission, Ministry of Natural resources and Climate Change, National Statistical Office, district councils and departments, Malawi Police Force, African Institute for Development Policy, Goal Malawi, Action Aid, AMref Health, Ntchisi Organization for Youth Development, Girls Empowerment Network, Family Planning Association of Malawi, Banja La Mtsogolo Malawi Girl Guides Association and Youth Net and Counselling.

PROGRAMMING LOCATIONS

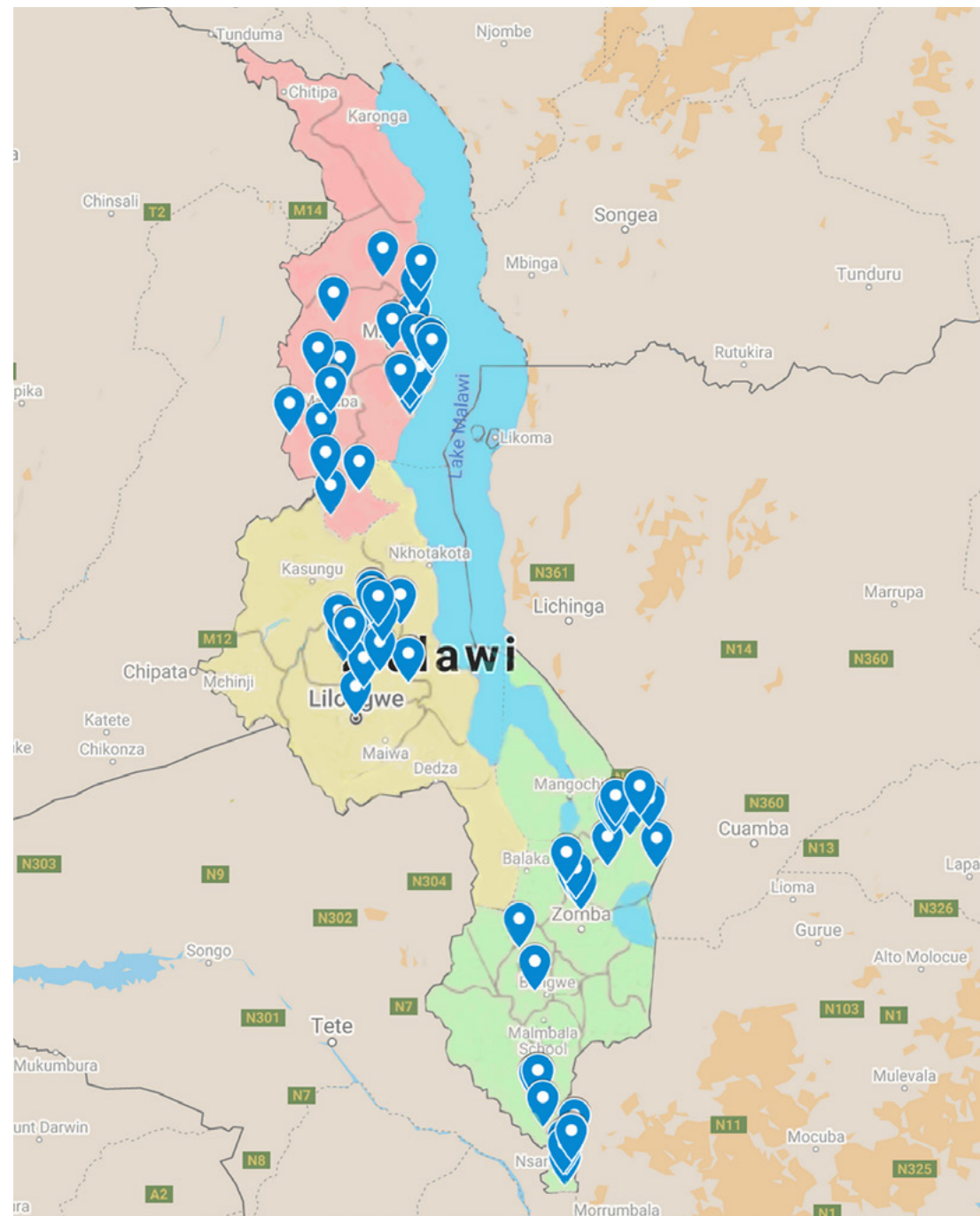
14 active programmes in 13 districts and 145 traditional authorities: Chikwawa, Chiradzulu, Dedza, Dowa, Kasungu, Machinga, Mangochi, Mchinji, Mzimba South, Nkhata bay, Nsaje, Ntchisi, Salima.

POLICY ENGAGEMENT

The post Covid-19 phase will be crucial for Malawi. This period coincides with the launch in 2021 of the Government of Malawi's 'youth centric' national development plan outlined in the 2063 Vision. This vision is to transform the country into an industrialized lower middle-income country by 2030.

Across all sectors of economic activity, the plan locates young people as central agents of development and sets targets for education, health and productive economic activities. Specific policies targeting youth development include increased participation of young people in decision making, employment and training, ensuring universal access to health services, including family planning, environmental management and business.

WHERE WE WORK : SAFE SPACE LOCATIONS



To support this vision, UNFPA has, in partnership with the Ministry of Youth and Sports, assisted in the development of a new and revised national youth policy 2022-2027 and implementation plan. This implementation plan and policy will be the core of government investment in young people in Malawi over the next five years.

UNFPA also supported the ICPD+25 Steering Committee which has developed a monitoring and reporting framework as well as a policy advocacy and engagement plan to accelerate the attainment of the goals outlined in Malawi's commitments at the Nairobi Summit in 2019.

Technical and financial support was also directed to the multi-sectoral technical working group for population policy that is led by the Ministry of Health, which has produced a final draft population policy for cabinet review in 2022.

This includes establishing a national population coordination body to strengthen linkages between socio-economic development and a demographic dividend through realizing universal access to sexual and reproductive health and rights.

Crucial advocacy work by UNFPA has also resulted in the Malawi 2063 first 10-year implementation plan and targets fully reflecting key needs in the areas of population dynamics, sexual and reproductive health and rights and the empowerment of women and girls.





STORY

BURSARIES KEEP GIRLS IN SCHOOL

For the past three years, Lusita Maikolo has been in and out of school. Her parents could not manage to pay her school fees regularly, and this led to her being excluded and missing entire periods of learning.

The 17-year-old girl never gave up. During the time she was home and out of school, Lusita would help on the family farm. And after harvest season, they would sell some of their surplus crops to pay the balance of the outstanding school fees. She struggled to catch up on studies after missing time at school, and she was falling behind and at risk of being left behind despite her efforts.

“Staying at home working for long periods made me fall behind in learning,” says Lusita, who attends Katewe community day secondary school. “However, I was always determined to continue with the next class as I did not want to lose out on education completely.”

POVERTY DRIVES HARMFUL PRACTICES

Lusita also feared falling into the same trap her sister did. A year before completing her secondary education, she dropped out of school as her parents failed to pay the fees. She stayed at home for an entire school year and finally decided to get married.

“She always talked of being a professional,” she recalls, “but now she is a mother of two, struggling to make ends meet with an unemployed husband.”

Lusita's determination was rewarded when she was selected as one of the beneficiaries of a bursary scheme supported by the UNFPA and Korea International Cooperation Agency as part of the project to support adolescent girls and teenage mothers.

EDUCATION IS A GAME-CHANGER

Her bursary covers school fees, which are crucial to ensure Lusita can focus on her education. Additional support is also available for her school uniform, shoes, notebooks, and pens.

She is one of the 45 disadvantaged girls in Dedza and Mchinji districts to be selected as part of the scheme. Lusita beams "My school performance has improved since I was selected, and now I have more time to concentrate on my studies."

So far, Katewe secondary school has three girls on the bursary scheme. Another beneficiary, Tapiwa Penuel says she wishes the scheme started some time back.

"I lost a lot of time loafing at home because my parents could not afford to pay for my school fees," she says. "Although I tried to study on my own, I could not understand most of the equipment. I needed to be guided by the teachers."

Tapiwa is now on course to finish her secondary school education and she has big dreams. "I want to be a journalist," she says emphatically. "Ever since I was young, I have dreamed about this career. And now that I have a helping hand to finish my studies, I will work to make my dream come true."

Mr. Macdonald Chinkombelo, who is the Deputy Headmaster at Katewe, believes the scheme is a game-changer for these girls.

"It is worrying that some bright young girls see their dreams cut short because they come from a poor background. The bursary scheme helps them finish their secondary school and concentrate on education as a pathway, not marriage or having children."

Education is a crucial catalyst for change for young girls. Access for girls and boys to primary level education has increased exponentially in Malawi since the introduction of compulsory primary education in 1994. Increased enrolment and a reduction in dropout rates are major markers of progress towards providing for an inclusive education system.

However, many challenges persist, including low enrolment rates at secondary levels, large class rooms that average 60 students per teacher and the low quality of teaching resources. Girls are also more likely than boys to drop out of school in Malawi. Poverty, unpaid domestic work in the home and harmful practices including underage marriage and teenage pregnancy are key drivers of adolescent girls leaving school before completing the primary certificate.



THE WAY FORWARD

ACCELERATION OF THE THREE ZEROS

Following an extensive validation exercise, we have reviewed our results and resource framework and scanned for strategic opportunities for strengthening the accelerators to align with the UNFPA global strategic plan for the period 2022–2025. All three transformative results in family planning, ending preventable maternal deaths and eradicating sexual and gender-based violence, outlined in the strategic plan will remain priorities in Malawi.

As well as adopting a series of new strategic accelerators, a set of indicators measuring the attainment of the three transformative results are being introduced in our results and resource framework. These will align the country programme to the strategic plan for an interim period until the completion of the current country programme document. These also reflect national priorities established in Malawi 2063, ensuring national alignment too.

we are working towards **THREE ZEROS**



ZERO preventable
maternal death



ZERO unmet need
for family planning



ZERO gender-
based violence

OUR SIX ACCELERATORS STRATEGY:

HUMAN RIGHTS-BASED AND GENDER-TRANSFORMATIVE

The accessibility of quality sexual and reproductive health services will be widened with the provision of an affordable and wide range of family planning commodities. Investment in increasing awareness of sexual and reproductive health and rights, including out-of-school comprehensive sexuality education, will target the most vulnerable adolescents.

Further investments in safe spaces to empower young girls and boys to increase resilience against gender-based violence and harmful practices are crucial. Participation of young people in decision-making will also be strengthened with support of youth advisory panels contributing to increasing the diversity of inputs in policy and development planning decisions affecting sexual and reproductive health and rights.

DIGITAL INNOVATION

Investment in innovation and digitalization will assist in improving quality of care, monitoring of service provision and addressing harmful practices. E-innovation will be introduced into safe spaces with adolescent girls able to access content and mentoring online in pilot programmes.

Digital comprehensive sexuality education applications will also be rolled out nationwide, accelerating in and out of school awareness and knowledge of sexual and reproductive health and rights. A nationwide gender-based violence information management system will also be a key focus in the coming period.

PARTNERSHIPS

Continued strengthening of UN joint programming as well as leveraging the UN Malawi's pooled funds will further coordination in supporting healthcare systems, improving access to sexual and reproductive health and rights and improve the data and evidence environment.

Engagement with non-traditional partners will also be developed to diversify these partnerships, and UNFPA will continue to consolidate its role in the UNCT, including in the implementation of the UN Sustainable Development Coordination Framework and in co-leading the UN data and youth groups.

The UNFPA role supporting the ICPD+25 national steering committee for monitoring and reporting will continue to promote attainment of the commitments made by Malawi at the ICPD event. Support for south-south cooperation, especially in the Southern African Development Community area, will be enhanced.

This will include exchange of best practices and policy level coordination in the southern Africa region in data and digitalization, further cooperation on monitoring in areas such as the attainment of sexual and reproductive health and rights, drawing on tools including regional scorecards as well as south-south peer exchanges.

DATA AND EVIDENCE

Digitalization will increase the demand and supply side for data and evidence. A focus on strengthening the existing partnership with the National Statistical Office to strategically manage the Malawi Data Dissemination Platform, integrating survey and population data in the country as part of the E-government strategy, will lead this approach and enhance the framework for measurement of SDG and the ICPD+25 programme of action indicators.

These data infrastructure investments and support for an improved legal and policy framework will also provide a framework for innovative approaches to data usage and improved data literacy.

Decision makers will have enhanced access to a wide range of evidence and data that will improve their ability to make evidence-based decisions and identify and map coverage of key UNFPA mandated priorities and the three zeros, including with geo-spatial mapping.

LEAVING NO ONE BEHIND

Strengthened diversity in existing programmes will be enhanced with the inclusion of vulnerable and marginalized groups, including those with disabilities. Groups that are traditionally discriminated against, including obstetric fistula survivors, will be supported to receive treatment and integrate into their communities as a priority.

A major target beneficiary of programming is adolescent girls between the ages of 15-19 as well as young women, including teenage mothers, who remain some of the most vulnerable parts of the population exposed to sexual and gender-based violence, harmful practices, underage pregnancy, and child marriage.

RESILIENCE AND ADAPTATION

To respond to the increased frequency of climate change related severe weather patterns and other emergencies such as the current Covid-19 pandemic, humanitarian support mechanisms will be strengthened. On-going emergency support for safe births and family planning during Covid-19 will be continued and recovery plans developed.

To mainstream sexual and reproductive health and rights in humanitarian responses, a component of the health system strengthening will include resilience.

The UNFPA will also work with partners to identify value-added investment in disaster preparedness with a focus on sexual and reproductive health and rights. This will ensure women and girls have access to health services and menstrual hygiene and adequate measures are in place for the prevention of, and response to, gender-based violence and harmful practices.



LESSONS LEARNT

Limited access to funding for public services and healthcare across all thematic areas remains a challenge. It is critical for the UNFPA to increase efforts to highlight evidence and encourage debate over increasing domestic financing for the long-term sustainability of family planning and maternal healthcare as well as services related to gender-based violence prevention and response.

In the Malawi context, population is a crucial policy issue. The sexual and reproductive health and rights of young people are one of the main drivers of the youth bulge. The current population trend poses a serious risk to meeting national development targets across all sectors unless population dynamics are effectively coordinated and integrated into national planning across all sectors.

The positive sexual and reproductive health and rights behavioural change girls completing the six-month-long programme of safe spaces demonstrate may not be maintained once they leave the programme unless they have access to social and economic opportunities for them to actively participate in wider society. It is crucial to develop opportunities for these girls at the completion of the mentoring period by expanding partnerships with a wider range of state and non-state actors.

Data indicates that when adolescent girls and young women are directly supported by programmes, they quickly tend to practice knowledge and skills and apply innovative ideas to tackle challenges as a group or individually. Among the mentees participating in the safe spaces, negative trends such as early age school drop-out rates, teenage pregnancy, and child marriage are reversed within a short period of time. There is strong evidence that young people are able to be change agents to lead social change with the right kind of support in programmes. In the future, increased support should be targeted at adolescent girls and young women to increase these empowerment opportunities.

Mobile clinics providing family planning services work well in the community context and have quickly built up a strong relationship with remote communities, particularly young women. These clinics were key to ensuring demand did not taper off during Covid-19 with clients reluctant to make long trips to static clinics. Such positive results clearly demonstrate the need for greater community-based health intervention, bringing sexual and reproductive health services, and especially family planning, closer to the population in need by using portable digital devices and expanded service packages delivered by community-based health workers. It is important to continue to ensure these clinics link up with other medical services, key services are better integrated and demand increases.



Further investment in the National Statistical Office is essential. In order to develop long-term sustainability, a more stable funding mechanism is required, supported by the Government of Malawi and development partners. The data demands on the statistical framework of the development goals are significant. A response requires increased harmonization and national coordination as well as more investment in technology, which are key areas for investment in a digital environment.

While there is increased data as a result of the census 2018, the use of data by decision makers, needs to be further promoted. It is critical that the range of data available on the Malawi Data Dissemination Platform be expanded. It is also vital that an on-line training facility for civil servants and the increasing capacity of the public sector to employ data are fully aligned with the civil service training programmes.

Reporting and collecting national data on sexual and gender-based violence remains a challenge, and it is essential that national agencies increase investments to manage the national databases to ensure quality and timely data is generated to monitor these forms of violence.

In the area of disaster preparedness, it is crucial to ensure adequate capacity of partners to integrate the Minimum Initial Service Package for sexual and reproductive health and rights and gender-based violence prevention and response into disaster and risk reduction plans. This needs to plan for prepositioning of commodities and invest in adequate skills so these life-saving interventions are available in response to emergencies. UNFPA Malawi should also continuously review response strategies to ensure they remain timely and effective responses.



STORY

VILLAGE HEADMAN CHAMPIONS GIRLS IN EDUCATION

Sitting under a large, leafy mango tree, village headman Patete marvels at a group of young girls singing as they walk to a nearby primary school. In the past, a scene like this was not common in the village. Many girls stayed at home, while boys went to school. As the group's village headman, he plays a crucial role in the community.

"It has been an uphill task," says the headman, who is from the district of Machinga. "I had to go against some deeply held traditions to persuade my people to see girls needed access to education just like boys."

The headman has long campaigned in the community to recognize the importance of equality between girls and boys.

To support the headman in his quest to support girls in education, he attended a training session as part of the Spotlight Initiative funded by the European Union. As a pillar of his community, his opinion is important in changing the way men and boys think about the role of girls and women in their communities.

The training focused on ending sexual and gender-based violence and increasing awareness of human rights, highlighting the rights of women and how these were diminished. "As a community, we take for granted so many things," recalls Patete. "For instance, the workload we put on women in the home and on our farms."

"In our culture, even if we are coming from the field, the woman carries all of the farming equipment while the men stride home with hands in their pockets. In the home, the wife has to cook again, while the husband is resting." He continues. "This training has given me a much broader outlook on these challenges."





“It is something that in the past was somehow socialized in us that women should do more work. The training has reinforced in me my view that we are abusing women.”

The training sessions have reinvigorated Patete and his championing of rights. He has approached fellow community leaders in their forums and highlighted the plight of women and girls and the responsibility of leaders to change the way communities perceive the role of girls and women to encourage actions against any harmful practices.

“It is not easy changing the old ways of doing things, but we are making progress,” he says. Combatting underage and early marriage is a case in point.

“There is no small crime,” he says. “All those who are found marrying off young girls are committing a crime. This is my stance and everyone in my area knows about this.”

Recently he annulled an early marriage where a 17-year-old girl was forced to marry her 20-year-old boyfriend. He explains. “Many people think if the girl becomes pregnant, they need to marry off their daughter, but on the contrary, that is a big mistake. What the girls need is a second chance.”

The girl he rescued is now back in school. She is also an active member of a Spotlight safe space in her village. “If it was not for the chief’s intervention, I could have been a housewife now with no opportunities ahead of me,” she says.

The decision was not easy and parts of the community are reluctant to embrace change. Once an adolescent girl has turned down a marriage, there can be a stigma attached.

The safe space she attends, however, helps her overcome such prejudice. “It has helped her live through the criticism to concentrate on her goals,” She explains proudly.

“It is not easy to be known for being someone who turned down marriage for school,” she says. That is what is driving me hard to fulfil my dream.”



UNFPA Malawi

Results Achieved 2021



Ensuring rights and choices for all since 1969

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