

Malawi

Update on the context and situation of children

Malawi remains among the countries in the lowest Human Development Index category (HDI) category. In 2022 its HDI score was 0.512, slightly below the average score of 0.518 for low HDI countries and significantly below the average score of 0.547 for sub-Saharan Africa.[1]

Malawi experienced a difficult macro-fiscal situation in 2022, stemming from the legacy of past fiscal policy choices and the more recent impact of local and global macroeconomic shocks. The latter include the secondary effects of the Russian/Ukraine conflict, the tightening of monetary policy in advanced economies, COVID-19 in its continued toll on the economy, and weather- and climate-related disasters, including Tropical Storm Ana and Cyclone Gombe in 2022, with lasting consequences. As a result, the government revised its real GDP growth rate projection for 2022 from 4.1 per cent in the National Budget 2022/23 to 1.7 in the Mid-Year Budget Review 2022/23.

Sustained inflationary pressures have affected Malawi's growth performance. Year-on-year inflation reached 33.7 per cent in October 2022, compared with 11.8 per cent in October 2021. The government projects an average inflation rate of 21.5 per cent in 2023. Inflation is mainly driven by increasing food prices due to difficulties in redistributing essential staples from surplus to deficit areas; it was exacerbated in 2022 by a 25 per cent devaluation of the Malawian Kwacha against the US dollar in May. Inflation reduces the purchasing power of poor households, and the lowest income quintiles are those impacted the most.

On advancing the child rights agenda in the country, Malawi remains on the right path, which included signing the Protocol on the Rights of Persons with Disabilities in Africa in February 2022 and ratifying the International Convention on the Protection of the Rights of All Migrant Workers and Members of their Families in September 2022.

The country submitted its first State Party Report under the International Covenant on Economic, Social and Cultural Rights in April 2022;[2] the second report, due in September 2022, is yet to be submitted. The Ministry of Gender held several consultation meetings. UNICEF provided financial support to develop an alternative report led by the NGO Coalition on the Rights of Children, which included consultations with children.

Malawi experienced multiple emergencies in 2022. Torrential rains and flooding caused by Tropical Storm Ana in January and Cyclone Gombe in March caused extensive damage to water and sanitation systems, which contributed to outbreaks of cholera and other waterborne diseases. The 2022 cholera outbreak claimed the lives of 486 people, including 38 children. An estimated 11 million people needed humanitarian support in 2022. During the emergencies, UNICEF provided technical assistance to the government and supported delivering life-saving services to vulnerable children. UNICEF is cluster co-lead for Malawi's education, nutrition and WASH sectors, working with other partners providing humanitarian assistance in the country.

In February 2022, the government declared a national public health emergency in response to a polio outbreak with confirmation of an index case (wild poliovirus type 1) in Lilongwe. An integrated response plan was implemented, including a four-round immunization campaign. UNICEF supported social mobilisation activities with funding from the Global Polio Eradication Initiative. Over 3.5 million children under five years old were given the polio vaccine.

Malawi conducted its second voluntary national review of the Sustainable Development Goals (SDGs)

in 2022. Overall, the country needs to register more progress towards achieving the goals and child rights, within the constrained economic and development environment.

Each year in Malawi, an estimated 40,000 children under five years of age die from preventable and treatable illnesses, including neonatal causes, pneumonia, diarrhoea and malaria. About 40 per cent of deaths in children under age 5 occur during the first 28 days of life, especially among children living in poverty (62 deaths per 1,000 live births in the poorest quintile vs 39 in the wealthiest quintile).[3] These neonatal deaths are attributed to premature births, infection and asphyxia, all of which are preventable through low-cost solutions. The adolescent birth rate is high (143 per 1,000 live births), with about 30 per cent of babies born to mothers aged 19 years or younger. Preterm deliveries and low birth weight are higher in babies born to adolescent mothers, and neonatal mortality rates are higher among mothers in this age group (37 deaths per 1,000 live births) than in women aged 20–29 years (22 per 1,000 live births).[4]

Retention in education remains a challenge, with the primary completion rate at 56 per cent and the repetition rate at 25 per cent in 2022. As a result, the population of out-of-school children has increased. Only 42 per cent of children transitioned from primary to secondary school in 2022, a slight increase over 37 per cent in 2021.[5] The gap between boys' and girls' completion rates, two percentage points at the primary level, increased to three percentage points at the secondary level, with boys' completion at 21.1 per cent and girls' completion at 17.9 per cent in 2022.[6]

There is a high tolerance for violence in Malawian society, with children's exposure to violence beginning in their earliest years, often in the form of physical punishment by parents, caregivers or teachers. These experiences perpetuate tolerance towards violence leading to inter-generational violence. Cases of gender-based violence are high in Malawi schools. Children in Malawi continue to experience violence (aged 10 to 17+ years) perpetrated mainly by schoolmates. Barriers to violence prevention in schools include the lack of capacity among teachers and school governing structures to identify and report violence.

For the past decade, access to WASH services in Malawi has gradually improved. However, 30 per cent of households still need access to basic drinking water, 74 per cent lack access to basic sanitation, and 92 per cent need hand-washing facilities with soap. Over 34 per cent of schools and health institutions have no access to WASH services. Recurrent emergencies (droughts, floods, cholera) worsen the situation. UNICEF has supported the government in developing a climate-resilient financing strategy for the WASH sector (2022–2032)

[1] HDR 2021.

[3] MICS 2019-20.

[5] EMIS 2022

Major contributions and drivers of results

UNICEF Malawi recorded remarkable results for children in 2022 against a backdrop of dealing with multiple emergencies. The multiple economic and climate shocks, including public health emergencies, such as COVID-19, polio and an unprecedented cholera outbreak, posed a threat to reverse the gains made over the past decades. While these crises directly impact infrastructure, access to services and shortage of supplies, the secondary impact on children holds long-lasting consequences due to learning loss, chronic preventable diseases, malnutrition, and exposure to sexual violence, exploitation and abuse. Despite this, UNICEF continued routine programming and system-strengthening work, such as improvements in cold chain management and ECD reforms, while focusing on emergency responses reaching over five million children.

Child survival and development: Efforts helped save the lives of 30,273 children under five years of age suffering from severe acute malnutrition or wasting; the children recovered through community management of acute malnutrition (CMAM) services. UNICEF supported the Ministry of Health (MoH) in incorporating the identification and treatment of severe wasting into the integrated management of childhood illnesses (iCCM) in four districts. The deployment of eight field monitors at the zonal level covering all 28 districts of the country helped to provide oversight of the CMAM programme and emergency response activities, contributing to improved performance of CMAM services against the established targets and Sphere standards for children.

An estimated 85 per cent of HIV-exposed infants received HIV virological tests within two months of birth. UNICEF worked with five districts to reach 4,784 pregnant women with HIV and antenatal care services; 3,032 pregnant women were tested for syphilis.

UNICEF supported Malawi's Expanded Programme on Immunization through the RapidPro open-source platform for real-time reporting of immunization data. UNICEF procured 11,000 basic mobile phones for use by the country's Health Surveillance Assistants and 1,000 MiFi devices with data bundles, enabling regular data reporting to all 865 health institutions by the district, regional and national teams. This investment significantly improved the timely reporting of events with minimal data loss during the third and fourth campaigns.

In response to the polio outbreak, UNICEF supported the MoH in a nationwide immunization campaign, with four rounds in 2022. The campaign reached 3,677,488 children –109 per cent of the number targeted – with the polio vaccine. Some 17.4 per cent of the population above 12 years of age (3,155,107) received the COVID-19 vaccine.

Learning: While free primary education led to 88 per cent net enrolment in primary school, the completion rate for primary school is just 33 per cent. Girls (38 per cent), children living in an urban area (65 per cent), and the wealthiest households (67 per cent) have a higher chance of completing primary school than boys (29 per cent), children in rural areas (27 per cent) and children in poorest households (11 per cent). Of children of lower secondary school age, 12 per cent attend lower secondary school or a higher level. Poor educational outcomes have been partly driven by school closures related to the COVID-19 pandemic and teachers' strikes.

The Global Partnership for Education appointed UNICEF as Grant Agent to complete a partnership compact with the Malawi Government. The compact allows the government to access over US\$129 million for the education sector through a system capacity grant.

UNICEF supported over 2.4 million children and adolescents (1.5 million girls) accessing education services in emergency and non-emergency settings. UNICEF supported the capacity building of 10,009 teachers (3,455 females) in improved inclusive learning and gender-responsive pedagogy to benefit approximately 590,000 learners (51 per cent girls).

To address learning challenges, 947,117 children (56,617 girls) accessed disability screening for the first time, a collaboration of the Ministries of Education and Health. Some 275 children were referred for appropriate services and the provision of assistive devices.

To prevent anaemia, the ministries further collaborated to reach 656,947 school-aged girls with iron–folic acid supplementation.

With UNICEF support, 132,199 learners (64,605 girls) accessed gender- and disability-friendly WASH facilities. Some 27,862 learners (14,273 girls) now have access to new, reticulated water supply schemes, and 49,132 have access to latrines with changing rooms and sanitary pads.

To enhance Early Childhood Education (ECE), a roadmap to expand ECE services was developed by

the Ministries of Education and Gender with support from ESARO.

UNICEF supported the Ministry of Education (MoE) in conducting a national consultation with stakeholders, which informed Malawi's commitment to transforming education in response to the global learning crisis.

Protection: To challenge the social-cultural beliefs that perpetuate violence in Malawi, UNICEF supported interventions on children's empowerment transformation and active citizenship training. Approximately 947,117 children (475,074 girls), including 3,351 children with disabilities (1,554 girls), now have improved skills to prevent and protect themselves from violence. UNICEF's continuing support to child protection service points (community victim support units, police victim support units and 'one-stop' centres) and the national roll-out of case management for victims allowed for timely identification, referral and assistance of 44,252 new cases of violence against girls (18,716 cases), boys (11,350 cases) and women (14,186 cases). In addition, protection services are provided by facilitators at 2,171 Children's Corners across the country, attended by 374,480 children (164,771 boys and 209,709 girls) currently. Children's Corners are a community-safe space for children aged 6 to 18.

WASH: In 2022, 195,202 people were reached with safe water, 83,887 people gained access to basic sanitation services, and 232,134 people gained access to basic hygiene services. Additionally, 500,000 people were reached with hygiene messages for improved sanitation services. UNICEF also supported delivering critical, immediate assistance to 1.39 million people (including approximately 500,000 children) affected by cholera, food insecurity and floods.

Social protection: Over 303,800 vulnerable households received monthly cash transfers through Malawi's social cash transfer programme (SCTP); the households represented 1,333,286 individuals, including 583,174 children. Some 3,376 SCTP beneficiaries (2,754 women and 622 men) participated in village savings and loan associations, positively affecting their livelihoods and participation in the economy.

UN Collaboration and Other Partnerships

UNICEF Malawi leveraged several partnerships to achieve results for children in 2022.

In support of the national response to the polio outbreak, UNICEF partnered with Malawi's Ministry of Health, the Global Polio Eradication Initiative, the United States Agency for International Development (USAID), the World Health Organization (WHO) and Lilongwe Technical College and provided technical and financial assistance. Four Polio SIA campaigns were conducted, resulting in immunization coverage exceeding 95 per cent for children under 5. Successful implementation of social behaviour change activities and vaccine promotion undertaken in partnership with district health offices, media organizations, academia and faith and political leaders in Malawi and with WHO globally helped mitigate the impacts of polio and COVID-19.

UNICEF partnered with the National Registration Bureau, the Ministry of Health and the United Nations Development Programme to expand children's birth registration. Efforts increased registration among children under five years of age from below 50 per cent in 2021 to over 67 per cent in 2022.

UNICEF is an Education Development Partners Group member, alongside other agencies and organizations supporting the education sector. UNICEF co-chairs the Education Services Joint Fund and the Ministry of Education Technical Working Group on Basic Education, Quality Research and Standards and is joined by other development partners, including the European Union, the United Kingdom Foreign Commonwealth and Development Office, USAID and the World Bank.

In May 2022, UNICEF and USAID entered a strategic partnership to expand secondary education in Malawi. They signed a memorandum of understanding under which UNICEF delivered furniture to 200 community day schools constructed by USAID.

UNICEF, together with the United Nations Educational, Scientific and Cultural Organization (UNESCO) through its Regional Office for Southern Africa, supported the Ministry of Education in facilitating a national consultation for the Transform Education Agenda involving stakeholders in education financing, including members of the Local Education Group, teachers, youth, education managers, civil society organizations and the private sector.

UNICEF finalized a five-year project partnership with Airtel Africa to champion digital education across Africa and elevate children's educational needs by making digital learning sustainable, effective and more accessible. Nine schools in Malawi have been identified to benefit from this partnership.

In social protection, UNICEF continued to effectively partner with the European Union, GIZ, the Government of Ireland (the International Labour Organization, the KfW Development Bank, the World Bank and World Food Programme). UNICEF collaborated with the European Union and GIZ to support a mid-term review of the Malawi National Social Support Programme (MNSSP II) and a 10-year, longitudinal impact evaluation for the Social Cash Transfer Programme.

UNICEF's partnership with the World Bank to advance the reform of decentralized systems continued to experience results in 2022. UNICEF led the production of position papers and government engagement events on behalf and to the benefit of other development partners, such as FCDO, UNDP and USAID.

Lessons Learned and Innovations

UNICEF applied a lifecycle approach to influence results for children through solid partnerships. In Malawi, the strategic implementation of various interventions through close partnerships and coordination within programme teams and partners was a decisive success factor in achieving

programme objectives and promoting efficiency, transparency, visibility and sustainability. This was evidenced by the implementation of the iron–folic acid intervention for adolescents in conjunction with the United Nations Joint Programme on Girls' Education (JPGE III), which enabled UNICEF and the Department of Nutrition, HIV and AIDS to leverage efforts and accelerate impact.

The Country Programme Evaluation (2022) found that the Malawi country programme 2019–2023 achieved its results through close coordination with the Government of Malawi across all programme pillars. A key learning was that for innovations to succeed and be brought to scale, they need to be piloted with good practices identified in a particular context. For example, the Intelligent Community Health Information System (iCHIS) was deployed in Kasungu District following a successful pilot in 2021. Scaling up pilots can bring about lasting changes in the situation of children at the societal level.

Short-term and reactive emergency responses can save lives in Malawi, where communities experience frequent shocks. But the longer-term development effects of such responses are limited and can only occur when emergency and humanitarian actions are included as a key part of the overall country programme planning.

Early screening for functional difficulties was another approach that worked well. The intervention helped identify children at risk for potential health, developmental or social-emotional problems and get them the assistance they would need to prevent them from falling behind in school.

UNICEF support for strengthened inventory management and end-user supply monitoring helped reduce the misuse of supplies and stock-outs and increase children's timely access to life-saving supplies, such as ready-to-use therapeutic foods for treating severe acute malnutrition.

Empowering communities leads to improved health outcomes. For example, caregivers were oriented on using mid-upper arm circumference tapes to assess their children's nutrition status and the urgent need to refer those children with acute malnutrition for treatment. The empowerment activity contributed to the early identification, timely treatment and improved treatment outcomes of children with acute malnutrition.

Strategic investment and capacity building can enhance the resiliency of government social protection delivery systems and ensure they are effectively leveraged to respond to emergencies. For example, the national harmonized e-payment system was efficiently leveraged to disburse cash during the 2021/22 lean season drought response in Ntcheu District, which reduced delivery costs from 10 per cent to 2.5 per cent of the overall response budget.

Social and behaviour change interventions were effective and more sustainable when accompanied by improvements in service provision and the ongoing engagement of families and communities. 26,864 children (14,622 girls) were protected from violence, abuse, exploitation, neglect and the impact of HIV.

In the WASH sector, challenges include the high costs of maintaining WASH facilities and infrastructure. A financial analysis for the WASH sector in Malawi, supported by UNICEF using the SDG costing tool, concluded that annual progress towards the country's 2030 targets on water and sanitation would require the sector to pursue a range of financial solutions and investments of around USD 97 million per year, which is unobtainable within the current economic context.

Innovation initiatives such as using drones "for good" can accelerate results for children. Below are some examples of innovations that contributed to results in 2022:

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- UNICEF and Airtel Africa used their assessment of the digital education landscape to inform the development of a roadmap and establish the next steps in the Reimagine Education digital learning initiative and Giga reaching approximately 500,000 learners.
- UNICEF supported an impact-based flood forecasting project targeting flood-prone districts and communities in northern Malawi. Aerial imagery was collected and used to inform programmatic needs, which will, in the future, benefit approximately 3.5 million people in need.
- UNICEF assisted the Ministry of Education in developing a learning management system as part of its electronic continuing professional development programme for teachers in Malawi. The programme is hosted on the government's vast area network; teachers in rural areas can access it through their low-level smartphones. All teachers can access this service.
- UNICEF and the Jesuit Refugee Service supported the launch of Connect My School, a pilot project that seeks to expand digital education opportunities for disadvantaged groups and communities, including children in refugee camps, reaching over 7,000 children.

Some 105 young people (42 women) graduated in 2022 from the African Drone and Data Academy, a UNICEF–Government of Malawi joint initiative whose mission is to build 21st-century skills among Africa's youth. Since 2020, when the academy was established at the Malawi University of Science and Technology, 913 people have graduated from the course. They received specialized training in flying drones, using drones to deliver development and humanitarian programming interventions, and supporting data analysis and gathering activities, such as aerial photography.

Evaluation of the multipurpose use of Drones indicated that drones could be used across different sectors and multiple activities in remote settings in support of humanitarian and development activities. The innovative use of drones in Malawi's Kasungu District is a good example of how drones can be used in development programming. Here, drones collected and delivered laboratory samples, vaccines, essential medicines and other commodities.