

Climate Resilient Health and Well-Being for Rural Communities in southern Malawi (CHWBRC)

Annex 23: Disease Control Programs in Malawi

Accredited Entity: Save the Children Australia
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Disease	Funder(s)	Geographical location	Detail
<p><u>Malaria</u></p> <p>In 1984, a National Malaria Control Committee was established. Currently the government are implementing a National Malaria Strategy Plan¹ (MSP: 2023 – 2030). Discussions are currently ongoing regarding the rollout with an expanded programme on immunization² to scale up to 11 districts³.</p>	<p>Global Fund funding the Indoor Residual Spraying (IRS) program (however due to funding constraints, this project is no longer a priority for this period 2024 – 2027)</p> <p>PMI supports ITNs, vector surveillance (through PMI Vector link), case management</p>	<p>Insecticide Treated Nets (ITNs) for antenatal care (ANC) and under 5 year olds are countrywide as mass distribution is targeted. Targeted districts targeted for Indoor Residual Spraying (IRS) include Nkotakota, Balaka and Nkhata bay. There are a total of 17 sentinel sites spread across three regions.</p>	<p>Integrated Vector Control Interventions: Long lasting insecticidal nets (ITNs)- The 2017-2022 MSP aimed at providing 1 net for every 2 people, covering all districts except for where IRS would be deployed, Strategies for ITN distribution in Malawi are:</p> <ol style="list-style-type: none"> 1) free routine distribution to pregnant women through antenatal care (ANC) and to new-born at the time of delivery and 2) mass campaigns every three years now changed to two years. Mass campaigns are done by HSAs <p>Targeted quality Indoor Residual Spraying (IRS)*: The implementation of IRS started in 2018. Pyrethroid resistance and the high cost of IRS presents a sustainability dilemma</p> <p>Larval Source Management (LSM) as a complementary intervention in some communities – The WHO recommends that individual countries can implement LSM in situations where larval breeding sites are few, fixed, and findable. Larval source management was planned in the previous MSP but not fully implemented due to resource constraints and lack of technical capacity.</p> <p>Monitoring of new vector control interventions and tools to address insecticide resistance where reported. Mass campaigns are done by HSAs</p> <p>Vector surveillance and insecticide resistance management. Monitoring vector infective bite rates and testing novel tools for use in managing insecticide resistance.</p>

¹ [The National Malaria Strategic Plan 2023-2030 Final Printing Version 20 March2023 2.pdf](#)

² [UNICEF-Malawi-EPI-COVID-19-Budget-Brief-2022-23.pdf](#)

³The implementing districts include Karonga, Nkhata-Bay, Mchinji, Lilongwe, Ntchisi, Balaka. [Malawi health workers report drop in malaria cases following vaccine intro \(gavi.org\)](#)

			<p>Conducts entomological studies and established a national entomological profile that explores vector ecology and behaviour, species composition and distribution and insecticide resistance.</p> <p>Malaria Case Management Implementing the new WHO recommendations - Injectable Artesunate in children, - Adopted a new policy from use of field stains A&B to Giemsa for malaria microscopy,</p> <p>-change of malaria microscopy reporting system from plus (+, ++, +++, +++) to parasite density count.</p> <p>Implementation of malaria case management at community level is through integrated community case management (iCCM) by community health workers (HSAs).</p> <p>*IRS will not be part of the proposed GCF project</p>
<p><u>Cholera</u></p> <p>The Ministry of Health in coordination with World Health Organization (WHO), the United Nations International Children Education Fund (UNICEF), and other partners have formulated a public health response plan to stop Cholera⁴.</p>	<ul style="list-style-type: none"> • WHO • UNICEF⁵ • Malawi Red Cross Society 	<p>Cholera control is country wide with a focus on endemic sites. Some districts focusing on community engagement and risk communication include promotion of uptake of oral cholera vaccine. Treatment side focuses on the</p>	<p>A multi-sectoral approach including a combination of:</p> <p>- Surveillance: Part of an integrated disease surveillance system that includes feedback at the local level and information-sharing at the global level Aims at early detection and reporting of the cases</p> <p>- Water, Sanitation and Hygiene (WASH): Improving access to clean water and sanitation, good waste management, food safety practices and hygienic practices to prevent the transmission of cholera.</p> <p>-Social mobilization:</p>

⁴ [Fight against cholera outbreak, efforts and challenges in Malawi - PMC \(nih.gov\)](#)

⁵ [Responding to the Cholera outbreak in Malawi | UNICEF Malawi](#)

		<p>where there is an active cholera outbreak. Cholera surveillance platform includes data from all the districts. There is overlap with our 6 districts in the GCF proposed project but coverage differs according to the availability of funding.</p>	<p>Community engagement continues throughout cholera outbreak response with increased communication regarding potential risks, symptoms of cholera, precautions to take to avoid cholera, when and where to report cases and to seek immediate treatment when symptoms appear.</p> <p>-Treatment (Case management through the establishment of treatment structures The majority of people can be treated successfully through prompt administration of oral rehydration solution (ORS). Severe cases require IV fluids.</p> <p>Oral rehydration should be available in communities at specific oral rehydration points (ORPs) plus zinc in children.</p> <p>Oral cholera vaccines: At least two doses of OCV for full protection. OCV is used in areas with endemic cholera, in humanitarian crises with high risk of cholera, and during cholera outbreaks in conjunction with other cholera prevention and control strategies.</p>
<p><u>Malnutrition</u></p> <p>The National Multi-Sector Nutrition Strategic Plan⁶ (2018-2022) is currently undergoing revision based on the current strategy period 2024 – 2030.</p>	<ul style="list-style-type: none"> • UNICEF • World Bank • World Food Programme • European Union • Irish Aid • GIZ 	<p>Countrywide – all districts.</p>	<p>Implementation of high-impact, nutrition interventions across the various sectors and line-ministries:</p> <p>Prevent Undernutrition with Emphasis on Children Under Five, Adolescent Girls, School-going Children, Pregnant and Lactating Women, PLHIV, and Other Vulnerable Groups</p> <ul style="list-style-type: none"> • Promote optimal nutrition for the general population <ul style="list-style-type: none"> ○ Promote women nutrition before, during and after pregnancy ○ Intensify prevention and control of micronutrient deficiencies ○ Promote optimal breast-feeding practices for children 0-6 months at facility, community and household levels

⁶ [Malawi National Multi-Sector Nutrition Strategic Plan 2018-2022 \(fao.org\)](https://www.fao.org/publications/02/serials/59302/en)

			<ul style="list-style-type: none"> ○ Promote continued breastfeeding and appropriate complementary feeding of children aged 6 to 24 months and beyond. ○ Strengthen optimal feeding of children during and after illness ○ Promote improved WASH practices at the community and household levels <ul style="list-style-type: none"> ● Implementation of nutrition sensitive and nutrition-specific interventions in the relevant core sectors <ul style="list-style-type: none"> ○ Promote school feeding and school health and nutrition programmes. <p>Treat and Control Acute Malnutrition Among Children Under Five, Adolescents, Pregnant and Lactating Women, PLHIV, and Other Vulnerable Groups</p> <ul style="list-style-type: none"> ● Strengthen the implementation of CMAM and NCST through lifecycle approach targeting adolescents, adults and children ● Promote scaling up of nutrition treatment, care and support of TB patients, PLHIV and other chronically ill persons in all public and private health facilities <p>Enhance Nutrition Education, Social Mobilisation, and Positive Behaviour Change.</p> <ul style="list-style-type: none"> ● Promote behavioural change for collective action, community ownership, and improved nutrition knowledge, attitudes and practices ● Promote social mobilization through mass media and other communication channels <p>Improve Delivery of Nutrition Interventions During Emergencies</p> <ul style="list-style-type: none"> ● Promote timely detection, referral and treatment of malnutrition ● Promote resilient programmes aimed at improving maternal and child nutrition
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