



# CDC in Malawi

The Centers for Disease Control and Prevention (CDC) established an office in Malawi in 2001, working with local and international partners to strengthen health systems and implement high-impact HIV and TB programs through the President’s Emergency Plan For AIDS Relief. CDC also provides support to build laboratory and workforce capacity, strengthen surveillance systems, and implement interventions for malaria control under the U.S. President’s Malaria Initiative.



## CDC STAFF

- 9 U.S. Assignees
- 28 Locally Employed



## AT A GLANCE

- Population: 18,622,104 (2017)
- Per capita income: \$1,180
- Life expectancy at birth: F 66/M 61 years
- Infant mortality rate: 42/1,000 live births

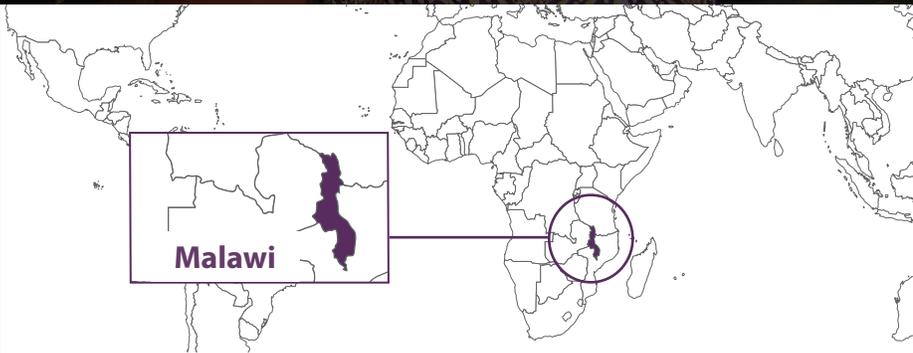
Sources:  
World Bank 2018, Malawi  
Population Reference Bureau 2018, Malawi



## TOP 10 CAUSES OF DEATH

1. HIV/AIDS
2. Neonatal disorders
3. Lower respiratory infections
4. Tuberculosis
5. Diarrheal diseases
6. Malaria
7. Ischemic heart disease
8. Stroke
9. Congenital defects
10. Diabetes

Source:  
GBD Compare 2018, Malawi



## HIV and Tuberculosis

HIV is a leading cause of death and a health threat to millions worldwide, and tuberculosis (TB) is emerging as the leading cause of death among people living with HIV (PLHIV). As a key implementer of the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR), CDC works with Malawi to build a sustainable, high-impact national HIV response program to accelerate progress towards the UNAIDS global targets to control the HIV epidemic.

Malawi began implementing TB preventive therapy (TPT) in PLHIV in September 2017. The Malawi TPT program guidance states that lifelong Isoniazid preventive therapy (IPT) should be implemented in 5 selected highest TB/ HIV burdened districts. Out of approximately 320,000 PLHIV in care in these 5 districts, the program was able to initiate over 250,000 PLHIV on IPT in 2018. Through PEPFAR, Malawi is working on plans to scale up TPT to all PLHIV.

CDC support for Malawi’s HIV and TB activities includes working with the Ministry of Health (MOH) to strengthen its health system capacity and implement high-impact HIV programs. Programming includes HIV testing and counseling, prevention of mother-to-child transmission, antiretroviral therapy (ART), and voluntary medical male circumcision.

Beyond HIV service delivery, CDC’s partnership with Malawi also focuses on building healthcare workforce capacity, strengthening laboratory systems, and increasing the capacity of its surveillance and health information systems to collect and analyze data for improved program decision-making.



U.S. Department of Health and Human Services  
Centers for Disease Control and Prevention

## Health Systems Strengthening

With CDC support, the Malawi MOH and partners are improving health facility efficiency and healthcare quality throughout the country by establishing an electronic medical record system (EMRS) and constructing clinic facilities. To date, 193 health facilities in several health districts have had EMRS installed. Within the Lilongwe and Blantyre districts, all 64 prefabricated health units have been completed. In addition, two brick and mortar drug storage warehouses and two ART Clinics were being built as of February 2019.

## Laboratory Capacity Building

CDC supports the MOH in establishing and sustaining a four-tiered approach (central, district, facility and community) to strengthen laboratory capacity to enable testing for HIV viral load and tuberculosis. Increased capacity has resulted in 411,000 viral load tests being conducted in 2018. Currently, CDC is assisting the MOH in evaluating the feasibility of using plasma instead of dried blood spot testing in urban clinics. Plasma testing would provide more accurate laboratory results.

## Field Epidemiology Training Program

CDC supports Malawi in strengthening the capacity of its workforce to investigate and respond to disease outbreaks through the establishment of a Field Epidemiology Training Program (FETP). FETPs train a workforce of field epidemiologists—or disease detectives—to identify and contain outbreaks before they become epidemics. Participants focus on “learning by doing” to develop the skills for gathering critical data and turning it into evidence-based action. Malawi’s FETP was launched in 2016, under the leadership of the Public Health Institute of Malawi. Currently, 70 health officers have completed training and returned to their MOH posts.

## Malaria

Malaria is a leading cause of death and disease in many countries, and young children and pregnant women are the groups most affected. Under the U.S. President’s Malaria Initiative, CDC has assigned a resident advisor to the malaria-endemic country of Malawi to support the implementation of malaria prevention and control interventions. These interventions include providing long-lasting insecticide-treated nets and indoor residual spraying, preventing malaria in pregnancy, and improving diagnostics and case management.

Through a cooperative agreement with the Malawi College of Medicine’s Malaria Alert Centre, CDC implements operational research activities and entomological monitoring to guide malaria programmatic decision-making. Recent studies include the evaluation of first- and second-line antimalarials, assessment of the impact of intermittent preventive treatment in pregnancy (IPTp) on birth outcomes, a randomized trial to assess the efficacy of an alternative medication for IPTp, and evaluation of cell phone messages to improve health worker management of malaria.

## CDC Implementing Partners in Malawi

Leadership, Policy, and National Oversight: National Aids Commission (NAC)

Service Delivery: Christian Health Association of Malawi (CHAM), Lighthouse Trust, Elizabeth Glaser Pediatric AIDS Foundation (EGPAF)

System Strengthening: Malawi Blood Transfusion Service (MBTS), Baobab Health Trust (BHT), University Research Co. LLC. (URC), National Registration Bureau (NRB), College of Medicine Malaria Alert Centre

Human Resources for Health: Malawi College of Medicine (COM); Christian Health Association of Malawi (CHAM); International Training and Education Center for Health (ITECH) - University of Washington, Malawi College of Medicine, ICAP-Columbia University



## CDC IMPACT IN MALAWI



Approximately 70% of patients on antiretroviral therapy (ART) were managed through the CDC-supported electronic medical record system as of April 2019.



760,000 people living with HIV are on ART. This is 70% of the estimated 1.1 million HIV positive population.



Over 36,300 prisoners accessed HIV services in 15 prisons in 2018, through the priority population program.



Through CDC support, 64 prefabricated clinics were constructed in Lilongwe and Blantyre, the districts hardest hit by the HIV epidemic.



The first molecule laboratory with capacity for HIV drug resistance testing was opened in the capital city of Lilongwe.



CDC supported the opening of the new Center for Excellence for HIV, TB, and Family Health in Blantyre.

**For more country information, visit:**  
[www.cdc.gov/globalhealth/countries/malawi](http://www.cdc.gov/globalhealth/countries/malawi)

**For more information, please contact:**  
Centers for Disease Control and Prevention  
1600 Clifton Road NE, Atlanta, GA 30329-4018  
[www.cdc.gov/global](http://www.cdc.gov/global)  
**Email:** [cdcglobal@cdc.gov](mailto:cdcglobal@cdc.gov)