The Centers for Disease Control and Prevention (CDC) has been working in Malawi (CDC Malawi) since 2001. As part of U.S. Government support, CDC Malawi works with local and international partners to help the Malawi Ministry of Health (MOH) achieve national public health goals in a variety of ways, including training health workers and providing technical and financial assistance to improve surveillance systems, medical informatics, monitoring and evaluation, laboratories, care and treatment, and prevention efforts throughout the country. Malawi is known for having one of the most innovative and efficient HIV programs in the world, and CDC Malawi is proud to be a key contributor to supporting Malawi to achieve an AIDS-free generation.

**HIV/AIDS and TB**

HIV/AIDS is a major public health issue and CDC’s HIV program began with the goal of strengthening HIV prevention and control. With tuberculosis emerging as the leading cause of death among people living with HIV, CDC’s program has moved from one focused mainly on HIV prevention to one that addresses TB as well. CDC works closely with Malawi’s MOH to deliver high quality and high impact HIV interventions to reduce the incidence of new HIV infections and to reduce morbidity and mortality related to HIV/AIDS. The country is committed to achieving the UNAIDS goal of 90-90-90 by 2020 (90% of all people living with HIV will know their HIV status, 90% of all people with diagnosed HIV infection will receive sustained treatment, and 90% of all people receiving treatment will have viral load suppression). HIV/AIDS and TB activities include:

- Supporting the implementation of universal eligibility for antiretroviral treatment (Test and Start)
- Scaling up comprehensive HIV services across a continuum of care, from prevention to treatment to meet the 90-90-90 goals for adults and children living with HIV;
- Enhancing access to and coordination of adult and pediatric HIV care and treatment;
- Expanding the range and quality of services for preventing mother-to-child transmission (PMTCT) and improve the cascades of care for women on Option B+ and HIV exposed infants;
- Strengthening integrated TB/HIV services;
- Support the expansion of a voluntary, low-risk blood donor pool nationally;
- Implementing diversified models of HIV testing and differentiated care models for treatment
- Provide voluntary medical male circumcision (VMMC) services

**AT A GLANCE**

Population: 18,958,000  
Per capita income: US $486  
Life expectancy at birth: W53/M51  
Infant mortality rate: 43.4/1,000 live births

**TOP 10 CAUSES OF DEATH**

1. HIV/AIDS & TB  
2. Diarrheal diseases  
3. Neonatal disorders  
4. NTDs & malaria  
5. Neoplasms  
6. Nutritional deficiencies  
7. Other noncommunicable diseases  
8. Cardiovascular diseases  
9. Unintentional injuries  
10. Mental disorders

Source: Population Reference Bureau 2015: Malawi  
Source: WHO Country Health Statistical Profiles 2015-Malawi
• Expand and strengthen laboratory services to meet 90-90-90 targets.
• Implement cervical cancer screening and treatment programs for women living with HIV.

Health Systems Improvements

CDC Malawi supports the strengthening of professional training colleges for nurse-midwives and other healthcare professionals, and has provided scholarships that resulted in more than 500 new healthcare workers graduating from public and Christian Health Association of Malawi (CHAM) training colleges. With CDC support, the Malawi MOH and partners are improving health facility efficiency and healthcare quality throughout the country by developing and maintaining national Electronic Medical Record systems, a Demographic Data Exchange system, a national HIV surveillance system and surveys.

CDC also supports strengthening of laboratory services by supporting in-service and pre-service training; institutionalizing quality assurance and quality control protocols, supervision, and management; and integrating overall laboratory diagnostics.

Malaria

As a partner in the President’s Malaria Initiative (PMI) with USAID, CDC Malawi provides technical support for Malawi’s primary malaria prevention and control efforts. This support emphasizes increasing coverage and use of long-lasting insecticide treated bed nets, improving uptake of intermittent preventive treatment of malaria in pregnancy (IPTp), strengthening malaria case management, and improving surveillance, monitoring and evaluation systems. Through a cooperative agreement with the Malawi College of Medicine’s Malaria Alert Centre, CDC implements PMI-funded operational research activities and entomological monitoring to guide malaria programmatic decision-making. Recent and current operational studies include the evaluation of efficacy of first- and second-line antimalarials, assessment of the impact of IPTp on birth outcomes, evaluation of cell phone messages to improve health worker management of malaria, and a randomized trial to assess the efficacy of an alternative medication for IPTp.

CDC’s 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

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IMPACT IN MALAWI

As of June 2018, about 55%, of patients on antiretroviral therapy (ART) nationally were being managed through the electronic medical record system (EMRS).

In 2018, 470 students participated in graduate courses. 389 will graduate at the end of 2018. CDC also supports salaries for over 400 health care workers in MOH facilities.

According to the validated MOH data, as of June 2018, there were 760,000 patients ‘Alive on ART’ representing 70% of the estimate 1.1 million HIV positive population.

In 2017, CDC Malawi helped ensure over 504,000 (96%) of 525,000 pregnant women attending antenatal care knew their HIV status. Among the 41,000 HIV-positive pregnant women, CDC Malawi ensured over 40,300 (98%) were receiving HIV treatment.

78% of adults and 79% of children remained alive on ART at 12 months after initiation.

Malawi was one of the first three countries globally to implement the Malawi Population-Based HIV Impact Assessment (MPHIA) in 2015/2016. MPHIA surveyed over 11,000 households and included about 19,700 adults and 6,200 children. MPHIA was the first study to define national progress to 90-90-90 and was foundational to PEPFAR Country Operational Plans for 2017 and 2018.

With CDC support, Malawi’s newly launched Civil Registration Vital statistics System issued its first ever birth certificate in August, 2015. By June 2018, over 150,000 birth certificates had been printed and issued.

CDC Malawi’s flagship Field Epidemiology Training Program (FETP) was launched on 18th April 2016 under the leadership of the Public Health Institute of Malawi (PHIM) initially enrolling ten residents into a four month frontline FETP course.