



Government of Malawi

2010 MALAWI MILLENNIUM DEVELOPMENT GOALS REPORT

**Ministry of Development Planning and Cooperation
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HIS EXCELLENCY THE STATE PRESIDENT
OF THE REPUBLIC OF MALAWI

“My Government is committed to accelerate the attainment of the millennium development goals by implementing a robust development strategy”

Foreword

The Government of Malawi is undertaking unequivocal efforts in reducing poverty and improving the welfare of its people. This dedication is manifested through the signing of the Millennium Declaration adopted at the United Nations (UN) General Assembly in New York in September, 2000. This initiative is aimed at reducing abject poverty affecting more than one sixth of the world's population.

The implementation of the Millennium Development Goals (MDGs) in Malawi is being done through the medium term development strategy known as the Malawi Growth and Development Strategy (MGDS). The strategy, which runs from 2006 to 2011, aims at creating wealth through sustainable economic growth as a means of reducing poverty. Initially the strategy focused on six priority areas, which have been revised to nine since 2009. Government believes that the successful implementation of the key priority areas will have positive implications on the achievement of the MDGs and other pertinent development indicators.

The 2010 Millennium Development Goals report provides an update with respect to achievements Malawi has made on the attainment of the MDGs. The assessment has clearly shown that the country is on track to attaining MDG targets by the year 2015. Stakeholders engaged in development activities in various sectors of the economy – agriculture and food security, health, education, environment, gender – will be pleased to see the impacts of their efforts through the quantitative assessments made in this report.

This report has also highlighted challenges that are being faced in the course of implementing relevant development policies to attain MDG targets and possible solutions to resolve them. It is my hope that government and all its stakeholders are going to put their effort together to overcome these challenges to ensure that Malawi attains the MDG targets by 2015.

Abbie Marambika Shawa, MP

MINISTER OF DEVELOPMENT PLANNING AND COOPERATION

Acknowledgments

This report was compiled through the work of numerous individuals too many to mention. They played different roles at different stages of the report. Many stakeholders were involved in the collection and compilation of qualitative and quantitative data. The Ministry would like to thank all individuals for their dedication and hard work.

The Ministry would also like to thank UNDP and its MDG country team for the financial and administrative support rendered towards the production of the report.

Table of Contents

Acknowledgments.....	iv
List of Figures	vi
List of Acronyms	vii
Status at a Glance.....	ix
Executive Summary	xi
Introduction.....	13
Goal 1: Eradicating Extreme Poverty	15
Goal 2: Achieve Universal Primary Education.....	21
Goal 3: Promote Gender Equality and Empower Women.....	25
Goal 4: Reduce Child Mortality.....	31
Goal 5: Improve Maternal Health.....	35
Goal 6: Combat HIV and AIDS, Malaria and other diseases	38
Goal 7: Ensure Environmental Sustainability.....	46
Goal 8: Develop Global Partnership for Development.....	53
Bibliography	60

List of Figures

Figure 1: Poverty Head Count	15
Figure 2: Poverty Gap Ratio	16
Figure 3: Poorest Quintile Share in National Consumption	17
Figure 4: Underweight Prevalence.....	18
Figure 5: Proportion of Ultra-poor.....	19
Figure 6: Net Enrolment Rate in Primary Education.....	21
Figure 7: Proportion of Pupils Starting Grade 1 reaching Grade 5.....	22
Figure 8: Literacy Rate of 15 – 24 Year Olds.....	23
Figure 9: Ratio of Girls to Boys in Primary Education	25
Figure 10: Ratio of Girls to Boys in Secondary Education	26
Figure 11: Ratio of Literate Women to Men 15- 24 years Old.....	27
Figure 12: Share of Women in Wage Employment in Non- Agricultural Sector.....	28
Figure 13: Proportion of Seats Held by Women in Parliament	29
Figure 14: Under-Five Mortality Rate	31
Figure 15: Infant Mortality Rate	32
Figure 16: Proportion of 1 Year Old Children Immunized against Measles	32
Figure 17: Maternal Mortality Ratio.....	35
Figure 18: Proportion of Births Attended by Skilled Health Personnel	36
Figure 19: HIV Prevalence Among 15-24 year Old Pregnant Women in Malawi.....	38
Figure 20: Ratio of Orphans to Non-orphans in Schools.....	39
Figure 21: Death Rates Associated with Malaria	40
Figure 22: Access to Malaria Treatment.....	41
Figure 23: Proportion of Household with at least One ITN.....	42
Figure 24: Death Rates Associated with Tuberculosis	43
Figure 25: Proportion of TB Cases Cured Under DOTS	43
Figure 26: Proportion of Land Area Covered by Forest	46
Figure 27: Ratio of Area Protected to Maintain Biological Diversity to Surface Area....	47
Figure 28: Proportion of Population Using Solid Fuels.....	48
Figure 29: Household with Sustainable Access to Improved Water Source	49
Figure 30: Proportion of the Population with Access to Improved Sanitation	50
Figure 31: Percentage of Slum Houses.....	50
Figure 32: Net ODA as a Percentage of Real Gross Domestic Product	53
Figure 33: Unemployment of 15-24 Year Old.....	54
Figure 34: Cell phone Subscribers.....	56
Figure 35: Landline Subscribers	56
Figure 36: Internet Subscribers	57

List of Acronyms

AIDS	Acquired Immune Deficiency Syndrome
ARV	Anti-Retroviral drugs
CBE	Complementary Basic Education
CBO	Community Based Organisation
CDSS	Community Day Secondary Schools
DAS	Development Assistance Strategy
DOTS	Direct Observable Treatment Short
EHP	Essential Health Package
EU	European Union
EPI	Expanded Programme for Immunization
FAO	Food and Agricultural Organization
HESSEA	Household Expenditure and Small Scale Economic Activities
HIPC	Highly Indebted Poor Countries
HIV	Human Immuno-deficiency Virus
HSA	Health Surveillance Assistant
ICT	Information Communication Technology
IHS	Integrated Household Survey
IMS	Information Management System
IRI	Interactive Radio Instruction
IT	Information Technology
ITN	Insecticide Treated Net
IVL	Interactive Video Learning
IMCI	Integrated Management of Child Illness
LA	Artemether Lumefantrine
MACOHA	Malawi Council for the Handicapped
MASEDA	Malawi Social Economic Database
MARDEF	Malawi Rural Development Fund
MAREP	Malawi Rural Electrification Programme
MIE	Malawi Institute of Education
MDG	Millennium Development Goal
MDHS	Malawi Demographic and Health Survey
MDRI	Multilateral Debt Relief Initiative
MGDS	Malawi Growth and Development Strategy
MICS	Multiple Indicator Cluster Survey
MPVA	Malawi Poverty Vulnerability Assessment
MTEF	Medium Term Expenditure Framework
NER	Net Enrollment Rate
NESP	National Education Sector Plan
PHC	Population and Housing Census
ODA	Overseas Development Assistance
OVOP	One Village One Product
PCAR	Primary Curriculum Assessment Review
PSIP	Public Sector Investment Programme
RBM	Roll Back Malaria Programme

SADC	Southern Africa Development Community
STDs	Sexually Transmitted Diseases
SWAp	Sector Wide Approach
TB	Tuberculosis
UN	United Nations
UNICEF	United Nation Children's Fund
UNDP	United Nations Development Programme
UNFPA	United Nations Fund for Population
UNEP	United Nations Environment Programme
UPE	Universal Primary Education
WMS	Welfare Monitoring Survey

Status at a Glance

Malawi's Progress Towards Achieving the Millennium Development Goals

GOAL/TARGET	Indicator	Current Status	2015 Target	Feasibility of achieving the Goal
Eradicate Extreme Poverty and Hunger	Proportion of population living below US\$1.00 per person per day	39 %	27%	Likely to be met
	Poverty Gap Ratio	17.8	8%	
	Poorest Quintile Share in National Consumption	10.1 %	20%	
	Prevalence of Underweight Children	17 %	14%	
	Proportion of population below minimum level of dietary energy consumption	15%	11.8%	
Achieve Universal Primary Education	Net Enrolment in Primary	83 %	100%	Unlikely to be met
	Proportion of Pupils Starting Grade1 Reaching Grade 5	75.7 %	100%	
	Literacy Rate (15-24yrs)	84 %	100%	
Promote Gender Equality and Empower Women	Ratio of Girls to Boys in Primary Education	1.03	1	Unlikely to be met
	Ratio of Girls to Boys in Secondary Education	0.79	1	
	Ratio of Literate Women to Men 15 – 24 Years Old	0.94	1	
	Share of Women in Wage Employment in non-Agriculture Sector	15 %	50%	
	Proportion of Seats Held by Women in Parliament	22 %	50%	
Reduce Child Mortality	Under-five mortality rate	122 per 1,000	78 per 1,000	Likely to be met
	Infant Mortality rate	69 per 1,000	44.7 per 1,000	
	Proportion of 1 year children immunized against measles	84 %	100 %	
Improve Maternal Health	Maternal mortality ratio	807 per 100,000	155 per 100,000	Unlikely to be met
	Proportion of births attended to by skilled health personnel	75 %	100%	
Combat HIV and AIDS, Malaria and other diseases	HIV prevalence among 15 – 24 year old pregnant women	12%	0%	Likely to be met
	Ratio of orphans to non-orphans in school	0.15	-	
	Deaths rates associated with Malaria	3%	-	
	Access to Malaria Treatment	22%	-	
	Proportion of Household with at least one ITN	60%	-	
	Death rates associated with Tuberculosis	8%	-	
	Proportion of TB Cases under DOTS	86%	-	
Ensure Environmental Sustainability	Proportion of land covered by forest	36.2%	50%	Likely to be met
	Proportion of area protected to maintain biological diversity	0.16%	0.18%	
	Proportion of population using solid fuel	98.8%	0%	
	Proportion of population with sustainable access to an improved water source	81%	74%	

	Proportion of population with access to improved sanitation	93%	86.2%	
	Slum population as percentage of urban population	67.7%	-	
Develop Global Partnership for Development	Net ODA as a percentage of Real Gross Domestic Product	22%	-	Likely to be met
	Unemployment of 15 – 24 year old (urban)	4%	-	
	Telephone lines subscribers per 100 population	2.3%	-	
	Cellular subscribers per 100 population	21%	-	
	Internet users per 1,000 population	10.5%	-	

Note: ‘-’ means no target set for the indicator

Executive Summary

Malawi remains committed to achieving the millennium development goals (MDGs) by 2015 through the implementation of her own national development strategy, called the Malawi Growth and Development Strategy (MGDS). The Strategy covers the period 2006 to 2011, and a successor MGDS will be designed before the current one expires.

This 2010 assessment on progress achieved in attaining the eight MDGs shows positive results. Five of the goals are likely to be achieved, and the other three are in doubt not for lack of effort to achieve them but due to the fact that the country had a much lower starting base compared to other countries. The five MDG targets that are likely to be achieved are on eradicating extreme poverty, reducing infant mortality, combating HIV and AIDS, malaria and other diseases, ensuring environmental sustainability, and developing global partnership for development. The three that are in doubt are on achieving universal primary education, reducing gender inequality and maternal mortality.

Under eradicating extreme poverty, the measure of poverty head count has declined by 11 percent from 2005 to 2009 and on the poverty gap ratio by 0.8 percent from the year 2000 to 2006. While the country is making progress in reducing poverty levels, the challenge still remains in reducing income inequality. Reducing child mortality is likely to be attained, and possibly surpassed. Currently, under-five mortality rate is at 122 deaths per 1000 live births and infant mortality at 69 deaths per 1000 live births in 2006. If the provision of health services continues at the rate they are being delivered, or improved beyond that then the country is on course to surpass the MDG targets.

Halting HIV and AIDS, malaria, and other diseases is also likely to be attained. Estimates of the national HIV prevalence rate among 15 to 24 year old pregnant women has been reduced by half from about 24 percent to 12 percent between 1998 to 2009. If this trend is sustained, the national HIV prevalence rate will be at 6 percent in 2015. As for other diseases like TB, the trend shows that Malawi is likely to reverse its incidence as evidenced by declining death rates associated with this disease. The goal of ensuring environmental sustainability is also on course for attainment. There are six indicators for this goal, and half of them show that things are on track while the others show otherwise. The land area covered by forest has declined steadily over the years, from 41.4 percent in 1990 to 36.2 percent in 2005. If this trend continues, Malawi's land area covered by forest will be less than 33 percent by 2015. However, the number of households with sustainable access to improved water sources has been increasing, such that if the current levels are maintained, this may surpass the MDG target by about 20 percent.

The goal of developing global partnership for development is also likely to be attained. The indicators for this include the rate of youth unemployment and telephone penetration. Data shows that youth unemployment has declined from 9 percent in 2006 to 4 percent in 2009. The trend for cellular phone subscribers per 100 people indicates that there has been an increase in subscribers from around 2 percent in 2004 to about 21 percent in 2010. This rapid increase can be attributed to low-cost cell phone handsets and an increased demand for faster communication. The projection shows that by 2015, about 34 percent of the population will be subscribed. For landline subscribers, there has been a low increase in the number of subscribers for fixed lines from about 0.6 percent in 2004 to about 2 percent in 2010.

Achievement of universal primary education is unlikely to be attained. Primary school education is free, but the net enrolment rate is not yet 100 percent. It stands at 83 percent in 2009, and the proportion of pupils starting grade one who reach grade five without repeating a grade has declined from 86 percent in 2006 to 76 percent in 2008. The youth literacy rate is currently at about 84 percent. According to linear projections, the attainment of this MDG will depend on capacity to scale up efforts beyond the historical levels. The improvement in maternal health is one of the three goals that would be difficult to attain. The country has been able to reduce maternal deaths from 984 per 100,000 live births in 2004 to 807 per 100,000 live births in 2006, but the desired target is almost six times below the desired rate. The country is also off track in reaching the target of births being attended by skilled birth personnel. The proportion of births attended by skilled personnel has increased from 57 percent in 2004 to 75 percent in 2009. Despite this improvement, the projection shows that by 2015 deliveries conducted by skilled attendants will have increased to 82 percent, falling short of the MDG target.

The last of the three MDG goals that is unlikely to be attained is the promotion of gender equality and women empowerment. Gender inequalities exist in accessing productive resources, development opportunities and decision making. Currently, the ratio of girls to boys in primary school is 1.03 and with this progress, a ratio of 1:1 would be surpassed. However the ratio of girls to boys in secondary school is meanwhile at 0.79. This trend therefore shows that gender parity, in aggregate terms, may be achieved at primary education level but not at secondary level, which in turn affects the ratio of girls to boys at the tertiary level.

Introduction

The UN General Assembly for Heads of State and Governments adopted long term development agenda for low income countries in partnership with high income countries. This long term development agenda is prescribed in the 2000 Millennium Declaration, to which 189 member countries, including Malawi are signatories. The agenda has eight goals, which are aimed at creating an enabling environment that will facilitate socio-economic development and the promotion of human rights in member countries. The eight millennium development goals (MDGs) are:

- 1) Eradicate extreme poverty and hunger,
- 2) Achieve universal primary education,
- 3) Promote gender equality and empowerment of women,
- 4) Reduce child mortality,
- 5) Improve maternal health,
- 6) Combat HIV/AIDS, malaria and other diseases,
- 7) Ensure environmental sustainability, and,
- 8) Develop a global partnership for development.

The implementation of MDGs is done through medium term strategies which are then translated into annual budgets. The first three year strategy was the Malawi Poverty Reduction Strategy (MPRS) which was implemented from 2000 to 2005. A review of the MPRS in 2005 showed that much as the strategy emphasized on poverty reduction, it did not put much emphasis on economic sectors which are important for sustainable poverty reduction. It became apparent therefore that if Government was to make reasonable progress towards attainment of the MDGs, it had to redesign its development strategy.

Lessons from MPRS implementation informed the formulation of the Malawi Growth and Development Strategy (MGDS). The MGDS, which is the second generation MPRSP provides an improved framework for implementing the MDGs. The strategy, which is designed to run from 2006 to 2011, has put emphasis on wealth creation and sustainable economic growth as a means to poverty reduction and human development. In addition, in allocating financial resources, government uses Medium Term Expenditure Framework (MTEF) and the Public Sector Investment Programme (PSIP) to ensure the smooth implementation of the MGDS. Government has set up an implementation, monitoring and evaluation framework to provide regular feedback on MDGs and MGDS.

As in the past, a significant proportion of financing for MGDS will come from development partners. A central norm of the Paris Declaration (PD) on aid effectiveness is that government owned national strategies should provide the road map for development that development partners should seek to align their support to these strategies in the most effective and efficient ways possible. In view of this, government has finalised the Development Assistance Strategy, which seeks to increase alignment of Malawi's development partners' to the MGDS using the most practical and efficient balance of aid modalities. The DAS sets out the policy and strategies for increasing

efficiency and effectiveness in the mobilisation and utilisation of such aid in achieving the development results set out in the MGDS.

The DAS seeks to achieve its objective through the operationalisation of the five key principles from the 2005 Paris Declaration on aid effectiveness, namely: national ownership of the national agenda; alignment of development partners to the national development strategy and government systems; harmonisation of development partner's systems and activities; managing resources and decision making for results and; mutual accountability for development results. Government recognises that improved coordination of financial support from the various development partners will improve the implementation and the achievement of MGDS outcomes and ultimately resulting in the attainment of the MDGs.

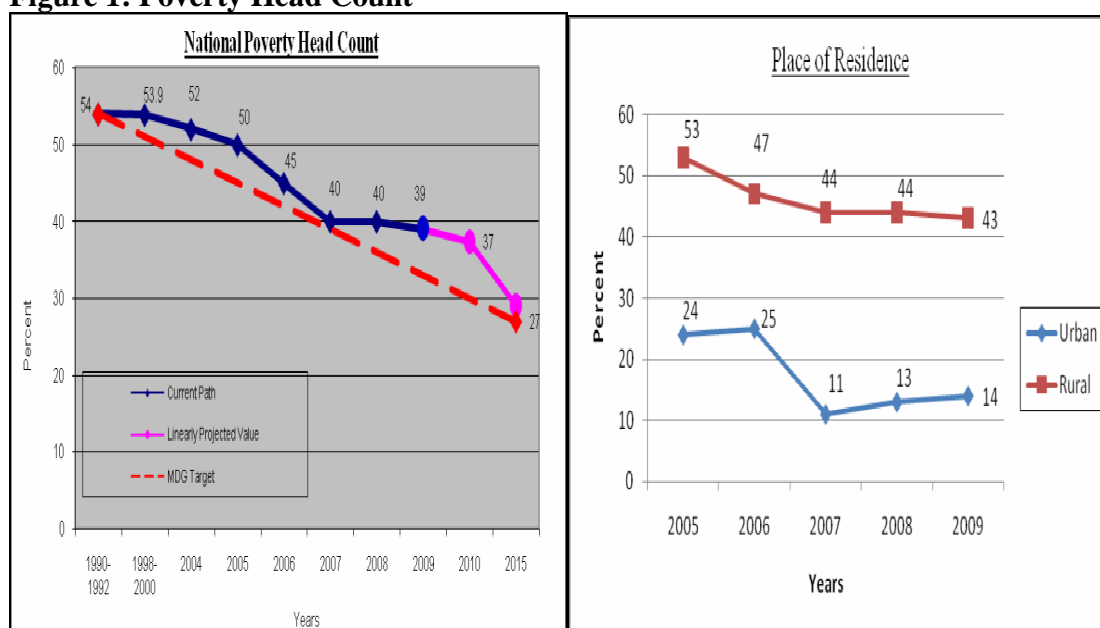
Goal 1: Eradicating Extreme Poverty

Extreme poverty is defined as the inability to meet basic minimum food requirements based on monthly cost of a food basket. Eradicating extreme poverty is the first of the eight MDGs and two main targets were set to achieve the goal by the year 2015. The first target is to halve, between 1990 and 2015, the proportion of people whose income is less than one dollar a day. To monitor progress made towards achieving the target, three indicators are used and these are: proportion of population below national poverty line; poverty gap ratio; and share of the poorest quintile in national consumption. The second target is to halve, between 1990 and 2015, the proportion of people who suffer from hunger. This has two indicators which are; prevalence of underweight children under five years of age, and the proportion of population below the minimum level of dietary energy consumption.

Target 1: Halve between 1990 and 2015 the Proportion of People whose Income is less than one Dollar per day

Indicator 1: Proportion of people below the poverty line¹ (poverty head count)

Figure 1: Poverty Head Count



Source: HESSEA 1991, IHS 1998, 2000, and WMS 2005, 2006, 2007, 2008

Figure 1 shows changes in poverty rates between 1990 and 2008. The figure shows that poverty has declined from 54 percent in 1990 to about 39 percent in 2009. However, with respect to place of residence, figures show that poverty in rural areas has been declining steadily since 2005 even though there are still more poor people in rural than urban areas.

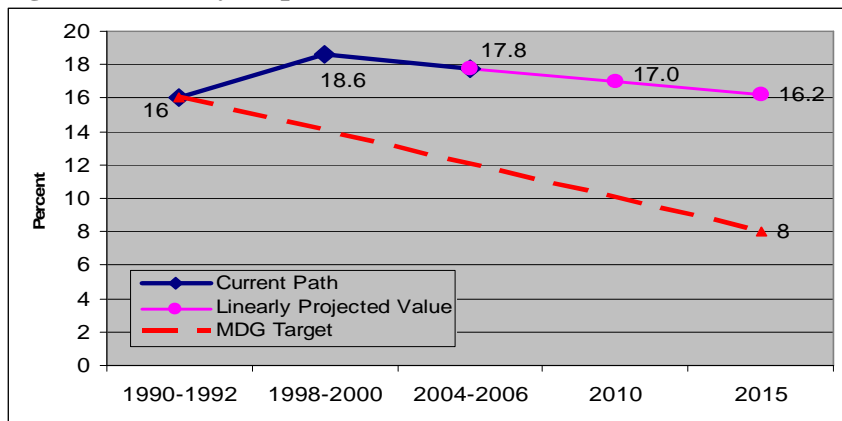
¹ Proportion of people living on less than one US dollar a day

This decline in poverty could be attributed to increased agriculture productivity realized through farm input subsidy programme among other government interventions. On the other hand, urban poverty declined from 24 percent in 2005 to 11 percent in 2007 but slightly increased to 13 percent in 2008. This could be due to urban migration amongst others. Nevertheless, at this rate of change, poverty is projected to reduce to 27 percent by 2015. This implies that the country is on track to achieve the MDG target.

Indicator 2: Incidence of depth of poverty as measured by the poverty gap

The poverty gap ratio is the average distance separating the poor from the poverty line expressed as a percentage of the poverty line. In addition to counting the number of poor people, the poverty gap also indicates the extent of poverty amongst the poor.

Figure 2: Poverty Gap Ratio



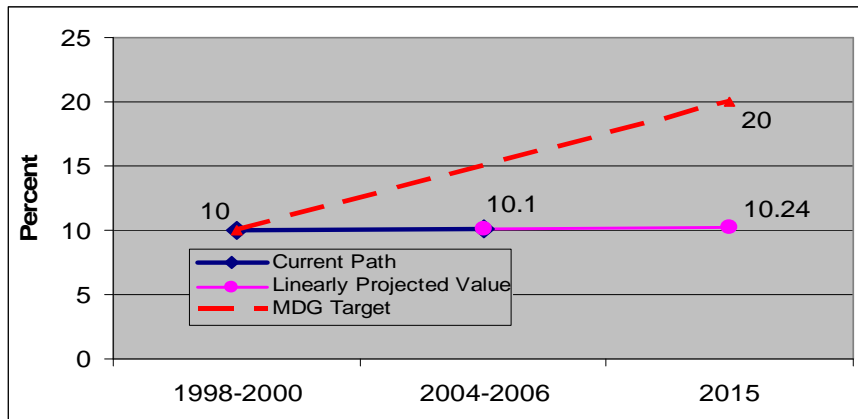
Source: HESSEA 1991 and IHS 1998, 2000, 2005

Figure 2 show that poverty gap ratio has increased from 16 percent in 1990 to about 19 percent in 1998. If this rate of change continues, the poverty gap ratio will have declined to around 16 percent by the year 2015. This is an indication that Malawi is unlikely to reduce the poverty gap ratio by half by the year 2015.

Indicator 3: Share of poorest quintile in national consumption.

This indicator measures the share of the poorest quintile in national consumption. The target under this indicator target is to double the share of the poorest quintile in national consumption.

Figure 3: Poorest Quintile Share in National Consumption



Source: IHS 1998 and 2005

Figure 3 shows that there has been no improvement on the share of the poorest quintile in national consumption between 1998 and 2005 as revealed by Integrated Household Surveys conducted in 1998 and 2005. Both surveys show that the poorest 20 percent of the population controlled only around 10 percent of the national consumption implying that inequality is not decreasing. At this rate, the MDG target will not be achieved by 2015.

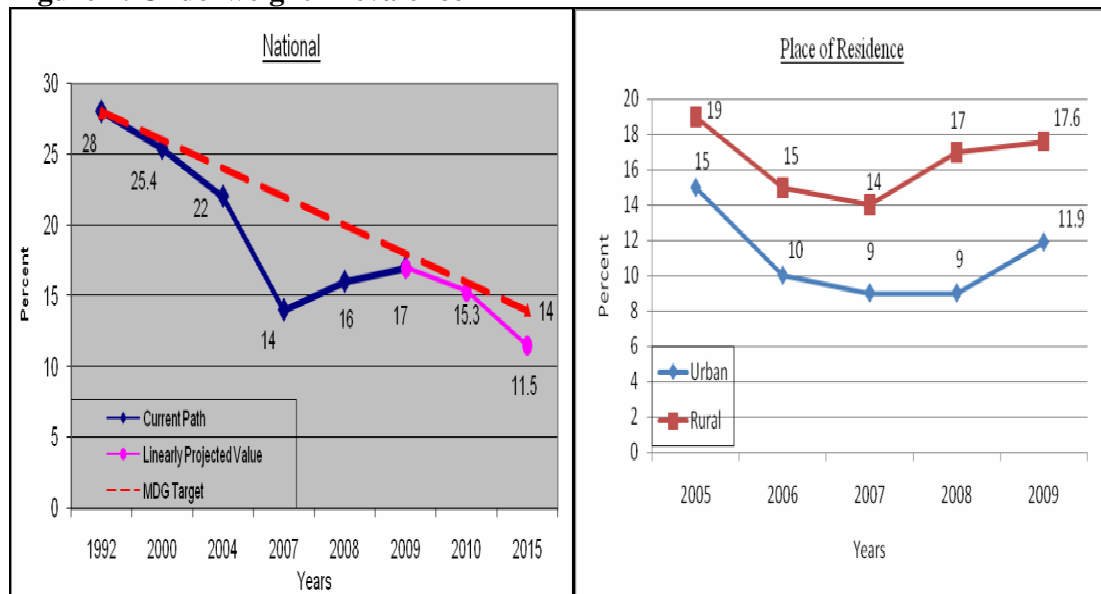
Target 2: Halve, between 1990 and 2015, the Proportion of People who Suffer from Hunger

The two main indicators for monitoring hunger are the prevalence of underweight children under five years of age and the proportion of the population living below the minimum level of dietary energy consumption.

Indicator 1: Prevalence of underweight children (under five years of age)

Malnutrition remains a serious challenge globally and the single biggest contributor to child mortality. Children's nutritional status is a reflection of their overall health and development. The nutritional wellbeing of young children is therefore a sign of the household, community and national investment in family health. Prevalence of underweight children is taken as a proxy indicator of proportion of population that is undernourished. Food intake for undernourished population is always below minimum requirements and insufficient to meet dietary energy.

Figure 4: Underweight Prevalence



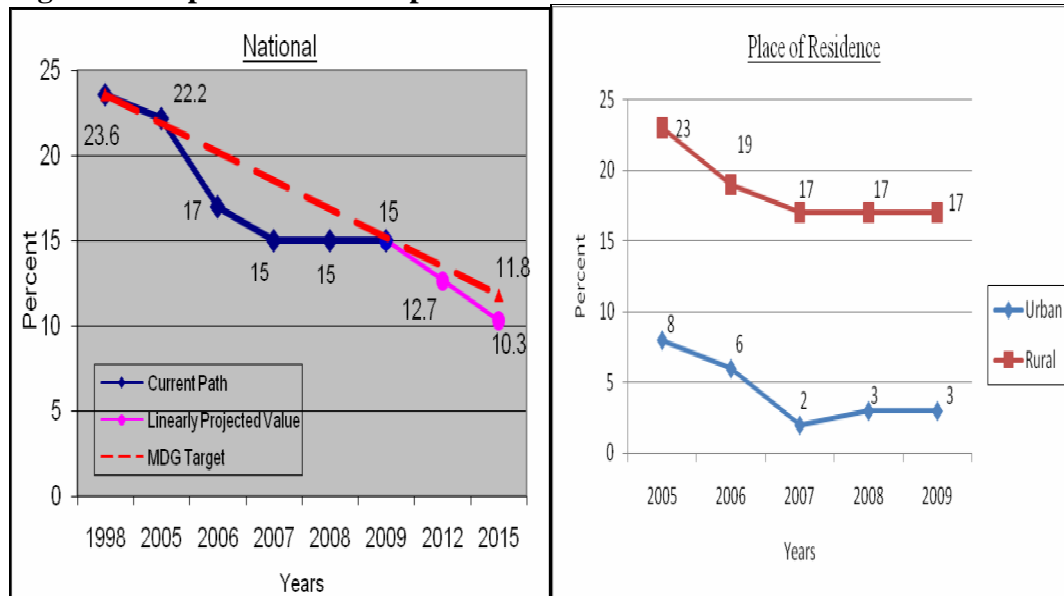
Source: MDHS 1992, 2000, 2004 and WMS 2005, 2006, 2007, 2008, 2009

Figure 4 shows that there has been a major stride in curbing the problem of prevalence of underweight in children under-five years of age. Underweight prevalence has declined from about 25 percent in 2000 to 14 percent in 2007. However, underweight prevalence has slightly increased from 14 percent to 17 percent between 2007 to 2009. Underweight prevalence in rural and urban areas is also showing similar trends despite improvement in the country’s food situation since 2004. This could be as a result of inadequate knowledge in food processing and utilization leading to hunger and malnutrition. Nevertheless, it is projected that by 2015, Malawi is likely to meet this target.

Indicator 2: Proportion of population below minimum level of dietary energy consumption.

The proportion of population below the minimum level of dietary energy requirement is estimated by defining a food poverty line. All persons below this line are deemed as ultra-poor. Proportion of ultra-poor in the population is used as a proxy indicator for the proportion of population below minimum level of dietary energy consumption.

Figure 5: Proportion of Ultra-poor



Source: IHS 1998, 2005 and WMS 2005, 2006, 2007, 2008

Figure 5 shows that the ultra poor population has decreased from about 24 percent in 1998 to 15 percent in 2009. The ultra poor population in rural and urban areas has steadily been declining since 2005 even though there is still higher proportion of ultra poor households in the rural than urban areas. At this rate, the projected proportion of persons deemed ultra poor will be about 10 percent by 2015. Malawi is therefore on track to reduce by half the proportion of population below the minimum level of dietary Projections have shown that by 2015, Malawi will register proportion of 7.5 percent Ultra poor.

Challenges

There are several challenges that the country is facing with respect to eradicating extreme poverty and hunger, some of which include the following:

- high illiteracy rates that limit the adoption of new agricultural technologies;
- inadequate food storage, processing and utilization knowledge that result in food wastage;
- critical shortage of capacity and skills in many institutions that are involved in the delivery of development programmes;
- inadequate knowledge and skills on household dietary diversification, and off-farm economic empowerment to increase access to high nutritive value foods for varied and nutritious diet;

- inadequate marketing infrastructure for rural communities, which discourages poor farmers and communities from growing cash crops and engaging in meaningful economic empowerment activities; and
- high disease burden such as HIV and AIDS, TB and malaria which affects the economically productive age group.

Policy Framework and Strategies

In an effort to reduce extreme poverty and hunger the government is implementing a number of strategies, which include the following:

- initiation of a number of agriculture programmes such as promotion of cash crops, agriculture input subsidy, green belt initiative to improve food security of smallholder farmers;
- construction of multipurpose dams to promote irrigation and provision of water supply;
- establishment of the MK5 billion Malawi Rural Development Fund (MARDEF) loans to enhance income generating capacity of the poor households;
- establishment of One Village One Product (OVOP) Scheme to encourage people to get into value adding processes;
- establishment of the MK 3 billion Youth Enterprise Development Fund which is providing financial resources to the youth for the establishment of businesses;
- rehabilitation of abandoned irrigation schemes for smallholder agriculture production for maize, rice and vegetables; and,
- promotion of advocacy for proper storage of food crops through metal storage facilities.

Goal 2: Achieve Universal Primary Education

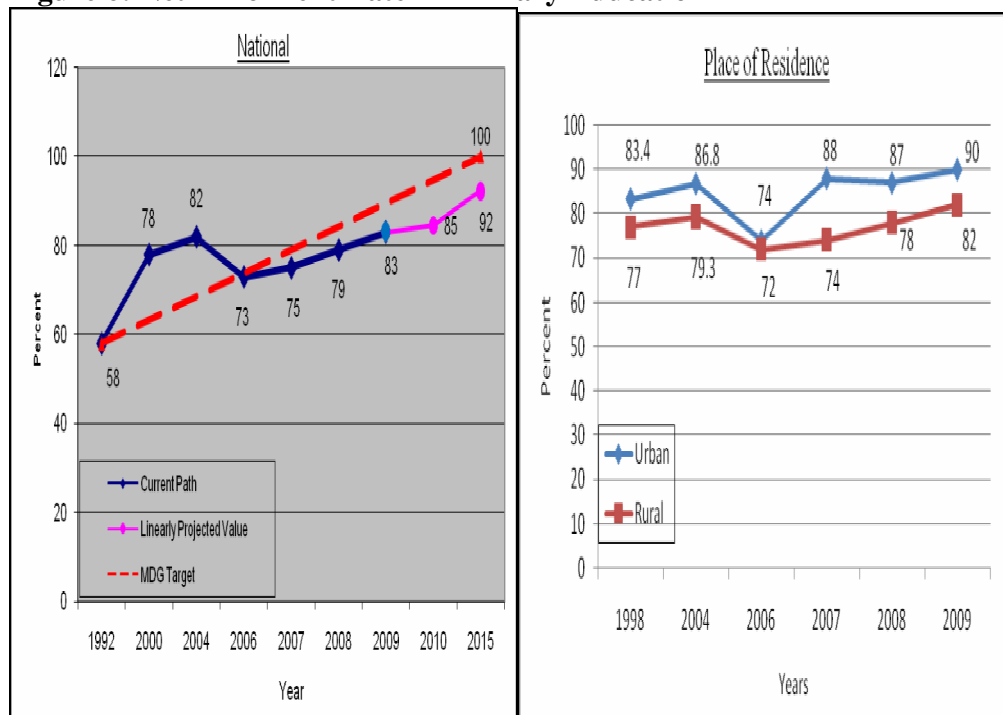
Universal access to basic education and the achievement of primary education by the World's children is one of the most important goals of the MDGs. Education is a vital prerequisite for combating poverty, empowering women and protecting children from hazardous and exploitative labour and sexual exploitation among others. It is for this reason that the Government of Malawi has included education as one of the nine priority areas in the national development strategy. The primary focus is to improve access and quality of education. To this extent government has over the years been increasing budgetary allocation towards education sector. Malawi government recognizes that human capital development is key in sustaining social and economic development.

Target 3: Ensure that by 2015, all Boys and Girls should be able to complete a Full Course of Primary Schooling

Indicator 1: Net Enrolment Rate (NER) in primary education

Net enrolment rate in primary education is defined as the extent to which the school going age (6-13) is enrolled in schools. This is a percentage calculated by dividing the number of school going age children enrolled in schools with the total number of the same age in the population.

Figure 6: Net Enrolment Rate in Primary Education

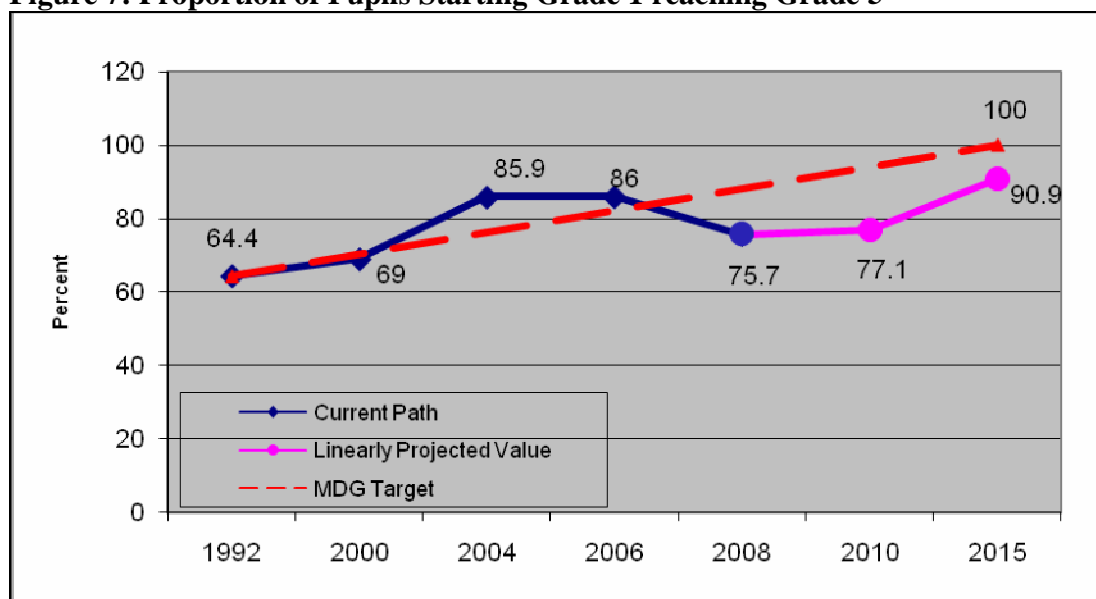


Source: MDHS 1992, 2000, 2004 and WMS 2006, 2007, 2008, 2009

There has been an increase in the primary school net enrollment since 2006 from 73 percent to 83 percent in 2009. Urban areas have a higher net primary school enrolment rate than rural areas even though the gap is narrowing since the year 2007. The differences in net enrolment between the rural and urban areas might be attributed to easy access to education facilities in urban areas as compared to rural areas. If current investments and provisions to education sector are maintained it is projected that net enrolment rate will reach about 92 percent, falling short of the MDG target of 100 percent by 8 percent.

Indicator 2: Proportion of pupils starting Grade 1 who reach Grade 5

Figure 7: Proportion of Pupils Starting Grade 1 reaching Grade 5

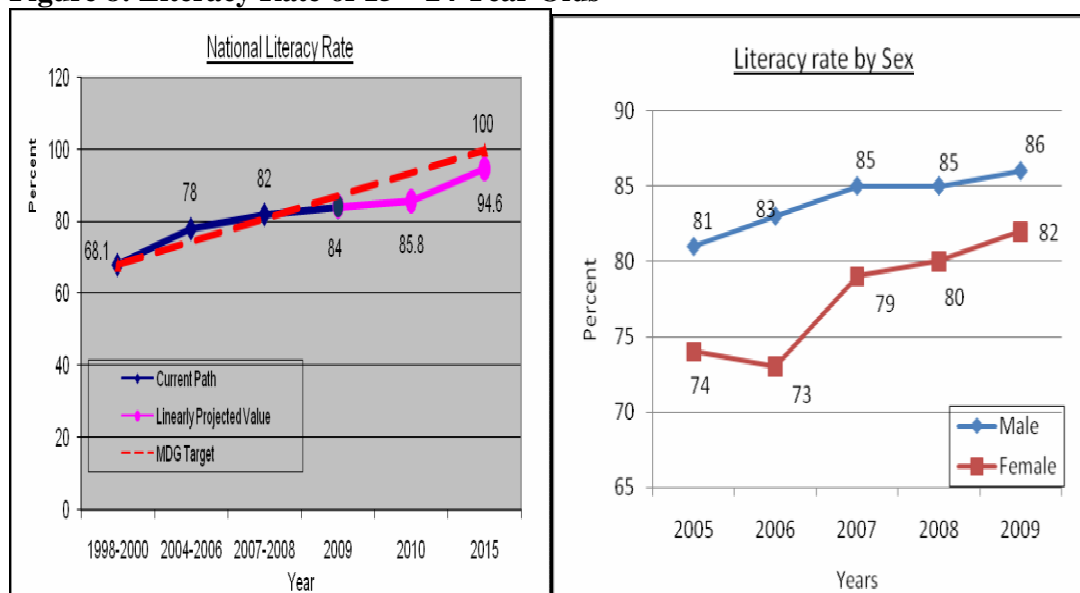


Source: MDHS 1992, 2000, 2004, MICS 2006 and EMIS 2008

This indicator measures the extent of drop out in primary education. Figure 7 shows that the proportion of pupils starting Grade 1 who reach Grade 5 without repeating a grade has increased from 69 percent in 2000 to about 76 percent in 2008. Proportion of pupils starting Grade 1 who reach Grade 5 is projected to reach about 75 percent in 2015, which is below the MDG target of 100 percent.

Indicator 3: Literacy Rate of 15 – 24 year-olds

Figure 8: Literacy Rate of 15 – 24 Year Olds



Source: MDHS 2000, 2004 and WMS 2005, 2006, 2007, 2008 and 2009

Figure 8 shows that youth literacy has increased from 68.1 percent in 2000 to about 84 percent in 2009. Literacy rate by sex indicates that there is a higher percentage of literate males compared to females. However, the percentage of literate females has increased significantly between 2006 and 2009 as compared to males. This could be as a result of increased female participation in adult literacy programmes. At this rate of improvement, youth literacy would reach about 95 percent by 2015 slightly below MDG target.

Challenges

Despite the positive developments in the education sector, it still faces a number of challenges which continue to undermine full realization of quality education service delivery. These include:

- shortage of qualified primary school teachers;
- inadequate physical infrastructure;
- poor retention of girls mainly from standard five to eight;
- high disease burden due to HIV and AIDS consequently leading to absenteeism especially among girls who take care of the sick; and
- poor participation of school committees and their communities in school management.
- Poverty levels are high in rural areas.

Policy Framework and Strategies

Government of Malawi initiated universal primary education (UPE) in 1994/ 95 with the main objective of increasing access to quality primary education. Government removed primary school fees and abolished school uniform as a requirement to attend classes to ensure that many boys and girls are able to enroll in school. In order to mitigate the emerging challenges on UPE, the education sector is engaged in policy re-definition. The National Education Sector Plan (NESP, 2008) outlines some of the redefined guiding principles and strategies to tackle issues of access at primary level as follows:

- reduction of pupil-teacher ratio, transfer of teachers from community day secondary schools (CDSSs) to primary schools;
- regular replenishment of textbooks for pupils and roll out of the primary curriculum assessment reform (PCAR) to all classes by 2009/10;
- construction of 50 primary schools and 1,000 teachers' houses annually through Pooled financing;
- construction of 1,500 classrooms annually through the pooled funding mechanism (Joint Financing Arrangement);
- Upgrading of junior primary schools to full primary schools;
- provision of grants to girls in selected areas especially at senior primary level and scaling up school feeding programmes (School Meals) to increase enrollment and retention;
- Scaling up the initiative of Take Home Rations to selected pupils in selected primary schools and
- expansion of existing Teacher Training Colleges and construction of additional colleges in order to improve on the quality and number of qualified teachers in primary schools.

Goal 3: Promote Gender Equality and Empower Women

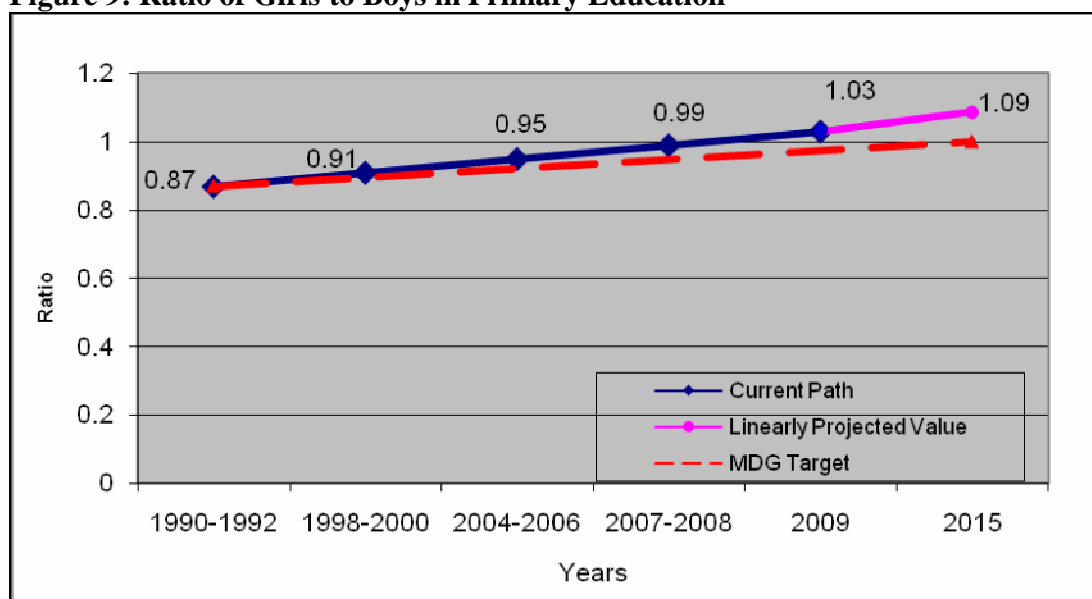
It has widely been accepted that gender inequality exists in Malawi and this status quo affects women more than their male counterparts. The Malawi Growth and Development Strategy (MGDS) recognises that there is high correlation between poverty, social vulnerability and gender inequality. This is the reason why even though women constitute 52 percent of the population in Malawi, they are in most cases marginalized in social and economic spheres and, therefore, unable to effectively contribute to social, economic and political development.

Strongly related to the above scenario is the high illiteracy level among women (56 percent as compared to 28 percent for men). This is fuelled by the high girl drop rates from the formal schooling system, a trend that eventually feeds back into a vicious cycle where once again one will expect to have very few women in formal employment.

Target 4: Eliminate Gender Disparity in Primary and Secondary Education, preferably by 2005, and in all Levels of Education no later than 2015.

Indicator 1: Ratio of girls to boys in primary education.

Figure 9: Ratio of Girls to Boys in Primary Education



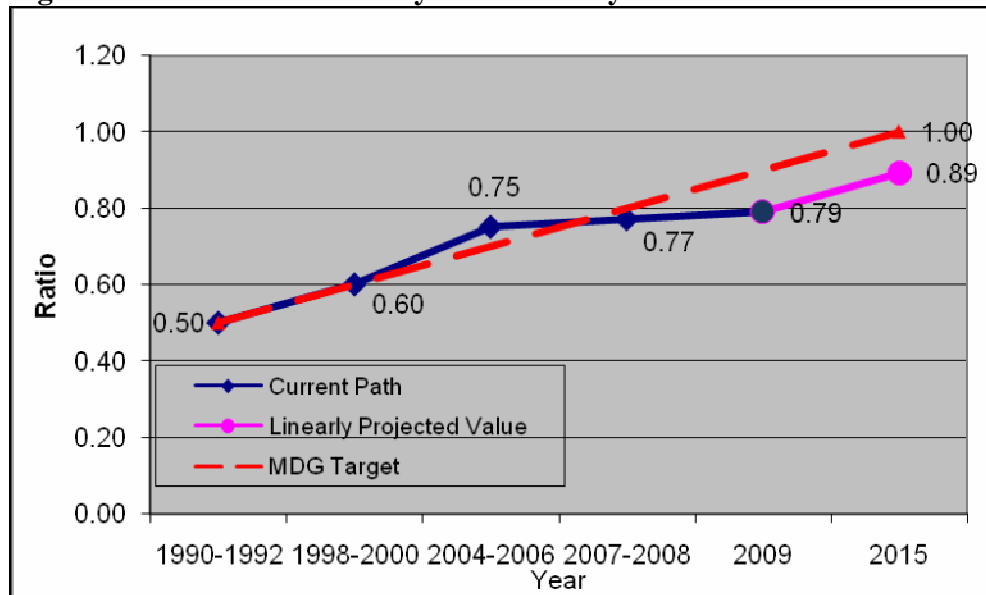
Source: MDHS 1992, 2000, 2004, EMIS 2006, 2007, 2008, 2009

Figure 9 shows that the ratio of girls to boys in primary school has increased from 0.91 in 2000 to 1.03 in 2009. This trend shows that the gender disparity gap at primary school level with respect to enrolment has narrowed considerably. The narrowing of the gender gap in primary school enrollment rate could be a result of government policy shift towards girl child education. With the abolition of school fees and school uniform as a

requirement to attend classes, many households can afford to send their girl children to school. Sanitation issues have been adequately addressed in most public primary schools and this has created a conducive environment for girls in the schools. The projected figure shows that Malawi is on track and has met the MDG target in 2009.

Indicator 2: Ratio of girls to boys in secondary education.

Figure 10: Ratio of Girls to Boys in Secondary Education



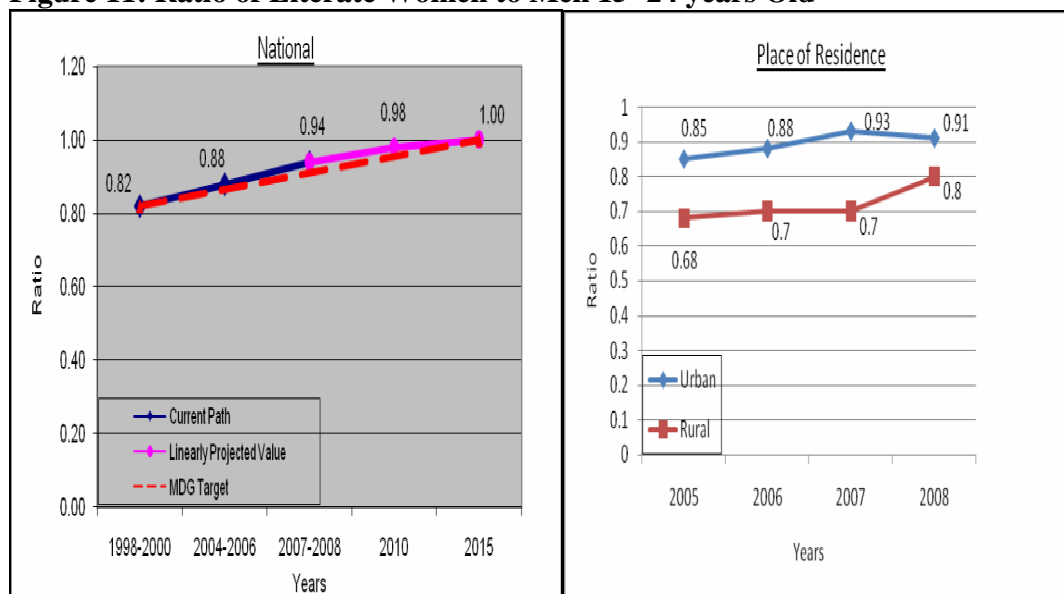
Source: MDHS 1992, 2000, 2004, EMIS 2008, 2009

The ratio of girls to boys in secondary schools has increased from 0.60 in 2000 to 0.79 in 2009 as shown in Figure 10. The projection shows that a ratio of 1:1 will not be attained by 2015. This trend seems to reveal that the education system loses a significant number of girls with progressive levels of education. The reason for this is that many girls drop out of school or repeat as they progress through the grades in primary education, thereby resulting in low girl intake at secondary school level and consequently at tertiary level.

Some of the factors that force girls out of school could be: early marriages and pregnancies, family and cultural responsibilities. Girls are more likely expected to assume the roles of providing care and support for relatives that are aged or sick than boys. This implies that the elimination of gender disparities remains a challenge at secondary level. This might also be the case at tertiary level. Hence the need to come up with strategies to ensure that the targeted interventions have an impact at all levels of education.

Indicator 3: Ratio of Literate Women to Men 15-24 year olds

Figure 11: Ratio of Literate Women to Men 15- 24 years Old



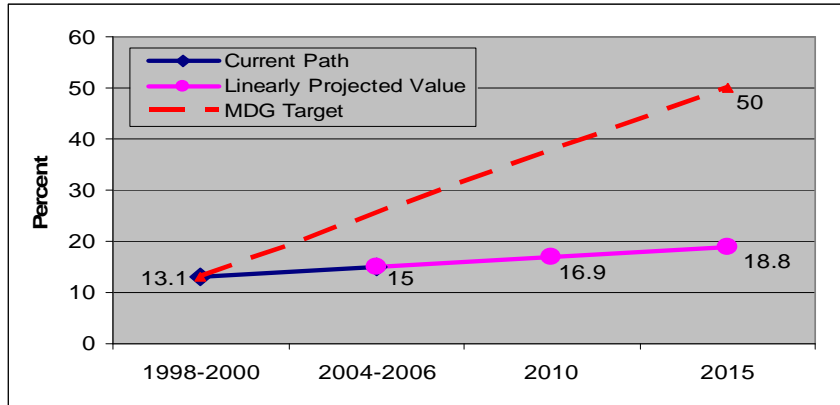
Source: MDHS1992, 2000 and 2004 and WMS 2005, 2006, 2007, 2008

Figure 11 shows that the ratio of literate females to males aged 15-24 years has increased from 0.82 in 2000 to 0.94 in 2008. Results also indicate a higher ratio of literate women to men in urban areas than rural areas. Even though there are more literate women to men in urban than rural areas, the ratio of literate women to men in rural areas has increased since 2005. This could be as a result of government's commitment to reduce illiteracy among the adult population with a special emphasis on women. Assuming the same rate of improvement continues, the ratio of literate females to males would reach equality in 2015.

Indicator 4: Share of Women in Wage Employment in the Non- Agriculture Sector

The indicator on share of women in wage employment in the non agriculture sector is a measure of employment opportunities. Given equal opportunities it is expected that there would be equal proportions of men and women in formal employment. However this is not the case. More women participate in the agriculture sector than in the formal wage employment especially in jobs that require professional qualifications. Some of the reasons for the lower participation in wage employment among women could be due to literacy levels, gender disparity and cultural values.

Figure 12: Share of Women in Wage Employment in Non- Agricultural Sector



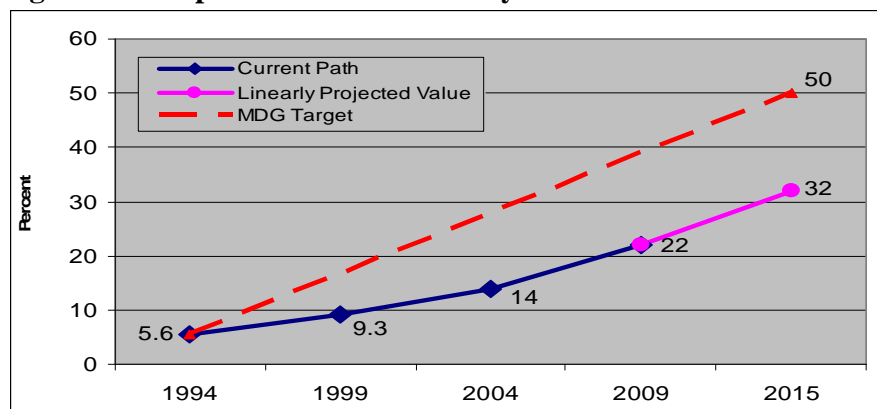
Source: IHS 1998 and 2005

Figure 12 shows that women’s share in wage employment has increased from 13 percent in 2000 to 15 percent in 2006. This trend suggests that women occupy a very small share of wage employment in the non-agricultural sector. Hence, the target of having an equal proportion of men and women in wage employment by the year 2015 is unlikely to be met.

Indicator 5: Proportion of seats held by women in National Parliaments

The proportion of seats held by women in national Parliament has improved significantly over time. During the 1999 presidential and parliamentary elections, out of 193 elected members of parliament, only 18 members of parliament were women. In the 2004 presidential and parliamentary elections, 27 women were elected out of 193 and in the 2009 presidential and parliamentary elections, 43 out of 193 elected members of parliament are women. However, in absolute terms the number of women parliamentarians is still low when compared to men parliamentarians.

Figure 13: Proportion of Seats Held by Women in Parliament



Source: Malawi National Assembly (2009)

Figure 13 above shows that there has been an increase in the proportion of seats held by women in the national assembly. However, the number of male parliamentarians is still higher than women. Assuming the same rate of improvement continues, the share of women in parliament is projected to reach about 32 percent by 2015. This implies that a target of 50 percent share of women in the national assembly may not be achieved.

Challenges

These are some of the challenges faced in promoting gender equality and women empowerment:

- limited capacity in terms of human and material resources to facilitate adult literacy and continuing education;
- early marriages perpetuated by socioeconomic factors;
- socio-cultural factors that make people believe that men should be leaders while women are followers; and,
- poor learning environment which affects girls in primary and secondary schools e.g. sanitary facilities, long distances to education facilities, extra burden from domestic chores especially for adolescent girls resulting into high dropout rate.

Policy Framework and Strategies

While recognizing important efforts that are being made in the area of gender equality and empowerment, there is still need to ensure that gender concerns are streamlined in all government policies and strategies. Government has therefore put in place a number of strategies in an effort to eliminate gender disparities. Some of the strategies include:

- construction and expansion of girls boarding facilities in secondary schools and teacher training institutions;

- revision of the re-admission policy in 2006, which makes it friendly for students who withdraw on pregnancy grounds to go back and continue with their education;
- encourage girls to pursue education in fields that have traditionally been dominated by men;
- introducing equitable selection policy at secondary schools and higher education institutions for girls and boys to share 50 percent of places;
- increase budgetary allocation to national adult literacy programme to improve its quality and scope; similarly strategies will be designed to attract male participation in adult literacy classes;
- introduction of 50: 50 programme that focuses on increasing women participation in politics at all levels; and,
- taking affirmative action to increase number of women in decision making positions in the public and private sectors.

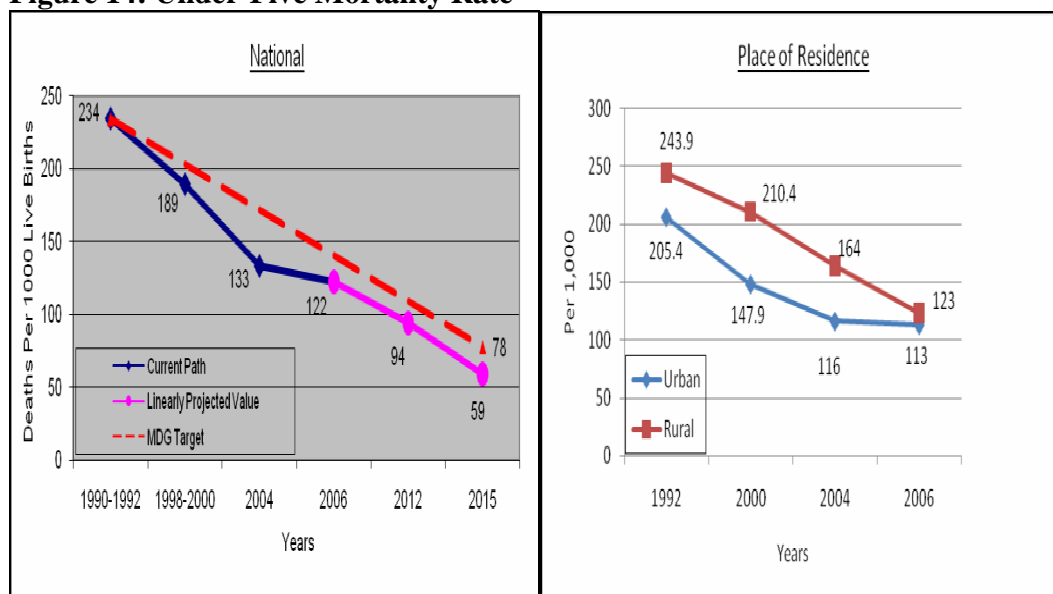
Goal 4: Reduce Child Mortality

Government is committed to reducing child mortality. As a manifestation of such commitment, government has over the years intensified investment in essential health care services. Special focus has been put on human resources development and retention; procurement of essential basic equipment, drugs and other medical supplies; and providing infrastructure. There has also been improved collaboration between Ministry of Health, development partners and non-state actors through the implementation of the Health SWAp Programme of Work, 2004 – 2010.

Target 5: Reduce by Two Thirds the Mortality Rate among Children Under-five

Indicator 1: Under-five mortality rate

Figure 14: Under-Five Mortality Rate

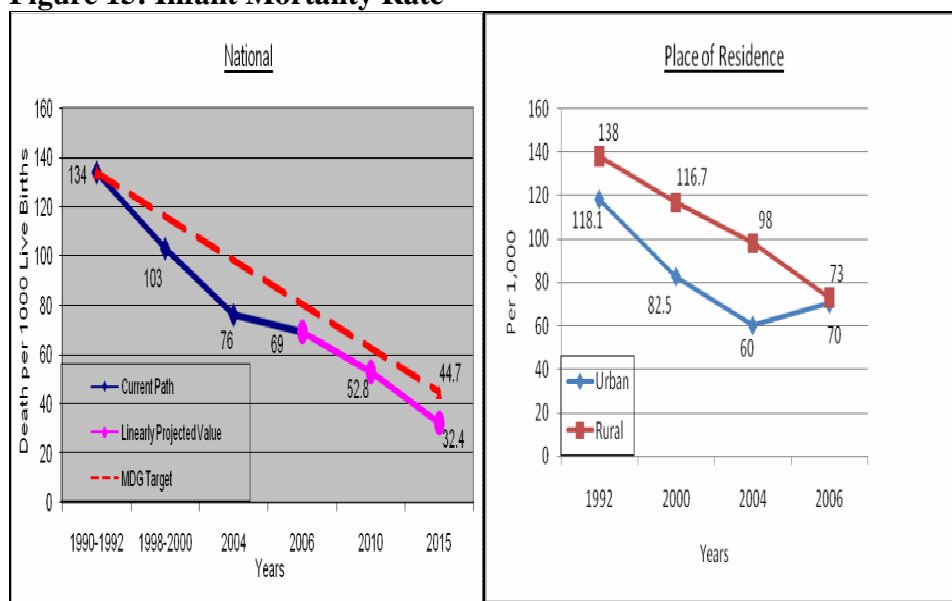


Source: MDHS 1992, 2000, 2004 and MICS 2006

Significant progress has been made in the provision of child health services. Figure 14 shows that under-five mortality has been declining steadily from 234 deaths per 1,000 live births in 1990 to 122 per 1,000 live births in 2006. Under-five mortality has been decreasing since in both urban and rural areas since 1992. If this trend continues, it is expected that by 2015, there will be 59 deaths of under-five children out of 1000 live births. This implies that the country is likely to reduce under-five mortality by more than two-thirds of the 1992 level.

Indicator 2: Infant mortality rate (IMR)

Figure 15: Infant Mortality Rate

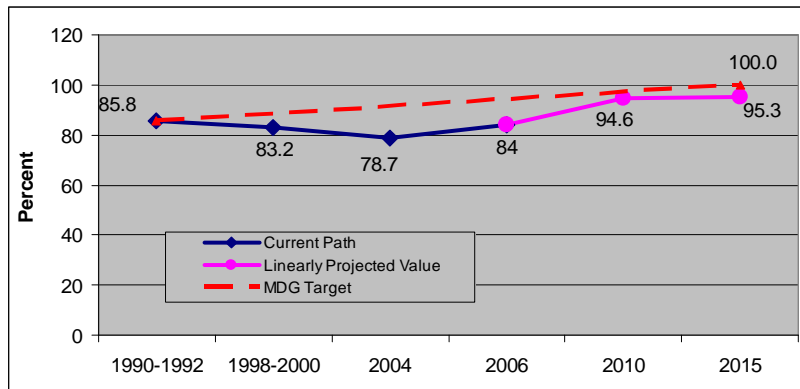


Source: MDHS 1992, 2000, 2004 and MICS 2006

Figure 15 shows that the country has made remarkable progress in reducing the infant mortality. Infant mortality rate has been steadily declining from a high level of 134 deaths per 1,000 live births in 1992 to 69 per 1,000 live births in 2006. Similar trends are observed in rural and urban areas except for years between 2004 and 2006 where urban infant mortality rate has increased from 60 deaths per 1000 live births to 70 deaths per 1000 live births. This decline could be attributed to various interventions that the Government is implementing among them extended Programme of immunization deworming and distribution of insecticides treated mosquito nets are undertaken. It is projected that by 2015, IMR will reduce to 32 deaths per 1,000 live births hence surpassing the MDG target of 44 deaths per 1000 live births.

Indicator 3: Proportion of 1-year old children immunized against measles.

Figure 16: Proportion of 1 Year Old Children Immunized against Measles



Source: MDHS 1992, 2000, 2004 and MICS 2006

Figure 16 shows that the proportion of 1 year old children immunized against measles decreased from 83 percent to about 79 percent between 2000 to 2004. However, the rate improved in 2006 to 84 percent largely due to the implementation of an integrated management of child illness approach. The projection shows that Malawi may attain the target by 2015, if the current efforts are maintained.

Challenges

Malawi still faces challenges in its efforts to reduce child mortality. Some of these challenges include;

- resource constraints to successfully provide the high impact essential health interventions;
- weak inter-sectoral collaboration has also constrained the health sector from dealing with other determinants of poor child health, such as water, sanitation and malnutrition;
- increased morbidity and mortality as a result of the HIV and AIDS pandemic also poses a challenge to the accelerated reduction of child mortality; and
- capacity constraints in training institutions due to lack of adequate teaching space, hostels and shortage of tutors thereby derailing the fight against high infant mortality.

Policy Framework and Strategies:

There are a number of initiatives that are being implemented in the health sector which include:

- integrated Management of Child Illnesses (IMCI) Approach and implementation of the Essential Health Package (EHP);
- introduction of Sector Wide Approach (SWAp) which has focused on both the implementation of interventions as well as development and strengthening of related health systems;
- continuous and accelerated training of health workers such as Health Surveillance Assistants (HSA);

- implementation of baby friendly initiative and child health days campaigns where de-worming, vitamin A vaccination, distribution of insecticides treated mosquito nets and promotion of improved sanitation are undertaken;
- implementation of targeted nutrition support through community based therapeutic care, positive deviants (P- HATH) initiatives and supplementary feeding at all levels.

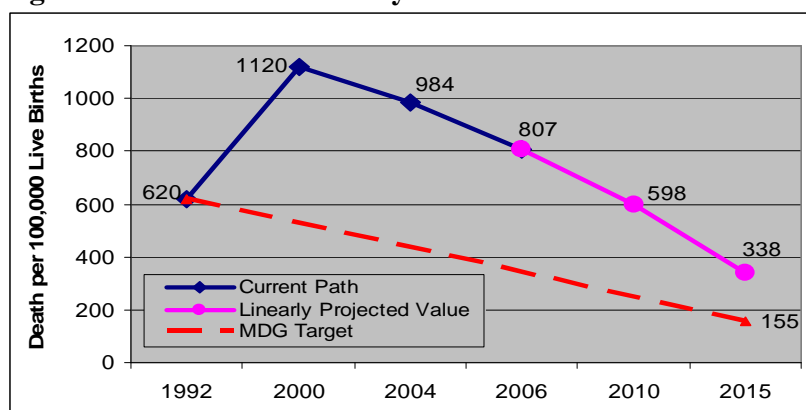
Goal 5: Improve Maternal Health

Malawi is among the countries with the highest maternal mortality rates in the world. The country, like many developing countries, experience complications of pregnancy and childbirth as a leading cause of deaths and disability among women of reproductive age. Hence there is need for more improvement on antenatal care; basic emergency obstetric care; and postnatal care, in order to achieve the targets with respect to maternal health. Progress under this goal is measured by two indicators, namely, proportion of births attended by skilled health personnel and maternal mortality ratio. The maternal health indicators for Malawi have generally remained poor over the last decade. Although maternal health performed poorly, there has been a general reduction in the maternal deaths over the past few years.

Target 6: Reduce by Three Quarters the Maternal Mortality Ratio

Indicator 1: Maternal Mortality Ratio

Figure 17: Maternal Mortality Ratio

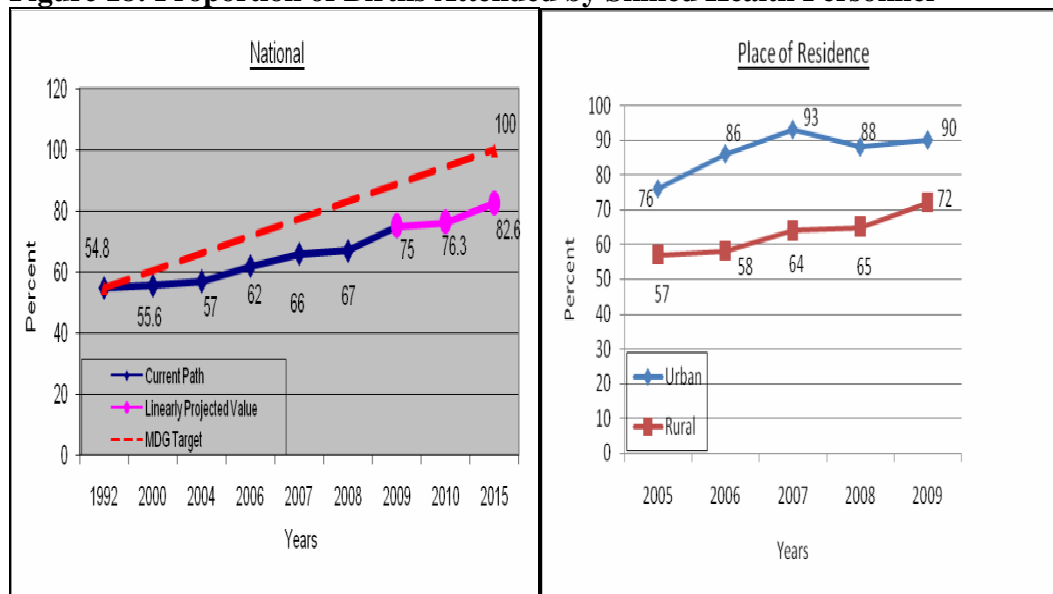


Source: MDHS 1992, 2000, 2004, MICS 2006

As shown in Figure 17 above, maternal mortality rate increased alarmingly to 1,120 deaths per 100,000 live births in 2000 from a rate of 620 deaths per 100,000 live births in 1992. However, the maternal mortality ratio has decreased from 1,120 deaths per 100,000 live births in 2000 to 807 deaths per 100,000 live births in 2006. Despite this improvement, Malawi is unlikely to achieve the desired target as the projections show that by 2015, MMR will be 338 deaths per 100,000 live births which is way above the MDG target.

Indicator 2: Proportion of Births Attended by Skilled Health Personnel

Figure 18: Proportion of Births Attended by Skilled Health Personnel



Source: MDHS 1992, 2000, 2004 and WMS 2006, 2007, 2008, 2009

Figure 18 shows that there is a steady increase in the proportion of births attended by skilled health personnel from about 56 percent in 2000 to 75 percent in 2009. The figure also shows that there is a significant difference with respect to the proportion of births that are attended by skilled health personnel between rural and urban areas. From the figure, it can be seen that on average about 86 percent of women in urban areas are attended to by skilled health personnel when giving births compared an average 63 percent for rural women. It should be noted however, that the proportion of births that are attended by skilled health personnel in rural area has increased from the year 2008 to 2009. This increase could be as a result of government's policy of changing the role of Traditional Birth Attendants (TBAs) from delivering children to promoting institutional deliveries at community level. In addition, the introduction of service level agreement between public and private sectors may have significantly improved access to health care through elimination of user fees. At this rate, delivery by skilled attendants is expected to increase to about 82 percent by 2015 which falls below the MDG target.

Challenges

There are a number of challenges the health sector is currently facing which include;

- critical insufficiency of skilled human resources;
- poor access to essential health care services;

- retention of skilled health personnel;
- inadequate and poorly equipped health facilities with stock-out and pilferage of basic essential drugs;
- prevalence of diseases such as HIV and AIDS, TB, and Malaria; and
- cultural practices which encourage early marriages and discourage use of modern contraceptives and delivery with the assistance of a skilled health worker.

Policy Framework and Strategies

The formulation of the MGDS brought new impetus to the efforts towards improving maternal health. It offers an appropriate policy framework at national level which outlines a multifaceted and integrated approach to health delivery system.

At the sectoral level, the introduction of Health SWAp was aimed at assisting the efficiency of health care and delivery system. Government has also developed the Road Map for accelerating the reduction of maternal and neonatal mortality and morbidity. The strategy aims at:

- increasing the availability and accessibility of antenatal services;
- utilization of skilled health personnel during pregnancy, childbirth and postnatal period at all levels of the health system;
- strengthening the capacity of individuals and institutions to improve maternal and neonatal health;
- increasing the number of skilled health personnel;
- constructing and upgrading health facilities to offer essential health services particularly focusing on rural and underserved areas; and
- provision of ARVs and micronutrients during pregnancy.

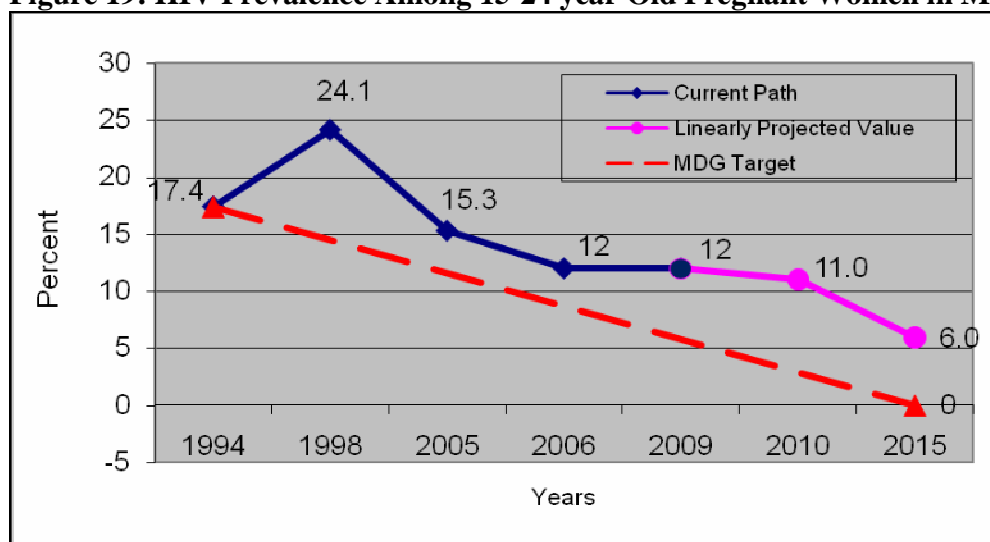
Goal 6: Combat HIV and AIDS, Malaria and other diseases

Malawi has been severely affected by the spread of HIV and AIDS pandemic despite coordinated national response among others. The impact of HIV and AIDS continues to be devastating. Its impact is being manifested through aggravation of incidence of other diseases such as malaria, Tuberculosis (TB) and other opportunistic infections due to compromised immunity for those infected. The high disease burden causes a big challenge in attaining a healthy nation and seriously impedes development efforts. The high prevalence of these diseases has grossly affected the human capital development, wellbeing and health service delivery system.

Target 7: Halt and begin to Reverse the Spread of HIV and AIDS

Indicator 1: HIV prevalence among 15 to 24 year old pregnant women

Figure 19: HIV Prevalence Among 15-24 year Old Pregnant Women in Malawi.

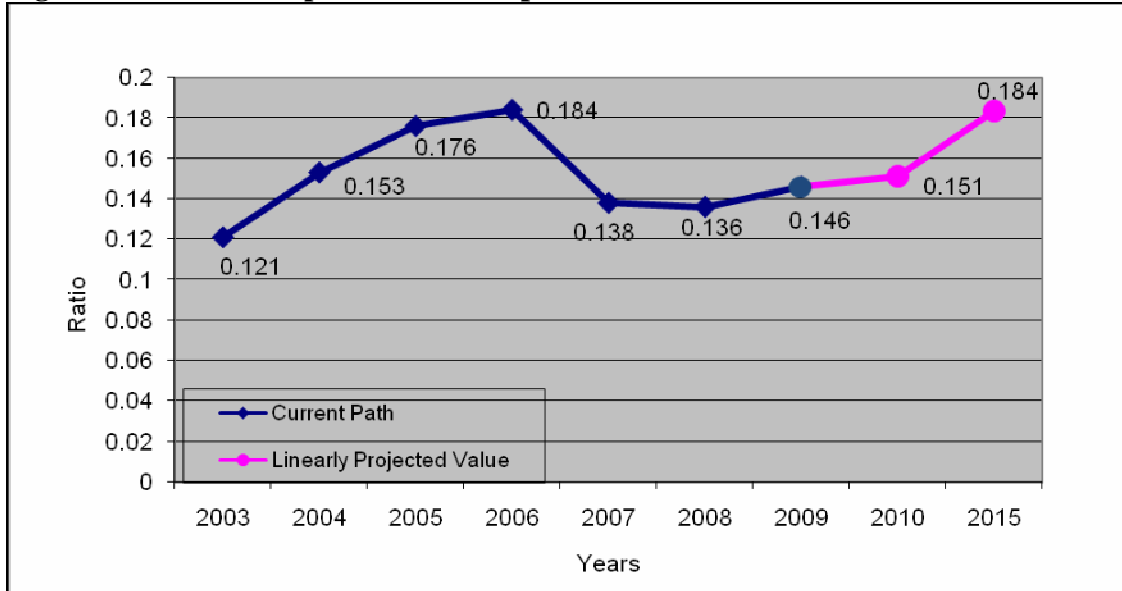


Source: NAC Sentinel Report, 2007 and UNGASS Report 2009

The national HIV prevalence rate among pregnant women aged 15 to 24 years has been declining from 24.1 percent in 1998 to 12 percent in 2009. The decline is attributed to the success of the increased awareness programmes on HIV prevention and behavioral change such as abstinence and practicing safe sex. It is projected that by 2015, HIV prevalence rate is likely to be at 6 percent. Although the projected rate of 6 percent shows that MDG target of 0 percent may not be achieved by 2015, nevertheless the country will have made good progress towards reducing the HIV prevalence.

Indicator 2: Ratio of School Attendance of Orphans to School Attendance of Non-orphans aged 10-14²

Figure 20: Ratio of Orphans to Non-orphans in Schools



Source: Ministry of Education Annual school census

Figure 20 shows that the ratio of orphans to non-orphans attending school had increased from 0.12 in 2003 to 0.18 in 2006 and dropped to about 0.14 in 2007. There has been a slight increase in the ratio of orphans to non orphans attending school from about 0.14 in 2007 to about 0.15 in 2009. The projection shows that the ratio may increase to about 0.18 in 2015. Hence, there is need for government intervention to ensure that more orphans of school going age are being enrolled in schools.

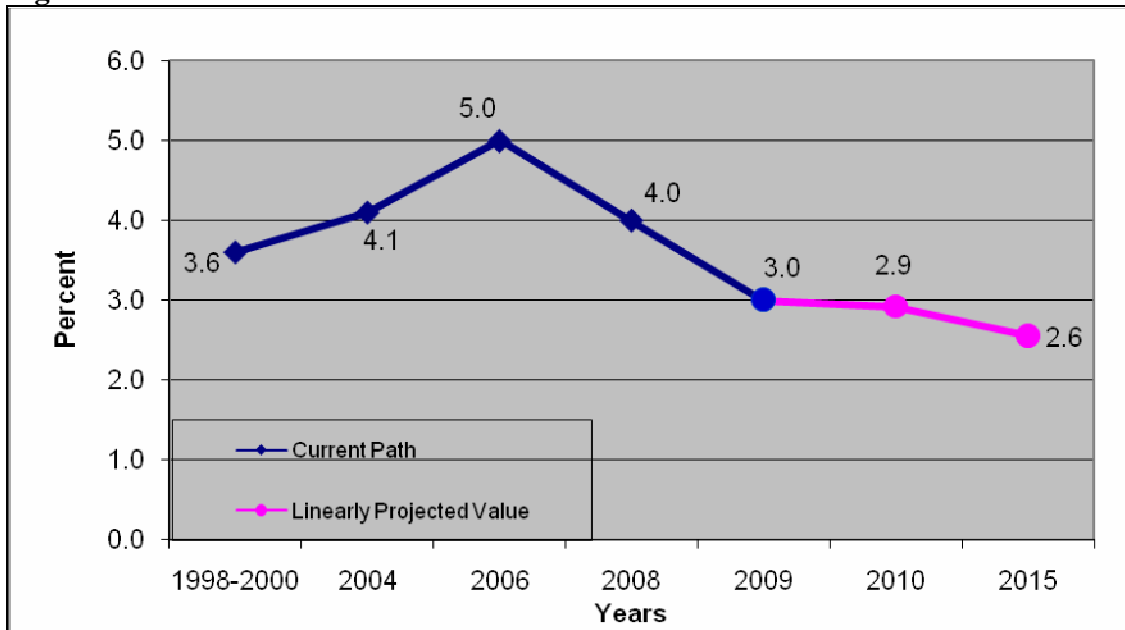
Target 8: Halt and begin to Reverse the Incidence of Malaria and other Major Diseases.

Malaria remains the most common cause of illness and death among under five children and pregnant women in Malawi. Malaria alone accounts for 40 percent of Out Patient Department (OPD) consultations in most health facilities in the country.

² Ratio used is on total number of orphans to non orphans of school going age at primary school level.

Indicator 1: Death Rates associated with Malaria

Figure 21: Death Rates Associated with Malaria



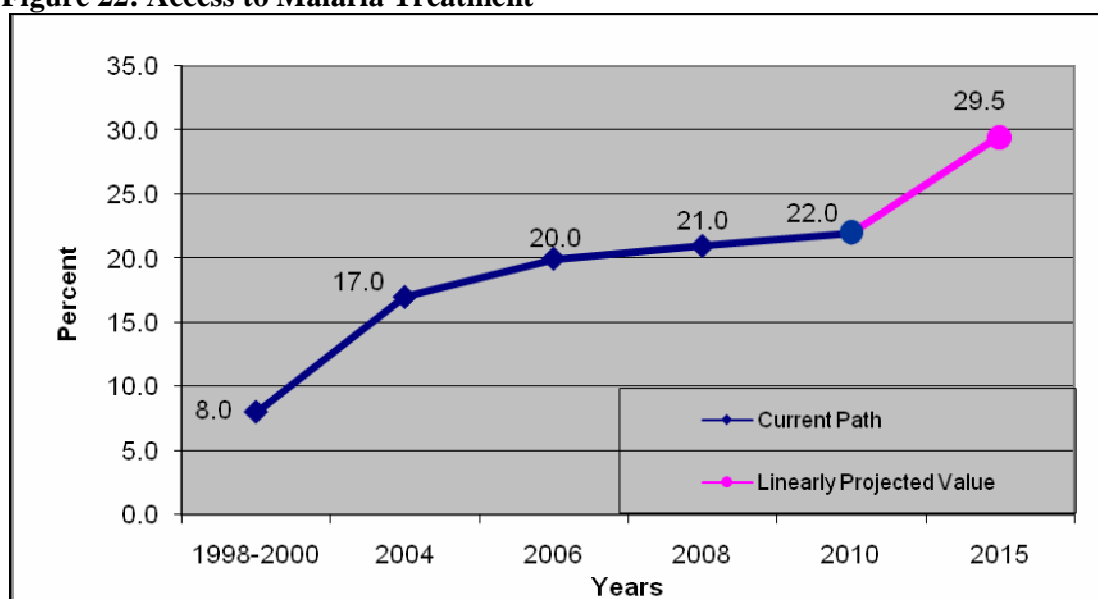
Source: Malaria Control Programme

Figure 21 shows that deaths associated with malaria increased from 3.6 percent in 2000 to 5 percent in 2006. This rise was attributed to development of high resistant strains to Fansidar SP which was a recommended drug for malaria. Nevertheless, the malaria related deaths has decreased to about 3 percent in 2009. This drop has been as a result of the introduction of a new anti malaria drug known as *Artemether Lumefantrine* (LA) and also increased distribution and use of ITNs.

Indicator 2: Access to Malaria Treatment

Government is committed to control malaria through a number programmes such as the Roll Back Malaria (RBM) initiative. The objective of the initiative is to ensure that those at risk of malaria, particularly pregnant women and under five children have access to the most suitable and affordable combination of personal and community preventive measures such as insecticide-treated mosquito nets (ITNs) and prompt effective treatment for malaria within 24 hours of onset of illness.

Figure 22: Access to Malaria Treatment

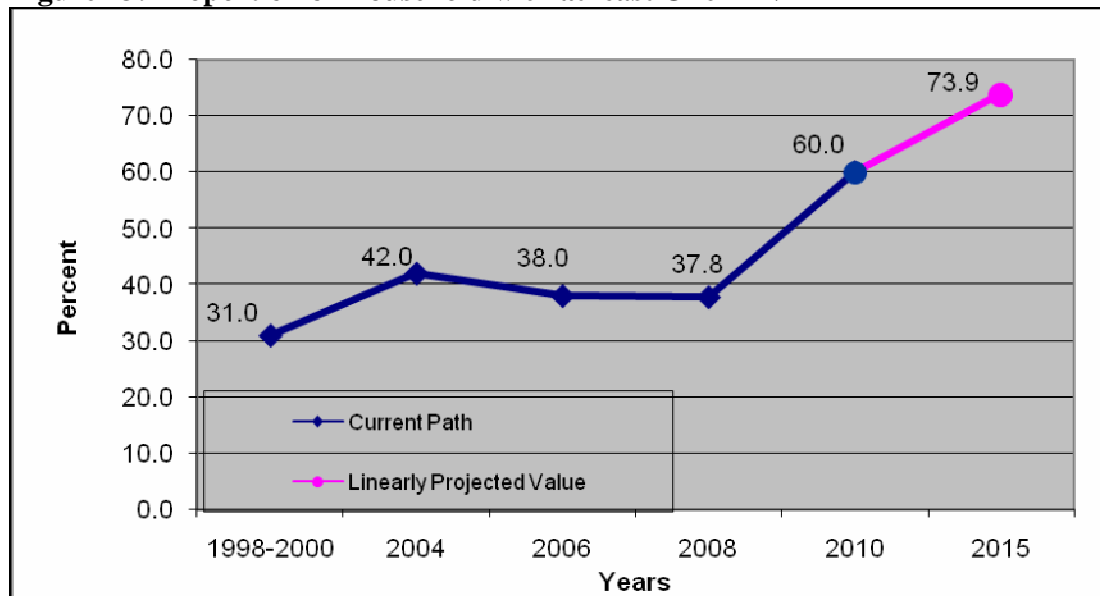


Source: Malaria Control Programme

Figure 22 shows that proportion of population with access to malaria treatment has increased from 17 percent in 2004 to 22 percent in 2010. This increase is attributed to intensive sensitization campaigns on the dangers of malaria. The projection shows that, if this trend is sustained, the proportion of the population accessing malaria treatment is expected to rise to about 30 percent by 2015.

Indicator 3: Proportion of Households with at least One ITN

Figure 23: Proportion of Household with at least One ITN



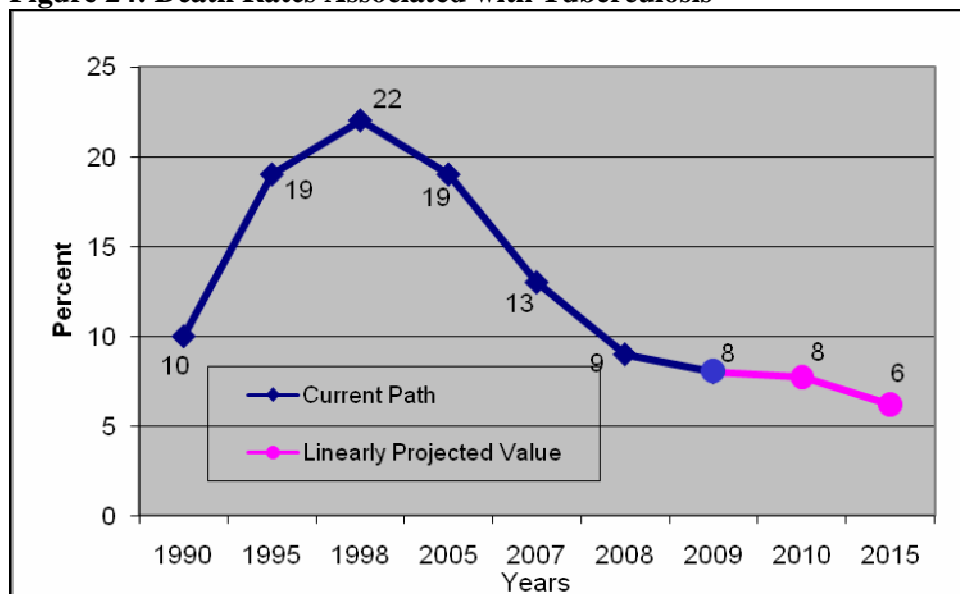
Source: Malaria Control Programme

The use of Insecticides Treated Nets (ITNs) has been adopted in Malawi as one of the key strategies to control malaria especially among under-five children and expectant women. Figure 23 shows that households with at least one ITN decreased from 42 percent in 2004 to about 38 percent in 2008. However, between 2008 and 2010 the proportion of households with at least one ITN has risen significantly from about 38 percent to 60 percent. This increase emanated from cumulative number of ITNs distributed throughout the country and campaigns on the use of ITNs. It is projected that by 2015, the proportion of households with at least one ITN will rise to about 74 percent.

Indicator 4: Death Rates Associated with Tuberculosis

Tuberculosis is the biggest single cause of adult illnesses and death from a communicable diseases in Malawi. Its greatest impact is on the poor, with crowding and poor nutrition favouring transmission and development of active disease from latent infection. This situation has been worsened with the advent of HIV infection. This accelerates the progression from infection with the bacterium to TB disease thereby resulting in an increase in the number of TB cases. Unless HIV infection in the community is reduced, TB cases will remain high.

Figure 24: Death Rates Associated with Tuberculosis

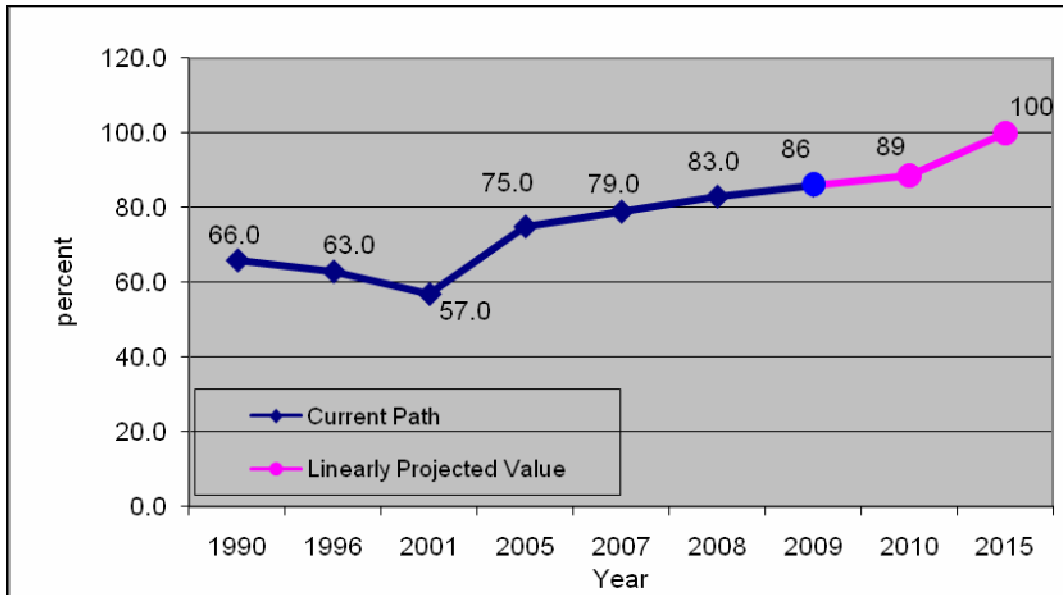


Source: National TB Control Programme

Death rates associated with TB cases has been declined from 19 percent in 2005 to 8 percent in 2009 as shown in Figure 24 above. Previously, co-infection with HIV and AIDS led to the sharp increase in TB cases between 1990 and 1998 as can be observed from the figure. This drop is attributed to the success of the direct observed treatment short-course (DOTS). The projection shows that Malawi will likely reduce TB related deaths to 6 percent by 2015.

Indicator 5: Proportion of Tuberculosis cases cured under Directly Observed Treatment Short-course (DOTS)

Figure 25: Proportion of TB Cases Cured Under DOTS



Source: National TB Control Programme

Proportion of TB cases cured under DOTS has increased from 57 percent in 2001 to almost 100 percent in 2009 as indicated in the Figure 25 above. This is mainly attributed to clear policy on TB control, improved case detection, standardized TB treatment, adequate effective drugs, and universal access to treatment even in the most remote areas. If this trend continues, the country will be in a position to maintain its cure rate of TB cases by 2015.

Challenges

There are several challenges that are being faced in attaining this goal. These include:

- increased demand for care due to high HIV and AIDS prevalence;
- negative socio-cultural attitudes towards abstinence and safe sex, including condom use;
- inadequate knowledge and skills on the relationship between nutrition and HIV and AIDS;
- shortages and pilferage of essential commodities e.g. ITNs, drugs and supplies;
- poor water sanitation and floods leading to water logging thereby increasing malaria incidences; and,
- negative impact of hunger and poverty on TB cure rate.

Policy Framework and Strategies

The country plans to implement a number of strategies in an effort to address the above challenges which include the following:

- improving peoples' access to comprehensive and correct knowledge on HIV prevention and transmission; HIV counseling and testing; and behavioral change;

- promotion of adequate nutrition, equitable and sustainable access to ARVs and nutrition supplements;
- introduction of subsidies on mosquito nets to the poor;
- distribution and use of ITNs to high risk groups, particularly the poor;
- involvement of stakeholders in the provision of universal access to TB diagnosis, monitoring and evaluation of TB trends; and,
- strengthening collaboration between the national TB control programme and HIV and AIDS programme to ensure better screening of TB and HIV.

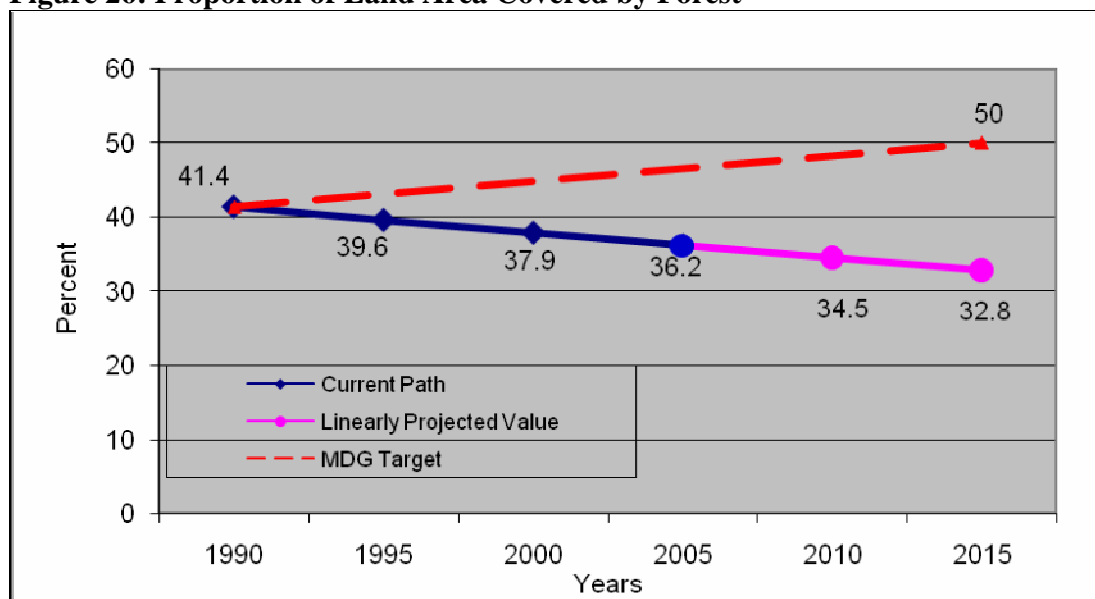
Goal 7: Ensure Environmental Sustainability

Target 9: Integrate the Principles of Sustainable Development into Country Policies and Programmes; Reverse Loss of Environmental Resources

Indicator 1: Proportion of land area covered by forest

Malawi is well endowed with environmental resources. However, degradation of these natural resources has been on the increase. It is being estimated that between 1990 and 2005 the country lost around 494,000 hectares of forest. Environmental degradation is caused by poverty, increasing population growth, inadequate alternative livelihoods and affordable energy technologies.

Figure 26: Proportion of Land Area Covered by Forest

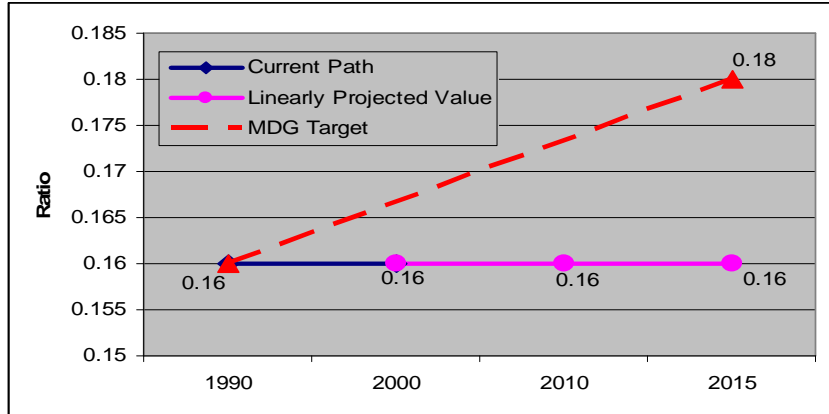


Source: FAO Global Forest Resources Assessment, 1990, 2000 and 2005

Figure 26 shows that between 1990 and 2005, proportion of land area covered by forest has declined from about 41 percent to about 36 percent. Projection shows that if this rate of deforestation continues, the proportion of land area covered by forest will drop to about 33 percent by 2015. Government is however committed to reverse this trend by intensifying reforestation, afforestation, promotion of natural regeneration, forest protection and management programmes.

Indicator 2: Proportion of area protected to maintain biological diversity to surface area

Figure 27: Ratio of Area Protected to Maintain Biological Diversity to Surface Area



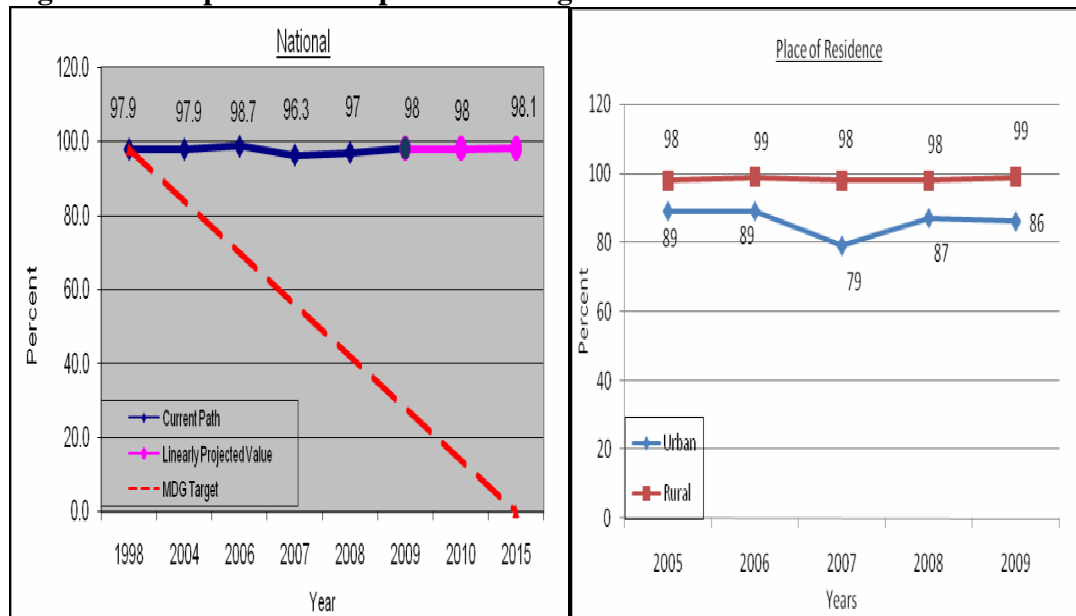
Source: UNEP (online databank)

The ratio of surface area protected to maintain biological diversity has been constant since 1990 as shown in the Figure 27. The projection shows that the proportion of protected area will continue to remain constant up to 2015, which implies that the country is on the right track on attaining this MDG target.

Indicator 3: Proportion of population using solid fuels

In Malawi just like most developing countries, energy sub sector has not fully reached its potential owing to a number of structural, operational and institutional challenges. Even in cases where energy in the form of hydro or solar electricity is made available, high cost of electricity is a deterrent to most households especially in rural areas.

Figure 28: Proportion of Population Using Solid Fuels



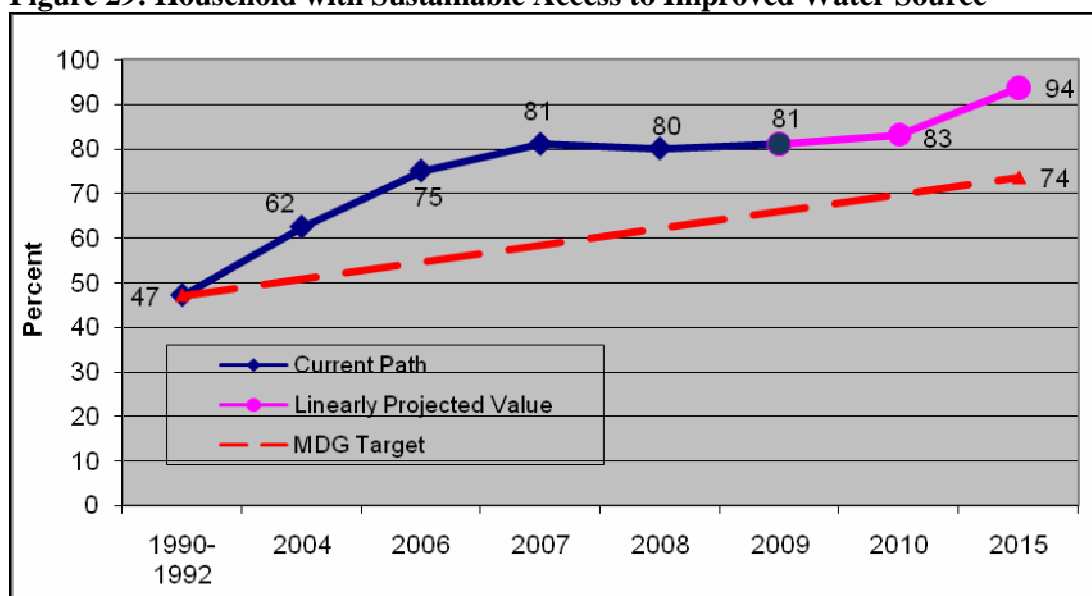
Source: PHC 1998, MDHS 2004, WMS 2005, 2006, 2007, 2008, 2009

The proportion of the population using solid fuel has almost remained constant from 1998 to 2009. Data from survey has shown that on average 99.5 percent of the rural population and 85.3 percent of the urban population are using solid fuel. The reasons for this could be lack of alternative sources of energy in rural areas and intermittent power failure and high electricity tariffs in urban areas. The MDG projection shows that it is unlikely to meet this target by 2015.

Target 10: Reduce by half the Proportion of People without Sustainable Access to Safe Drinking Water

Indicator 1: Proportion of population with sustainable access to an improved Water Source

Figure 29: Household with Sustainable Access to Improved Water Source



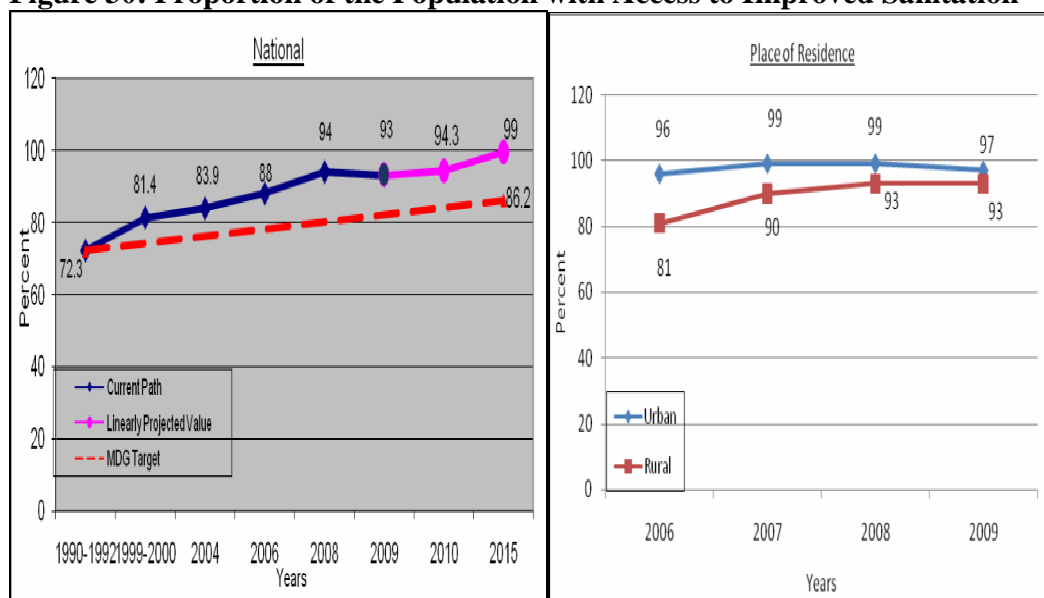
Source: MDHS 1992, 2000, 2004, MICS 2006 and WMS 2007, 2008 and 2009

Figure 29 shows that between the period 1990 and 2009, access to safe water had significantly improved from about 47 percent to 81 percent. At this rate of change, the projection shows that by 2015, about 94 percent of population is likely to have sustainable access to improved water source. This implies that Malawi will have exceeded the MDG target of about 74 percent.

Indicator 2: Proportion of population with access to improved sanitation

Malawi, relative to many other Sub Saharan countries has a high level of access to some form of basic excreta disposal facilities, despite the disparities in latrine coverage within the country especially in rural areas. It is estimated that latrine coverage ranges from 40 percent in some rural villages to as high as 95 percent in areas where some sanitation projects have been active in promoting sanitation and hygiene in an integrated manner. However, there is need that the standard of latrines should be improved.

Figure 30: Proportion of the Population with Access to Improved Sanitation



Source: MDHS 1992, 2000, 2004, MICS 2006 and WMS 2007, 2008 and 2009

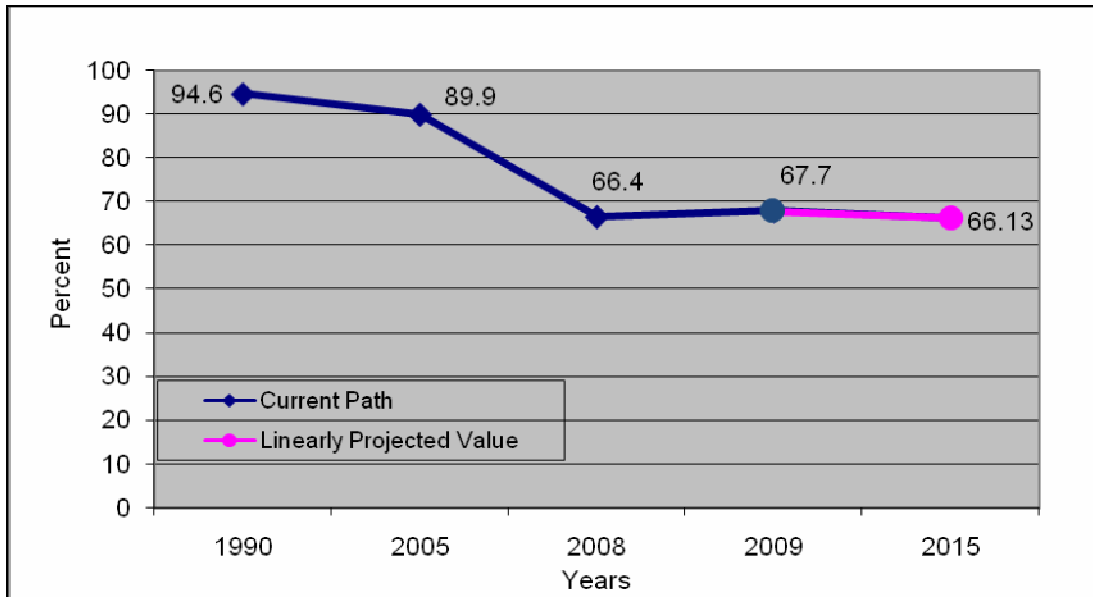
Figure 30 shows that access to basic sanitation has increased from 72 percent in 1990 to 93 percent in 2009. Data from surveys show there has been an increase in access to basic sanitation in rural areas from 81 percent in 2006 to 93 percent in 2009. On the other hand, over 95 percent of the urban population has access to basic sanitation. By 2015, it has been projected that access to basic sanitation is likely to increase to about 99 percent, which is above the MDG target.

Target 11: Achieve significant improvement in the lives of at least 100 million slum dwellers

Indicator 1: Slum population as a percentage of urban population

A slum household is a family in an urban area that lack one or more of the following five amenities: durable housing, sufficient living area, access to improved water, access to sanitation and secure land tenure. More than 50 per cent of the urban population live as slum households.

Figure 31: Percentage of Slum Houses



Source: UN-HABITAT State of the World Cities Report 2008/2009

Figure 31 above shows that slum population percentage has declined from nearly 90 percent in 2005 to about 68 percent in 2009. This decrease could be a result of the low cost housing initiative that has enabled a number of people to afford modest accommodation. At this rate of change, the proportion of slum population is expected to reduce to 64.57 percent by 2015. Despite the decrease in the percentage of slum households, their population has increased from 1.0 million in 1990 to about 2.6 million in 2009.

Challenges

While some progress has been made with respect to sustainability of the environment, there are a number of challenges that the sector is facing. Some of which include:

- increased deforestation due to increased demand for arable land and failure to enforce measures to curb problems of deforestation;
- lack of community participation in environment and natural resources management;
- poor quality of surface and ground water; and
- inequitable promotion of improved sanitation facilities.

Policy Framework and Strategies

Several initiatives have been put in place in order to address the above challenges, and these include:

- revision of environmental and natural resources legislation with the aim of halting the rate of environmental degradation;

- promotion of community participation in environmental and natural resources management;
- implementation of a tree planting season to address deforestation;
- development of a National Adaptation Programs of Action to climate change which seeks to support vulnerable communities with coping strategies to the diverse effects of climate;
- improvement of access to safe water and sanitation by strengthening and building capacity for common water resources management, monitoring systems, rehabilitation and construction of small community earth dams;
- review of the National Housing Policy to help upgrade slums and reduce slum formation in the cities;
- prioritization of climate change, natural resources and environmental management as one of the nine key priority areas in the MGDS; and
- prioritisation of climate change, natural resources and environmental management as one of the nine key priority areas in the MGDS.

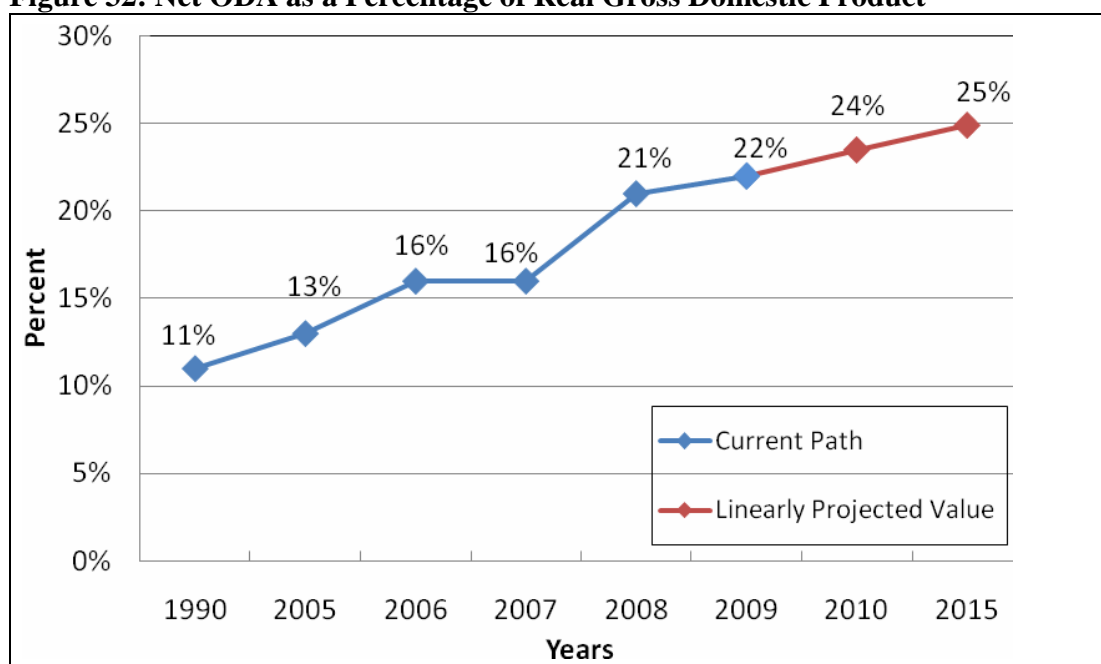
Goal 8: Develop Global Partnership for Development

Target 18: In Cooperation with the Private Sector, make available the benefits of New Technologies, especially Information and Communications.

Malawi has implemented a number of core policies and structural reforms including; Trade and Exchange Rate Liberalization, Public Service Reforms, Investment Promotion, Tax Reforms, Financial Sector Reforms, Legal Sector and Local Governance Reforms, the National Anti-corruption Strategy, and others. These have improved confidence on the economy, and one consequence is the improvement in the flow of Official Development Assistance (ODA) and Foreign Direct Investments (FDI). This ODA is being used to finance about 80 percent of the development budget and about 20 percent of the recurrent budget.

Indicator 1: Net ODA as a percentage of real Gross Domestic Product

Figure 32: Net ODA as a Percentage of Real Gross Domestic Product



Source: Ministry of Finance

Figure 32 shows that net ODA as a percentage of GDP has increased from 13% in 2005 to 22% in 2009. This continued growth in donor financing is a sign of the increased confidence which the Government has been able to establish surrounding its economic and aid management. In 2009, donor grants financed approximately 80 percent of the development budget and 40 percent of the overall budget.

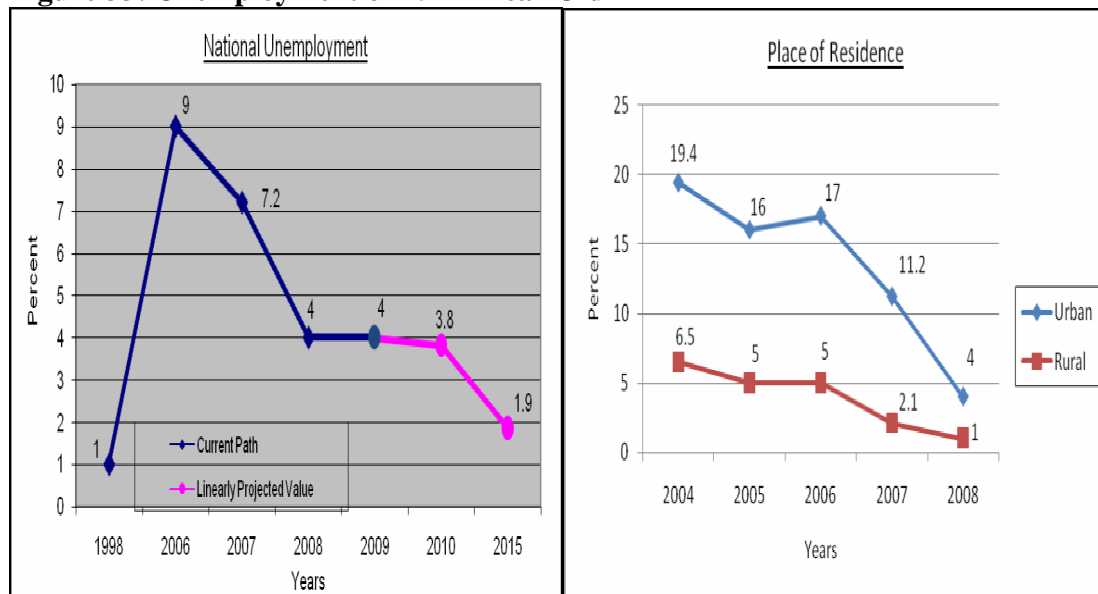
As Malawi continues to develop economically and the Government is able to draw on a larger and more robust domestic revenue base, the need for grants will decline - particularly as the Government looks towards public-private partnerships to finance development activities. As such, whilst short term increases in donor grants may continue over the coming few years, the Government aims to slowly reduce its dependency on aid.

The major challenge for government in the post HIPC period is to ensure that new external borrowing is sufficiently concessional in order to avoid a return to unsustainable debts. In addition, sustained robust economic growth is crucial to improving Malawi's external debt sustainability prospects. Long term debt sustainability can be attained if the international community goes beyond provision of debt relief and address critical issues of trade access. On its part, government will address local constraints to debt management by building debt management capacity, contracting loans on highly concessional terms, sustained policy reforms and insulating the economy from periodic shocks.

Indicator 2: Unemployment of 15 – 24 year olds

The youth constitute a larger percentage of the total population in Malawi. Malawi recognizes youth unemployment as the most serious employment challenge facing the Nation. Among all the age categories of the labour force, the youth have the highest rate of unemployment.

Figure 33: Unemployment of 15-24 Year Old



Source: PHC 1998, IHS2 2004 and WMS 2006 2007 2008

The unemployment rate for the Nation as a whole has been decreasing from 9 percent in 2006 to 4 percent in 2009 as shown in Figure 33. This decrease has been as a result of promotion of agriculture production through cheap farm inputs and rehabilitation of irrigation schemes, which has enabled youths engage in farming activities almost

throughout the year. In addition, government introduced various projects such as Malawi Rural Development Fund (MARDEF), Public Works Programme among others which have provided employment opportunities to the youths especially in rural areas. In both rural and urban there has been a decrease in unemployment rate since 2004. The projection shows that by 2015, the unemployment rate is likely to decrease to about 2 percent.

Policy framework and strategies

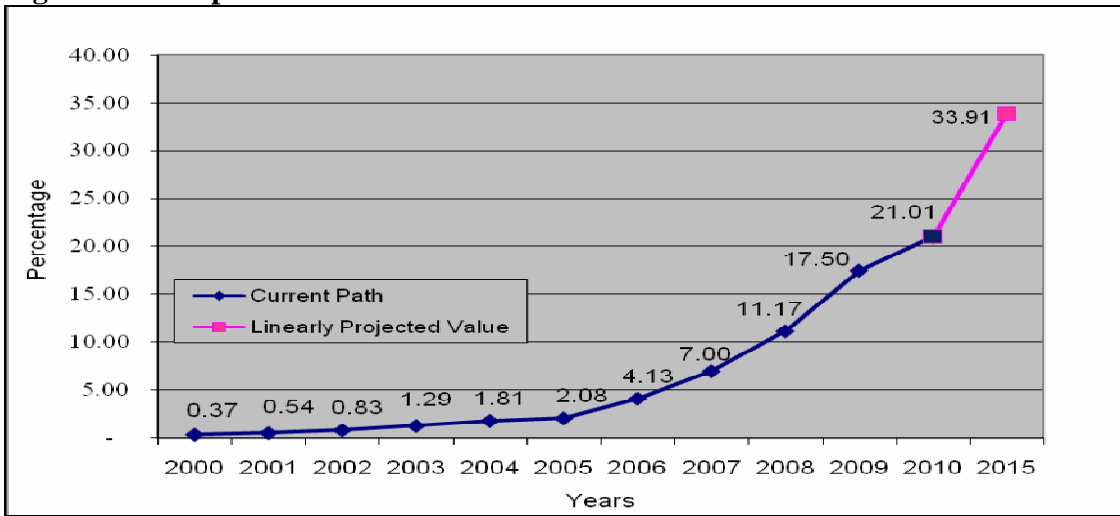
Government is addressing problems of unemployment through a number of programmes some of which include the following:

- establishment of rural growth centres to reduce rural-urban migration;
- establishment and rehabilitation of abandoned irrigation schemes to encourage rural people to engage in agriculture production throughout the year;
- maintaining a stable macroeconomic framework with low inflation, low interest rates and stable exchange rates;
- establishment of loan schemes such as the Malawi Rural Development Fund which provides capital to local small scale business people;
- implementation of One Village One Product Programme which is promoting value adding processes thereby creating employment; and;
- implementation of Public Works Programme.

Indicator 3: Telephone Lines and Cellular Subscribers per 100 Population

Telecommunication plays a vital role in economic development and poverty reduction. The government's policy regarding telecommunication is to ensure universal access to connectivity and affordable information and communications technology. The country in collaboration with the private sector has in recent years made good progress with respect to provision of telecommunication services such as mobile phones, landlines and internet.

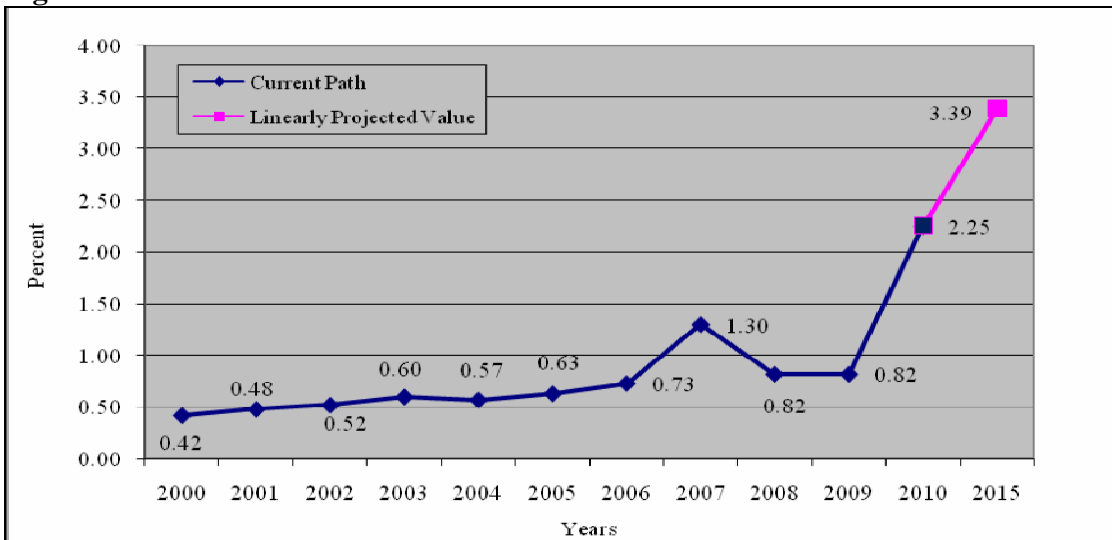
Figure 34: Cell phone Subscribers



Source: MACRA and NSO

Figure 34 shows that cell phone subscribers have been increased drastically from 2007 to 2010. The Figure shows that the percentage of cell phone subscribers has increased from 7 percent in 2007 to 21 percent in 2010. This rapid increase is attributed to availability of cheap cell phone handsets and increased demand for faster communication. The projection shows that by 2015, the number of cell phone subscribers will increase to about 34 percent.

Figure 35: Landline Subscribers



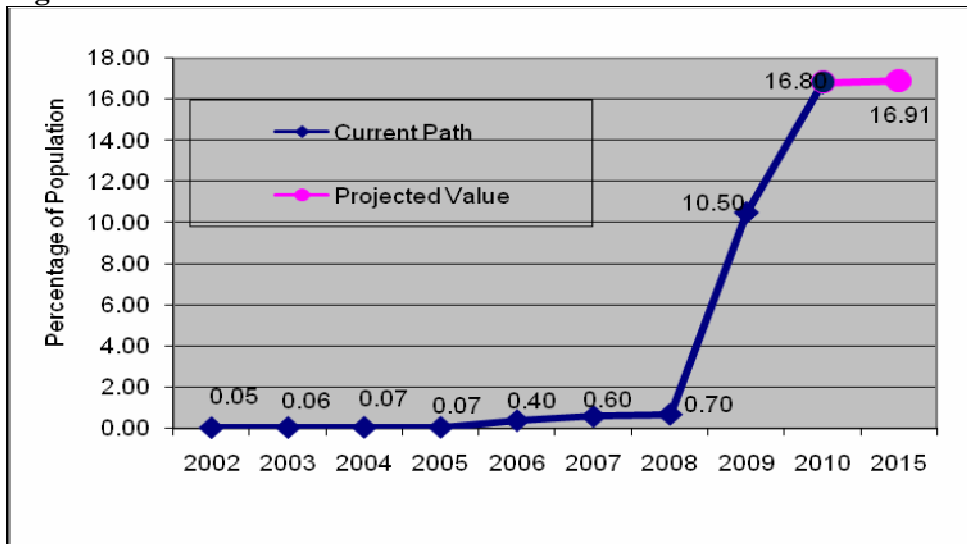
Source: MACRA and NSO

Figure 35 above shows that there was a drop in the percentage of subscribers for fixed landlines between 2007 and 2009 from 1.3 percent to 0.82 percent. This decrease is a result of vandalism of telecommunication equipment and a higher preference for cellular

phones. However, the percentage of land line subscribers has increased to about 2.3 percent in 2010 from 0.82 percent in 2009. It is projected that the number of landline subscribers is expected to increase to about 3.4 percent by 2015.

Indicator 4: Personal computers in use and internet users per 1000 population

Figure 36: Internet Subscribers



Source: MACRA

Figure 36 above shows that there has been an increase in the number of internet subscribers from about 0.07 percent in 2005 to about 16.8 percent in 2010. This should be attributed to an increase in the number of internet service providers and opening of village internet centres. This growth reflects a positive telecommunication development.

Challenges

There are several challenges that the country is facing with respect to developing global partnership, some of which include the following:

- vandalism of telecommunication equipment;
- inadequate distribution of ICT services and infrastructure;
- high cost of ICT equipment and services;
- poor internet and IT support infrastructure;
- underdeveloped regulatory framework in the telecommunication sector; and,
- lack of competition.

Policy framework and strategies

The MGDS recognizes that the creation of a conducive environment to attract investment in ICT will enhance economic growth and poverty reduction through economic and social

development and accelerate the process of attaining the MDGs. As such, several strategies have been put in place to achieve this end. These include;

- development of a reliable, fast, adaptive and robust national IT infrastructure;
- enhancing the capacity of the regulatory body, Malawi Communications Regulatory Authority (MACRA), to act as a competent referee in order to level the playing field;
- developing a monitoring and periodically receiving regulations which will play a vital role in ensuring that the standard of better telecommunication services are achieved.
- improving IT and internet access by all communities;
- enacting an appropriate legislation that promotes and facilitate the country's participation in the information age; and,
- developing connectivity to the Indian ocean marine cable link.

Conclusion

This report assesses progress Malawi has made towards achieving the Millennium Development Goals. The assessment shows that Malawi will be able to meet the MDG targets on reducing child mortality, eradicating extreme poverty, combating HIV and AIDS, malaria and other diseases, ensuring environmental sustainability and developing a global partnership for development. The MDG targets that may not be met are: achieving universal primary education, promoting gender equality and empowering women and improving maternal health. Failure to achieve these targets is not due to lack of or failure of effort, but that the country started off with a very low baseline compared to other UN countries.

Malawi is committed to achieving all the millennium development goals. This commitment is shown through localisation of the MDGs in the Malawi Growth and Development Strategy (2006 to 2011). Government realises that the achievement of these goals will depend on the availability of adequate resources. As such, it has put in place several measures to increase domestic financial resources from both tax and non-tax revenues to ensure that adequate resources are channelled towards MDG related interventions. Government has also put in place proper policies and strategies to ensure that by 2015 it attains most if not all the MDGs.

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