

AT A GLANCE

An estimated 3.5 million Malawian women will be of reproductive age in 2010.

28% of married women have an unmet need for contraception.

43% of all pregnancies are unintended.

Only 10% of the total demand for FP is met by use of the most effective methods.

36% of FP users discontinue using a method within 12 months.

Addressing unmet need for FP can avert nearly 11,000 maternal deaths and more than 210,000 child deaths by the MDG target date of 2015.

MEETING NATIONAL GOALS AND PEOPLE'S NEEDS WITH LA/PMs

CURRENT TRENDS WILL NOT MEET NATIONAL GOALS

For the Government of Malawi to fulfill its population's unmet need for family planning (FP) services in support of the fifth Millennium Development Goal (MDG), it would need to reach a contraceptive prevalence rate (CPR) of 62% by 2015. Achieving this goal is fundamental to slowing the nation's population growth, meeting national development goals, and helping its citizens achieve their reproductive health (RH) intentions.

However, Malawi faces a daunting FP challenge. While the use of modern FP methods more than tripled between 1992 and 2000, over the past decade the momentum has slowed. The unmet need for FP is currently 28% among married women. Meanwhile, the population continues to grow. By 2015, there will be an estimated 723,000 more women of reproductive age in Malawi than there are today. To meet the government's contraceptive goal, 1.8 million women would need to be served.

If the most recent trend were to continue, Malawi would be expected to reach a CPR of 38% by 2015, which is 61% of what it would take to fulfill the fifth MDG. (See Figure 1, below.)

LA/PMs—A SMART PROGRAMMATIC INVESTMENT

Experience in Sub-Saharan Africa confirms that without widespread availability and use of long-acting and permanent contraceptive methods (LA/PMs),* a country cannot cost-effectively meet its fertility, health, and development goals.

The Government of Malawi's national FP program offers LA/PMs in support of its CPR goal. While the use of such highly effective methods increased threefold during the 1990s, these methods' contribution to the method mix has declined slightly. Fewer than 20% of FP users currently rely on LA/PMs.

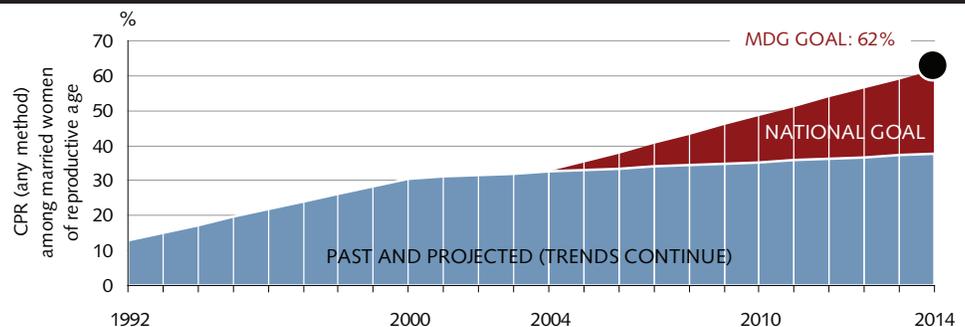
HELP PEOPLE ACHIEVE THEIR REPRODUCTIVE INTENTIONS

If the existing unmet need for FP in Malawi could be fulfilled, the demographic

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* LA/PMs are long-acting methods (IUDs and implants) and permanent methods (male and female sterilization).

FIGURE 1: MEETING MALAWI'S NATIONAL GOALS



Sources: 1992, 2000, and 2004 Demographic and Health Surveys, and Reality √ projections for intervening and future years

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impact would be substantial. LA/PMs have an important role to play and offer multiple benefits to programs, women, and couples.

LA/PMs are vital to address the dissonance between women's expressed reproductive intentions and their method use. The gap between intention and practice could be closed by increasing awareness of LA/PMs, correcting misinformation about them, and increasing their availability to expand method choice.

Though IUDs and implants are the most effective methods for women who want to space their births, these long-acting methods constitute a very small share of the method mix for both spacers and limiters in Malawi. (See Figure 2, below.) Unlike many of its African counterparts, Malawi shows a significant level of sterilization use. Almost one-quarter of the total demand for limiting is met by sterilization. This indicates potential for more robust programming focused on LA/PMs. Greater access to correct information and services, particularly for long-acting methods, would enable people to meet their changing needs as they progress through their reproductive lives.

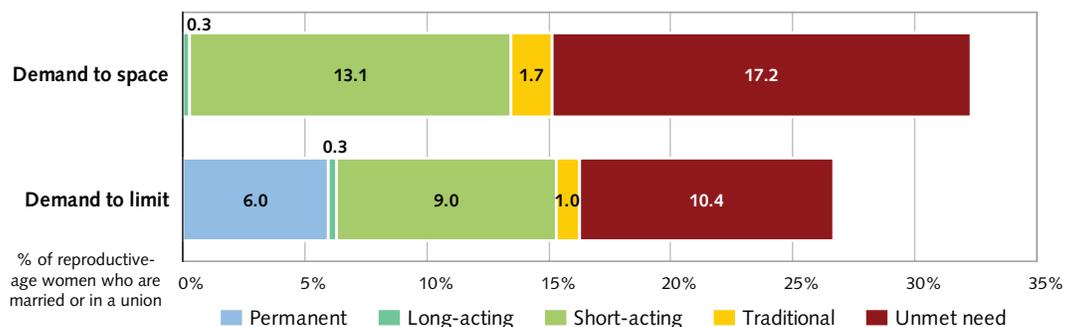
RESPOND TO MALAWI'S NEEDS

The RESPOND Project can help the Ministry of Health and the USAID Mis-

sion's implementing partners to achieve their FP and reproductive health (RH) goals by taking a holistic programmatic approach that addresses the essential components of supply, demand, and advocacy. Possible interventions include:

- *Reality √*, a cutting-edge forecasting and planning tool that generates data for realistic, evidence-based service, training, and commodity projections
- State-of-the-art technical assistance to strengthen service delivery support systems (training, supervision, and contraceptive security) and communications campaigns to address LA/PMs
- Strategies to revitalize specific methods, such as sterilization, the IUD, and implants, including the introduction of Sino-implant (II) (the lower-cost generic version of the contraceptive implant Jadelle), for which registration is currently under review in Malawi
- Proven programmatic models to improve and scale up access to FP/RH services by integrating LA/PMs into other services (community postabortion care, FP/HIV/maternal and child health services, private practitioner networks, and mobile outreach for the underserved urban and rural poor)

FIGURE 2: MALAWI'S DEMAND FOR CONTRACEPTION (MET AND UNMET NEED)



Source: 2004 Demographic and Health Survey