

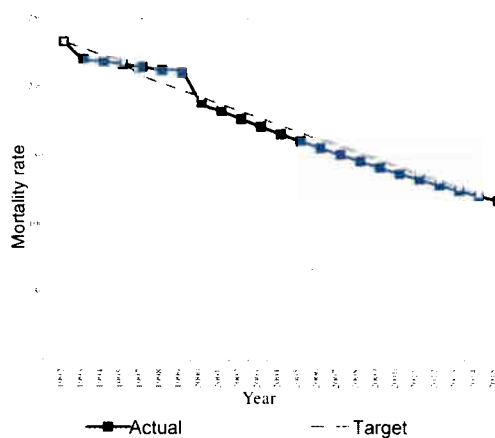
# REDUCE CHILD MORTALITY

**Target: Reduce, by two-thirds, between 1990 and 2015, the under-five mortality rate**

## 1. The Status of Under-Five Mortality

Progress towards reducing the under-five mortality rate, in Malawi is on target, reflecting the success of Government interventions in the sector, supported by its development partners. According to the 1992 Malawi Demographic Health Survey (MDHS), under-five mortality rate was 234 deaths in every 1,000 live births. Figure 6 shows that there is a strong correlation between actual and targeted reduction of under-five mortality rate.

Figure 6: Under-five mortality rate



## 2. Challenge

Challenges in this area are water- and food-borne diseases, the high incidence of malaria among children and pregnant mothers, resulting in anemia and low birth weight of the children.

The main human resource challenges are encountered at community and district levels. There is need to increase knowledge and skills of key players in the management of breast feeding, food preparation and feeding of young children. It is also necessary to raise the awareness of key players, including traditional leaders, on the care for pregnant and lactating mothers, use of sanitation facilities, family and personal hygiene and general health practices in the household. This requires recruitment and training of trainers of trainers and front line health workers, including health surveillance assistants, at district and community levels, respectively. Likewise, there is need for proper staffing of health centres and district hospitals. It is acknowledged that the planned Essential Health Package (EHP) has already included the human resource requirements.

## 3. Policy Framework and Strategies

The current National Health Plan attempts to address most of the epidemiological and health system problems that cause infant and child morbidity and mortality. For example, an Integrated Management of Childhood Illnesses (IMCI) approach was adopted to deal with the major illnesses among infants and children, namely malaria, diarrhea, respiratory infections and nutrition deficiencies. In addition, a national Malaria Policy was also approved, which included action to respond to this number one killer among the under-five age group. Efforts to reduce infant and child mortality should be linked to HIV/AIDS prevention strategies such as voluntary counseling and testing (VCT) and prevention of mother to child transmission (PMTCT) of HIV. These measures reduce the risk of HIV infection of children.

Another programme of integrated essential services the Government has developed is dubbed, Essential Health Package (EHP), which targets major conditions such as HIV/AIDS. It incorporates preventive, educational and clinical services delivered through the community, health centres and district hospitals. The MPRSP also proposes concentrating resource on the EHP as part of its objectives to increase the pro-poor budget.

#### 4. Assessment of Progress

Significant progress has been made with respect to this target. Under-five mortality rate has fallen from 234/1000 live births in 1992 to 189/1000 in 2000. If this trend is maintained, then there is a high probability of reaching the target of reducing the under-five mortality rate by two-thirds, in 2015.