

WE COULD SAVE  
**AN ESTIMATED**  
**4200**  
**MOTHERS EVERY YEAR**

Source: WHO, UNICEF, UNFPA, World Bank Group & UNDP 2015

 **A WOMAN IN MALAWI HAS A**  
**1 IN 29**  
**LIFETIME RISK OF DYING**  
**FROM A MATERNAL CAUSE**

Source: WHO, UNICEF, UNFPA, World Bank Group & UNDP 2015

**IN MALAWI**  
**38 NEWBORNS DIE EVERY DAY**  
**38 NEWBORNS COULD BE**  
**38 SAVED DAILY**

Source: Derived from UNICEF, WHO, The World Bank, & UNDP 2015

**MALAWI**  
**COLLECTS**  
**ONE THIRD**  
**OF THE BLOOD NEEDED**  
**66% OF BLOOD IS NEEDED**  
**FOR MOTHERS AND CHILDREN**

Source: E4A 2016; WHO 2010; PRB 2015; Kaombe 2016; M'baya 2009



## TERMS EXPLAINED

### MATERNAL MORTALITY

This is the death of a woman while pregnant or within 42 days of termination of pregnancy, from any cause related to or aggravated by the pregnancy or its management, but not from accidental or incidental causes. It can be measured in terms of maternal mortality ratio, which is the number of maternal deaths during a given time period per 100,000 live births (WHO, UNICEF, UNFPA, World Bank Group & UNDP 2015).

### NEONATAL MORTALITY

This is the death of a newborn baby who is born alive, but dies within the first 28 days of life. It can be measured in terms of neonatal mortality rate, which is the number of deaths per 1,000 live births (WHO 2006).

### SDGs

The UN Sustainable Development Goals (SDGs), officially known as Transforming our world: the 2030 Agenda for Sustainable Development, is a set of seventeen aspirational "Global Goals" that were adopted at the UN General Assembly in September 2015.

The SDGs build on the Millennium Development Goals and will shape the economic, social and environmental development agenda over the next 15 years. All countries and all stakeholders, acting in collaborative partnership, will implement this plan and pledge that no one will be left behind.

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# MATERNAL AND NEWBORN HEALTH FACTSHEET



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MALAWI

2017

## Neonatal Mortality Rate

per 1,000 live births (estimated)



Source: Malawi DHS 2015-16; MoH ENAP 2015a

## Government Health Spending

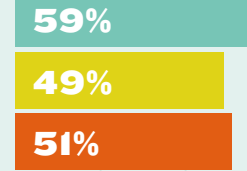


# US\$15

The amount spent on health per person by the Malawian Government. This is below the target of \$86 per capita. Health spending in Malawi is heavily reliant on donor funding.

Source: WHO GHED 2017, 2014 estimate; McIntry & Meheus 2014

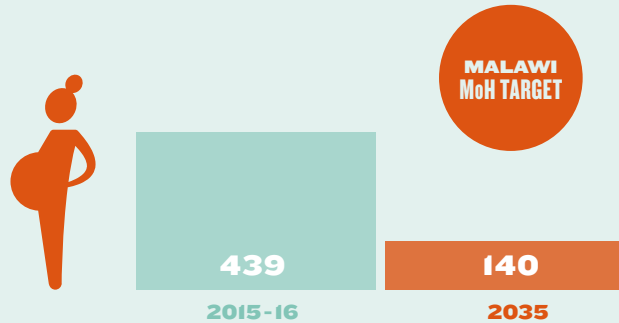
## % of women receiving at least 4 antenatal visits



Source: Malawi DHS 2015-16

## Maternal Mortality Ratio

per 100,000 live births (estimated)



Source: Malawi DHS 2015-16; Malawi MoH 2015b

## Unmet Need for Contraception

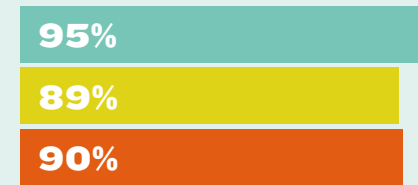


# 19%

of married women aged 15-49 have an unmet need for family planning.

Source: Malawi DHS 2015-2016

## % of births assisted by a skilled provider



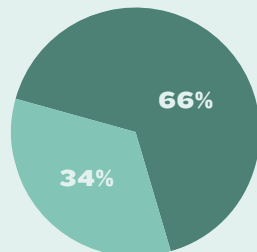
Source: Malawi DHS 2015-16

## Causes of Newborn Deaths

**1 OUT OF EVERY 3 NEWBORN DEATHS IN MALAWI IS DUE TO PRETERM BIRTH COMPLICATIONS.**



Of all children under 5 who die in Malawi 34% are newborns; 66% are other under 5 deaths.



Source: Liu et al. 2016

## Availability of Emergency Care



# ONLY 4%

of health centres assessed offered all recommended aspects of basic **Emergency Obstetric and Newborn Care (EmONC)**



# 52%

of hospitals assessed offered all recommended aspects of comprehensive **Emergency Obstetric and Newborn Care (EmONC)**

Malawi is not meeting the UN guideline on the minimum number of EmONC facilities. Malawi only has 41% of the recommended minimum amount.

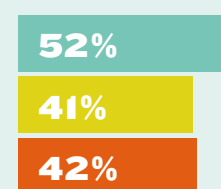
Source: Malawi MoH, USAID, UNFPA, UNICEF, CHAI & Save the Children 2014

## % of women delivering in a health facility



Source: Malawi DHS 2015-16

## % of mothers who received post-natal health check within two days after birth



Source: Malawi DHS 2015-16