



# Family Planning Association of Malawi (FPAM)

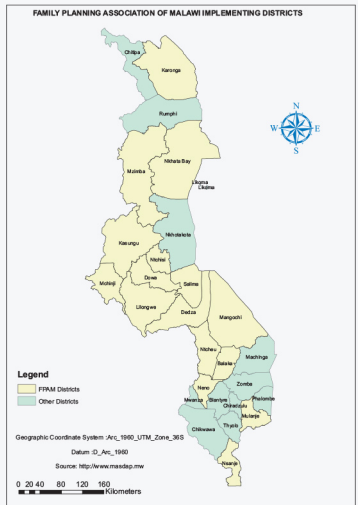


## Overview

FPAM was registered as a local non-governmental organization in Malawi in 1999 and is recognized as a leader in advancing SRHR quality of care and access for hard-to-reach and marginalized populations. FPAM manages 7 static clinics, 16 mobile outreach teams, 51 associated clinics, and >500 community-based distribution agents (CBDAs).

FPAM operates in 19 districts: Balaka, Dedza, Dowa, Karonga, Kasungu, Lilongwe, Machinga, Mangochi, Mchinji, Mulanje, Mzimba North and South, Neno, Nkhatabay, Nkhosvota, Nsanje, Ntcheu, Ntchisi, Salima and Thyolo.

FPAM's average annual budget over the past five years is 3M USD and includes support from the International Planned Parenthood Federation (IPPF) and UK-FCDO, KOICA, Global Fund for AIDS, TB & Malaria, AmplifyChange, Global Affairs Canada, and UNFPA. FPAM is an accredited IPPF member since 2007, which involves collaboration with IPPF to adhere to its 48 programmatic and financial management standards.



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## Structure, Mission, and Values

FPAM has **97 staff**, 34% of whom are **women**. FPAM's mission is to provide quality, accessible and affordable comprehensive SRHR information and services, with attention to underserved and marginalized populations. Our vision is a Malawian society with access to quality and comprehensive SRH information and services. Our core values are diversity, social inclusion, partnership, volunteerism, and accountability.



## Approach and Achievements

FPAM provides a comprehensive range of **SRH services** such as voluntary FP counseling and contraception, PAC, HIV/AIDS screening and treatment, responding to SGBV, cervical cancer screening, and STI screening and treatment. FPAM has recently initiated the provision of antenatal and postnatal services. These are provided using a network of static clinics that operate using a social business model, charging sliding-scale user fees.

Additionally, CBDAs and community RH promoters provide door-to-door FP counselling and commodities. Community-outreach services in particular target young people and the most vulnerable. Through the UK-FCDO WISH program, FPAM successfully introduced the Cluster Model that brings together public and private clinics with CBDAs, using poverty maps and client data to focus on those most in need. FPAM also provides clinical training in FP/PAC to public and private providers.

## 2020 performance

FP services to youth 10-24 years	298,442
FP services to those >25 years	201,784
HIV services (including ART)	150,240
SGBV services (prevention, psychosocial, medical support)	18,414
Cervical cancer screening services (with onsite thermocoagulation of minor lesions)	11,298
Policy makers, service providers, community health workers, and youth trained	1,226

FPAM is a member of technical groups for: FP; **Safe Motherhood**; **Youth Friendly Health Services (YFHS)**; **RH Commodity Security**; **Population and Development**; and **HIV Prevention**. FPAM contributed to FP Reference Manual for Malawi, PAC Guidelines, RH/HIV Mentees/Mentors Guidelines, SRHR/HIV/SGBV integrated guidelines, YFHS/SRHR strategies, and Emergency Contraceptive Strategy.

## Public and Private Sector Quality of Care

FPAM undertakes capacity building interventions for its staff and public and private health service providers in collaboration with MOH. FPAM has strengthened public and private partnership for strengthened quality of care systems, referral mechanisms, and data analysis and use, including for commodity management.

## Equity & Youth

FPAM focuses on social equity, using poverty mapping to target services and addressing equitable access, including for youth. To promote youth-responsive care, FPAM provides outreach for nulliparous youth, trains providers, and works with young people from its **"Youth Action Movement"**, CBOs, and youth clubs, engaging young people on cluster management committees and in client exit interviews.

