

JAN-DEC 2025 PERFORMANCE UPDATES

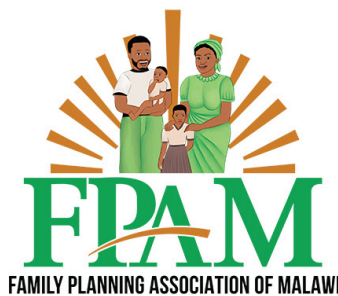


A MEMBER ASSOCIATION OF THE
INTERNATIONAL PLANNED PARENTHOOD FEDERATION

FPAM Strategic Pillars

FPAM strategic plan (2023-2028) is aligned to the IPPF Strategic Framework, Come Together (2023-2028) and the strategic pillars are aligned to the following

- **Strategic Pillar 1:** Centre care on people
- **Strategic Pillar 2:** Move the sexuality agenda
- **Strategic Pillar 3:** Solidarity for change
- **Strategic Pillar 4:** Nature our federation



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For healthcare solutions like:

- General medical Services
- Syphilis screening
- Hepatitis B screening



Dowa

Kasungu

Lilongwe

Ntcheu



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Family Planning Association of Malawi



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OUR MISSION

To provide quality, accessible and affordable, comprehensive Reproductive Health and Rights information and services to young people, women, men and the underserved.

OUR VISION

A Malawian society with access to quality and comprehensive sexual and reproductive health information and services.

WHO WE ARE

An indigenous, non-profit making and non-political Malawian local Non-Governmental Organization established in 1999 and registered under the Trustees Incorporation Act.

FPAM is affiliated to International Planned Parenthood Federation (IPPF) as a member association.

WHO WE ARE

- Diversity
- Social Inclusion
- Partnerships
- Volunteerism
- Accountability

MOTTO

Centre of excellence in the Provision of Sexual Reproductive Health Services



FAITH KAMTAMBE



**ANDREW BISHOP
MKANDAWIRE**

Editors, FPAM Annual
Projects Newsletter.

Welcome to the 2025 edition of the FPAM 2025 programme updates!

This issue highlights the incredible work FPAM has undertaken over the past year to expand access to sexual and reproductive health (SRH) services across Malawi, particularly in underserved and hard-to-reach communities.

As you read through this newsletter, we invite you to reflect on the progress made, the challenges overcome, and the path ahead. We remain committed to improving the lives of individuals and communities through innovative and inclusive healthcare solutions. Thank you for your continued support and engagement. Happy reading!

EDITORIAL TEAM

Donald Makwakwa
Tazirwa Chipeta
Faith Kamtambe
Andrew Bishop
Mkandawire

CONTRIBUTORS

Esther Moyo
Jimmy Kachale
Vincent Sinda
Yvonne Kajombo

DESIGN

Designed by Mosa
Ltd and Creatus Media



MESSAGE FROM EXECUTIVE DIRECTOR

This year, the Family Planning Association of Malawi (FPAM) has continued to make meaningful progress in expanding access to Sexual and Reproductive Health (SRH) services across the country, particularly for communities in hard-to-reach areas.

In 2025, FPAM implemented eight projects aimed at strengthening equitable access to quality SRH services. However, the year has also presented significant challenges. The Momentum One and Two projects were implemented only up to March 2025 following the USAID funding freeze, while the DISC Project was suspended in October 2025. These suspensions have adversely affected service delivery, staffing, and operations.

Despite these constraints, FPAM has remained committed to working with communities to bridge gaps in healthcare access and uphold the right to quality SRH services for all. We are deeply grateful to our partners and stakeholders, and especially to the Government of Malawi through the Ministry of Health and Sanitation, for their continued guidance and support.

As we move forward, FPAM remains resilient and optimistic, committed to innovative approaches and ensuring that no one is left behind despite ongoing funding challenges.

Donald Chikwakwa

Executive Director, Family
Planning Association of Malawi

PROJECTS OVERVIEW

PROJECT	DISTRICT OF IMPLEMENTATION	INCOME TYPE
HARM MITIGATION	Lilongwe, Kasungu	RESTRICTED
Consortium for the advancing of HIV prevention Biomedicals - Stream 2 IPPF	Mzuzu, Kasungu, Dowa, Lilongwe, Ntcheu	RESTRICTED
UNFPA - ACE	Mchinji and Dedza	RESTRICTED
DISC 2.0	Ntcheu and Neno	RESTRICTED
We belong Together	Mzimba North and Dowa	RESTRICTED
CORE GRANT	All FPAM districts	UNRESTRICTED
CHOICE	Balaka and Lilongwe	RESTRICTED
Momentum Tiyeni	Lilongwe, Dowa, Zomba, Machinga, Chikwawa, Mulanje and Mangochi	RESTRICTED
Momentum Tikweze Umoyo	Kasungu, Salima, Karonga, Nkhotakota, Chitipa	RESTRICTED

ABOUT FPAM

FPAM is an indigenous, non-profit making and non-political Malawian local NGO established in 1999 registered under the Trustees Incorporation Act in 2004.

FPAM is affiliated with the International Planned Parenthood Federation (IPPF) as a Member Association. It exists to provide comprehensive youth-friendly, sexual, and reproductive health services. FPAM targets young people in the rural underserved communities in the provision of integrated youth friendly Sexual Reproductive Health and Rights (SRHR) information and services using static and community-based approaches. Services provided by FPAM include provision of short and long-acting family planning methods (injectable, oral contraceptive pills, implants such as jaddelle and implanon, male and female condoms, pregnancy tests.

Sexually Transmitted Infections (STI) screening and treatment, voluntary counselling, testing and treatment of HIV, cervical cancer screening FPAM also provides general medical services in static clinics.

You can access our website on www.fpamalawi.org



Family Planning Association of Malawi

FUNDERS



USAID
FROM THE AMERICAN PEOPLE



Global Affairs
Canada
Affaires mondiales
Canada

FPAM HOLDS ITS 23RD ANNUAL DELEGATES CONFERENCE

On 19th December 2025, FPAM held its 23rd Annual Delegates Conference (ADC) at Crossroads Hotel in Lilongwe. As the organization's highest governance platform, the ADC brought together FPAM volunteers, Board members, staff, and other stakeholders to reflect on the organization's progress and strategic direction. The conference was held under the theme, Resilience and Innovation: Sustaining SRHR in the Face of Funding Challenges. The theme challenged delegates to consider innovative approaches to sustainability in response to major shifts in the global aid landscape, including the withdrawal of United States Government funding, which affected FPAM's operations following the termination of two USAID-funded projects, Momentum TIYENI and Momentum Tikweze Umoyo. As a result, FPAM scaled down some of its operations, raising concerns about the impact on communities that depend on the organization for sexual and reproductive health and rights (SRHR) information and services. In some areas, FPAM is the only provider of these essential services, and the withdrawal has created significant gaps in access. Against this background, the conference noted that the organization is facing an existential threat and that identifying and securing new revenue streams is no longer a long-term aspiration, but an urgent requirement for medium-term survival. The meeting therefore resolved that, to address this challenge, FPAM must adopt a commercial mindset that promotes innovation, resilience, and financial sustainability, particularly in the operation of its static clinics. This shift

must be embraced across all levels of the organization, beginning with the Board of Directors.

IPPF Accreditation

As a condition of membership, all IPPF Member Associations are required to comply with 10 fundamental principles and 33 distinct standards. These principles require an organization to be:

- Open and democratic
- Well-governed
- Strategic and progressive
- Transparent and accountable
- Well-managed
- Financially healthy
- A good employer
- Committed to results
- Committed to quality
- A leading non-governmental organization in its country

In 2025, FPAM was successfully re-accredited as a full member of IPPF. This is a significant milestone, as accreditation confirms FPAM's continued compliance with the standards required to maintain full membership in the Federation.

Board Meetings

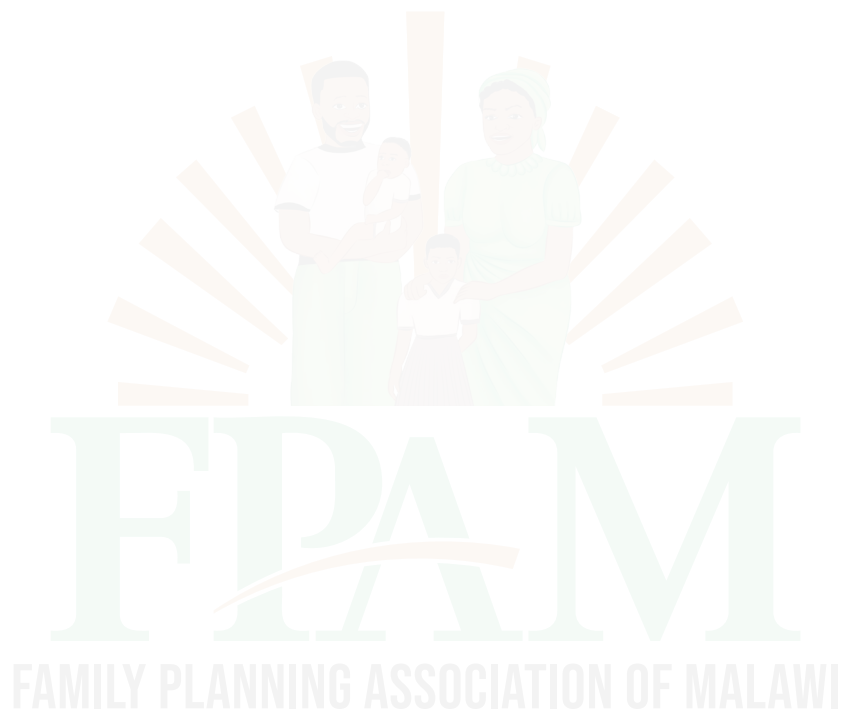
The Board held its regular meetings throughout the year. These statutory meetings enabled the Board to provide strategic guidance and support to management in advancing the organization's mission and vision.

Board Orientation

Many members of the current Board were elected during the December 2024 ADC. In view of this, it was considered necessary to conduct an orientation to strengthen the Board's understanding of its roles and responsibilities. An independent consultant was engaged to deliver the training professionally.

Board Oversight Visits to Branches

During the year, the Board, through its representatives, conducted oversight visits to all eight branches and engaged members of the District Advisory Committees to appreciate achievements, understand challenges, and provide support where necessary.





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Did you know that FPAM also provides general healthcare services?



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HELLO DOWA

DOWA FPAM CLINIC

MONDAY - SATURDAY
08:00 - 17:00

OFFERS GENERAL MEDICAL SERVICES

OTHER AVAILABLE SERVICES

- Family Planning
- Comprehensive Abortion Care (CAC)
- HIV & ART Services
- Cervical Cancer Screening
- STI Screening & Treatment
- Youth Friendly Health Services

FOR MORE INFORMATION

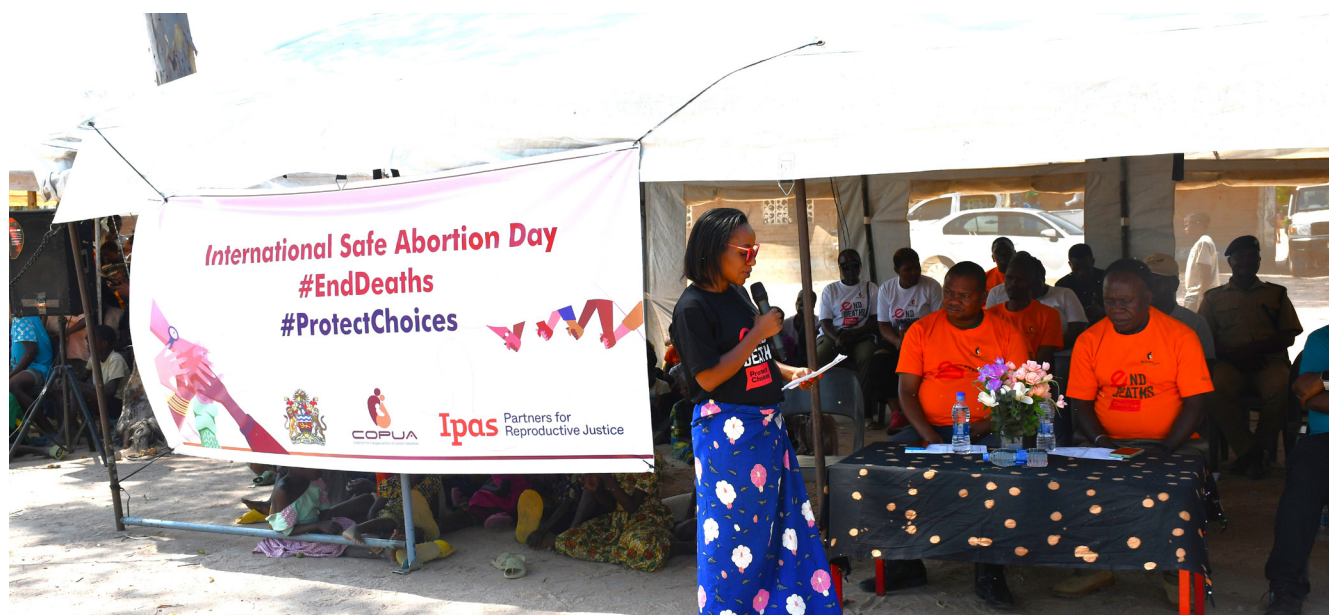
☎ 0995 342 255 | 0881 932 615 ✉ fpam@fpamalawi.org 🌐 www.fpamalawi.org



COREGRANT PROGRAMMES

FUNDER: INTERNATIONAL PLANNED PARENTHOOD FEDERATION (IPPF)

Implementation Districts - National Wide



IMPLEMENTATION PERIOD: JANUARY 2025 TO DECEMBER 2025

1. ADVOCACY AND COMMUNICATION

The Family Planning Association of Malawi (FPAM) continues to champion the promotion of sexual and reproductive health and rights (SRHR) through strategic communication and evidence-based advocacy. In 2025, FPAM implemented a range of activities aimed at strengthening policy advocacy and political engagement, enhancing organizational visibility and brand positioning and influencing national dialogue around family planning, HIV prevention, and safe abortion.

During the year, FPAM, together with Amref Health Africa and other CSOs under the PMNCH-supported Collaborative Advocacy Action Plan (CAAP), engaged major political parties - the Malawi Congress Party (MCP), UTM Party, Democratic Progressive Party (DPP), and United Democratic Front (UDF)

- in high-level dialogues before Malawi conducted the 2025 Tripartite General Elections.

The aim was to assess and influence how party manifestos prioritize the health and well-being of women, children, and adolescents (SRMNCAH).

Key Advocacy Points:

The key advocacy issue was that government should allocate at least 15% of the national budget to health (Abuja Declaration) and make commitment to universal access to family planning and SRHR services.

Achievements/Outcomes:

All parties expressed commitment to prioritizing SRHR in their future manifestos. Increased recognition of FPAM and partners

as credible advocates for health and gender equality.
Strengthened relationships between CSOs and political stakeholders.

Courtesy Visit to the Deputy Minister of Health – Advocacy for Family Planning Financing

The CAAP consortium, including FPAM, held a high-level meeting with the former Deputy Minister of Health, Hon. Noah Chimpeni, to advocate for increased domestic funding for family planning programs.

During the engagement meeting, FPAM Executive Director, Mr. Donald Makwakwa, highlighted that 68% of married women are using modern contraceptives, yet unmet need among youth remains high - fueling teenage pregnancies.

2. YOUTH ACTION MOVEMENT

FPAM recognizes the importance of youth structures and leadership within the association and actively promotes youth participation and empowerment. As such the organisation works hand in hand with its youth arm, the Youth Action Movement.

Achievements

FPAM conducted a three-day resource mobilization training for YAM members held in Mponela, Dowa. At the training, the participants were taught how to mobilize resources for their operations. YAM-Malawi's former President, Erasmo Mbemba, encouraged young people to fully embrace the training and translate the knowledge gained into practical actions that can positively impact their lives and communities. FPAM also funded the Annual General Meeting of YAM which was also held in Mponera.

3. GOVERNANCE

On 20th December 2025, FPAM held its 23rd Annual Delegates Conference (ADC) at Crossroads Hotel in Lilongwe under the theme Resilience and Innovation: Sustaining SRHR in the face of funding challenges.

The ADC is the highest governance organ for the organization. The event brought together FPAM volunteers, Board members and other key stakeholders to discuss strategies for promoting sexual and reproductive health and rights for all. This theme called delegates to action to advance sexual reproductive health and rights for all Malawians amid funding challenges.



Funder: NORAD through FOKUS

Implementation Period: January 2025 to December 2025

Implementation districts: Dowa and Mzimba North

Improving access to SRHR information and services to girls and women including the LGBTQI + community particularly those in the hard-to-reach areas.

Family Planning Association of Malawi (FPAM) is implementing “We Belong Together (WBT)” a 5-year project (2023-2027) targeting Mzimba North and Dowa districts. The project is funded by NORAD through FOKUS implemented jointly with Sex Og Politik (a Norwegian partner organization).

This project is focusing on improving access to SRHR information and services to girls and women including the LGBTQI+ community particularly those in the hard-to-reach areas.

The project will empower health service providers to understand the comprehensive SRHR needs of women, girls and LGBTQI + from a rights perspective.

The project is also focusing on interventions aimed at reducing cases of unsafe abortions by improving access to contraceptives and improving access to comprehensive abortion care services within the provision of the law. Interventions around advocacy for the review of the restrictive abortion laws in Malawi will also be implemented by mobilizing communities to engage with the duty bearers to demand for reproductive health justice around access to safe abortion care. In addition, the judicial review process through strategic litigation will be explored if a viable case is identified.

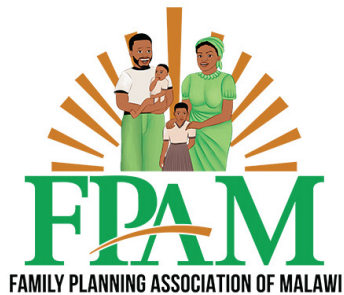
Achievements

- The project successfully facilitated a comprehensive review of the Universal Periodic Review (UPR) through a consortium led by Sonke Justice and the Malawi Sexual Reproductive Health Alliance.
- This initiative focused on evaluating the 2020 recommendations concerning sexual and reproductive health and rights (SRHR). The project further conducted consultations with the Ministry of Justice to assess the implementation progress of these recommendations and the status of suggestions from other member states regarding Malawi. As a significant outcome, it produced a shadow report, which was submitted to the UN prior to the 50th UPR sessions. This report



highlighted key findings and recommendations from the consultations, ensuring that the Malawian government, represented by the Ministry of Justice, was informed and prepared for the discussions at the UPR.

- The project reached 18,647 clients from 160 outreach clinics. Women, girls, and LGBTQ+ populations accessed Sexual Reproductive Health and Rights services (SRHR), such as Family planning, STI and VIA screening as well as PrEP, through community outreach initiatives. These services aim to reduce teenage pregnancies among girls and decrease the incidence of new infections across all populations accessing SRHR care, including the LGBTQ+ community, via both static and mobile outreach clinics.



OBSTETRIC AND GYNAECOLOGICAL SCANNING SERVICES

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AVAILABLE IN
OUR CLINICS:

Kasungu

Ntcheu

Dowa

Lilongwe

Funder: USAID through Amref

Implementation Period: January 2025 to March 2025

Implementation districts: Kasungu, Salima, Karonga, Nkhotakota, Chitipa

MOMENTUM Tikweze Umoyo was a five-year USAID-funded integrated service delivery project in Malawi. The project aimed at reducing maternal, newborn, and child morbidity and mortality through improved access and quality of health service delivery. The focus is on Maternal, Newborn, and Child Health (MNCH), Family Planning (FP) and Reproductive Health (RH), Nutrition, Water, Sanitation and Hygiene (WASH) and malaria prevention and treatment.

AMREF Africa served as the prime partner for the MOMENTUM Tikweze Umoyo project, collaborating with other organizations such as FPAM, Youth Wave, PSI Malawi, D-tree, and WaterAid. FPAM was the technical lead in provision of integrated SRHR services, such as family planning for youth, people with disabilities, and others who are difficult to reach through mobile outreach clinics.

Achievements



- Supported 101 Youth Targeted Outreach clinics (YTOs) providing a total of 70,684 services.
- 208 Bilateral-Tubal Ligation/Vasectomy (BTLs) were performed through 51 Family Planning (FP) Outreach Clinics for Permanent FP Methods.
- Trained 26 service providers on DMPA Sayana and Moment of truth concept.
- Supported the districts to conduct One Stop Centre Orientation.

PROJECT

03

MOMENTUM TIYENI

Funder: USAID through Palladium

Implementation Period: January 2025 to March 2025

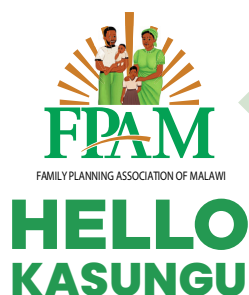
Implementation districts: Lilongwe, Dowa, Zomba, Machinga, Chikwawa, Mulanje and Mangochi

FPAM was among the partners that implemented the Momentum Tiyeni project alongside Palladium (Prime), Save the Children, Evangelical Association of Malawi, Pakachere and PACHI. Under this project, FPAM was providing technical support in Family Planning (FP)/ Sexual Reproductive Health and Rights (SRHR) and strengthening local capacity for service delivery. In addition, One FPAM team was providing the services in Lilongwe district.

Achievements



- The team was able to provide integrated SRHR services: 1824 BTL Services were performed.
- The project reached a total of 23,307 clients with integrated SRH services through Integrated Family Health Outreach Clinics (IFHOC) and Community Health workers - Youth Community Based Distribution Agents (47) were trained.



**KASUNGU
FPAM CLINIC**

**MONDAY - SATURDAY
08:00 - 17:00**

OFFERS GENERAL MEDICAL SERVICES

OTHER AVAILABLE SERVICES

- | | |
|-------------------------------------|----------------------------------|
| ➤ Family Planning | ➤ Cervical Cancer Screening |
| ➤ Comprehensive Abortion Care (CAC) | ➤ STI Screening & Treatment |
| ➤ HIV & ART Services | ➤ Youth Friendly Health Services |

**FOR MORE
INFORMATION**

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PROJECT

04

CONSORTIUM TO ADVANCE ACCESS TO HIV PREVENTION PRODUCTS (CAAPP)

Funder: IPPF through a consortium led by India

Implementation Period: January 2025 to December 2025

Implementation districts: Mzuzu, Kasungu, Dowa, Lilongwe, Dedza, Ntcheu and Mangochi.

Project Goal

Optimizing the rollout and integration of new biomedical HIV prevention methods into IPPF service delivery platforms.

FPAM is implementing a project on HIV Biomedical Prevention Products in Malawi, a Consortium to Advance Access to HIV Prevention Products (CAAPP), funded by

IPPF. The goal of the project is to significantly increase the delivery of new biomedical HIV prevention methods at FPAM and IPPF delivery points and to successfully integrate those services. At FPAM, PrEP is delivered through static and outreach clinics in seven districts.

Achievements



- FPAM, in collaboration with NAC and the Ministry of Health (MoH), developed posters and brochures promoting oral PrEP. These materials were pretested in four districts namely Kasungu, Lilongwe, Mangochi and Mzimba North where initial community dialogue sessions had been conducted in 2024. The pretesting aimed to check with target audience if the messages on IEC materials were real and credible, clear and understandable, meeting communication objectives and culturally acceptable. Following the pretest, the materials were vetted and accredited by MoH and were approved they will be adopted as for oral PrEP. This marks a significant contribution by the CAAPP project to national HIV prevention efforts. official MoH IEC materials.

- In October 2025, under the CAAPP project, the Family Planning Association of Malawi (FPAM) became the first organisation in the country to roll out injectable pre-exposure prophylaxis (PrEP) with cabotegravir long-acting (CAB-LA) outside of a research setting, marking a major milestone in HIV prevention; among the first recipients was a policewoman who has consistently tested HIV negative despite her husband being on antiretroviral therapy (ART) for two years, and while condom use had initially been recommended to reduce transmission risk, inconsistent adherence made CABLA a vital and more reliable option for protecting her health in a Sero discordant relationship. She began using daily oral PrEP tablets from our Lilongwe clinic and has been adherent. With the arrival of injectable CAB-LA, she chose to switch, welcoming the injectable to reduce pill burden and maintain protection. “It’s a relief to us. My husband started taking ARVs a year ago, and he is doing well. However, I don’t know his adherence level or viral load, and I worry that I might get infected. This service is very important for partners of people living with HIV. It helps ease the psychological pain of being with someone who has cheated. There are innocent women like me in marriages who cannot leave their husbands simply because they are HIV-positive. Such women deserve protection. Please develop a system that sends reminders for our subsequent doses”.
- The project managed 10405 rapid screening of clients visiting SRHR clinics (FPAM) to check their eligibility for PrEP: Oral and Injectable. A total of 2352 clients accessed Oral PrEP and 27 accessed subsidised injectable PrEP.



DON'T RISK IT

***Dzitetezeni ku HIV,
Gwiritsani ntchito
PrEP***

PrEP akupezeka m'zipatala za FPAM izi:

Dowa Kasungu Lilongwe Ntcheu

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Bringing Life-Saving HIV and SRHR Services Closer to Communities

By Faith Kadzanja

When essential health services are brought closer to where people live and work, barriers are reduced and lives are protected. This was clearly demonstrated as the Family Planning Association of Malawi (FPAM) joined the Pre-World AIDS Day commemorations led by the Lilongwe City Council, with support from the National AIDS Commission (NAC).

FPAM was stationed at Nsungwi Market, transforming the busy trading space into a point of access for HIV prevention and Sexual and Reproductive Health and Rights (SRHR) services. For many vendors and shoppers, the outreach provided a rare opportunity to access free, confidential services without leaving their stations.



During the outreach, FPAM reached hundreds of community members with essential services. A total of 5,200 male condoms were distributed to promote safer sexual practices. Twenty-one people accessed HIV testing, 10 clients were initiated on oral Pre-Exposure Prophylaxis (PrEP), 80 HIV self-testing kits were provided, and five clients received treatment for sexually transmitted infections (STIs). One of the beneficiaries, Joseph Jeffrey, a local vendor at Nsungwi Market, welcomed the initiative, noting that it allowed him to know his HIV status without disrupting his business. "Having these services right here at the market gives us a chance to look after our health while we work," he said.

FPAM's engagement continued during the main World AIDS Day commemoration on Monday, 1 December 2025, held at Lilongwe Central Market (Old Town). The organisation set up a pavilion and provided free SRHR services from 6:00 AM to 9:00 AM, ensuring early-morning traders could also benefit before the start of their day.

These initiatives are being implemented under FPAM's Consortium to Advance Access to HIV Prevention Products (CAAPP) project, which seeks to optimise the rollout and integration of new biomedical HIV prevention methods into the International Planned Parenthood Federation (IPPF) service delivery platforms.

The project is funded by IPPF through a consortium led by India and is being implemented from January 2025 to December 2025 across Mzuzu, Kasungu, Dowa, Lilongwe, Dedza, Ntcheu, and Mangochi districts. Beyond service delivery, FPAM has made significant contributions to national HIV prevention efforts through strategic communication under the CAAPP project. In collaboration with NAC and the Ministry of Health (MoH), FPAM developed posters and brochures promoting oral PrEP. These IEC materials were pretested in Kasungu, Lilongwe, Mangochi, and Mzimba North, where earlier community dialogue sessions had been conducted in 2024.

The pretesting process assessed whether messages were clear, credible, culturally acceptable, and aligned with communication objectives. Following this, the materials will be vetted and accredited by MoH and NAC. Once approved, they will be adopted as official MoH IEC materials for oral PrEP, marking a significant contribution by the CAAPP project to Malawi's national HIV prevention response.

FPAM has also pioneered innovation in IV prevention service delivery. In October 2025, under the CAAPP project, FPAM became the first organisation in Malawi to roll out



injectable Pre-exposure Prophylaxis using cabotegravir long-acting (CABLA) outside of a research setting, a major milestone in expanding HIV prevention choices.

Among the first recipients was a policewoman in a sero-discordant marriage. Despite consistently testing HIV negative, her husband has been on antiretroviral therapy (ART) for two years. While condom use had been recommended, inconsistent adherence posed a continued risk. She initially used daily oral PrEP at FPAM's Lilongwe clinic and remained adherent. With the introduction of injectable CAB-LA, she chose to switch, citing reduced pill burden and sustained protection. "It's a relief for me," she shared. "My husband is on ARVs and doing well, but I don't know his adherence level or viral load. I worry that I might get

infected. This service is very important for partners of people living with HIV. There are innocent women in marriages who cannot simply leave and deserve protection. I hope a system can be developed to remind us of our next doses."

Through community outreach, strengthened national communication efforts, and the introduction of new biomedical HIV prevention options, FPAM through the CAAPP project continues to work towards ending AIDS and promoting healthier, empowered communities across Malawi.

Funder: KfW through PSI**Implementation Period:** March 2025 to December 2025**Implementation districts:** Ntcheu and Neno

FPAM is implementing the N'zatonse Phase V project led by PSI (Population Services International) in collaboration with other consortium partners Family Health Services (FHS), and Act Alliance. N'zatonse Phase V is a continuation of the N'zatonse Project where it builds on the deliverables of phase I, II and III and IV. N'zatonse V aims at improving access and use of Sexual Reproductive Health (SRH)

services in rural areas while ensuring that the behaviour of the target population is better adapted to the needs of individuals as well as the nation. The focus for phase five is on the unmarried and nulliparous youth (aged 10-24 years) improving their access to Family planning services especially long acting and reversible contraceptives (LARC).

Achievements

Project main achievements including number of people reached with services in 2025 (January to November)

- Reached total of 54,471 clients were reached with SRHR services including FP methods against target of 37,500.
- Reached a total of 50,409 clients through the Community Health Workers (CHWs) channel. From the total, 37,412 were the youth. Part of this achievement is attributed to the improved mobility of CBDAs who were provided with Bicycles through the N'zatonse project.

Funder: CIFF (Children's Investment Fund Foundation) through PSI

Implementation Period: September 2024 to October 2025

Implementation districts: Ntcheu and Neno



PROJECT OBJECTIVES

FPAM with support from PSI Malawi is implementing the Delivering Innovation in Self-Care (DISC) program alongside the N'zatonse V project in Ntcheu and Neno districts. The DISC program is a Children's Investment Fund Foundation (CIFF) funded

investment, and its objective is to increase uptake of selfinjection through overcoming providerbased barriers throughout the consumer journey. In fulfillment of the 2025 AWP agreement, the following programs and interventions were implemented.

Project main achievements including number of people reached with services in 2025 (January to December 2025)

- In the year 2025, the project surpassed its projections with 85% (50832) clients accessing DMPA SC out of which 89% (25066) were for SI. The achievement was facilitated by MOT of MoH providers (3 nurses, 27 CMA's and 31 HSA's) and supportive supervision of the trained providers which enhanced the capacity of health workers thereby driving higher adoption rates of self-injection. There was a notable increase in the average number of health facilities reporting on DMPA SC SI from 27 health facilities in 2024 to 35 health facilities as of October 2025.
- Supervision of 229 MOT MoHS providers in 43 facilities in Ntcheu and 13 facilities in Neno districts enhanced the capacity of health workers thereby driving higher adoption rates of self-injection.

The 2025 Annual Work plan (AWP) was an agreement between FPAM and the United Nations Population Fund (UNFPA) Malawi Country Office, spanning from 1st April 2025 to 31st December 2025. The AWP is a contribution to the UN joint UNSDCF (UN Sustainable Development Cooperation Framework) as well as Country Program outcomes. Additionally, the 2025 AWP focused on ensuring that women of reproductive health, sexually active adolescent girls and boys in the targeted communities and districts have access to sexual reproductive health rights information and are empowered to take action on their Sexual Reproductive Health

through mobile outreach and moonlight clinic activities in Mchinji and Dedza districts under the Addressing challenges to adolescent girls' empowerment through sexual and reproductive health and rights (ACE) programme. UNFPA supported FPAM with Family planning commodities, STI treatment, HIV /ART commodities and services as well as humanitarian services commodities and supplies that include infection prevention supplies for the districts where they are involved under the UNFPA impact districts. In fulfillment of the 2025 AWP agreement, the following programs and interventions were implemented.

Addressing challenges to adolescent girls' empowerment through sexual and reproductive health and rights (ACE) programme

Implementation Districts: Dedza and Mchinji

FPAM with support from UNFPA in Malawi and generous support and funding from the government of the Republic of Korea (RoK) through the Korea International Cooperation Agency (KOICA) is implementing the Addressing Challenges to Adolescent Girls' Empowerment through Sexual and Reproductive Health and Rights (ACE) project in Mchinji and Dedza districts.

The ACE project, a successor of the Action for Teen Mothers and Adolescent Girls project, aims to strengthen the individual and collective agency and the capabilities of

adolescent girls including teenage mothers to be able to make informed decisions determining their lives including on their sexual and reproductive health and rights. The project is being implemented from 2025 to 2028.

In the year 2025, FPAM provided integrated SRHR services through mobile outreach clinics, moonlight clinics targeting key populations and door to door information and service provision by Community Based Distribution Agents (CBDAs) in the districts of Dedza and Mchinji.

Achievements

- Through SRHR integrated mobile outreach clinics conducted, a total of 5713 adolescent client visits accessed the services. A total of 3216.9 CYPs were generated. SRHR integrated mobile outreach clinics conducted recording 10,166 adolescent client visits accessing the services.
- A total of 1222 representing 65% achievement of visits made by adolescent girls and boys who received integrated SRHR and SGBV services through mobile and outreach clinics.

Support to the Ministry of Health – Reproductive Health Directorate

UNFPA Malawi supported the Ministry of Health (MoH) – Reproductive Health Directorate (RHD) through FPAM with financial resources to implement five broad activities aimed at building the capacity of government health care workers and improved supply chain management, increasing the range and availability of FP commodities for marginalized groups in line with reproductive rights and making SRHR/ HIV/GBV integrated services available to the key populations in hard-to-reach communities.

KEY INTERVENTIONS

Integrated SRHR and GBV into Malawi Policies

The Ministry of Health - Reproductive Health Directorate through FPAM engaged a consultant to lead in the evaluation of the 2020 - 2025 PAC guidelines implementation which will inform the development of the 2026 - 2030 PAC Guidelines. The consultant finalized data collection from sampled districts and submitted a draft report and held a validation meeting with key stakeholders. The process will allow for the development of the 2026–2030 PAC guidelines. The Ministry has further been supported with resources to finalize Malawi's Second-Generation FP-CIP (2025– 2030). A consultant has been engaged with the responsibility of developing a draft

FP-CIP 2025-2030 plan by December 2025. The document will be strategically focused on aligning the FP-CIP with policies, particularly the DPP Manifesto (Education and Economic Empowerment/Demographic Dividend linkage), and connecting with the FP2030 Malawi Interministerial Committee.

Support MISP capacity building in Dedza, Kasungu, Mzimba North, Lilongwe, Dowa, Ntchisi, Salima and Mangochi Districts

The Ministry of Health-Reproductive Health Directorate, with support from UNFPA through FPAM, conducted training on MISP to frontline workers and stakeholders from the seven (8) districts of Dedza, Kasungu, Mzimba North, Lilongwe, Dowa, Ntchisi, Salima and Mangochi. A total of 267 front line workers (Healthcare workers, DoDMA, Ministry of Gender, Judiciary, Malawi Defense Force, Malawi Police) from Mzimba North (24), Kasungu (25), Dedza (22), Lilongwe (75), Dowa (25), Ntchisi (25), Mangochi (46) and Salima (25) capacitated on MISP in 2025. A cumulative total of 574 front line workers from 17 districts trained from 2023 (153), 2024 (154) to 2025 (267).

Support demand and outreach clinics for new and lesser utilized commodities of Sayana press, hormonal IUD, and other methods in Nsanje, Nkhatabay, Mulanje, Mchinji, Dedza, Chikhwawa, Mangochi and Machinga Districts

The Ministry of Health – Reproductive Health Directorate (RHD) with funding from UNFPA through FPAM supported the districts of Nsanje, Nkhatabay, Mulanje, Mchinji, Dedza, Chikhwawa, Mangochi and Machinga to conduct sensitization campaigns coupled with integrated SRHR outreach clinics to increase the demand and utilization of these less utilized commodities and services. A cumulative total of 3,571 clients has accessed integrated SRHR services from the outreach clinics conducted in the four targeted districts. Further to the service provision, mentorship to service providers has been conducted and a total of 136 health care workers comprised of clinical officers (10), medical officers (2), Nurses (35), Nurse Midwife Technicians

(35), Community and Midwife Assistants (11), Health Surveillance Assistants (8), HIV Diagnostic Assistants (1), Environmental Health Officers (3), Health Promotion Officers

(6), Disease Control Surveillance Assistants (16), District Health Management Officers (7) and Pharmacy Technicians (2) have been mentored.

Support Quantification and forecasting

The Ministry of Health – Reproductive Health Directorate (RHD) with funding and technical support from UNFPA Malawi through FPAM conducted a Family Planning commodity spot check supervision and physical inventory to 12 districts of Rumphi, Mzimba North, Nkhosakota, Dowa, Mchinji, Dedza, Neno, Chikhwawa, Zomba, Machinga, Ntcheu and Mangochi. A total of 251 health care workers ranging from pharmacy personnel (69), Nurses (102), Clinicians (22), Disease Control Surveillance Assistants (21), Health Management Information System officers (20) and EHOs (17) participated in the commodity validation mentorship.



Case Study 01

Restoring Women's Power Through Self-Injection Contraception

By Andrew Bishop Mkandawire, Family Planning Association of Malawi (FPAM) SBCC Lead Co-edited by Reproductive Health Directorate, Ministry of Health Malawi

Introduction

Girls and women in Malaŵi can now exercise their sexual and reproductive health power and decision with user friendly four-dose self-injection contraception that keep them away from the health worker and health facility for 12 months. The utility of this contraception is not affected by women's education, social economic, political, and cultural background. The self-injection family planning method contains DMPA drug, progestinonly. There are two types, DMPA IM or Depo Provera and DMPA SC or Sayana Press that can be administered, DMPA SC Provider Initiated (PI), and selfadministered DMPA SC Self Injection (SI), DISC2 (2022). A single dose,

one injection, protects a woman for three months and four doses cover the whole year.

The contraception self-injection concept can be related to how diabetic and arthritis drugs are self-administered, DISC2 (2023). The DMPA IM is injected in the muscles, shoulder area, while DMPA SC is injected on a fatty tissue around the navel and on the thigh. These sites are for self-injection, but when it's injected by a provider, the back arm is preferred. FP2030 commitments is one of the key performance measures to check if Malawi is doing well in promoting use of modern family planning contraceptives. Currently uptake of contraceptives is at 48.9 % for all women and 71% for married women.

Challenges facing girls and women in reproductive health has pushed Malaŵi



government to find most affordable family planning services that can be made available at all service delivery points. As of 2020, the teenage prevalence rate was pegged at 28.9%, neonatal mortality rate at 26/1000, infant mortality rate at 60/1000, and total fertility rate at 4.2, MICS (2020). However, The National Statistical Office (2024) indicates an increase in teenage (15-19) pregnancy prevalence rate now at 32% while neonatal mortality rate and infant mortality rates have dropped to 24/1,000 live births, and 35/1,000 live births respectively.

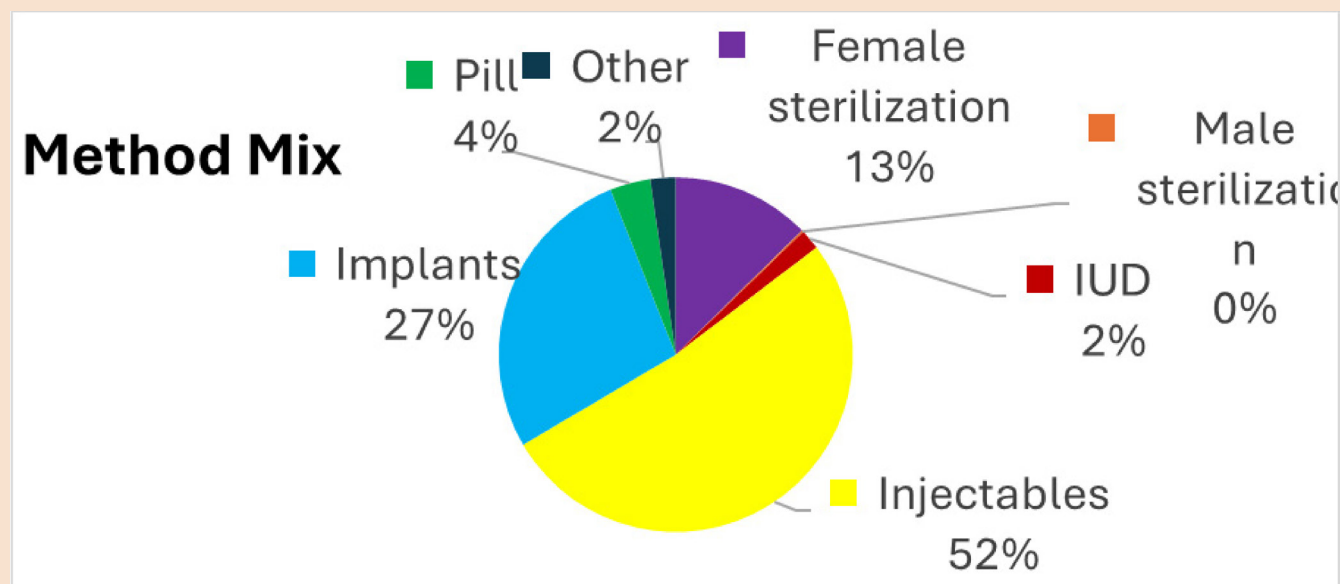
The uptake trends since 2019 have been fluctuating, indicating commodity acceptance although the uptake rates are relatively low compared to administered contraception injections. The fourth quarter of 2019 recorded 36% service uptake which dropped below 26% from 2020 to April – June 2023. By July to September 2023, a spike of 30% was reached. The journey was attributed to increase in DMPA – SC PI (Provider Initiated) visits due to stockouts of DMPA IM, Depo Provera in 2022. The Moment of Truth (MoT) trainings for service providers that began in October 2022 also increased

the number of service providers to serve more women with the new family planning method, Chirwa (2022).

Benefits

The DMPA-SC (Sayana Press) has many benefits for women. Injectables are highly demanded family planning method in Malaŵi so far with uptake of 52% among all women of reproductive age. The self-injection is discrete and confidential, giving women the power to choose and use the smart injection at their preferred space, Chirwa (2022). The self-administered injection reduces every three-month visit to a health facility, thereby reducing transport expenditures, which draws attention to her health – seeking behavior. The selfinjection contraception currently branded as Sayana Press is known to be time and resource saving as a woman can selfinject without interrupting her daily work schedules.

Eligibility



The pride and power women express by self-injecting has proven to generate selfconfidence in women who end up with a sense of accomplishment and pride.

All women of reproductive age 10-49 interested to prevent unintended pregnancy can use the self-injection provided they meet the medical recommended criteria. Women breastfeeding a baby who is at least 6 weeks old, women who have not had children, women who do not want to use family planning containing other hormones like estrogen can opt for self-injection family planning method. Women who have sexually transmitted infections including HIV and those taking medicines including ARVs to treat HIV/AIDS are also eligible although duo protection is encouraged to prevent spread of venereal infections, DISC (2022). Sayana Press is safe, effective, easy to use, long-lasting, reversible, and can be discontinued without a provider's help. It doesn't interfere with sex and can be used privately.

Challenges

Not all women face similar side effects of DMPA SC SI. Some see prolonged or heavy vaginal bleeding, irregular bleeding, or spotting. Some women feel headaches and dizziness and some completely stop having menses. In some instances, other women gain weight. And some women have changes in mood and sex drive, and some have abdominal bloating and discomfort with the SI.

People react differently after injection. Some women feel pain, tenderness, lump, persistent skin indentation/dimpling at an injection area but the most common side effect of DMPA-SC is itching for a while at the injection site according to NHS Foundation Trust (2021). Health workers have noted that women who get counseling are likely to continue using SI than those who do not.

Conclusion

The self-injection contraception intends to improve access to contraceptives and empower women to choose their preferred contraceptive method. Chirwa (2022) explains that in Malaŵi, the SI availability is contributing to the re-commitment of raising the country's modern contraceptive prevalence rate to 60%

by 2030 from a baseline of 48.9% in 2020 with a focus among all women of childbearing age. This also responds development goal of Malaŵi Agenda 2063 which aims at having 'A globally competitive and highly motivated human resources.' The Ministry of Health in Malaŵi through Reproductive Health Directorate (RHD) rolled the introduction of DMPA – SC in a phased approach in 2018. By October 2018, service provision commenced with intent to raise the country's DMPA SC self – Injection uptake from 29% in Jan to March 2024 as baseline by 2030.

Also published on Family Planning Association of Malawi (FPAM) website: <https://www.fpamalawi.org/news/restoring-womens-power-through-self-injection-contraception/>

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Case Study 02 (HARM MITIGATION RESPONSE PROJECT)

A Second Chance For Women In Kondiyani

By Faith Kadzanja

By the time the Family Planning Association of Malawi (FPAM) team returned to Kondiyani Village in Traditional Authority (T/A) Njewa, Lilongwe, 24-year-old Ulemu Kapile had already seen her dreams take an unexpected turn.

When Ulemu learned she was pregnant earlier this year, she was not celebrating – she was in shock.

“I waited for the clinic to come,” she says quietly. “They used to come every month. But after the aid freeze, they never came back, and by the time I realized it, I was already pregnant.”

For women like Ulemu, access to contraception and other reproductive health services had always depended on FPAM’s Integrated Family Health Outreach Clinics

(IFHOCs). Through projects funded by the USAID such as Momentum Tiyeni and Tikweze Umoyo, FPAM had been bringing essential health services including family planning, HIV testing, and cervical cancer screening in hard-to-reach communities.

However, when the United States government suspended aid to Malawi earlier this year, these outreach activities came to a sudden halt. The projects were fully funded by the U.S. government, and without the financial support, operations were forced to stop.

“I had just finished my pack of contraceptive pills,” Ulemu recounts. “I had nowhere else to go for another supply. I still slept with my partner, thinking maybe the clinic would come soon. But they never did.”



Nelson Nefitale, a community volunteer in Kondiyani, confirmed that the gap left by the halted projects had a severe negative impact.

“Many women were desperate. Some felt hopeless and feared going back to unplanned pregnancies,” he said. “The support from IPPF is timely, although the current model only focuses on family planning and not the wider range

of services we used to have before.” Despite the renewed efforts, the harm has already been done for some women. For Ulemu, life has taken a turn she did not plan for, but she remains hopeful that others will not share her fate.

“Even though the clinic is back, the pain of living with an unintended pregnancy still lingers,” she says. “But I am thankful that other women will now have the help I did not have.”



The Harm Mitigation Response Project is currently being implemented in Lilongwe and Kasungu districts, offering a lifeline to communities that were left behind when the aid freeze took effect.



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- Cervical Cancer Screening
- STI Screening & Treatment
- Youth Friendly Health Services

IPPF

PROJECT

HARM MITIGATION RESPONSE

08

Funder: International Planned Parenthood Federation

Implementation Period: May 2025 to March 2026

Implementation Districts: Kasungu and Lilongwe



FPAM is implementing the IPPF Harm Mitigation Response project in Lilongwe and Kasungu districts, providing essential sexual and reproductive health care services to people of reproductive health age with the aim to curb SRH problems affecting communities pertaining SRHR, Youth Friendly Health Services including unplanned pregnancies and STI's. The project

is implemented using the mobile outreach clinic service delivery model complemented by demand creation interventions. Two dedicated outreach/mobile clinic teams have been operating since May 2025, each conducting at least 17 outreach clinics per month. The interventions have targeted most affected communities resulting from the US Government Aid Freeze.

Key Activities Planned during the reporting period. Progress on Implementation of planned activities

Achievements

- The project recorded a total of 20,160 client visits from both districts against a target of 36,000 (4,991 in Kasungu district against a planned target of 7,500 for the reporting period, and 15,169 in Lilongwe district against a planned target of 10,500).
- A total of 32,818 clients were reached with general group SRH services.
- A total of 45,221 clients were reached with general group SRHR counselling from the total outreach clinics conducted during the reporting period in Kasungu district.

The Quality-of-Care (QoC) department within FPAM in collaboration with the respective District Health Office (DHO) Family Planning (FP) mentored and Continuous Quality Improvement (CQI) officers conducted assessments of the outreach teams and individual provider assessments aimed at providing mentorship on provider competencies and overall adherence to standards of care by the outreach teams.

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03



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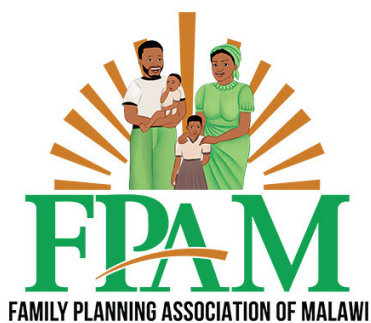


06



07

1. FPAM staff pose with Athlete Asimenye Simwaka during a training of eradicating teen pregnancies organised by the Malawi Olympic Committee.
2. YAM - Members of the Youth Action Movement pose for a group photo.
3. FPAM ED, Donald Makwakwa pose with Jon Lomoy Chair of SexOgPolitikk Norway, at the IPPF general assembly.
4. IPPF Booth at ICFP2025 enhanced visibility of the new IPPF branding. FPAM SBCC Lead, Andrew Bishop Mkandawire, supported clients understand more about the new branding.
5. CAAPP - FPAM service provider Griffins Kaonga briefing Lilongwe City Mayor Peter Banda about FPAM services at the World AIDS Day.
6. FPAM Board Chairperson, Mercy Kulanga Paundi touring YAM pavilion during FPAM 23rd Annual Delegates Conference in Lilongwe.
7. FPAM Director of Programmes Tazirwa Chipeta (Center) interacting with N'zatonse V nurse provider at the outreach in Ntcheu.



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Dowa

Kasungu

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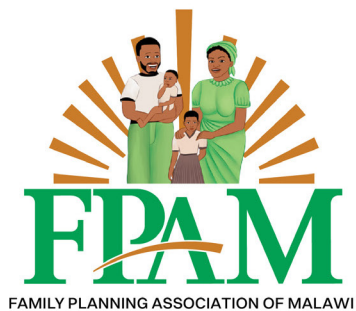
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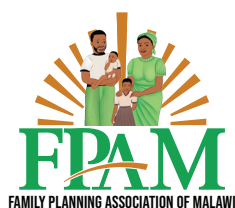
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Family Planning Association of Malawi (FPAM)

FPAM House, Area 10, Plot No. 10/447

Private Bag B424, Lilongwe, Malawi

+265 (0) 999 771 031

fpam@fpamalawi.org

@FPAM_

Family Planning Association of Malawi

Family planning Association of Malawi

www.fpamalawi.org

