



**General Country Information:**

The Republic of Malawi is located in south-eastern Africa, and borders Mozambique, Tanzania and Zambia. Malawi is divided into three regions (Northern, Central and Southern) which are further subdivided into 27 districts. Lilongwe is the capital since 1971, however the major commercial center and largest city is Blantyre.

In 1891, under the control of the British Government, Malawi was called Nyasaland Protectorate. The first half of the 20<sup>th</sup> century was marked by several attempts to obtain independence, but it was only in July 1964 that Malawi became a fully independent member of the British Commonwealth. It became a Republic two years later.

Malawi's economy mainly relies on its agriculture and represents 80% of all exports. Its three most important crops are tobacco, tea and sugar. Economic development and trade suffer from factors such as inadequate and deteriorating roads, poor electricity, water and telecommunications infrastructure. Malawi must import all its fuel products and transport costs are high. Malawi's Human Development Index is 164 over 177.

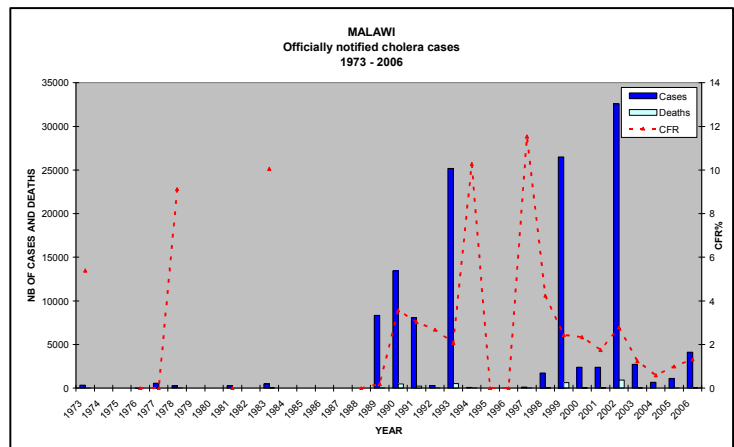
The child mortality is 125/1000. The prevalence for HIV is 14.1% and an estimated 700'000 children became orphans when their parents died of AIDS. Malawi has repeatedly been affected by famines since 2002 like other Southern Africa countries. It also faces poor access to medical treatment and insufficient school education.

**Cholera Background History:**

The first reported cholera cases occurred in 1973 during the pandemic wave that hit most Eastern African countries.

In 1989/1990, Malawi faced its first major outbreak with 21 808 cases and 497 deaths. (Case Fatality Rate 2.3%). This was followed by another large outbreak in 1993, recording 25 193 cases and 524 deaths (CFR 2%). The outbreak started at the end of December 1992 in the Central region (Lilongwe, Ntcheu and Dedza) and further spread to the Southern region.

In 1999, the outbreak recorded 26 508 cases with 648 deaths (CFR 2.4%), however precise time and geographical spread are not available.



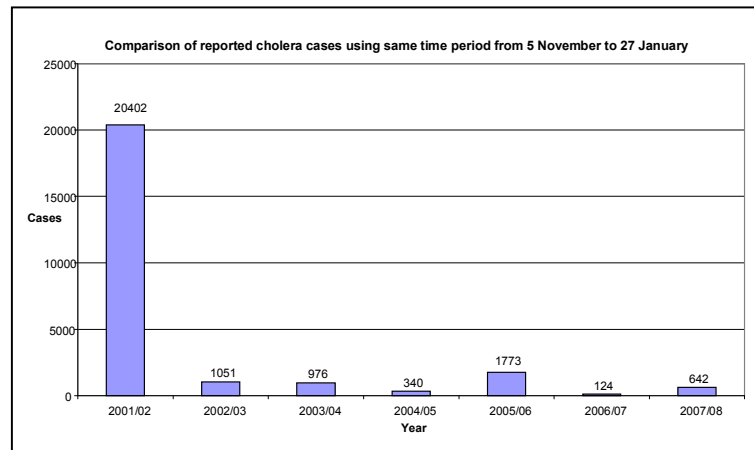
From October 2001 until April 2002 (rainy season), Malawi recorded its worst outbreak with 33 150 cases and 981 deaths (CFR 2.96%). The epidemic reached its highest peak between week 5 and 11, affecting 26 districts out of 27. The Southern Region was the worst affected with 69% of reported cases. Although the overall CFR was 2.96%, in some districts, the CFR was as high as 6.7%, indicating the possibility of inadequate case management and/or shortage of supplies. A review of the epidemic response showed that refresher training for health staff was not conducted this time unlike in previous years.

Malawi encounters cholera outbreaks from September/October to April/May each year, which corresponds to the rainy season. In 2005/2006, Malawi reported 4 805 cases. In 2006/2007, Malawi reported 262 cases. The outbreak started in October 2006 and ended in May 2007.

**Cholera situation in 2007/2008:**

The cholera outbreak started in Nsanje and Mulanje with the first cases reported on 7 November 2007. As of 13 April 2008, 1022 cases and 20 deaths have been reported. (CFR 2.0%). Out of 27 districts, 9 are affected (Mulanje, Balaka, Blantyre, Chikwawa, Thyolo, Nsanje, Ntcheu, Nkhotoakota), but 45% of cases are being reported in Nsanje district. Among the cholera control activities, which are being carried out by district, we can list the following:

- Health education activities such as health talks, drama and role plays etc
- Chlorination of water at household level
- Isolation of cases, case follow up and case management



**WHO Support Actions:**

- 1994-1997: Malawi was part of the Southern African Initiative for cholera control and strengthening of Epidemic Diarrhoeal Diseases preparedness and response. This included training of trainers for surveillance and cases management as well as laboratory support.
- 2001/2002: Response coordination with MoH and UNICEF, set-up of CTCs, chlorination of water supplies and hygiene education

**Demographic and Socio-Economic Data:**

<b>Geography</b>	Total surface	118'480km2 (20% is water, Lake Malawi )
	Capital	Lilongwe (pop. Lilongwe: 400'000, pop. Blantyre: 646'235 in 2003 )
	Provinces	3 regions (Northern, Central and Southern) , 27 districts
	Official Language	English, Chichewa
<b>Environment</b>	Climate	Sub-tropical
	Rainy season	rainy season (November to May); dry season (May to November)
	Floods and droughts	Floods in Dec. 2002 and March 2005, drought in Sept. 2004
	Desertification	Deforestation, land degradation, water pollution from agricultural runoff, sewage, industrial wastes
<b>Demographics</b>	Natural resources	Limestone, arable land, hydropower, unexploited deposits of uranium, coal, and bauxite
	Population	13,603,181 (annual population growth rate: 2.38%, 2007)
	Religions	Christian 79.9%, Muslim 12.8%, other 3%, none 4.3% (1998)
	Ethnic groups	Chewa, Nyanja, Tumbuka, Yao, Lomwe, Sena, Tonga, Ngoni, Ngonde, Asian, European
<b>Economy</b>	Migrants	8'000 refugees (mostly Ethiopians and Somalis) and asylum seekers in Dzaleka camp (end of 2007)
	Industry	Tobacco, tea, sugar, sawmill products, cement, consumer goods
<b>Health Indicators</b>	Farming	Tobacco, sugarcane, cotton, tea, corn, potatoes, cassava (tapioca), sorghum, pulses, groundnuts, Macadamia nuts; cattle, goats
	Per capita total expenditure on health	58\$
	Life expectancy birth (yrs)	Males: 47                      Females: 46
<b>Communicable Diseases</b>	Child mortality (per 1000)	125 (2005)
		2 physicians per 100'000
<b>Risk Factors for Cholera</b>	Food or waterborne diseases:	bacterial and protozoal diarrhea, hepatitis A, and typhoid fever
	Vectorborne diseases:	malaria and plague are high risks in some locations
	Water contact disease:	schistosomiasis (2007)
<b>Risk Factors for Cholera</b>	HIV prevalence (2005):	14.1%
	Population with access to improved water source	73% (2004)
	Population with access to proper sanitation facilities	61% (2004)
	Chronic Malnutrition	35% (2002-2004)

Sources for Document: WHO, UNHCR, UNDP