NJIRA IMPACT
COMMUNITY HEALTH, COMMUNITY WEALTH

NJIRA IMPACT Q1 REPORT 2025

Welcome

Dear Partners for Equity

It is my pleasure to present the midterm report for the Njira Impact for January- March 2025.. In 2024, we embarked on an exciting rebranding journey, which led to a name change. In this report, we have referred to our organization by its new name.

This report highlights our achievements, performance, and strategic progress over the first quarter of 2025, reflecting our commitment to improving the health and livelihoods of women, children, and young adults in last-mile hard-to-reach areas across Malawi.

During the last three months, we have experienced tremendous growth and gone through various opportunities and challenges. However, we cherish our dedicated team that worked tirelessly throughout the year to register great outcomes and impact.

Notably, our services in the first quarter reached over 400,000 people in seven districts in Malawi, ensuring access to quality unmet health care, food, and income so that no woman and child dies from treatable infections.

These outcomes and impact are a clear testament to the strong and resilient partnerships within our model, including the professionalized We are also pleased to highlight our expansion to the Zomba district with the Facilitated Collective Action Process program.

Community Health Workers, the resilient health partnerships with health facilities, speed of care through motorcycle taxi operators, and the catalyst community-based facilitators.

Deep diving into this report will present you with detailed achievements on our health program focusing on maternal and child health, nutrition, HIV and AIDS, and sexual and reproductive health. Our livelihoods program through catalyst Microgrants, the hybrid economic and livelihoods process, and emergency and disaster response reached women and children with improved food systems and household income to deal with poverty and diseases.

As we move forward, we remain committed to providing quality health care and livelihoods in Malawi last last-mile communities while ensuring that no woman or child will die from treatable infections. I would like to express my gratitude to our team, stakeholders, and partners who made our work possible.

Thank you for your trust and confidence in Njira Impact. We look forward to achieving even greater milestones together in the coming year. Please know that your support inspires us and those we serve. We remain committed to putting your contributions to good use.

Sincerely
Dan Eddie Nthara
Executive Director

About Us

In rural Malawi, 14 million people live in poverty, with only 3 out of 10 able to access quality healthcare.

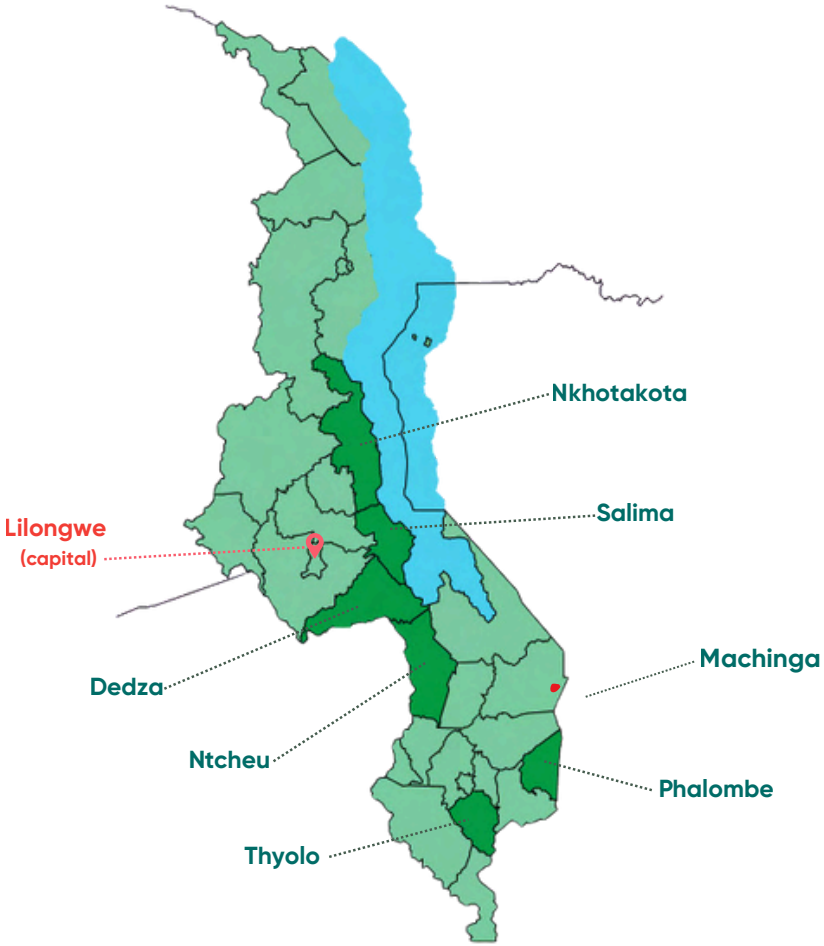
Njira Impact is a Malawian-led, local non-governmental organization, dedicated to improving the health and livelihoods of women, children & young adults in last-mile hard-to-reach areas.

With a focus on rural communities, Njira Impact addresses critical challenges such as limited access to healthcare and economic opportunities.

We provide essential transportation and logistical support, ensuring that women, children, and young adults can access maternal neonatal & child health, Sexual & Reproductive Health-related services.

We deliver the services through last-mile outreach clinics, door-to-door visits, and community health workers, reaching those most in need. Our holistic approach combines healthcare interventions with livelihood programs,

Njira Impact works in seven districts of Malawi:
Nkhotakota (population 395,897); Dedza (population 830,512); Salima (population 478,346); Thyolo (population: 458,976); Phalombe (population 429,450); Ntcheu (population 659,608).Machinga (population 874,337)
Together, these districts cover a total population of 4,127, 126



The 4 Pillars of our Collective Impact Model

PROFESSIONALIZED COMMUNITY HEALTH WORKERS

point of entry of care in households and communities

RESILIENT HEALTH SYSTEMS

partnerships with health facilities for last mile clinics and referral pathways

SPEED OF CARE

synergies with motorcycle tax operators

CATALYST LIVELIHOOD FACILITATORS

entrepreneurship and economic catalysts at community level

To date, our model has the following millestones...

trained and deployed

80

high quality Community Health Workers

partnered with

34

health facilities

partnered with

67

motorcycle taxi operators who provide emergency transport

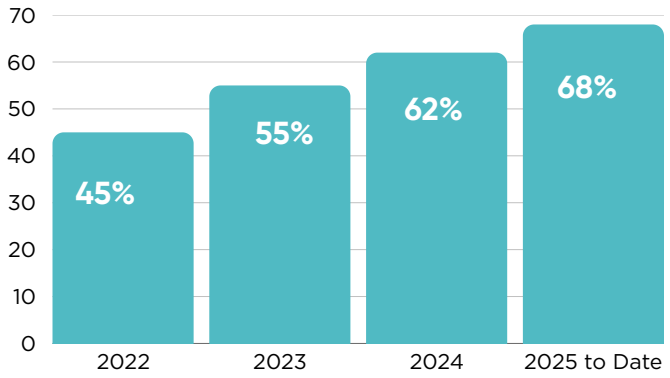
engaged

52

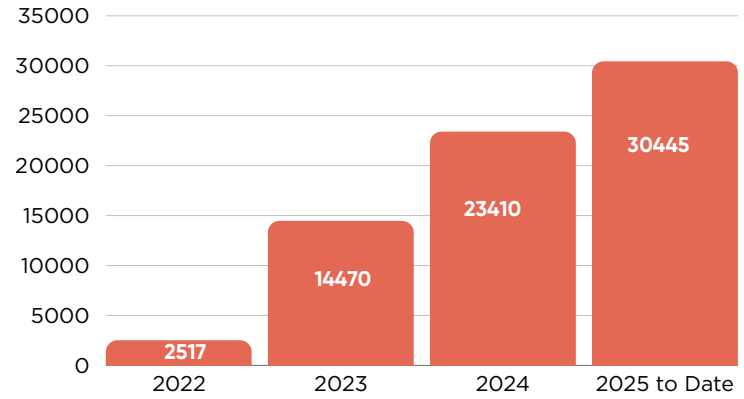
Community based facilitators who are actively working as catalysts for community businesses

Our Impact to Date

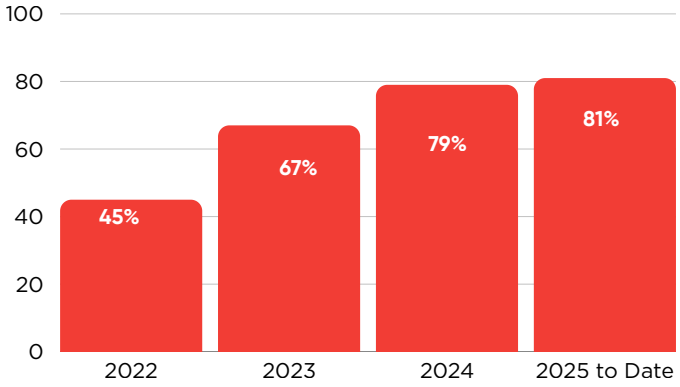
% of children and women who accessed MNCH services increased from 45% to 62%



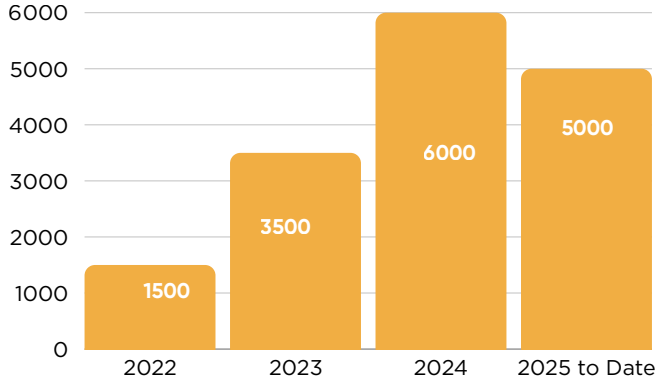
Number of home care visits done by Community Health Workers increased from 2517 to 23410 home visits.



% of women and children timely (within one hour of call) transported to health facilities to receive care increased from 45% to 79%



Number of households with increased income



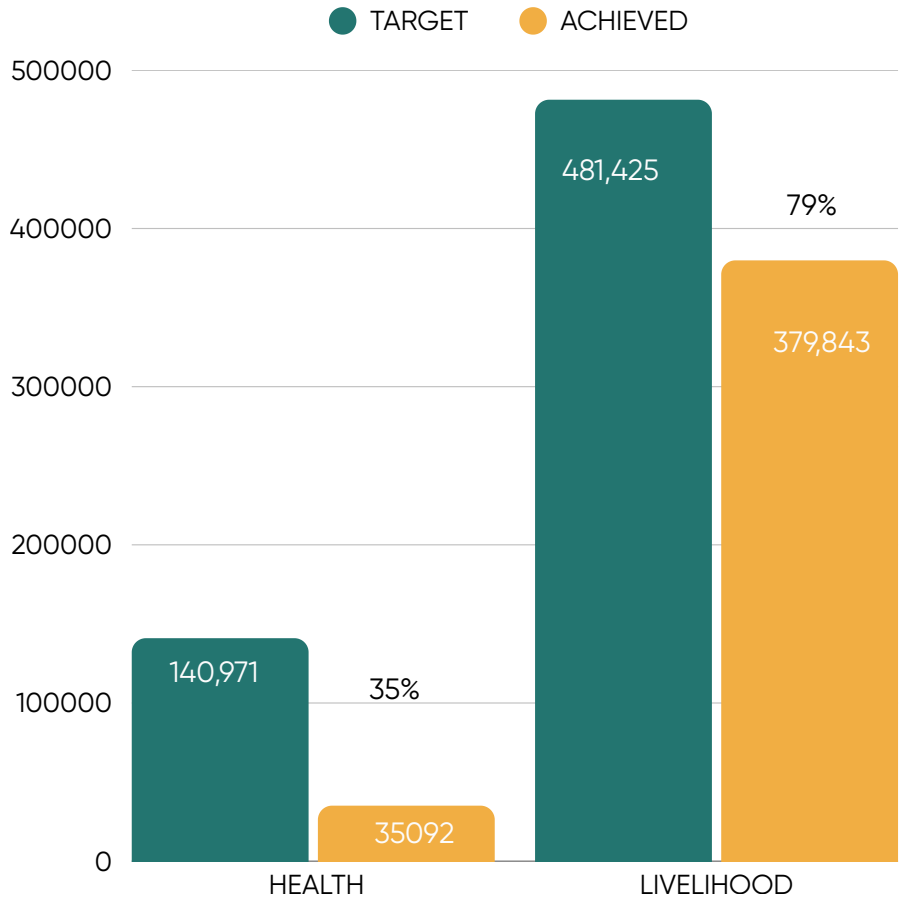
Q1 Performance

Njira Impact reached 398,448 people in the first quarter of 2025 through its health and livelihood interventions. Overall, 64% have been achieved in Q1 through health and livelihood interventions in all 7 districts where Njira Impact is implementing its interventions. It has been noted that the livelihood program has dominated in this quarter, as 79% has been achieved compared to the health program, which achieved 13% of its annual target.

During the first quarter of 2025, we served over 35000 people through last-mile clinics, emergency transport, and professionalized CHW. Njira Impact's health program delivery was significantly affected by external challenges that disrupted healthcare services, particularly those targeting mothers, children, and young adults. Stockouts of essential medical supplies(HIV Test kits, under-five vaccines, TTV, PEP/Prep, and Condoms) became more common across the partnered health facilities, which affected outreach and mobile clinics and referral as the Njira Impact supplement from the DHO (District Hospital Office) operations.

Njira Impact remained at the forefront of emergency response efforts, reaching over 370,000 people in Thyolo and Machinga with much-needed food assistance. Through a combination of food distributions and cash transfers, we supported families facing severe hunger brought on by the El Niño-induced crisis, as well as those still recovering from the devastating impact of Cyclone Freddy.

24 FCAP Titukulane villages serving 3362 households in Nkhotakota have started benefiting from the Micro Grants Project, hence livelihood leading in this quarter.



Program Achievements

Health Program

Focused on Maternal, Neonatal & Child Health, Nutrition, Sexual/Reproductive Health, and HIV & AIDS. Delivered through innovative solutions and strategic partnerships.

Innovative approaches:

- **Moonlight Clinics in hotspots**
- **Integrated Last mile clinics**
- **Emergency Transport Services**
- **Health Facility Partnerships**
- **Community Health Workers**

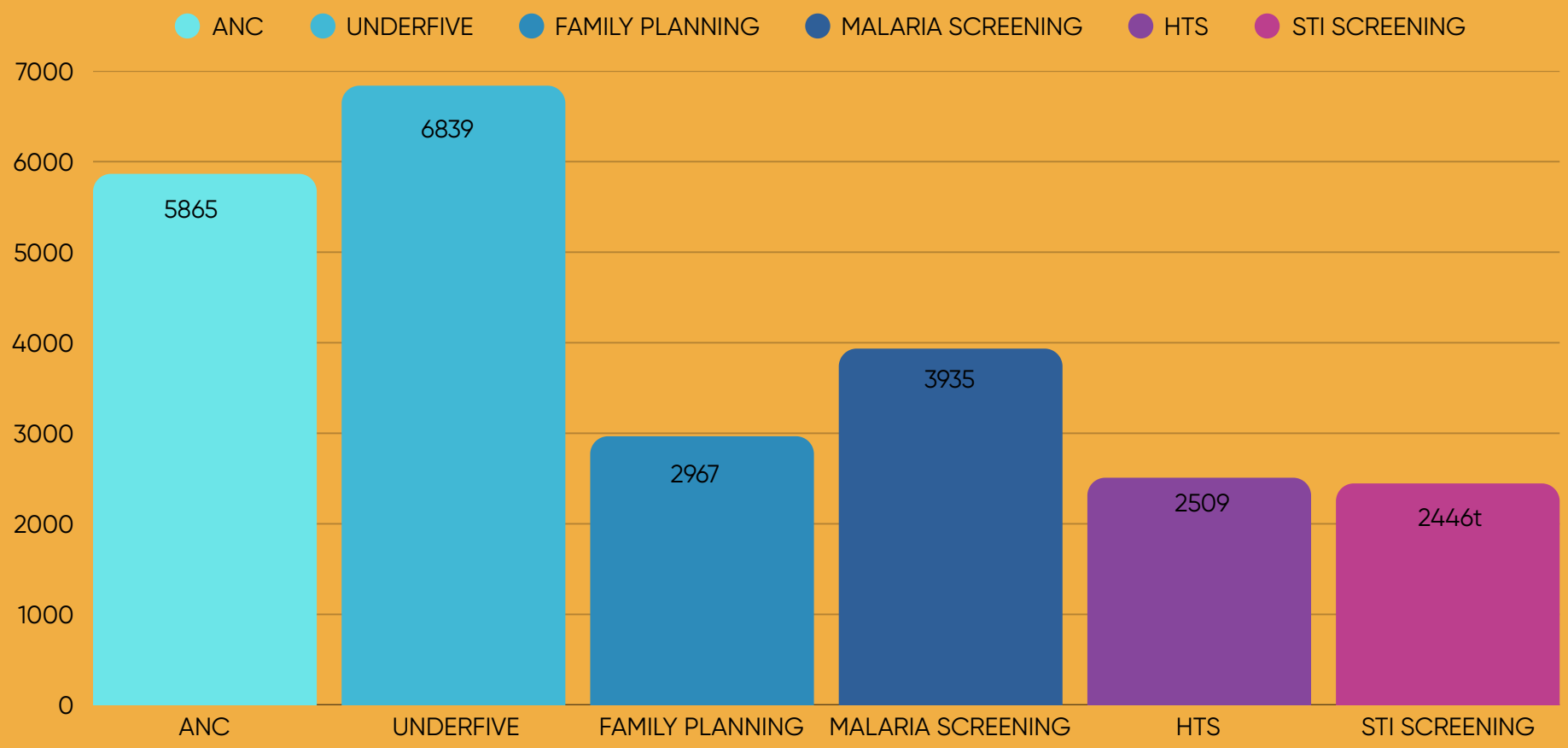
Reduction in maternal and infant morbidity and mortality

Njira Impact continued to serve the communities through health interventions, reaching those most in need through last-mile outreach clinics that targeted pregnant and lactating women, as well as children. The main aim of these clinics is to provide improved access to Primary quality Health Care services in last-mile, hard-to-reach communities, emphasizing MNCH and Nutrition, as well as integrated HIV and AIDS diagnosis and treatment of Sexually Transmitted Infections (STIs), and treatment for sexual malaria and Reproductive Health (SRH) services.

In the first quarter of 2025, Njira Impact conducted 38 circles of last-mile mobile outreach clinics in 21 catchment areas across 4 implementation districts, serving 24,561 patients. Njira Impact experienced a 26% decline in reach, from 33,240 patients reached through 63 circles of last-mile clinics in the same period in 2024. Due to the scarcity of consumables and supplies, the first quarter concentrated on delivering more life-saving MNCH services during outreaches as opposed to the usual complete outpatient clinics.

Interestingly, the decline in patients is not as steep as the decline in circles, which suggests higher average patient attendance per circle in 2025 who accessed health care services. and this replicates an increased demand for last-mile outreach clinics in the hard-to-reach communities.

Increased uptake of healthcare services through last-mile outreach in hard-to-reach communities



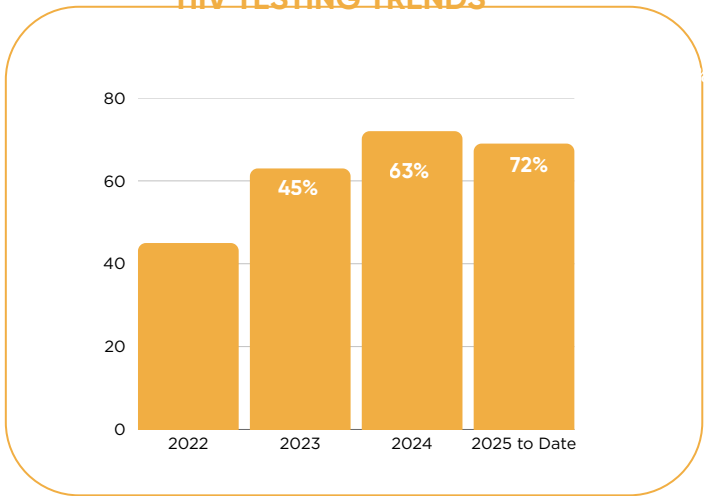
HIV Testing & Care Support

We expanded access to HIV testing and treatment through moonlight testing, mobile clinics, and index testing. This initiative aimed to improve access to HIV testing and active case finding in high-risk areas and remote communities.

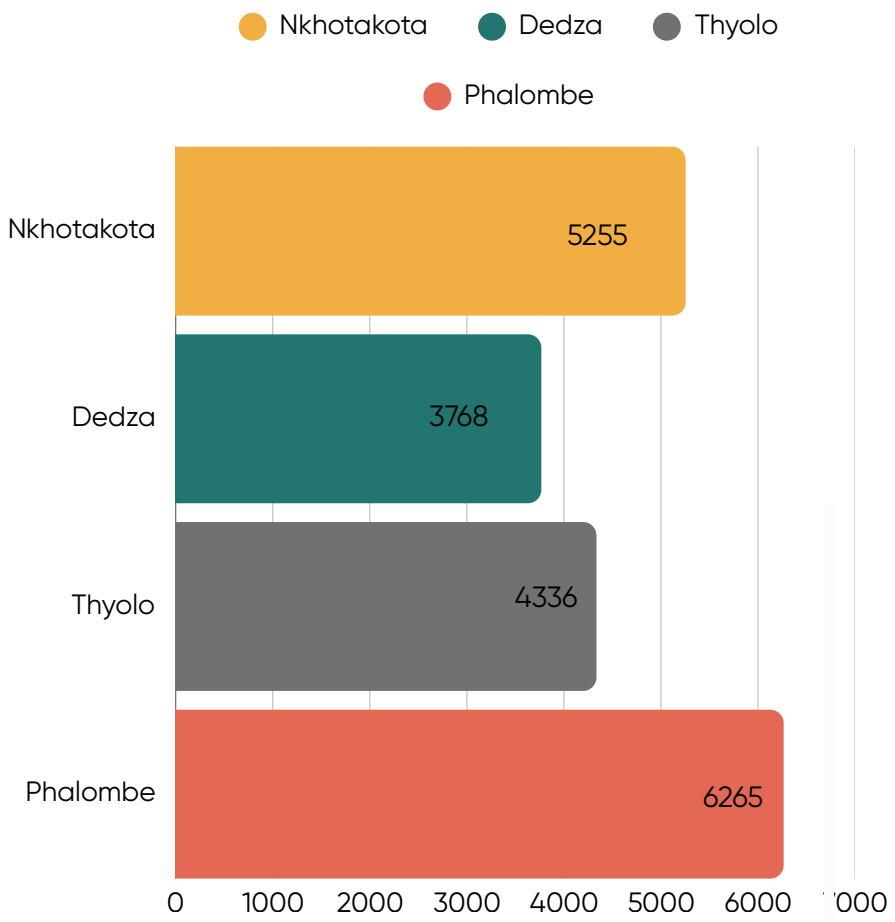
- In Q1 2025, 2569 people accessed HIV testing services, including adolescents and young women in hot spots. 3456 people accessed HIV testing in Q1 2024, resulting in a 26% decline due to the change in Malawi national standards to focus on hot spots where more HIV positive clients could be tested and put in treatment.

- 86 new positives were found and were initiated on ART as well as mentored on treatment literacy adherence.

HIV TESTING TRENDS



HIV TESTING IN PARTNER FACILITIES

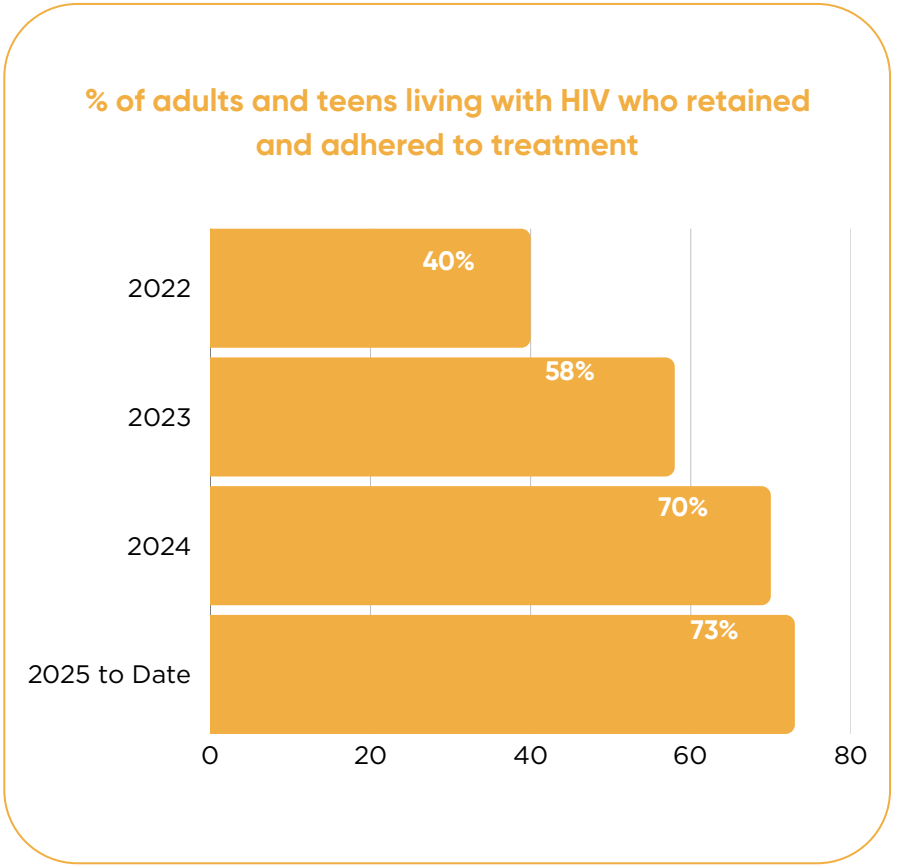


We Improved Retention to Treatment Care and Support through Pabwalo Citizen Alliance

In Q1 2025, Njira Impact continued to improve ART adherence and treatment among **17,818** lactating and pregnant mothers on PMTCT, teens, and young adults, a 54.6% increase from the **11,450** patients reached in Q1 2024. This remarkable effort expanded knowledge and zeal for remaining on ART treatment through the Pabwalo Citizen Alliance. Pabwalo Citizen Alliance is Njira Impacts' innovative community, clinic, and client collaboration of reducing default from MNCH, ART, and other key health services by promoting defaulter tracing and jointly conducting home visits.

Pabwalo Citizen Alliance :

- 17818 ART defaulters in their communities that missed appointments and lost follow-ups have been identified and traced.
- 17067 ART-traced defaulters have accessed treatment and care support, and they have been brought back to care in Nkhotakota, Dedza, Thyolo, and Phalombe.
- 3575 lactating and pregnant women have accessed information and health care, from home to the health facility.
- Reconciled the ART Defaulters data with the health workers in all 21 partnered health facilities.



Increase in women and children timely transported to health facilities to receive care when they need it.

Emily a 34-year-old pregnant woman from Mpamatha catchment area, she felt relieved after she was visited by Njira Impact CHW in her catchment area, Emily lost hope as she was referred to the District hospital for further medical examination due to complications she had with the pregnancy, but due to financial problems, she failed to visit the DHO.

Njira Impact Health team identified Emily during home visits, where they found her still at home with an overdue pregnancy due to a lack of transport money. Further counselling and encouragement were offered to stranded Emily, and she was provided with emergency transport and processed to seek care support at Nkhotakota DHO.

"I underwent an emergency Caesarean section immediately I reached the DHO, though the baby had some complications, but now we are all doing well. I don't know what would have happened to me and my baby if not for Njira impact supporting me with the emergency transport" she narrated Emily was 10-months pregnant by the time she was identified and her last ANC visit was attended 6 weeks back and she was advised that was her last ANC visit hence staying at home without any support.

The Njirainpact nurses facilitated timely referral, and ensured she received life-saving care through an emergency C-section, preventing potential life-threatening complications for both mother and baby.

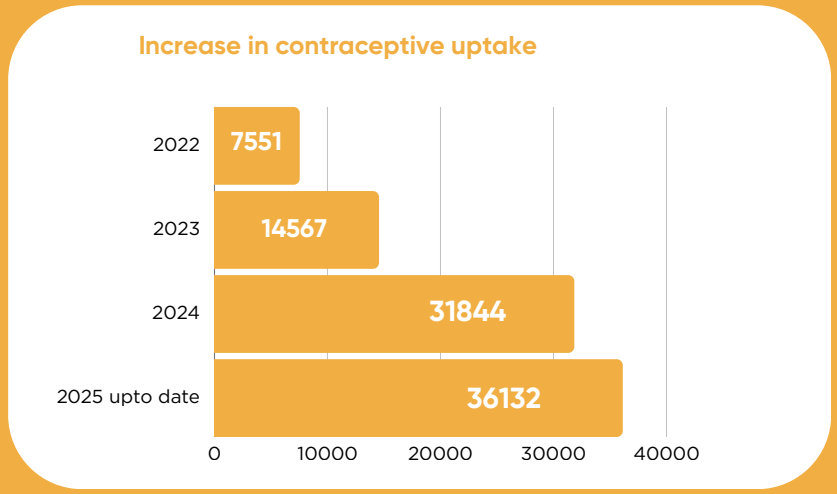
Emily is one of 137 pregnant women who were timely transported to the nearest health facility through the Speed of Care emergency transport system.

Sexual & Reproductive Health Services

Njira Impact provides SRHR information and services to women, Girls, and Youth. The package includes condom distribution, provision of contraceptive pills, and safe injected contraceptives HIV testing.

Njira Impact has expanded access to contraceptive uptake among women and girls through monthly SRHR mobile clinics, Moonlight SRHR delivery, and managed SRHR Clinic. This is aimed at increasing contraception uptake by women and girls, targeting the key population in hot spot areas.

4288 women and girls accessed contraceptives through mobile clinics in hotspot areas, last-mile outreach clinics, and one-stop center. Cumulatively, up to date, 36132 women and girls have accessed contraceptives in all areas of implementation.



Livelihoods Program

Focused on Economic Processes, Resilience, Disaster Response, and Catalyst Microgrants. Implemented through community collaborations and capacity building.

Innovative approaches:

- **Facilitated Collective Action Process (FCAP)**
- **Hybrid Economic Models**
- **ICT-based Extension Services**
- **Agribusiness Management**
- **Entrepreneurial Training**

Livelihoods Program Highlights

During the reporting period, we registered tremendous strides in households livelihoods development as follows:

- 80,000 households have are accessing unconditional food transfers as part of lean season response in Machinga district addressing food poverty.
- 4000 households are receiving conditional and unconditional transfers as part of el-nino resilience beneficiaries.
- 24 community projects received micro-grants of over USD250,000 to run projects in livestock, water and sanitation, agriculture and irrigation, and fishing hence addressing household economic shocks.
- Savings rates in HELP groups grew by 74% as compared to the time groups were operating using the self help group model.

51%

of women from **HELP** operates profitable businesses and improved households

469,463

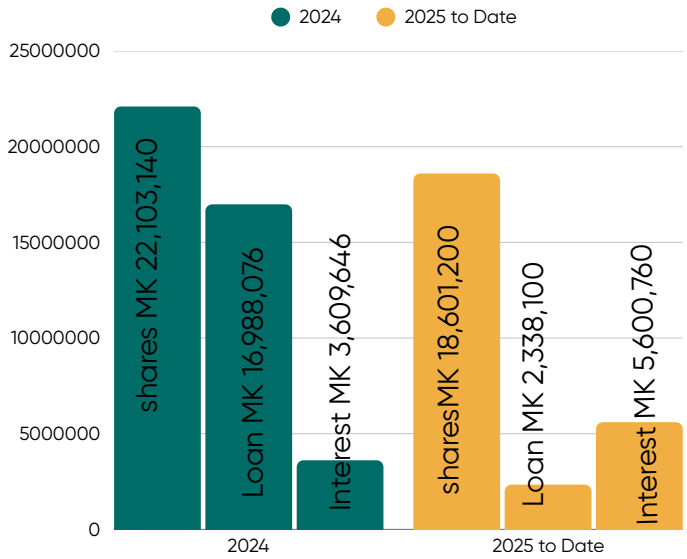
food insecure households supported with cash and in kind assistnace to meet their needs

52

communities benefited with Microgrants to support community-driven initiatives

Increase in income in participants households

3168 (829 new) women are participating in the Hybrid Economic Livelihood process(HELP), benefiting through social discussions, access to loans, and managed to buy their shares amounting to MK23,380,123. Over 582 women experienced increased income ranging from MK100,000 to MK4,000,000 through small-scale businesses and rice farming. Over 1,992 (1120 new) households are participating in Village Savings and Loans.



Income growth ranging from 60-95%

3335 women can invest in small-scale businesses and earn a living, including financing their health needs

With high rice yields, our HELP Women registered tremendous income growth of over 95% (Over 10 times growth)

Income level shift - growth segment

# of Households	Income levels(MK)
2	4,875,000
18	3,000,000
12	2,600,000
16	2,000,000
45	1,500,000
78	1,000,000

Ruth Nyirenda, a dedicated HELP Program Officer, shares her daily outlook with the women in HELP Groups

" I ensure that I provide weekly mentorship on financial literacy and business management skills at the same time, I encourage them to do small-scale businesses to improve their household income"

Meet Rose

Rose Chisale, a resilient single mother of three from the Chagwa HELP group,once faced overwhelming challenges in providing for her family. With limited income opportunities and growing household needs, each day was a struggle to make ends meet. But Rose's story took a positive turn this year through the Chagwa HELP group.

At the beginning of this year, Rose took a bold step and accessed a loan of MK150,000 through her group. Determined to break the cycle of poverty, she invested the funds into rice farming. The money enabled her to purchase fertilizer, pay for labor, and manage other essential farm needs.
Her hard work paid off. Rose harvested 60 bags of rice and sold 40 bags at MK65,000 each, earning a total of MK2.6 million.

"With this income, I was not only able to repay my loan in full, but I have also provided for my children's needs, including food, school fees, and clothing. Instead of stopping there, I have also reinvested my earnings into winter rice cropping; I have rented 2 acres, purchased additional inputs, and now I expect to harvest about 65 bags. "

Rose's journey is a testament to the other 604 women who accessed loans to invest in farming, showing the power of a hybrid economic livelihood process in empowering women economically, who not only accessed loans but climate justice, extension and business management skills.

Access to income through Microgrant Projects

Vegetable winter production at Khonde village

Layers chicken production at Pendwe village

Cooking oil production at Makhwazi village

24 Titukulane FCAP villages continue to implement their village pathways, where 3362 households are participating and generating income ranging from MK300,000 -MK 3,000,000 through selling the products

Challenges & Lessons Learnt

- **Shortage of medical supplies** in the health facilities which affected delivery of outreach clinics. Our last mile outreach clinics rely on supplies from government health facilities. During the year, our clients were deprived of quality health care due to frequent stock outs. Looking forward to the year ahead, we have strategically established new partnerships and developed proper roadmaps with the District Health Office for proper supply chain systems.

- **Heavy rains & flooding:** This affected all the programs activities as roads were impassable which led cancellation of last mile clinics. livelihood activities were also affected as HELP and FCAP villages were not able to meet during their scheduled meetings and led to delays in implementation. Beneficiaries were also affected due to floods as such continuation to participate in activities was on hold. Farmers fields were washed away which will lead to low or no yields for the farming households hence they will be food insecure.

- **Inflation and other economic challenges:** Malawi has experienced devaluation of the currency, price fluctuations and lack of forex which also led to fuel scarcity. In the past year, the economic conditions were not conducive for service delivery as prices for basic commodities had tripled. Looking ahead, Njira Impact has developed strong financial and program resilience strategies for managing reserves.

- Despite the efforts to make sure every youths has access to condoms, there is still **a rise in cases of STIs in all districts** where youths of age between 15 – 20 years are among the alarming figures of STIs, where 213 AGYW and their clients treated for STIs

Institutional Strengthening & Looking Forward

Our adoption of development quarterly rocks had become an established system for profiling the future of the organization. Our messaging, communications, and visibility journey for 2024 provided new thoughts to have clear implementable rocks for the year. Our 2024 goals that keep running to December 2024 remained the following:

Five Key Organizational Goals

- Improved quality and standards of programs and activities delivered to our clients and stakeholders.
- Improved adherence and compliance to organizational financial, administrative and program policy systems and procedures
- Enhanced functionality of M&E systems for effective knowledge management and learning
- Enhanced staff development and retention
- Increased resource base to 1 million USD per annum.

Our fourth quarter Rocks achievements for 2024

- Improved program delivery compliance, ensuring that operating procedures are utilized in all field activities,
- improved on human development stories and outcome harvesting documentation
- A new training guide for our CHWs is under development to professionalize the cadre according to CHIC and national-level standards.
- Reinforce operationalization of Rice Mill

Our first quarter Rocks for 2025

- To improve the quality of the program's implementation and reporting.
- To improve HR-staff development and retention
- To improve Compliance and departmental coordination
- To mobilize 1.5 million USD

Thank you to our Partners

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