



GOVERNMENT OF MALAWI

NATIONAL ENVIRONMENTAL HEALTH POLICY

MINISTRY OF HEALTH AND POPULATION

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Preface	vi
ACKNOWLEDGEMENT	viii
LIST OF ABBREVIATIONS	ix
1.0 INTRODUCTION	1
1.5 Linkages Between EH Policy and Other Development Frameworks and Sectoral Policies	4
1.6 Challenges	4
2.0 BROAD POLICY DIRECTIONS.	4
2.1 Vision	4
2.2 Mission	4
2.4 Overall Goal	6
2.5 Objectives	6
3.0 POLICY THEMES	6
3.1 Food Safety and Hygiene	6
3.1.1 Introduction	6
3.1.2 Goal	6
3.1.3 Policy statements	7
3.1.4 Strategies	7
3.2 Water, Sanitation and Hygiene	8
3.2.1 Introduction	8
3.2.2 Goal	8
3.2.3 Policy statements	8
3.2.4 Strategies	8
3.3 Health and Safety	9
3.3.2 Goal	9
3.3.3 Policy statements	9
3.3.4 Strategies	9
3.4 Vector and Disease Prevention and Control	10
3.4.1 Introduction	10
3.4.2 Goal	10
3.4.3 Policy statements	10
3.4.4 Strategies	10
3.5 Emergencies, Climate Change and Human Health	10
3.5.2 Goal	11
3.5.3 Policy statements	11
3.5.4 Strategies	11
4.0 IMPLEMENTATION ARRANGEMENTS.	12
5.0 IMPLEMENTATION PLAN.	14
2. Monitoring and Evaluation	14
5.2 Roles and Responsibilities of Different Levels of Environmental Health	15
5.2.1 National Level	15
5.2.2 District Level	15

5.2.3 Enterprise Level	16
5.2.4 Community Level	16
5.3 Roles and Responsibilities for Stakeholders In Environmental Health	17
ANNEXES 1 TO 4 STRUCTURE OF ENVIRONMENTAL HEALTH	20
2. Central Hospitals	22
3. District Level	23
4 Health Centre Level	24
ANNEX 5 STRATEGIC PLAN (2017–2022)	25
ANNEX 6 MONITORING AND EVALUATION FRAMEWORK	38

FOREWORD

The Government of Malawi recognizes that Environmental Health services have a greatest impact on people whose health status is already at risk; therefore environmental health must address the societal and environmental factors that increase the likelihood of exposure to hazards and diseases. Environmental health has been recognized as one of the most important functions in a drive to improving human health. Maintaining the health environment is central to increasing quality of life and years of healthy life. Globally, 25% of all deaths and 52% of total disease burden can be attributed to environmental health factors. Environmental health factors are so diverse and include: exposure to hazards substances in the air, water, soil, and food, natural and technological disasters, physical hazards, the built environment, nutritional deficiencies.

The goal of this National Environmental Health Policy is to guide and articulate, among others: National vision on Environmental Health hinging on five key thematic areas of Sanitation & Hygiene, Disease Control, Food safety and Hygiene, Health & Safety, and Human Health and Climate Change including Emerging issues as stipulated in the Public Health Act 1968; Policy Goals and Objectives for Environmental Health Management in Malawi; Principles, Strategies and Institutional Framework for effective management of critical Environmental Health matters and issues, including capacity building; education, training and public awareness; the polluter pays principle mechanism; reduction of emissions from automobiles hence lessen air pollution; adaptation and mitigation in natural and built environments, Waste management both industrial and domestic, water quality surveillance, and disaster impact mitigations emanating from climate change effects. This is also in line with Malawi's National goals, as outlined in Malawi's Growth and Development Strategy II and Vision 2020.

The policy will achieve this through better adaptation to mitigation measures against environmental health risks and hazards with key focus on sanitation and hygiene, food safety and hygiene, disease control, health and safety provision for Malawi's citizens. This Environmental Health Policy will create an environment for the development of a country-wide, coordinated and harmonized approach, which attends to the needs and concerns of all sectors of society, while ensuring continued sustainable development. This Environmental Health Policy, is intended to guide actions that reduce environmental health risks to human health and further guides harmonized approaches by different sectors and institutions towards implementation of Environmental Health Services.

The policy will also guide Malawi to benefit from the global financial, technical and technological opportunities arising from the desire of the international community towards Health People 2020 Environmental Health agenda. Examples of technological opportunities

include investment in recycling of generated wastes and composting biodegradable wastes for manure production.

The policy lays out a number of principles, and outlines an institutional framework, to guide Malawi in the application and the implementation of adaptation and mitigation. Translating this policy into action will prepare the country to overcome the challenges of Environmental Health hazards and embrace the opportunities to lay a solid foundation for a sustainable and prosperous Malawi. The Government of Malawi therefore commits to fully addressing Environmental Health through implementing this policy in line with the current Malawi growth and Development Strategy and previous strategies such as vision 2020.



Hon. Atupele Muluzi, MP
Minister of Health and Population

PREFACE

The Government of Malawi is concerned about the high disease burden that the country is experiencing. Most of these diseases are attributable to avoidable environmental risk factors.

HMIS Reports, (2017) indicate that 52% of all out patient's attendances in all health facilities and 25% of morbidity was due to sanitation and hygiene related diseases. The Ministry of Health has set out most of these as priority diseases in the Essential Health Care Package as outlined in the Health Sector Strategic Plan (HSSP)2017-20226. The challenge therefore is how to reduce the disease burden through environmental health interventions as one way of reducing pressure on the scarce health and national resources as outlined in outcome three of HSSP.

Environmental health encompasses the assessment and control of all physical, chemical and biological factors that can potentially affect the health of individuals. It is targeted towards preventing diseases and creating a health supportive environment. This Environmental Health policy is aimed at providing guidance on implementation of environmental health interventions. The policy ought to achieve the following:

- To increase the coverage of environmental health interventions in Malawi.
- To increase public awareness of environmental health issues in Malawi.
- To improve coordination and collaboration between various stakeholders in the implementation of environmental health interventions.

The policy has been developed in line with international declarations which Malawi is a signatory of and these are: Libreville Declaration on Health and Environment, held in Libreville in 2008, Ethekewini Declaration on Hygiene and Sanitation, 2008, Africa Health Strategy (of the African Union), 2007-2015, UN Millennium Declaration and subsequent Millennium Development Goals, 2000, Rio Declaration on Environment and Development, 1992 and the Alma-Ata Declaration on Primary Health Care, 1978. The development of this Environmental Health policy demonstrates Malawi commitment towards these global declarations.

Environmental health activities are being implemented in the country by different partners. These activities have been implemented without proper guidance and direction. This has, all along, even affected monitoring of the services since there have been no standards for implementation of the activities. The policy has therefore set out the core functions of environmental health which should guide every institution; governmental or non-governmental, that is rendering such services at all levels.

It is my sincere hope that all stakeholders in the country will use this policy in order to contribute to the reduction of disease burden thereby improving SDGs 3 and 6; enhancing economic development and so contributing to the overall reduction of poverty at all levels in the country.

This policy was developed after extensive consultations with Government Officials, Civil Society, Academia, NGOs, Experts and Development Partners. Amongst the consulted stakeholders included: UNICEF, WHO, Redcross, Wateraid, CPAR, Ministry of Agriculture, Irrigation and Water Development, University of Malawi (Polytechnic), Malawi Law Commission, Malawi Bureau of Standards, Ministry of Labour, World Vision Malawi, Malawi Environmental Health Association, Malawi College of Health Sciences, Medical Council of Malawi, Department of Environmental Affairs, Ministry of Education, Ministry of Labour, Ministry of Trade and Industry, World Bank, Department of Disaster Risk Management. The consultations ranged from meeting relevant stakeholders in their offices, sharing the draft policy with relevant stakeholders and holding consultative meetings with the relevant stakeholders.

The policy will be guided by principles set out in the Malawi Constitution, the United Nations Framework, Convention on Environmental Health and the Ethekwini Declaration on Hygiene and Sanitation, 2008. The principles include protection of human rights and freedoms, gender equality, sustainable development, equitable development, the polluter pays principle, the precautionary principle and informed stakeholder besides community participation



Dr. Dan Namarika
Secretary for Health and Population

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The Government of Malawi, through Ministry of Health and population would like to sincerely thank World Health Organisation for providing financial and technical support during the development of this policy. A special vote of thanks should also go to stakeholders that were involved in the consultation stage of the development of this policy and to WaterAid for financing printing of this policy. Lastly special thanks to the team in Ministry of Health and Population that worked tirelessly in the development of this policy.

LIST OF ABBREVIATIONS

ARI	Acute Respiratory Infections
CAMA	Consumer Association of Malawi
DODMA	Department of Disaster Management
EIA	Environmental Impact Assessment
EAD	Environmental Affairs Department
EHP	Essential Health care Package
EHS	Environmental Health Services
FSH	Food Safety and Hygiene
HACCP	Hazard Analysis Critical Control Point
HCWM	Health Care Waste Management
HIA	Health Impact Assessment
HIV/AIDS	Human Immuno Virus/Acquired Immuno-Deficiency Syndrome
HMIS	Health Management Information System
JMP	Joint Monitoring Programme
MBS	Malawi Bureau of Standards
MDG	Millennium Development Goals
MDGS	Malawi Growth and Development Strategy
MDIS	Ministry of Defence and Internal Security
MICS	Malawi Indicator Cluster Survey
MOAIWD	Ministry of Irrigation and Water Development
MOH	Ministry of Health
MOLGRD	Ministry of Local Government and Rural Development
MOJ	Ministry of Justice
MOL	Ministry of Labour
MRA	Malawi Revenue Authority
NGO	Non-Governmental Organisations
NSO	National Statistical Office
ODF	Open Defecation Free
SCT	Sanitation Core Team
STI	Sexually Transmitted Infections
UNICEF	United Nations Children's Fund
WASH	Water Sanitation and Hygiene
WHO	World Health Organisation

1.0 INTRODUCTION

1.1 Environmental Health Policy

The Environmental Health Policy provides policy direction on implementation of environmental health interventions. The policy has been developed in line with the Malawi Growth and Development Strategy (MGDS III), an overarching development plan for Malawi that recognizes that a healthy and educated population is essential if Malawi is to achieve sustainable socio-economic growth. This policy has also been developed in line with the overall national health policy that aims at improving the health status of all people of Malawi by among other things reducing environmental health risks as spelt out in the Health Sector Strategic Plan (HSSP) 2017-2022 under outcome number three, that pose serious threats to all people in Malawi.

The Environmental Health Policy will be implemented through the following priority areas: Food Safety and Hygiene; Health and Safety; Vector and Disease Prevention and Control; Water, Sanitation and Hygiene; Emergencies, Climate Change and Human Health.

The Policy will be implemented between 2018 and 2023.

1.2 Background

Malawi like many other rapid developing countries is faced with a number of environmental health issues and problems that affect the human health and environment. The Environmental Health risks result in 52% of the disease burden in Malawi (HMIS Reports, 2017). These diseases occur due to poor sanitation and hygiene, food contamination, inadequate disease surveillance, occupational health risks and poor environmental management leading to climate change and subsequently subjecting people to the effects such as disaster like floods and droughts. The climate of Malawi coupled with poor environmental management practices favours the breeding of vectors e.g. mosquitoes, houseflies, tsetse flies that are responsible for transmission of diseases from one person to another. The vectors and vermin are on increase and are resulting in a rise in related diseases like malaria, diarrhoeal, lymphatic filariasis, onchocerciasis, eye, and skin infections (Emerson et al, 2004). Diarrhoeal diseases account for 37% of the disease burden; 83% roundworms; 41% hookworms; and malaria 48%. Thirty percent reduction in Trachoma prevalence would be achieved where there is improved sanitation and hygienic practices coupled with safe water supply (HMIS 2017).

Occupational health and safety standards in institutions are generally poor. Most of the work environments are not safe either because there is no adequate personal protective equipment (PPEs) or else policy enforcement has lacked. This has resulted into an increase in occupational health related conditions, incidents and diseases, (Esrey, 2011). Management of hazardous industrial, health care wastes, electronic wastes is inadequate and in most cases, these are discharged into the environment without pre-treatment.

All border posts into the country (air, water and land) are prone to transmission of diseases from other countries. Nevertheless, these borders lack equipment, infrastructure and worse still the manpower is not provided with adequate capacity to manage such functions.

The community knowledge of environmental health issues such as waste management, sanitation and hygiene, food safety and hygiene, disease control is at minimal level hence participation in environmental health interventions has been very low.

Ministry of Health and Population in addressing environmental health issues faces a challenge of weak coordination with key sector stakeholders that include: Ministry of Local Government and Rural Development; Ministry of Agriculture Irrigation and Water Development; Department of Environmental Affairs; Ministry of Labour; Ministry of Industry and Trade; Ministry of Tourism, Wildlife and Culture and other Nongovernmental Organisations.

1.3 Rationale

The environmental health policy has been developed to guide the implementation of Environmental Health interventions which will help to mitigate the risk factors thereby reducing the sanitation and hygiene related disease burden that is already high. The resources used to treat these conditions will be saved and used to address other activities hence improve the general health status of all people of Malawi.

1.4 Statement of the problem

For many years, the environment health services have been implemented without a guidance of a policy resulting into challenges in addressing poor waste management; sanitation and hygiene; food safety and hygiene; occupational health and safety; vector and disease control and emergencies; and climate change and human health.

1.5 Purpose of the policy

The environmental health policy therefore seeks to seek to provide direction in the implementation of environmental health services.

2.0 LINKAGES WITH OTHER RELEVANT POLICIES

Linkages Between EH Policy and Other Development Frameworks and Sectoral Policies

The government of Malawi, with financial support from World Health Organization, through the Environmental Health section in the Ministry of Health and Population has developed this Environmental Health Policy. This is in line with Malawi's international commitments and national strategies. The policy responds to a number of international declarations to which Malawi is a signatory such as: Libreville Declaration on Health and Environment (2008), Ethekewini Declaration on Hygiene and Sanitation (2008), Africa Health Strategy of the African Union (2007-2015), UN Millennium Declaration and subsequent Millennium Development Goals (2000) Rio Declaration on Environment and Development (1992) and the Alma-Ata Declaration on Primary Health Care (1978).

The National Environmental Health Policy shall mirror other relevant policies and legal instruments such as Malawi Vision 2020, Malawi Growth and Development Strategy (MDGS) 2017-2022, Health Policy 2008, National Sanitation policy (2008), National Decentralisation Policy (1998), National Water Policy(2005), Health Sector Strategic Plan (HSSP) 2017-2022, Environmental Policy(1997), Social Disability Policy (2005),

HIV/AIDs Policy(2012) Disaster Risk Management Policy (2015), National Gender Policy (2011), National Health Communication strategy (2015)

2.3 Guiding Principles

The policy shall be guided by the following principles:

- 2.3.1 A legal framework shall provide an enabling environment for implementing Environmental Health interventions.
- 2.3.2 The delivery of national integrated environmental health service shall be based on Coordination, partnership and consultation within the Ministry of Health, multilateral organisations, relevant government agencies, non-governmental organisations and communities.
- 2.3.3 Adequate and necessary financial, human and material resources shall be mobilized and allocated for effective and efficient implementation of the environmental health services at all levels.
- 2.3.4 Promote man power development in Environmental Health through pre-service and in-service training, in collaboration with academic and consulting Institutions for effective implementation of Environmental Health services
- 2.3.5 The Policy shall address the needs of the target groups based on the evidence and analysis of data and information products through monitoring and evaluation appropriate cost effective technology and local innovations shall be adopted to promote the prevention and control of environmental health problems and their effects on health.
- 2.3.6 Design, manage and operate our establishments to maximize on safety, efficiency and protect the environment
- 2.3.7 International and Regional Instruments and Protocols shall be complied with, when implementing Environmental Health services after adaptation and adoption.
- 2.3.8 There shall be equitable deployment and distribution of EH staff and services, respectively, so they are accessible to everyone living in Malawi, including the marginalised.
- 2.3.9 Ensure that all community members and stakeholders are aware of their roles and responsibilities in the fulfillment and sustenance of environmental health and safety management systems.

3.0 BROAD POLICY DIRECTIONS

2.1 Vision

A healthy Malawi, free from environmental health risks

2.2 Mission

To improve the health status of all people in Malawi by providing efficient, effective, equitable and sustainable environmental health services.

2.4 Policy goal

To achieve the highest possible level of health and well-being for every Malawian by reducing morbidity and mortality resulting from environmental health risks.

2.5 Policy objectives

1. To protect the consumer against unsafe, impure and fraudulently presented food that may be injurious to health.
2. To improve water quality, sanitation and hygiene at household level, public and private institutions
3. To protect workers and the general public from impacts of unsafe and poor working environment
4. To prevent and control the transmission of communicable diseases
5. To reduce impacts of public health emergencies and effects of Climate Change on Human health

The policy has the following as priority areas that require attention and intervention to promote Environmental Health services:

1. Food Safety and Hygiene.
2. Health and Safety
3. Vector and Disease Prevention and Control.
4. Water, Sanitation and Hygiene.
5. Emergencies, Climate Change and Human Health

3.1 Food Safety and Hygiene

3.1.1 Introduction

Food borne diseases in Malawi are on the increase due to contamination of food through biological, chemical and physical agents. The implementation of Food Safety and Hygiene interventions will not only contribute to the reduction of the incidence of these diseases, but also, present an opportunity for the country to expand both domestic and international trade through compliance with set standards.

Policy statements:

- a. Government shall ensure National Food Safety and Quality Control systems are in place*

Strategies:

- Establish and strengthen Food Control Authority
- Strengthen and enforce appropriate food laws and regulations
- Strengthen the monitoring of food at different points in the food chain

3.2 *Water, Sanitation and Hygiene*

3.2.1 Introduction

Malawi's access to safe water is relatively high. According to MICS (2014), access to improved drinking water sources in Malawi is at 86.2%, however, 27.8% uses untreated water. 40.6% owns and uses improved sanitation and only 4.2% uses hand washing facilities, the open defecation free (ODF) status in Malawi is at 44.6% (MOH Report, 2018). This low coverage is leading to high prevalence of water and sanitation related diseases. Strengthening of interventions will contribute to the reduction in these diseases and conditions hence improve the general health of the people of Malawi. This also contributes to saving of finances that can be used for other health services.

3.2.2 Policy statements

3.2.3.2.1 Government shall promote proper management of solid and liquid wastes at all levels (households, institutions, rural and urban communities).

3.2.4 Strategies

- 3.2.4.1 Strengthen water quality monitoring from source to user-end.
- 3.2.4.2 Promote sanitation facilities that are gender and disability friendly
- 3.2.4.3 Promote proper management of liquid and solid waste at all levels
- 3.2.4.4 Promote Open Defecation Free (ODF) communities.

3.3 *Health and Safety*

3.3.1 Introduction

Health and safety focuses on environmental health factors that disproportionately affect the health of people especially the disadvantaged populations due to unsafe and poor working environment. Health and safety priority problems include: respiratory infections including tuberculosis; sexually transmitted infections (STIs) including HIV and AIDS; Eye, Ear and Skin (EES) infections, common injuries and other work related conditions such as stress and mental disorders. Most of these problems and challenges could be addressed by environmental health interventions.

Policy statements:

- a. Government shall ensure that there is compliance with health and safety requirements in the design, siting and construction of buildings.

Strategies:

- Establish mechanisms for health impact assessment during EIAs.
 - Establish mechanisms for health and safety in construction of new structures and demarcation of new settlements.
- b. Government shall ensure that there is health and safety in all work places.

Strategies:

- Strengthen inspection of work places and institutions.
- Improve the management of HCW in health facilities.
- Establish advocacy mechanisms for management of radioactive, toxic and injurious substances.
- Strengthen mechanisms for prevention of air pollution for both in door and out door.
- Strengthen proper industrial waste management

3.4 Vector and Disease Prevention and Control

3.4.1 Introduction

In Malawi communicable diseases related to environmental health risks such as Malaria, acute respiratory infections (ARI), Diarrhoeal diseases and Bilharzia remain the major causes of morbidity and mortality. These diseases occur due to poor sanitation and hygiene, food contamination and poor environmental management.

Policy statements:

Government shall promote appropriate control measures of vector and vermin:

Strategies:

- Strengthen port health services.
- Strengthen prevention of vaccine preventable diseases
- Strengthen reporting of notifiable and emerging diseases
- Strengthen sustainable vector and vermin control measures
- Strengthen collaboration in prevention of zoonotic diseases
- Enhance Information, Education and Communication of all communicable diseases including notifiable, emerging diseases and events

3.5 Emergencies, Climate Change and Human Health

3.5.1 Introduction

Climate change poses a serious threat to Malawi's development agenda. In the short to medium term, climate change will significantly affect the functioning of natural ecosystems, with serious repercussions on weather-sensitive sectors, such as health, agriculture, forestry, water resources, energy, fisheries, and wildlife. There is occurrence of some diseases such as malaria, diarrhoea and malnutrition correlate with changes in climatic conditions such temperature, rainfall and humidity. Impacts of disasters/emergencies such as floods and drought have already severely hit the well-being of many people in the country; smooth and effective delivery of health services has also been badly affected.

3.5.3 Policy statements

Government shall ensure that there are strong and resilient public health systems and programmes to respond to emergencies and disasters, and address effects of climate change on human health

3.5.3.3 Ensure that there is capacity building of Human Resource both for Health workers and community on health and climate change issues and emergencies.

Strategies:

- Strengthen environmental health hazard identification, mapping and risk reduction mechanisms at all levels.
- Strengthen preparedness for response, during and after emergencies and disasters.
- Promote research on climate change impacts and adaptation.
- Strengthen and operationalize the health components of disaster risk reduction and management plans.
- Strengthen core national and district capacities that shall facilitate development of strong and resilient public health systems and programmes to respond and address effects of climate change to human health.
- Establish and strengthen a surveillance system that will integrate health and climate change information for early warning and emergency preparedness and planning.
- Strengthen adaptation and mitigation measures for climate change sensitive diseases and conditions such as malaria, diarrhoea and malnutrition based on seasonal variations of climatic variables and disease incidences.
- Strengthen and promote multi-sectoral collaboration on health and climate change.
- Strengthen governance structures for the management of emergencies and climate change effects on health.
- Establish a mechanism for monitoring emergencies, health and climate trends.

4.0 IMPLEMENTATION ARRANGEMENTS

4.1 INSTITUTIONAL ARRANGEMENTS

There are many stakeholders that need to be engaged in the implementation of this policy. Coordination and leadership across these players is critical to achieving success. The Ministry of Health shall be the coordination office and shall lead implementation at all levels. The prime goal of this leadership is to convene, facilitate and guide rather than to command and direct so that an integrated approach towards the common goals and objectives of this policy can be achieved.

Key stakeholders include: government, non-governmental organizations and civil society, the private sector, academia, development partners, local communities and other marginalized groups.

4.2 Government coordination

At government level, the current cabinet committee on Health and Environmental shall report all issues pertaining to Environmental Health to cabinet. Similarly, the Parliamentary Committee on health and environment shall, report all issues pertaining to Environmental Health to Parliament. The Cabinet Committee will enable all arms of government to coordinate their actions. The Parliamentary Committee will serve to provide good governance oversight of environmental health interventions and services in Malawi.

4.3 National and District Fora

In order for government to efficiently and effectively reach out and engage with communities, a National Environmental Health Committee shall be established. This committee shall monitor progress, and provide advice on strategies and actions of its implementation. It shall also ensure that prescribed standards of services provided are adhered to. This National Environmental Health Committee shall include Environmental Health professional representatives from: civil society including the marginalized groups, government line ministries, and academia, media and development partners.

The Ministry of Health and Population, through the Environmental Health section, shall be the secretariat of the National Environmental Health Committee. This Committee shall establish a technical working group to tackle issues in all Environmental Health Thematic areas. This technical working committee shall be chaired by the Deputy Director responsible for Environmental Health.

The National Environmental Health Committee, including its roles, shall be replicated at district level. The head of Environmental Health Services shall serve as secretary to the District Environmental Health Committee.

5.0 IMPLEMENTATION PLAN

Government, through the Ministry of Health and Population in conjunction with the key stakeholders as outlined in the institutional framework shall develop a national strategic plan to take forward this national environmental health policy.

1. Incorporation of environmental health into relevant Sectoral and Partners' Strategic Plans

The structures established in the institutional framework will promote the incorporation of environmental health into all relevant Sectoral and partners' strategic plans.

2. Monitoring and Evaluation

Regular review of progress in the implementation of the national environmental health policy and advice on how to take the policy forward shall be provided by the bodies established in the institutional framework. Observing change, in environmental health interactions and disease trend alike, can only be achieved by monitoring key indicators and communicating hazards, risks and trends to those who can take action for addressing them.

The Malawi Government affirms to the need to monitor and evaluate environmental health interventions both on short term and long term besides climate change impacts such as floods, droughts, earthquakes, cyclones. This will enable environmental health practitioners to make evidence based decisions and to plan and respond effectively to environmental health risks and hazards including other emerging issues.

Monitoring and evaluation also provides a mechanism for institutional transparency and accountability. Progress with international and national developmental goals such as SDGs, the MGDS II, HSSP, and Vision 2020 can also be assessed. The Ministry of Health and Population in collaboration with other stakeholders, shall develop appropriate indicators. The ministry shall also report on regular basis on performance of those indicators. The relevant regulatory bodies and associations shall play a vital role in regulating professional conduct and career development of its environmental health practitioners. For instance, regulatory bodies shall ensure that all practitioners who implement the environmental health activities are qualified by training from recognized institution by Malawi government.

The Ministry of Health and Population through Environmental Health Organizational structure shall provide overall guidance, coordination, monitoring and evaluation of the national environmental health policy (see annex 3).

5.2 Roles and Responsibilities of Different Levels of Environmental Health

5.2.1 National Level

The department for the Environmental health in the Ministry of health and Population shall be responsible for the following

- 5.2.1.1 Initiate the review and development of legislation, policies, and standards and guidelines on environmental health
- 5.2.1.2 Establish mechanisms for sectoral and inter-sectoral co-ordination.
- 5.2.1.3 Identify major environmental health issues for priority interventions
- 5.2.1.4 Establish environmental health indicators for monitoring and evaluation of the effectiveness of the policies and strategies.
- 5.2.1.5 Provide supplementary financial and material resources for the management of environmental health at district level.
- 5.2.1.7 Define responsibilities and lines of authority of EHOs at different levels
- 5.2.1.8 Ensure equitable distribution of Environmental Health Officers
- 5.2.1.9 Establish a training programme for Environmental Health Officers.

- 5.2.1.10 Promote international collaboration and cooperation on EH issues.
- 5.2.1.11 Promote coordination with other ministries and organisations that provide environmental health services

5.2.2 District Level

The department of Environmental health in the district shall be responsible for the following:

- 5.2.2.1 Implementing, monitoring and evaluation of environmental health programmes.
- 5.2.2.2 Conduct education and information campaigns to promote environmental health.
- 5.2.2.3 Maintain a data-base and information net-work on environmental health.
- 5.2.2.4 Ensure timely response to emergencies and management of epidemics.
- 5.2.2.7 Enforce and ensure compliance with statutory regulations and standards on environmental health
- 5.2.2.8 Promote inter-sectoral collaboration and co-operation
- 5.2.2.10 Prepare periodical reports on the state of environmental health in the district
- 5.2.2.11 Promote community participation in the formulation of strategies for assessment, monitoring and evaluation of environmental health interventions.

5.2.3 Enterprise Level

- 5.2.3.1 Formulate institutional environmental health policy and procedures
- 5.2.3.2 Ensure compliance with all statutory regulations and standards on environmental health
- 5.2.3.4 Establish training and information programmes for workers and surrounding communities

5.2.4 Community Level

- 5.2.4.1 Establish community-based Development and Management Committees for environmental health programmes
- 5.2.4.2 Promote inter-sectoral co-operation and involvement
- 5.2.4.3 Participate in policy decisions to identify and determine local priorities in resources, developmental projects and services in environmental health

- 5.2.4.4 Participate in the planning, implementation, monitoring and evaluation of environmental health programmes.
- 5.2.4.5 Support and participate in public information campaigns of the national environmental health policy and programmes
- 5.2.4.6 Develop plans and mobilise the community for timely response to emergencies and management of epidemics
- 5.2.4.7 Mobilise the community to plan, implement and evaluate EH services

5.3 Roles and Responsibilities for Stakeholders In Environmental Health

The strategies stipulated in this policy cuts across different sectors. This section is clarifying the roles and responsibilities for different stakeholders in Environmental Health field.

Ministry of Health and Population

- ❖ Water quality monitoring and sanitary surveys
- ❖ Promotion of water point sanitation and hygiene
- ❖ Water treatment at household level
- ❖ Promotion of sanitation and hygiene in cities and communities using relevant approaches such as CLTS and PHAST
- ❖ Promotion and enforcement of proper waste management at both households and commercial sites
- ❖ Conduct Environmental Health Impact assessment
- ❖ Promotion and enforcement of food safety and hygiene at household, informal and formal food establishments.
- ❖ Certification of exported and imported foods that meet food safety and hygiene standards
- ❖ Monitoring and enforcement of food fortification at ports of entry, commercial and household levels
- ❖ Medical examinations of food handlers from informal and formal establishments
- ❖ Coordination of food safety and hygiene activities at all levels
- ❖ Coordination of disease prevention and control including vector and vermin
- ❖ Planning, implementing and evaluating of disease prevention and control measure/interventions including vector and vermin
- ❖ Management of port health services at all ports of entry
- ❖ Planning, implementing and coordinating of health interventions during disaster and emergency
- ❖ Planning, implementing and coordinating of health and climate change interventions

Ministry of Agriculture, Irrigation and Water Development

- ❖ Provision of water sources
- ❖ Water quality monitoring before commissioning of new water sources
- ❖ Facilitation of water sources management
- ❖ Water treatment at water facility

Malawi Bureau of Standards

- ❖ Setting and monitoring standards of environmental health related services and products
- ❖ Certification of environmental health related services and products

Department of Environmental Affairs

- ❖ Monitoring of water pollution
- ❖ Conduct Environmental Impact assessment
- ❖ Conduct environmental education and public awareness
- ❖ Enforcement of environmental standards, laws and regulations
- ❖ Reporting on state of environment.
- ❖ Issuing of certification for effluents to be discharged into water bodies
- ❖ Monitoring of radiation

Water Boards

- ❖ Provision of urban and peri urban piped water supplies
- ❖ Water treatment
- ❖ Water catchment conservation management

Local Authorities

- ❖ Plan, implement and coordinate environmental health services.
- ❖ Provision of sanitation and hygiene facilities in public places e.g markets
- ❖ Solicit funding for implementation of environmental health services
- ❖ Formulate and enforce of Bye laws, statutory regulations and standards on Environmental health.
- ❖ Promote awareness on environmental health issues
- ❖ Prepare periodical reports on the state of environmental health in their areas.
- ❖ Promote intersect oral collaboration and co-operation

Non-Governmental Organisations and Civil Societies

- ❖ Assist in community sensitisation in environmental health issues
- ❖ Encourage the community to manage water and sanitary facilities.
- ❖ Assist Government in implementing environmental health activities
- ❖ Advocacy on health and safety measures

Training institutions

- ❖ Undertake capacity building in environmental health issues
- ❖ Promote and conduct research in environmental health
- ❖ Develop low cost technologies for advancement of environmental health issues

Development Partners

- ❖ Provision of technical and financial resources
- ❖ Capacity building

Ministry of Labour

- ❖ Conduct inspection in work places.
- ❖ Formulate and review laws regulation codes of practice on occupational safety and health
- ❖ Creating awareness to employees and employers on occupational safety and health

Department of Relief and Disaster Management

- ❖ Coordination of disaster risk management.
- ❖ Mobilising resources for disaster and emergency management
- ❖ Coordination of development of disaster risk management plans

Ministry of Home Affairs and Internal Security

- ❖ Enforcement of laws

Media

- ❖ Creating awareness on environmental health issues

Malawi Revenue Authority

- ❖ Support in regulating importation and exportation of food and other materials.
- ❖ Collaborating with port health officers in their duties.

Ministry of Education, Science and Technology

- ❖ Collaborate in planning, implementing and evaluating school environmental health services.
- ❖ Maintain environmental health issues in school curriculum.

Ministry of Gender, Community Services and Social Welfare

- ❖ Support community mobilisation for Environmental Health Services (EHS).

ANNEX 5 IMPLEMENTATION PLAN (2018 – 2024)

Specific goal	Outcome	Strategy	Activity	Implementing partners	Timeframe		
To protect the consumer against unsafe, impure and fraudulently presented food that may be injurious to the health of the consumer.	Reduced incidents of food borne diseases	Strengthen food inspection and premise auditing	Conduct food inspections	MoHP, MBS, Ministry of Tourism, MOLG	Ongoing		
			Procure equipment and supplies	MoHP, UNICEF, WHO	2018 and ongoing		
			Train EH staff in food inspections	MoHP, Training institutions	Ongoing		
			Conduct stakeholders meetings	MoHP,	Ongoing		
			Take and review inventory of food premises	MoHP, Trade, MOA, MOT, Councils, MBS	Ongoing		
		Strengthen medical examination for food handlers			Develop standards for conducting food inspections and premise auditing	MoHP, MBS, WHO, MOA	2018
					Review guidelines for medical examinations	MoHP, Local Government	2018
					Conduct routine medical examinations for food handlers	MoHP, MBS, Councils	Ongoing
					Procurement of reagents and equipment for testing of food handlers	MoHP,	Ongoing

		Develop health certification guidelines for local, exported and imported foods and corresponding certificates	MoHP, MOIT, MRA, MBS	
Establishment of certification mechanisms	Strengthen mechanisms for food testing	Develop food testing guidelines (sampling, transportation, storage)	MoHP, MBS	2018
		Train EH staff in food testing guidelines	MoHP, MBS, training institutions	2018
		Procure equipment and supplies	MoHP, WHO, UNICEF	2018
		Train lab personnel in food testing	MoHP,	2018
Strengthen investigation and documentation of food borne diseases and conditions	Raise awareness and educate consumers on food safety and hygiene	Develop guidelines on investigation and reporting of food borne diseases and conditions	MoHP,	2018
		Training of EH staff on the guidelines	MoHP, WHO	2018
		Conduct IEC on FSH practices at household level	MoHP, CAMA	Ongoing
		Develop IEC messages and materials on FSH	MoHP, WHO	2018

					2018
				MoHP, MBS	
		Develop training materials of food premises owners and food handlers			
Strengthen the monitoring of food at different points in the food chain, including raw agricultural products, processed foods, genetically modified foods, street foods, foods served in food service establishments, fortified foods and at household level		Train food premise owners in FSH		MoHP, MBS	2016
		Harmonise guidelines for formal food establishments		MoHP, MBS	2016
		Adapt codex/WHO guidelines in informal food establishments in FSH		MoHP, MBS	2016
		Training of food handlers and inspectors in HACCP		MBS, MoHP, Training institutions	Ongoing
		Strengthen and	Review the available food laws and	MoHP, MOJ,MBS, MOAFS	2018

			enforce appropriate food laws and regulations	regulations	MoHP, MBS, MOJ	2018
				Disseminate the food laws and regulations	MoHP, MBS, MOJ	2018
				Develop food control Act	MoHP, MBS, MOJ	Ongoing
				Enforcement of food laws and regulations	MoHP, MOLG, MOT, MRA, MDIS, MBS, MOJ	
			Strengthen quality monitoring from source to the user	Training of EHOs in water quality monitoring	MoHP, MOIWD, Training institutions	Ongoing
				Procurement of equipment and supplies for water quality monitoring	MoHP, UNICEF	Ongoing
			Strengthen water treatment at point of use	Conduct IEC on water treatment	MoHP, Partners	Ongoing
				Lobby for availability of chlorine products	MoHP,	Ongoing
				Provide chlorine	MoHP, PSI	Ongoing
			Strengthen surveillance of WASH related diseases.	Training of HSAs and community structures in WASH diseases.	MoHP, Partners	Ongoing
To ensure availability of safe water, sanitary facilities and improved hygienic practices	Reduced incidents of WASH related diseases					

		Promote hygiene at household level	Develop IEC messages and materials on sanitation and hygiene. Conduct clean village competition Sensitize communities on construction of dwelling houses that meet minimum housing standards	MoHP, Partners MoHP, MoHP,	2018
	Promote Open Defecation Free	Trigger communities for ODF using appropriate approaches such as CLTS	MoHP,		
	Promote provision of sanitary facilities and hand washing	Inspection of sanitation in villages, public and private institutions Conduct IEC on sanitation and hygiene Conduct IEC on sanitation and hand washing at critical times	MoHP, Local councils MoHP, Partners MoHP, Partners	Ongoing Ongoing Ongoing	
	Promote the use of sustainable sanitation technologies	Conduct IEC on sustainable sanitation technologies Documentation of sustainable technologies Facilitate construction of water and sanitation facilities that are gender and disability friendly	MoHP, Partners MoHP, Partners MoHP,	Ongoing Ongoing	
	Promote proper management of liquid and solid waste at all levels	Facilitate construction of standard liquid and solid waste facilities Facilitate procurement of liquid and solid waste collection vehicles	MoHP, MoHP,		

		Increased collaboration and coordination	Strengthening sectoral and inter sectoral coordination and collaboration	Conduct stakeholders meetings in thematic areas	MoHP,	Ongoing
				Conduct joint visits to project areas	MoHP, Partners	Ongoing
		Increased use of data in decision making	Strengthen EH information management system	Develop indicators for EH thematic areas	MoHP, PARTNERS	2018
				Establish data base for EH thematic areas	MoHP,	2018
				Produce and submit reports on EH thematic areas	MoHP,	Ongoing
				Disseminate information in EH thematic areas	MoHP,	Ongoing
		Improved evidence based decision making	Promote research and technology development in EH thematic areas	Conduct research in EH thematic areas	MoHP, Partners	Ongoing
				Adapt and adopt innovative technologies in EH thematic areas	MoHP, Partners	Ongoing
To prevent and control transmission of other communicable diseases		Reduced incidences of other communicable diseases	Strengthen port health services	Deploy EH personnel in border posts	MoHP,	2018
				Training of border staff	MoHP, MRA	
				Renovation and construction of health offices		

diseases and disease outbreaks	and magnitude of outbreaks		in borders	MoHP, MRA, WHO	2018
				MoHP, WHO	2018
			Procure equipment and supplies for port health offices	MoHP, WHO	2018
			Collaboration with border Stakeholders	MBS, MoHP, MRA	Ongoing
			Conduct diseases surveillance at border posts	MoHP,	Ongoing
			Conduct cross border meetings on disease prevention and control	MoHP, MOLG	Ongoing
			Train health workers in disease surveillance and response	MoHP, WHO	Ongoing
			Conduct surveillance of diseases in communities and health facilities	MoHP, VHCs	Ongoing
		Strengthen disease surveillance and response for communicable diseases and events	Procure and distribute supplies for responding to outbreaks	MoHP, Partners	Whenever required
		Strengthen response to disease outbreaks and events	Conduct outbreak investigations and respond	MoHP, WHO, UNICEF	Whenever required

			Form and revamp epidemic management structures	MoHP,	Ongoing
			Conduct stakeholder meetings on epidemics	MoHP, Local councils	
Strengthen reporting of notifiable and emerging diseases			Establish entomological laboratories	MoHP,	2018
Strengthen sustainable vector and vermin control measures			Procure vector control equipment and supplies	MoHP, Partners	Ongoing
			Conduct operational research on entomology	MoHP, Partners	Ongoing
Enhance information, education, and communication for all communicable diseases including notifiable, emerging diseases and events			Promote IEC on dangers and control of vectors	MoHP, Partners	Ongoing
			Promote insecticide revolving fund initiative	MoHP, Partners	Ongoing
			Mobilise communities in vector and control (healthy village settings)	MoHP, Partners	Ongoing
			Conduct research on vector control methods	MoHP, Partners	Ongoing
Strengthen collaboration			Conduct meat inspection	Veterinary, MoHP,	Ongoing

		in prevention of zoonotic diseases	Conduct community sensitisations on zoonotic diseases	MoHP, Veterinary	Ongoing
		Strengthen prevention of vaccine preventable disease	Conduct immunisations for other immunisable diseases Conduct mass screening for some conditions Conduct mass treatment in communities	MoHP, WHO MoHP, Partners MoHP, Partners	Whenever required Whenever required Whenever required
To protect the workers and general public from hazardous environmental factors.	Reduced hazardous environmental factors in workplaces and general community	Strengthen inspection work places	Update list of workplaces	MOL, councils, MBS	2018
			Review guidelines and checklist for inspections	MoHP, MOL	2018 Ongoing
			Conduct inspection of work places	MoHP, MOL	
		Strengthen HCWM in all health establishment	Review training manuals for HCWM Conduct training of health workers on HCWM Conduct inspection of HCWM facilities in health institutions	MoHP, WHO MoHP, MoHP, EAD	2018 2018 Ongoing

		Establish mechanisms for health and safety in construction of new structures and demarcation of new settlements	Develop guidelines in health and safety in siting, designing and construction of buildings. Train EHOs in the health and safety guidelines Participate in country and town physical planning meetings at all levels	MoHP, Physical planning	2018
		Strengthen health impact assessment during EIAs	Develop guidelines for health impact assessment	MoHP, EAD	2018
			Train Health personnel in HIAs	MoHP, EAD	2018
		Strengthen mechanisms for prevention of air pollution for both indoor and outdoor	Advocate for participation in EIAs	MoHP,	2018
			Conduct health audits of projects	MoHP, EAD	2018
			Conduct advocacy on in door air pollution	MoHP, EAD	2018

		Strengthen industrial waste management	Conduct industrial audits on waste management	MoHP, EAD, Local council	2018
	Strengthen core national capacities that enable health systems to prepare for and effectively respond to climate change threats to human health	<ul style="list-style-type: none"> Conduct regular environmental health audits in all catchment areas to establish climate change impacts that may likely occur Establish early warning systems of climate change impacts at all levels Provide capacity to all extension workers to support communities on environmental safeguards construction Promote resilient construction technologies to mitigate climate change impacts Train health workers and stakeholders in climate change impacts mitigation 	MoHP, Meteorological department		2018
	Promote research on climate change impacts and adaptation	<ul style="list-style-type: none"> Intensify use of evidence based data to plan interventions aimed at addressing climate change impacts Conduct research on climate change impacts and their respective mitigations Collaborate with academia in tracking trends of climate change impacts 	MoHP, University of Malawi, Luamar, WHO		2018
	Strengthen and operationalise the health components in	<ul style="list-style-type: none"> Establish effective plans and incorporated in the national, district implementation plan for proper 	MoHP, DoDMA, WHO		2018

		disaster risk reduction plans	<p>coordination purposes</p> <ul style="list-style-type: none"> • Provide budgetary estimates to DoDMA every year to assist in responding to disaster impacts • Constitute emergency health teams to respond to disaster risks 		
To promote preventive, mitigation and adaptation measures regarding health impacts of emergencies and climate change issues.	Strengthen environmental health hazard identification, mapping and risk reduction mechanisms at all levels		Train health personnel in hazard mapping	MoHP, Local councils	2018
			Conduct hazard and environmental health risk mapping	MoHP, Local councils	2018
			Conduct sensitisation meetings on hazard mitigation	MoHP, Local councils	2018
			Conduct routine documentation of all hazards	MMoHP, Local councils	2018

ANNEX 6 MONITORING AND EVALUATION FRAMEWORK

Outcome	Output	Indicator	Baseline	Target	MOV	Frequency	Timeline	Responsible officer
HEALTH AND SAFETY								
Reduced health risks in workplaces	inspection of work places strengthened	% of w/places with safe or non hazardous working conditions	Unknown		District reports	Quarterly	Ongoing	CEHO
					Surveys	Annually	Ongoing	
	health and safety standards reviewed	Availability of reviewed standards on occupational health and safety			Copy of reviewed standards	Once	2016	CEHO
Reduced health risks during emergencies and disasters	response to emergencies and disasters strengthened	No. of disasters where response was timely	Unknown		Disaster reports	Whenever required		CEHO
Reduced risk of infections and injuries from health care wastes	HCWM in health facilities improved	% of facilities with required HCWM *	Unknown		District reports	Quarterly	Ongoing	CEHO

Outcome	Output	Indicator	Baseline	Target	MOV	Frequency	Timeline	Responsible officer
Reduced risk of infections and injuries from developmental projects	Health impact assessment during EIAs strengthened Health audits strengthened	% of projects which have passed HIAs % of projects passed audits	Unknown Unknown		District reports District reports	Quarterly Quarterly	Ongoing Ongoing	CEHO CEHO
Improved health and safety in settlements	Health and safety measures in settlements and buildings strengthened	% of new settlements designed in compliance with health and safety guidelines	Unknown		District reports	Quarterly	Ongoing	CEHO
Reduced health hazards from exposure and injurious hazardous substances	mechanisms for reduction of exposure of hazardous and injurious substances	Mechanisms in place Population exposed			Survey	Annually	2017 2017	CEHO CEHO

	Advocacy for water hygiene, sanitation and hand washing at household level enhanced	% of water samples from households with residual chlorine.	Unknown		District reports	Quarterly	Ongoing	CEHO
		% of water samples from households tested coliform negative	Unknown		District reports	Quarterly	Ongoing	CEHO
		% of households owning and using improved sanitary facilities*	40.6% improved MICS,2014	60% improved	District reports Surveys	Quarterly Annually	2017	CEHO
		% of ODF villages	29% (MoH Reports 2015)		District reports	Quarterly	Ongoing	CEHO
		% of people hand washing with soap	56.2% MICS 2014	60%	Survey	Annually	2017	CEHO
Outcome	Output	Indicator	Baseline	Target	MOV	Frequency	Timeline	Responsible officer
	Water treatment at point of use improved	% of with water samples from households tested positive on chlorine residuals	Unknown		Survey	Annually	2017	CEHO

	Advocacy for provision of sanitary facilities in public institutions strengthened	% of institutions with adequate sanitary facilities	Unknown		District reports	Quarterly	Ongoing	CEHO
	Promotion of sustainable, gender disability friendly sanitary facilities enhanced	Availability of sustainable gender and disability friendly sanitary facilities	Unknown		Survey	Annually	Ongoing	
FOOD SAFETY AND HYGIENE								
Reduced incidences of food borne diseases	Food inspection strengthened	No. of food items condemned No. of inspections done	unknown		District reports	Quarterly		CEHO
	premises auditing strengthened	% of satisfactory food premises* .	Unknown (data from MBS, city)		District reports	Quarterly		CEHO

Outcome	Output	Indicator	Baseline	Target	MOV	Frequency	Timeline	Responsible officer
	Medical examination services for food handlers strengthened	% of food handlers satisfying medical fitness * No. of food establishments complying with testing	unknown		District reports	Quarterly		CEHO
	Food certification guidelines established	Food certification guidelines established	unknown		Presence of guidelines	Once		CEHO
	Mechanisms for food testing established	Food testing guidelines in place	None		Guidelines	Quarterly		CEHO
	Investigation of food borne disease outbreaks and conditions strengthened	Number of food borne disease outbreaks investigated	unknown		District reports	Immediately upon occurrence		CEHO
	Reporting of food borne diseases and conditions strengthened	% of districts reporting			District reports	Immediately upon occurrence		CEHO
	Advocacy on	Number of	unknown		Survey	Annually		CEHO

diseases and control of disease outbreaks	regulations strengthened	No. of cases detected				District reports	Quarterly				CEHO
	disease surveillance strengthened	No. of deaths detected									
	Response to disease outbreaks strengthened	Number of functional coordination committees				District reports	Quarterly				CEHO
		Attack rate for outbreaks Case fatality rate for outbreaks									
Outcome	Output	Indicator	Baseline	Target	MOV	Frequency	Timeline	Responsible officer			
	Sustainable vector control methods promoted	% of villages implementing sustainable vector control interventions*	Unknown		District reports	Quarterly		CEHO			

Outcome	Control of zoonotic diseases strengthened	Prevalence of zoonotic diseases	Unknown	Target	MOV	Frequency	Timeline	Responsible officer
Output	Indicator	Baseline	Target	MOV	Frequency	Timeline	Responsible officer	
Emergencies, Climate Change and Human Health								
Reduced health risks during emergencies and disasters	response to emergencies and disasters strengthened	No. of disasters where response was timely	Unknown		Disaster reports	Whenever required		CEHO
Increased allocation of resources towards disaster risks mitigations	Well and effective coordination of disaster management	Number of resources and stakeholders committed to disaster risks management			District reports	Weekly	Ongoing	CEHO
Enhanced capacity for health systems to prepare for and respond to climate change threats to human	Well trained workforce to prepare and respond to climate change threats to human health	Number of health workers trained in climate change impacts mitigations	Unknown		District reports	Quarterly	Ongoing	CEHO

health	Scientific research promoted on climate change impacts and adaptation	put in place	Well coordinated research on climate change impacts and adaptation mechanisms	Number of research reports published	Unknown		District reports	Biannually	On going	CEHO
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