



National
Statistical Office

Child Poverty in Malawi

2018 REPORT



**The Government
of Malawi**

Department for Economic Planning and
Development, Ministry of Finance

unicef 
for every child

**2018 Child Poverty Report based on the 4th
Integrated Household Survey**

Produced by:

National Statistical Office in collaboration with
the Ministry of Finance, Economic Planning
& Development, with support from UNICEF,
Partnership for Economic Policy and Oxford Policy
Management

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Preface

The Government of Malawi has made strides in addressing some of the challenges that children face. For example, infant mortality went down from 189 deaths per 1000 live births in 2000 to 62 deaths in 2015. Under-five mortality also decreased from 104 deaths per 1000 live births to 42 during the same period. The percentage of women who gave birth in a facility significantly increased from 55 percent in 2000 to 91 percent in 2016. Stunting went down from 55 percent to 37 percent during the same period (MDHS, 2015). Enrolment in early child education (ECE) has increased from 34 percent in 2010 to 47 percent in 2017 (MoGCDSW, 2017). The Government has also done well in eliminating the worst forms of child labour. A recent Child Labour and Forced Labour report (2016) produced by the Bureau of International Labour Affairs (US-Department of Labour), highlights milestones achieved by the Government in addressing child labour. Among other things, the Government hired and trained 21 new labour inspectors and expanded the Malawi Social Action Fund and other social programs in order to address child labour. The Government also passed the Marriage, Divorce and Family Relations Law in 2015, which increased the minimum age of marriage from fifteen to eighteen.

The Malawi Growth and Development Strategy (MGDS III) identifies education and skills development as one of the key national priority areas. Through MGDS III, the Government has committed to improving access, equity and quality of Early Child Development (ECD), primary, secondary and tertiary education. These objectives are aligned with the 2030 Agenda for Sustainable Development, in particular SDG Goal 4 which aims to ensure that every child has access to inclusive and quality education, including ECD. ECD is key to achieving at least seven of the SDGs, on education, inequality, hunger, poverty, gender, health, water and sanitation.

This Child Poverty report, based on Multiple and Overlapping Deprivation Analysis (MODA), therefore comes at the right time when the Government and its development partners have joined hands to improve the welfare of children in all dimensions. This report will be a source of information in measuring the progress made in reducing child poverty.

The report was jointly produced by the National Statistical Office (NSO) and the Department of Economic Planning and Development with support from UNICEF, Partnership for Economic Policy and Oxford Policy Management.

The NSO is grateful to the following staff members for working together to produce this report: Mr. Jameson Ndawala, Mrs. Lizzie Chikoti, Mr. Charles Chakanza, Mr. Twikaleghe Mwalwanda and Mr. Imran Chiosa. Special mention also goes to the team from the Department of Economic Planning and Development (Ms Victoria Geresomo and Mr. Ernest Falinya) and from UNICEF (Mr. Edward Archibald, Mr. Bob Muchabaiwa and Mr. Elias Ackim Mphatso) who closely collaborated with NSO in the production of this report. Technical assistance in undertaking the MODA was provided by the Partnership for Economic Policy (Ms. Paola Ballon) and Oxford Policy Management (Ms. Marta Marzi and Ms. Monet Durieux). I would also like to recognize contributions of our valued stakeholders from Centre for Social Research in Zomba and representatives of Ministries of Education, Health, Gender, Civic Education and Agriculture who participated in the MODA training workshop where the framework and methodology for the study was discussed.

Lastly, I am grateful to UNICEF Malawi Country Office for providing financial and technical support throughout the process. We also appreciate comments received from UNICEF East and Southern Africa Regional Office.



Mrs. Mercy Kanyuka
Commissioner, National Statistical Office (NSO)

Contents

List of Tables	ii
List of Figures	iii
List of Abbreviations	iv
EXECUTIVE SUMMARY	1
CHAPTER 1	
INTRODUCTION	3
1.1 National policy context (motivation)	3
1.2 Why focus on multidimensional child poverty analysis?	3
CHAPTER 2	
METHODOLOGY	5
2.1 The Multiple Overlapping Deprivation Analysis (MODA) Methodology	5
2.2 Adaptation of MODA in Malawi	6
2.3 Data Sources	8
2.4 Sampling Design	8
2.5 Study Limitations	8
CHAPTER 3	
SINGLE DEPRIVATION ANALYSIS	9
3.1 Children 0-17 years old	9
3.2 Children 0-23 months	13
3.3 Children 24-59 months	15
3.4 Children 5-14 years	17
3.5 Children 15-17 years	20
CHAPTER 4	
MULTIPLE DEPRIVATION ANALYSIS	23
4.1 Number of deprivations	24
4.2 Overlap in dimensions for multidimensionally poor children (k=2)	31
4.2.1 Children 0-23 months	31
4.2.2 Children 24-59 months	31
4.2.3 Children 5-14 years	33
4.2.4 Children 15-17 years	34
CHAPTER 5	
MONETARY POVERTY AND DEPRIVATIONS	36
5.1 Monetary child poverty	36
5.2 Overlap between monetary and multidimensional poverty	38
5.3 Consumption and deprivation analysis	43
CHAPTER 6	
CONCLUSIONS AND RECOMMENDATIONS	49
6.1 Conclusions	49
6.2 Recommendations	50
6.2.1 Strategies to address child poverty	50
6.2.2 Sector-specific poverty eradication programs	50
6.2.3 Strategies to tackle multidimensional child poverty	50
6.2.4 Poverty eradication strategies and budgets	51
6.2.5 A dataset is needed to effectively institutionalize multidimensional child poverty measurements	51
6.2.6 Enhance domestic resource mobilization and improve efficiency and effectiveness of public spending	51
REFERENCES	52
ANNEX	53
1. Regional Results	53
2. District level Results	57

List of Tables

1.	Definitions and age coverage of indicators included in MODA index	7
2.	Description of data by household characteristics	8
3.	Description of data by children characteristics	8
4.	Dimensional deprivation rates by background characteristics (% of children 0-23 months)	13
5.	Dimensional deprivation rates by background characteristics (% of children 24-59 months)	15
6.	Dimensional deprivation rates by background characteristics (% of children 5-14 years old)	19
7.	Dimensional deprivation rates by background characteristics (% of children 15-17 years old)	22
8.	Multidimensional poverty headcount, intensity, and adjusted headcount (children aged 0-17)	27
9.	Multidimensional poverty headcount, intensity and adjusted H by area of residence (children aged 0-17 years)	28
10.	Multidimensional poverty headcount, intensity and adjusted headcount by region, for all k values	28
11.	Multidimensional poverty headcount by age group	29
12.	Multidimensional poverty Intensity by age group	29
13.	Multidimensional poverty Adjusted Headcount by age group, for all k values	29
14.	Monetary poverty by area of residence and age group	36
15.	Child monetary poverty rates by region and age group	37
16.	Average number and share of deprivations by monetary poverty status	38
17.	Overlap between monetary and multidimensional poverty (k=2) by area of residence and region (% of children)	39
18.	Overlap between monetary and multidimensional poverty (k=2) by age group (% of children)	39
19.	Background characteristics by deprivation and poverty status for all children	42
20.	Deprivation rates by region, Children 0-23 months	53
21.	Deprivation rates by region, Children 24-59 months	54
22.	Deprivation rates by region, Children 5-14 years	55
23.	Deprivation rates by region, Children 15-17 years	56
24.	Deprivation rates by district, North region	57
25.	Deprivation rates by district, Central region	58
26.	Deprivation rates by district, Southern region	59
27.	Percentage of children regarded as monetary poor and multidimensionally poor (k=2) by district	60

List of Figures

1.	Single deprivation analysis by age groups (% of children deprived in 1+ indicator per dimension)	10
2.	Single deprivation analysis by region (% of children deprived in 1+ indicator per dimension)	11
3.	Single deprivation analysis by urban/rural areas (% of children deprived in 1+ indicator per dimension)	12
4.	Single deprivation analysis (% of children 0-23 months)	14
5.	Deprivation rate by indicator (% of children 0-23 months)	14
6.	Single deprivation analysis (% of children 24-59 months)	16
7.	Deprivation rate by indicator (% of children 24-59 months)	16
8.	Single deprivation analysis (% of children 5-14 years old)	17
9.	Deprivation rate by indicator (% of children 5-14 years old)	18
10.	Single deprivation analysis (% of children 15-17 years old)	20
11.	Deprivation rate by indicator (% of children 15-17 years old)	21
12.	Percentage of children by number of deprivations and age group	24
13.	Percentage of children by number of deprivations and place of residence	25
14.	Percentage of children by number of deprivations and region	26
15.	Percentage of number of deprivations per child by gender of child (% of children)	27
16.	Multidimensional poverty headcount (k=2), by age group	30
17.	Overlap of dimensions (% of multidimensionally poor children (k=2)) 0-23 months	31
18.	Overlap among water, sanitation and housing dimensions (% of multidimensionally poor children (k=2)) 0-23 months	32
19.	Overlap of dimensions (% of multidimensionally poor children (k=2)) 24-59 months	32
20.	Overlap among housing, water, and sanitation dimensions (% of multidimensionally poor children (k=2)) 24-59 months	33
21.	Overlap of dimensions (% of multidimensionally poor children (k=2)) 5-14 years	33
22.	Overlap among nutrition, education, and housing dimensions (% of multidimensionally poor children (k=2)) 5-14 years	34
23.	Overlap of dimensions (% of multidimensionally poor children (k=2)) 15-17 years	34
24.	Overlap among housing, education, and information dimensions (% of multidimensionally poor children (k=2)) 15-17 years	35
25.	Distribution of monetary poverty across age groups	37
26.	Overlap between monetary and multidimensional poverty (k=2) 0-17 years	38
27.	Association plot between monetary poverty and multidimensional poverty, by area of residence for all children 0-17 years	39
28.	Multidimensional poverty by district for children 0-17 years	41
29.	Association plot between monetary and multidimensional child poverty by area of residence for children 0 to 23 months	44
30.	Association plot between monetary and multidimensional child poverty by area of residence for children 24 to 59 months	45
31.	Association plot between monetary and multidimensional deprivation by area of residence for children 5 to 14 years	46
32.	Association between monetary and multidimensional deprivation by area of residence for children 15 to 17 years	48

List of Abbreviations

CRC	Convention on the Rights of the Child
EA	Enumeration Areas
ECD	Early Childhood Development
HH	Household
ICT	Information and communications technology
IHS	Integrated Household Survey
KPI	Key performance indicator
MDAs	Ministries, Departments and Agencies
MDHS	Malawi Demographic Health Survey
MGDS	Malawi's Growth and Development Strategy
MODA	Multidimensional Overlapping Deprivation Analysis
MoFEP&D	Ministry of Finance and Economic Planning & Development
MoGCDS	Ministry of Gender, Children, Disability, and Social Welfare
OPM	Oxford Policy Management
PLSCE	Primary School Leaving Certificate of Education
NSO	National Statistical office

Executive Summary

60.5% of children in Malawi aged 0-17 years, are multi-dimensionally poor.

The aim of this report is to assess multidimensional child poverty in Malawi by looking at the overlap of deprivations that children experience in their life time. This assessment will enable Malawi to profile the incidence and intensity of poverty in all its forms among children and thus identify those dimensions that require priority action and consequently tailor policies to target the most vulnerable children in the country.

This report uses data from the Fourth Integrated Household Survey (IHS4) of Malawi (2016/17). It is the second report on child poverty in Malawi. The first report was released in 2016, based on data from the Integrated Household Panel Survey from (2013). The IHS4 data was used because it is comprehensive, representative at the district level and allows for tailoring of indicators to the Malawian context.

This report applies a counting approach to poverty measurement in a multidimensional framework. In particular, it uses the Multiple and Overlapping Deprivation Analysis (MODA) methodology anchored on a life cycle approach to child poverty measurement. Building on the 2016 study, this particular report measures poverty for four age groups in eight dimensions. The age groups are as follows: 0-23 months, 24-59 months, 5-14 years, and 15-17 years. The dimensions assessed are nutrition, health, protection, education, information, water, sanitation and housing. Each dimension is measured by indicators tailored for each age-group.

The analysis of multidimensional poverty shows that for a multidimensional poverty threshold of 2 deprivations or more, 60.5% of children in Malawi aged 0-17 years are multi-dimensionally poor, compared to 63% in 2011. Children who live in multidimensional poverty experience, on average, deprivations in 46% of the dimensions. Under the same poverty threshold, the analysis shows highest incidence amongst children aged 15-17 years (66%) and lowest incidence amongst children 0-23 months (42%). In terms of intensity of poverty, however, the study finds a different pattern, with children aged 24-59 months exhibiting the greatest intensity rate of 4 indicators (51%) with the other three groups showing a similar intensity rate of 3 indicators.

The proportion of children living in ultra-poverty is estimated at 24% in 2016/17, this is slightly higher than the national average (20.1%). A comparison of monetary poverty with multidimensional poverty incidence among children aged 0-17 shows lower incidence rates of monetary poverty and ultra-poverty vis-à-vis the multidimensional poverty. As such, 58% of children aged 0-17 years are monetary poor and 24% are ultra-poor.

The proportion of children who are multi-dimensionally poor is higher in rural areas (70%) than in urban areas (25%). About 70% of the children who live in rural areas are multi-dimensionally poor as compared to 25% in the urban areas. Rural children suffer deprivations in

46% of dimensions compared to 41% in urban areas. In rural areas, nearly 50% of children are both monetarily and multi-dimensionally poor, compared to 13% in urban areas. The rural/ urban divide is highest in the dimensions of housing (61% vs 17%), nutrition (36% vs 16%), education (40% vs 26%) and information (30% vs 8%).

Deprivation rates amongst children in Malawi also exhibit regional variations.

About 63% of children are deprived in two or more dimensions in the Central Region compared to 61% in the Southern Region and 45% in the Northern Region. Children in the Central Region are more deprived in housing (59%) and education (40%) than their counterparts in Southern and Northern Region. At the same time deprivation rates in sanitation (32%), nutrition (35%), and information (28%) are highest in the Southern Region. However, health and protection dimensional deprivation rates are lowest across all the regions.

Approximately 43% of children aged 0-17 years in Malawi are both multi-dimensionally and monetarily poor.

About 17% of children who are multi-dimensionally poor live in households that are not monetarily poor. An estimated 14% of children in Malawi are monetarily poor only, and 25% are neither multidimensionally nor monetarily poor. In the Central Region, 46% of children are multi-dimensionally and monetarily poor compared to 33% in the Northern Region. In 8 of the 28 rural districts in Malawi, the percentage of children who are multi-dimensionally poor was above 70%,

including Dedza (78%), Machinga (76%), and Salima (74%). The lowest rates are found in the districts of Mzuzu City (18%) and in Blantyre City (20.4%). Monetary poverty rates are highest in Phalombe (87%), Chitipa (80%), and Machinga (79%) and lowest in Blantyre (10%) and Mzuzu City (12%).

The highest levels of deprivations in Malawi are found in the area of housing for all age groups, except for the age group 15-17 years where the highest dimensional deprivation rates were in education (85%).

Amongst the age group 0-23 months, the deprivation rate in housing is 60%, followed by sanitation (33%). The lowest rates are observed in nutrition (10%) and water (14%). Amongst children aged 24-59 months, the highest deprivation rates are in housing (59%) and nutrition (57%), and the lowest in water (13%) and health (14%). In the older age groups, 5-14 years, the dimensional deprivation rate in housing is 52% and 44% in education. For children aged 15-17 years, the highest deprivation rate is in education (85%) followed by housing (46%). The deprivation rates for these latter age groups are lowest in the dimensions of protection and water.

Child poverty also reflect education, gender, age and other socio-economic characteristics of households.

The analysis indicates that children are more likely to be deprived in households where the head (i) is female, (ii) has no Primary School Leaving Certificate of Education (PLSCE), (iii) is older than 60 years; (iv) and when the household is located in a rural area, or (v) the household has five or more members.

85% of children between 15 and 17 years are deprived in education.

Introduction

1

1. National policy context (motivation)

The Malawi Growth and Development Strategy III (MGDS III) 2017-2022, highlights that poverty remains high in Malawi, particularly in rural areas. Poverty rates remained relatively unchanged between 2011 (50.7%) and 2016 (51.5%). The incidence of the ultra-poor, on the other hand, has declined from 24.5% to 20.1% over the same period (IHS3 & 4, NSO). The MGDS III notes that child poverty reports are expected to be the source of verification to measure key performance indicators (KPIs) such as the percentage of children (0-17 years) that suffers from two or more (2+) deprivations, child monetary poverty rate (0-17 years) and percentage of children (0-17 years) that are poor and deprived in 2+ deprivations.

These KPIs will help verify the expected outcomes of a strengthened national response to reduce children's vulnerability to violence, abuse, and exploitation. Thus, this report will contribute to the evaluation of interventions linked to the MGDS III. The MGDS III also places emphasis on the need for improving data gathering and analytical capacity across a number of sectors, improving M&E for impact assessments and the establishment of data repositories of socio-economic statistics and analysis.

2. Why focus on multidimensional child poverty analysis?

Poverty is a condition in which children are exposed to multiple disadvantages – actual and potential, and includes monetary and non-monetary deprivations.

In Malawi, children below 18 years' account for more than 50 percent of the total population, with many of them living in extreme poverty. Such figures highlight the importance of analyzing child poverty.

Children face a complex set of socio-economic needs which are over and above their material needs. These include emotional nurturing, intellectual stimulation and social skills (Gordon, 2003). While these needs are often negatively affected by the lack of material resources, there are social and contextual factors such as social norms and cultural practices which can mitigate the impact of material resources on child wellbeing. Thus, there is need to measure multidimensional child poverty to obtain a holistic picture of the well-being of children in Malawi (Bradshaw et al 2006, Young Lives 2011, Wordsworth et al 2005).

The 2030 Agenda for Sustainable Development acknowledges poverty as a multidimensional phenomenon. Target 1.2 states the need, by 2030, to "reduce at least by half the proportion of men, women and children of all ages living in poverty in all its dimensions according to national definitions". Child poverty not only affects children's immediate situation, but it also has long term effects. For example, child poverty is associated with lower skills and productivity levels, poorer health and nutritional status, lower educational outcomes and higher probabilities of unemployment.

Existing measures of monetary poverty focus mainly on income or consumption at household level. However, children have no control over how household income and consumption are allocated

thus estimating the children's share of consumption is difficult to determine. In most cases an adjustment is made in the form of the adult equivalence scale. In addition, household level indicators may not identify the intra-household dynamics which impact on the resources allocated within a household, for example discrimination against girls, or the allocation and access to household resources amongst orphaned and disabled children.

The Convention on the Rights of the Child (CRC) adopted in 1989 provides the basis for the fundamental elements which are essential for the survival, protection and development of a child.

The call for the development of complementary measurements, including methodologies and indicators for measuring human development and poverty, that better reflect multidimensionality has also been highlighted in the following:

- The 69th Session of the UN General Assembly, December 2014.
- The Resolution adopted by the General Assembly on 6 July, 2017 – Work of the Statistical Commission pertaining to the 2030 Agenda.
- Agenda 2063 (for Africa).
- The Addis Ababa Action Agenda for Financing Development.

Routine national measurement of child poverty is critical. Without knowing how many and which children are living in **multidimensional and monetary poverty**, it is not possible to know how a country is progressing towards SDG 1, or the impacts of particular policies and programmes on child poverty.



Methodology

2

2.1 The Multiple Overlapping Deprivation Analysis (MODA) Methodology

This study adopted the Multiple Overlapping Deprivation Analysis (MODA) methodology developed by UNICEF's Office of Research, drawing from Alkire and Foster (AF) (2011) poverty measurement methodology.

The methodology builds on the UNICEF Global Poverty Study on Child Poverty and Disparities (Bristol Approach) to assess child poverty in a multidimensional setting. Through the MODA, the study assesses the nature and extent of multidimensional poverty and deprivation experienced by children in Malawi. The MODA employs child-specific indicators, produces a child-deprivation scale and looks at overlaps in deprivations.

MODA is a counting approach to child poverty measurement which uses a life-cycle approach to appraise poverty across the different stages of life of a child. Indeed, children's needs are not homogenous across childhood. The MODA methodology profiles child poverty not only in terms of incidence but also of its intensity. The methodology also allows for the decomposition of multidimensional child poverty by region and socioeconomic characteristics of children. This information is crucial for policy design and targeting.

MODA uses a "child-centred approach" where the child, rather than the household, is the unit of analysis. It focuses on deprivations that a child experiences simultaneously. The dimensions and indicators are chosen

according to their relevance to child well-being. This is key as children experience poverty differently from adults, with regards to their developmental needs. Deprivations are therefore assessed by age-group using indicators that are specific to a child's age

The MODA approach comprises several steps. The first step entails identification of a set of dimensions which align closely to the rights of children as defined in the UN Convention on the Rights of the Child (UN 1989). The next step is to select specific indicators that capture potential deprivations within each of the selected dimensions. Based on the union approach, a child is considered deprived in a dimension if s/he is deprived in one or more of the indicators relevant to that dimension. For example, a child is considered deprived in the housing dimension if the floor and roofs are made of natural material and/or if there are more than 4 household members per room, or both. Aside from single deprivation analysis, this report focuses on deprivation in multiple dimensions understood as multidimensional poverty. In the MODA methodology each dimension is valued equally (de Neubourg et al. 2014).

The MODA methodology also entails calculation of three multi-dimensional measures. The first of these is the multidimensional poverty headcount ratio (H), or incidence rate, that indicates the proportion of multi-dimensionally poor children according to a given poverty cut-off. The second measure is the intensity rate (A) that indicates, on average, the extent of poverty that children who are

poor experience. The third measure combines the aspects of incidence and breadth of poverty into one number: the adjusted multidimensional headcount ratio referred to as M0. This is an index that ranges between 0 and 1 and is helpful when ranking districts or regions within a country.

2.2 Adaptation of MODA in Malawi

Eight selected dimensions were considered in the MODA using data from IHS4. Table 1 outlines the 8 selected dimensions (Nutrition, Health, Protection, Education, Information, Water, Sanitation and Housing). These are the same dimensions as the ones used in the 2016 Child Poverty Report that used the 2013 Integrated Household Panel Survey (IHPS) data. The only exception is the indicator on antenatal care that could not be included in the health dimension as it was not captured in the IHS4. Based on these dimensions and indicators, and following the first report on child poverty, this report also uses a poverty threshold of two indicators or more. Thus, a child is considered to be multidimensionally poor if s/he experiences deprivations in two dimensions or more simultaneously.

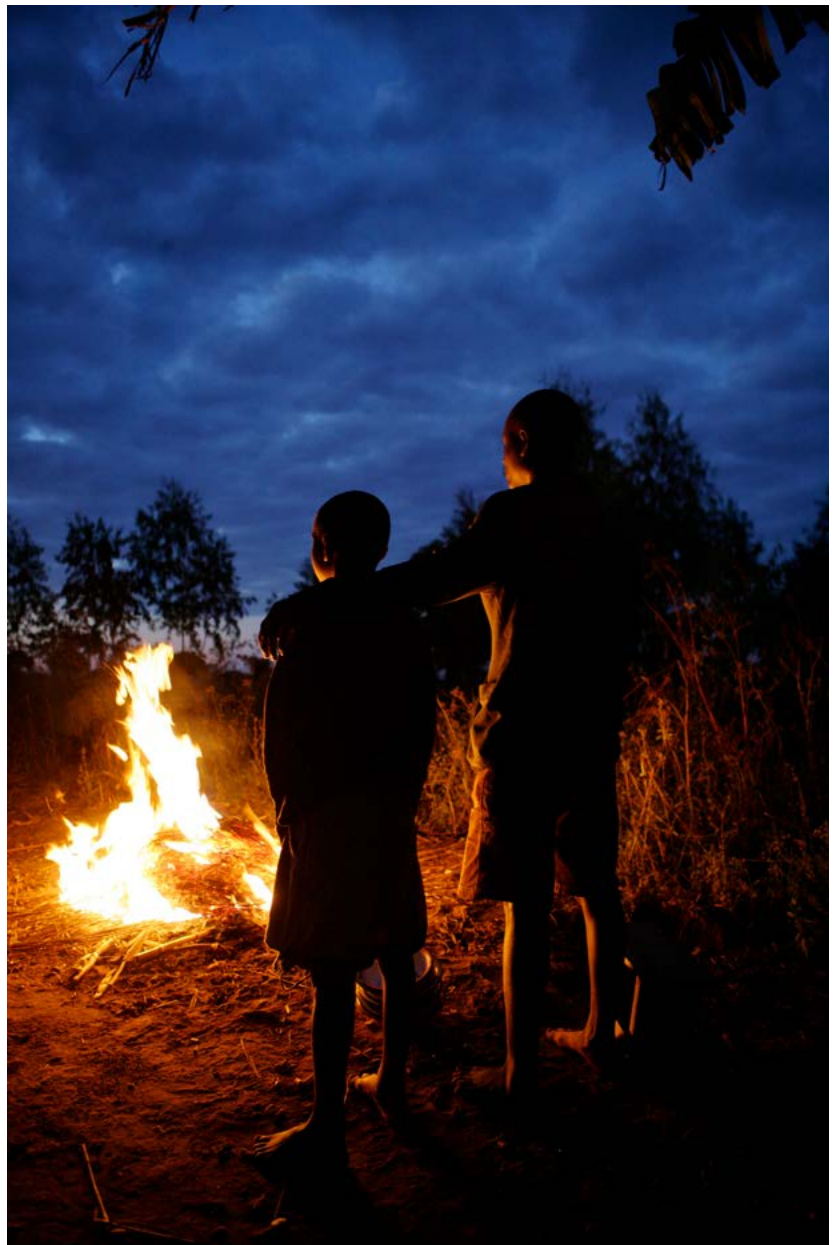


Table 1 Definitions and age coverage of indicators included in MODA index

Dimension	Indicator	Age Groups				Threshold Values
		0-23 months	24-59 months	5-14 years	15-17 years	
Nutrition	Stunted		✓			Deprived if height for age <-2 s.d (moderate stunting)
	Underweight	✓				Deprived if weight for age <- 2 s.d (children 0-5 months are not deprived) ¹
	Wasting	✓				Deprived if weight for height <- 2 s.d (children 0-5 months are not deprived) ²
	Meals		✓			Deprived if children 6-59 months in the HH have fewer than 3 meals per day
	Nothing for breakfast			✓	✓	Deprived if he/she had nothing for breakfast
Health	Skilled birth attendance	✓				Deprived if not delivered with skilled birth assistance (doctor, nurse) AND not in a hospital/health facility
	Sleeps under a bed net	✓	✓			Deprived if not all children under 5 sleep under a net
Protection	Early marriage				✓ 12-17	Deprived if ever married
	Child labour			✓	✓	Child 5-11 is deprived if she does 1+ hours of economic activity ³ or 28+ hours of household chores ⁴ ; Child 12-14 is deprived if she does 14+ hours of economic activity or 28+ hours of total activity ⁵ ; Child 15-17 is deprived if she does 43+ hours of total activity
Education	Illiterate				✓ 15-17	Deprived if she cannot write in any language (English and Chichewa)
	Completed Primary				✓ 15-16	Deprived if he /she has not completed primary school (i.e. highest qualification is below PSLC)
	Not in preschool			✓ 5-6		Deprived if he/she is not in and never went to school (either pre-school or primary)
	Grade progression				✓ 9-17	Child 9-17 years deprived in more than 2 grades behind expected grade for age
Information	No information devices				✓	Deprived if in the HH there is no TV, no radio, no radio with Flash drive/micro CD, no mobile, no pc, AND no satellite dish.
Water	Potable water	✓	✓	✓	✓	Deprived if HH uses open well in yard/plot, open public well, river/stream, pond/lake, dam, tanker truck/bowser, Other in either wet or dry season
	30 minutes to water	✓	✓	✓	✓	Deprived if it takes more than 30 minutes one way on foot to reach water source
Sanitation	Improved sanitation	✓	✓	✓	✓	Deprived if HH uses traditional latrine w/o roof, no latrine, other types of toilets. All other types of toilets are considered as improved even if shared.
Housing	Inadequate roof/ floor	✓	✓	✓	✓	Deprived if HH has floor of sand/smoothed mud or other and the roof is made of grass, plastic sheeting other materials
	Over-crowding	✓	✓	✓	✓	Deprived if HH has 5+ households members (including servants if HH member) per room

Source: NSO Fourth Integrated Household Survey (IHS4)

1 Anthropometric data is collected only for children 6 to 23 months of age. Children below 6 months old are considered as not deprived in the dimension of nutrition.

2 See previous note.

3 Economic activity is defined as spending time on household farming business, spending time on household livestock/fishing activities, spending time running or helping on other types of household businesses, engaging in casual, part-time, or manual labour; working for a salary; engaging in an unpaid apprenticeship.

4 Household chores include firewood and water collection.

5 Total activity is economic activity and domestic work combined.

2.3 Data Sources

The report uses secondary data from the Fourth Integrated Household Survey (IHS4). This is the fourth full survey in the series of Integrated Household Surveys conducted by the National Statistical Office from April 2016 to April 2017. The IHS4 is a nationally representative survey designed to provide information on the various aspects of household welfare in Malawi at both national, district, urban and rural levels. The IHS data have, among other insights, provided benchmark poverty and vulnerability indicators to foster evidence-based policy formulation and evaluation of the country's medium development framework, the Malawi Growth and Development Strategy (MGDS).

2.4 Sampling Design

A stratified two-stage sample design was used for the IHS4. The primary sampling units (PSUs) selected at the first sampling stage were the census enumeration areas (EAs) defined in the 2008 Malawi Population and Housing Census. The EA is the smallest operational area established for the Census with well-defined boundaries, corresponding to the workload of one census enumerator. The EAs have an average of about 235 households each. Malawi is divided into 28 districts, which were the geographic domains of estimation. The IHS4 also included Likoma district.

2.5 Study Limitations

In the study, for some dimensions only one indicator is used to measure deprivations for instance information and sanitation. A child is considered to be deprived in a dimension if he or she is deprived in at least one indicator in that dimension (union approach).

Table 2 Description of data by Household characteristics

Disaggregation Criterion	Category	% of Children	Sample	Number of children
Household size	<=4	30.1	8,057	2,541,432
	5-6	42.5	11,696	3,588,591
	>6	27.4	8,053	2,311,077
Age of HH head	<25	5.4	1,392	455,544
	25-34	25.7	7,100	2,165,748
	35-49	45.6	12,733	3,851,310
	50-64	15.9	4,466	1,344,484
	65+	7.4	2,115	624,014
Sex of HH head	Male	72.4	20,355	6,114,384
	Female	27.6	7,451	2,326,716
Education of HH head	Less than primary	56.2	15,520	4,744,211
	More than primary	43.8	12,283	3,696,809
Labour market status of HH head	Not Working ⁶	78.1	21,955	6,590,228
	Working	21.9	5,851	1,850,873
Monetary poverty	Non-poor	42.3	11,670	3,566,742
	Poor	57.7	16,136	4,874,358
Region	North	9.3	5,602	784,661
	Central	45.4	9,580	3,830,840
	Southern	45.3	12,624	3,825,599
Area of residence	Urban	17	4,467	1,435,174
	Rural	83	23,339	7,005,927

Source: NSO Integrated Household Survey (IHS4)⁷

Table 3 Description of data by children characteristics

Disaggregation Criterion	Category	% of children	Sample	Number of children
All	All children		27,806	8,441,100
Age of child	0-23 months	10.6	2,937	891,430
	24-59 months	16.3	4,533	1,376,163
	5-14 years	59.6	16,572	5,030,714
	15-17 years	13.5	3,765	1,142,793
Child's sex	Male	49.6	13,804	4,190,563
	Female	50.4	14,002	4,250,538
Child is orphan (mother and/or father has died)	No	89.9	25,002	7,589,895
	Yes	10.1	2,804	851,205

Source: NSO Integrated Household Survey (IHS4)⁸

⁶ Not working defined as the Head has not engaged in any activity in the past 7 days.

⁷ Universe: all children 0-17. Percentages and population totals are weighted by sampling weights.

⁸ Universe: All children 0-17. Percentages and population totals are weighted by sampling weights.

Single Deprivation Analysis

3

In this section the report presents the findings from the single deprivation analysis, i.e. the percentage of children who are deprived in each of the 8 dimensions used to construct the MODA. To assess dimensional deprivations the report considers a child to be deprived in a dimension if s/he is deprived in any of the indicators that are used to measure the given dimension. Single deprivation analysis is helpful to identify those age groups that are affected more than others by deprivations in particular areas of well-being. To provide sectoral information to policy makers the analysis by dimension also looks at the contribution of the various deprivation indicators within each dimension.

3.1 Children 0-17 years old

Across all age groups, with the exception of the age group 15-17 years, deprivation rates are highest in the housing dimensions, ranging from a high of 60% for children aged 0-23 months to a low of 52% amongst children aged 5-14 years. Amongst children aged 15-17 years, the highest deprivation rate is in education (87%), followed by housing (46%). Looking at the children below five years old, sanitation is the second dimension

in which children below 25 months are mostly deprived (33%). On the other hand, children aged 24-59 months are most likely to be deprived in nutrition (57%) after housing. The analysis shows that for older age groups, protection is the dimension in which children above five years of age tend to be least deprived.

Figure 1 Single deprivation analysis by age groups (% of children deprived in 1+ indicator per dimension)

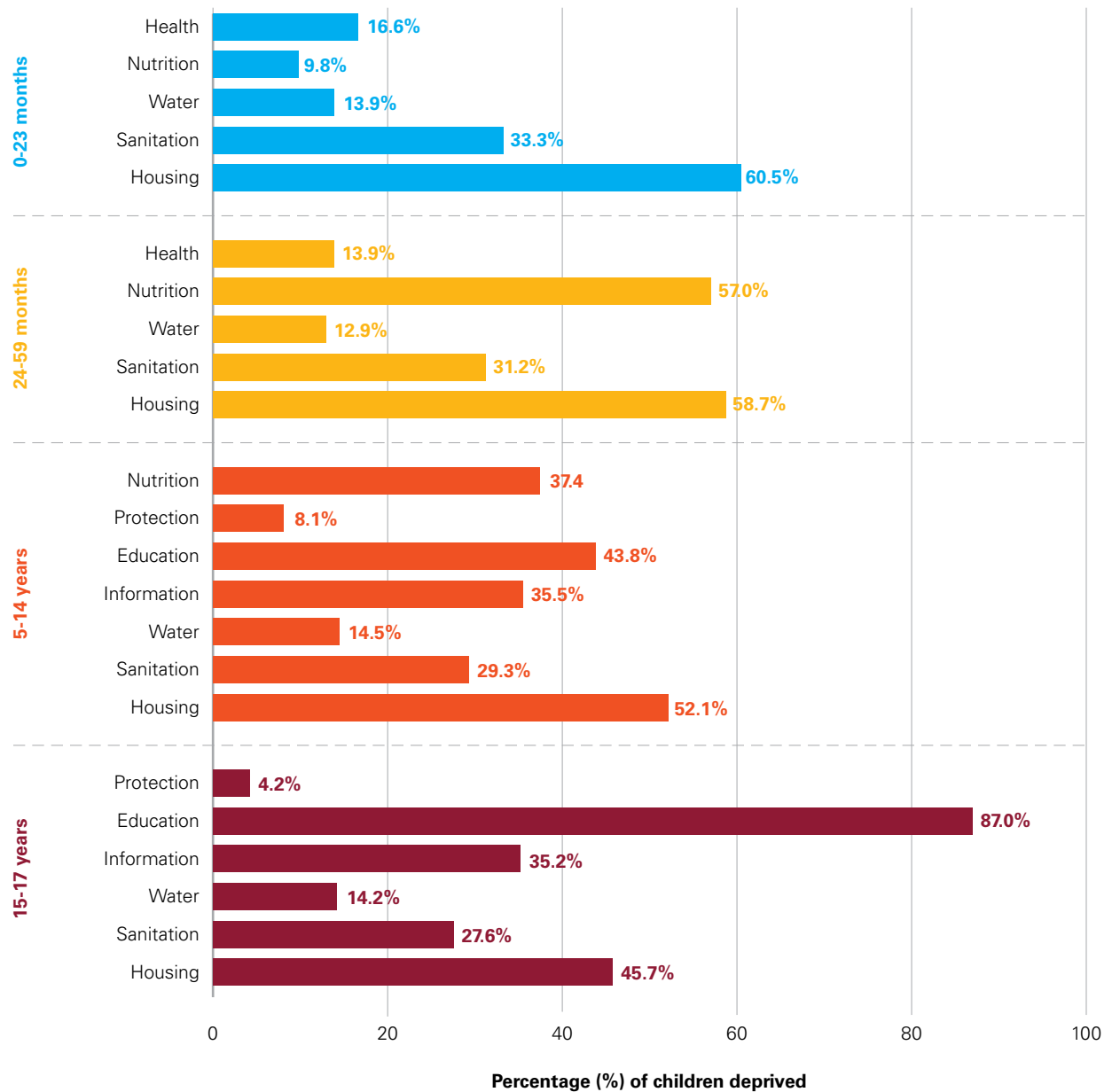


Figure 2 Single deprivation analysis by region (% of children deprived in 1+ indicator per dimension)

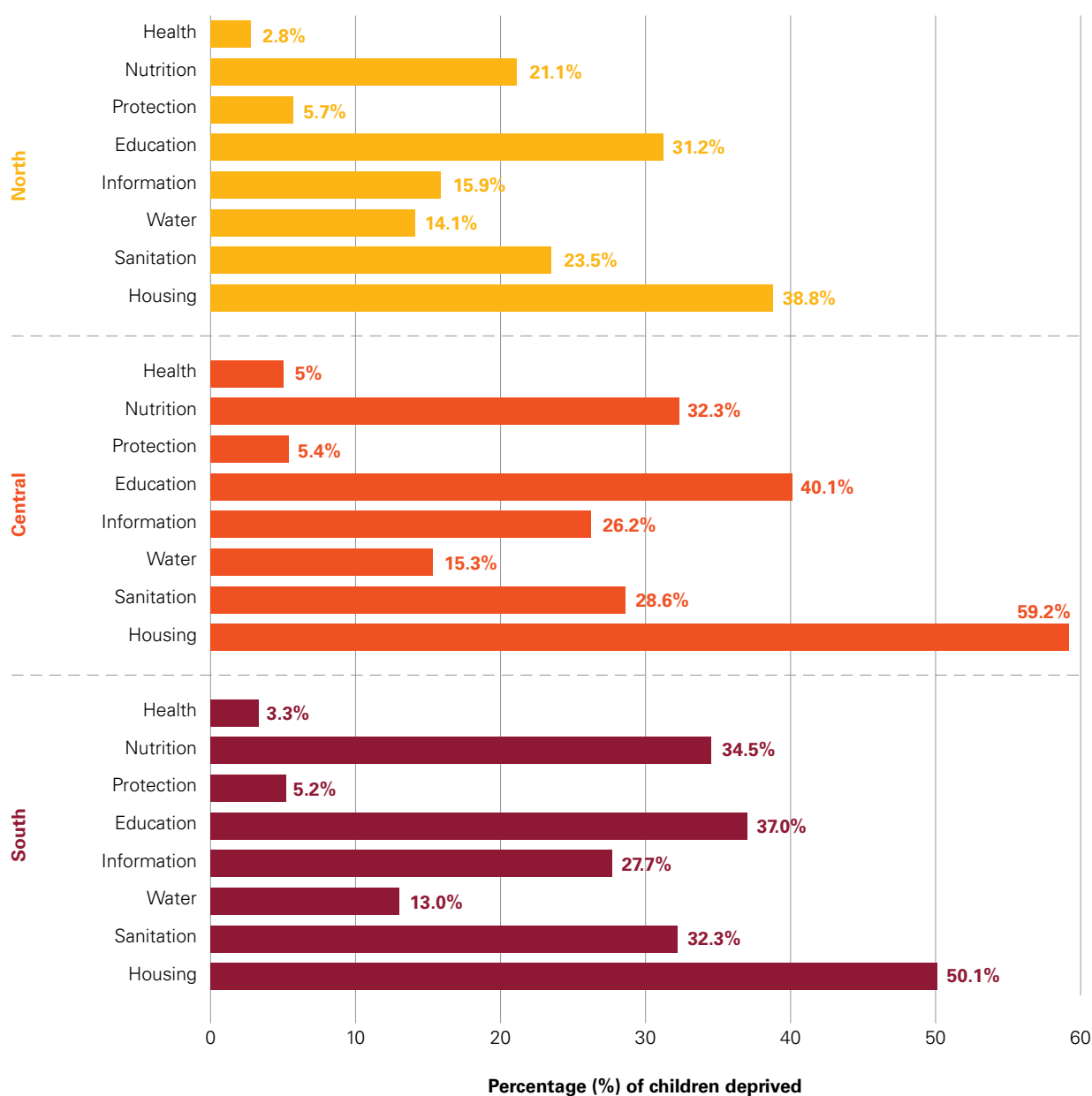


Figure 2 shows that deprivation rates amongst children in Malawi exhibit regional variations. Children in the Northern region are less likely to be deprived in any dimension, with the exception of protection where the deprivation rate of 5.7% is the highest.

Over half of the children in Central and Southern regions are deprived in housing dimension (59% and 50% respectively), while the equivalent statistic for the Northern region is below 40%.

Deprivation in sanitation dimension is above 20% in all regions. Deprivation in the water dimension follows a different pattern, being highest in Central region (15%) and lowest in Southern region (13%).

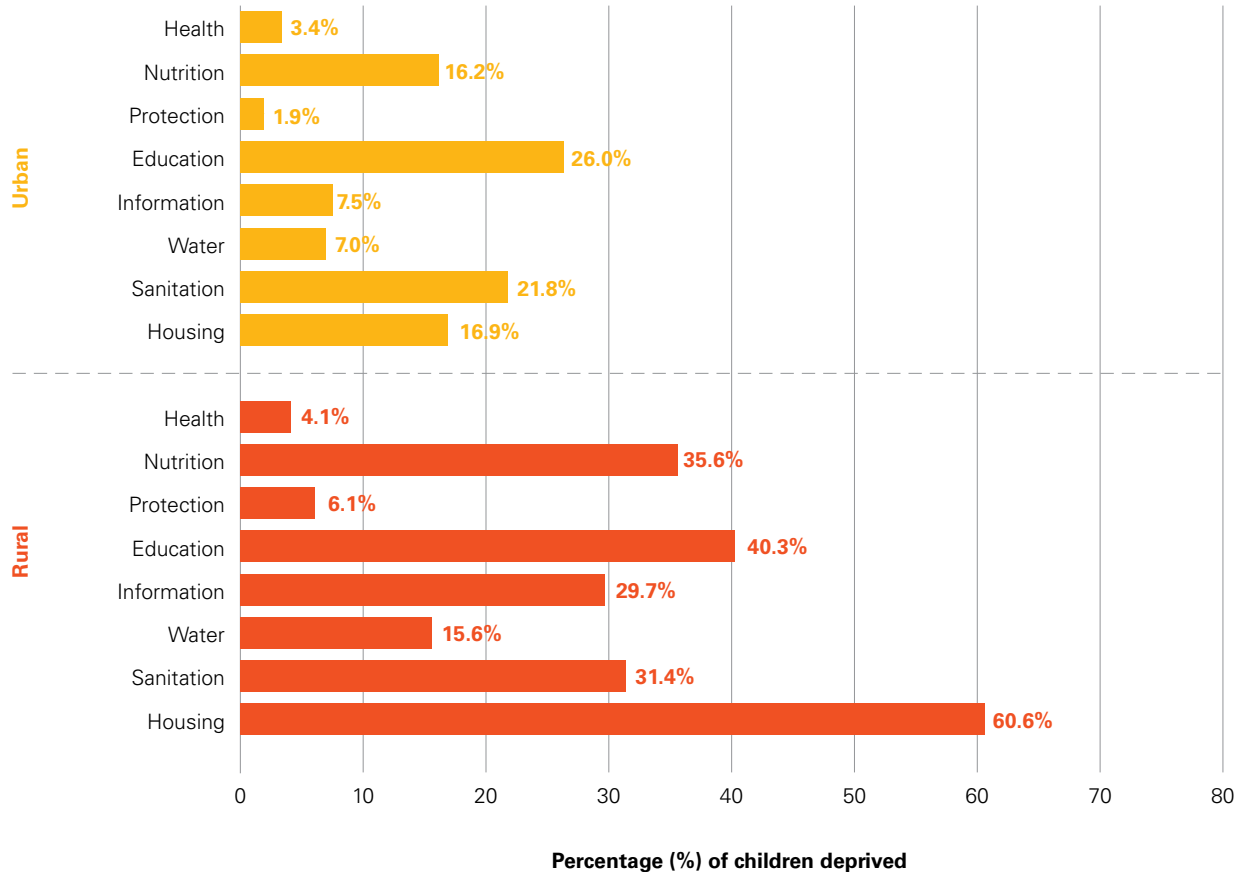
About 31% of children from the North are deprived in education, 40% in Central region, and 37% in Southern region. Information deprivation is most common in Central and Southern regions. Only 16% of children in the Northern Region are information deprived. Nutrition seems to be a widespread problem with over a third of children deprived in all regions.

Health and protection dimensional deprivation rates are lowest across all the regions.

Figure 3 shows that rural and urban disparities are pronounced in Malawi. Across all dimensions, children who reside in rural areas are more deprived as compared to their counterparts in urban areas. The rural/urban divide is more pronounced in four dimensions: housing (rural 61%; urban 17%), nutrition (rural, 36%; urban, 16%), education (rural, 40%; urban, 26%) and information (rural, 30%; urban, 8%).

About 31% of children from the North are deprived in education, 40% in Central region, and 37% in Southern region.

Figure 3 Single deprivation analysis by urban/rural areas (% of children deprived in 1+ indicator per dimension)



In children aged 0-23 months, the lowest rates of deprivation are observed in nutrition where only 10% of the children are deprived.

3.2 Children 0-23 months

Figure 4 shows that children aged between 0 and 23 months are mostly deprived in housing and sanitation, with 60% of children deprived in the housing dimension and 33% deprived in sanitation. The lowest rates of deprivation are observed in nutrition where only 10% of the children are deprived.

In addition to showing deprivation rates by dimensions, it is useful to understand which indicators are driving deprivation patterns. As shown in Figure 5, deprivation in housing is mainly driven by inadequate floor and roofing (58%). Similarly, the main contributor to deprivation in water is the absence of potable water although most children are within reasonable distance from water source. Finally, the absence of mosquito nets in the household is driving deprivation in health.

Table 4 compares deprivation by background characteristics of the child and of the child's household and indicates whether the difference in dimensional deprivation rates are statistically significant. It can be observed from the table that children who reside in households whose head has less than PSLCE have higher deprivation rates across all dimensions. In addition, children who live in female headed households are significantly more deprived in all dimensions than children in male headed households except for the nutrition dimension. The table further shows that child deprivation rates in rural areas are higher than in urban rates, in dimensions of water, sanitation and housing.

Table 4 Dimensional deprivation rates by background characteristics (% of children 0-23 months)

Characteristics	Health	Nutrition	Water	Sanitation	Housing
All children 0-23 m	16.6	9.8	13.9	33.3	60.5
All boys 0-23 m	18.3	11.7	15.9	33.1	60.9
All girls 0-23 m	14.9**	7.9***	11.9***	33.4	60
HH with fewer than 3 children	15.7	9.7	13.2	33	60.6
HH with 3+ children	18.3	10	15.3	33.8	60.3
HH head age below 60	16.6	9.8	14	33.5	61
HH head age 60+	15.2	9.6	12.4	27.8	49.8**
HH head is single	22.3	8.3	14.9	39.7	64.8
HH head is married	15.5***	10.1	13.7	32.1**	59.7
HH head has more than primary education	12.5	9	10.9	24.8	38.9
HH head has less than primary education	18.6***	10.2	15.4***	37.4***	71***
HH head is working	16.1	9.4	13.8	31.8	58.9
HH head is not working	18.2	11.4	14.2	38.7**	66.4***
HH head is female	21	7	14.4	39.1	65.5
HH head is male	15.3***	10.6**	13.8	31.6**	59.1**
HH is in urban area	13.3	7.1	6.3	20.6	17.8
HH is in rural area	17.3*	10.4*	15.5***	35.9***	69.4***

Note 9

9 Stars indicate significant differences across categories (e.g. all boys versus all girls): ***p-value<0.01, **p-value<0.05, *p-value<0.1.

Figure 4 Single deprivation analysis (% of children 0-23 months)

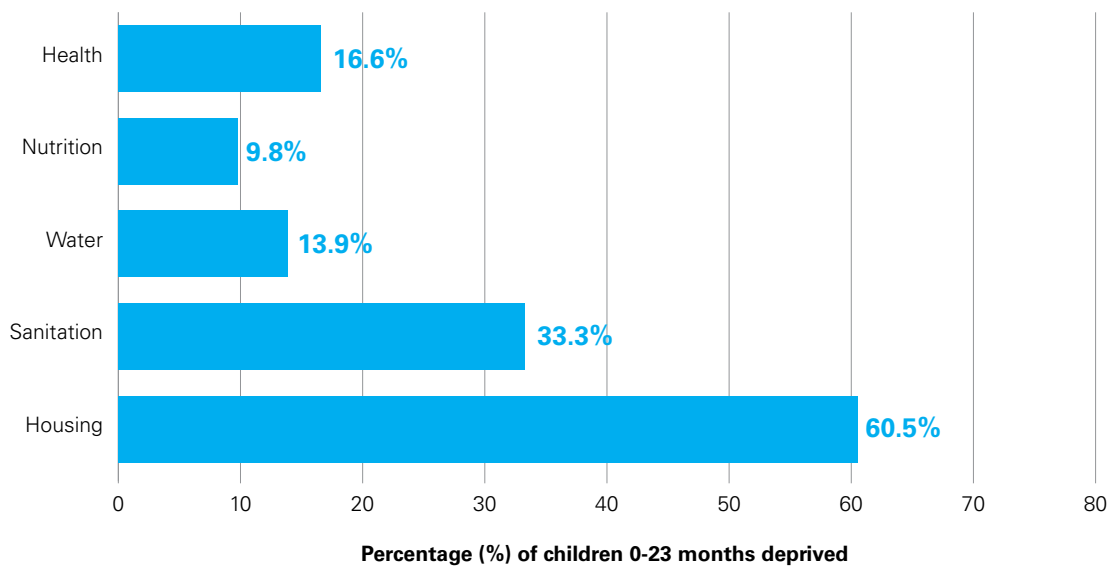
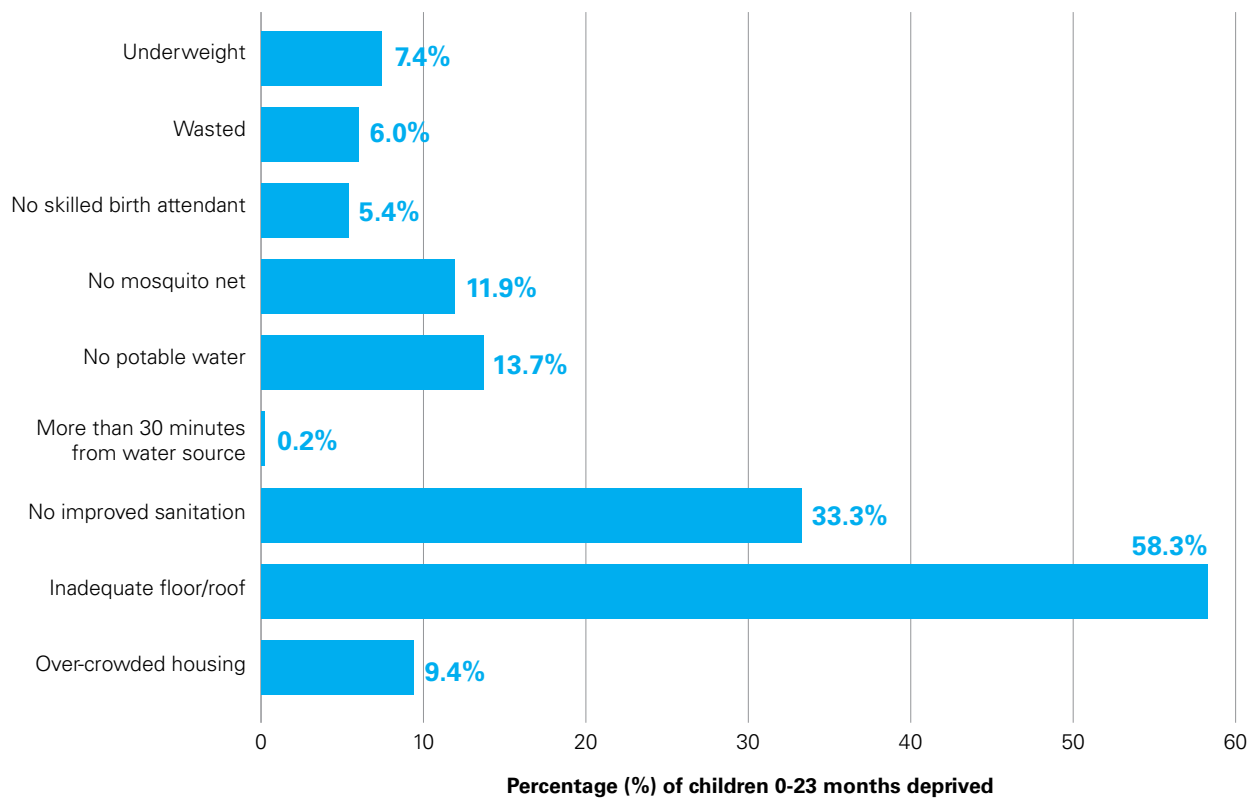


Figure 5 Deprivation rate by indicator (% of children 0-23 months)



The highest deprivation rates for children 24-59 months are observed in the housing and nutrition dimensions.

3.3 Children 24-59 months

Figure 6 reports deprivation rates in each dimension for children 24 to 59 months old. It can be observed that most of these children (59%) are deprived in housing dimension followed by 57% who are deprived in nutrition dimension. On the other hand, 14% and 13% of the children in this age group are deprived in the health and water dimensions respectively. Sanitation deprivation concerns slightly less than a third of the children.

In Figure 7 we look at the contribution of each deprivation indicator. The highest deprivation rates for children 24-59 months are observed in the housing and nutrition dimensions. For housing, the high deprivation rates are mainly driven by inadequate floor and roofing (57%) whereby for nutrition, having less than three meals per day is the main driver (36%) followed closely by stunting.

Education, place of residence and marital status of the household head are important predictors of deprivation rates for children aged 24-59 months. Table 5 highlights that there is a statistically significant difference in deprivation rates between children whose household heads have less than primary education compared to children whose household heads have more than primary education across all five dimensions. Further, the table indicates that children from rural areas are more deprived in all dimensions than their urban counterpart, however the difference in the health dimension is not statistically significant. Deprivation rates for this age group are also higher in health and the nutrition dimensions for households with more than three children. Children residing in a female headed household are more deprived in all dimensions except for the water dimension, where the difference is not statistically significant.

Table 5 Dimensional deprivation rates by background characteristics (% of children 24-59 months)

Characteristics	Health	Nutrition	Water	Sanitation	Housing
All children 24-59 m	13.9	57.0	12.9	31.2	58.7
All boys 24-59 m	13.7	57	13	30.4	59.1
All girls 24-59 m	14.2	57	12.8	32	58.4
HH with fewer than 3 children	12.7	54.2	12.6	30.7	59.5
HH with 3+ children	16**	61.4***	13.5	32	57.5
HH head age below 60	13.8	57.1	12.8	31.3	59.6
HH head age 60+	16.5	55.2	15.7	30	42.8***
HH head is single	17.4	64.6	12.2	39	62.5
HH head is married	13.2**	55.4***	13.1	29.5***	57.9*
HH head has more than primary education	9.1	45.2	9.5	21.5	37.5
HH head has less than primary education	16.1***	62.3***	14.4***	35.5***	68.3***
HH head is working	13.8	56.2	12.9	31.4	57.4
HH head is not working	14.4	60.2	13.2	30.5	63.9**
HH head is female	17.2	61.9	12.5	36.7	64.3
HH head is male	12.9***	55.4**	13.1	29.4***	56.9***
HH is in urban area	12.5	42.7	6.2	20.4	18.1
HH is in rural area	14.2	59.8***	14.3***	33.4***	66.9***

Note 10

10 a Household head is not currently married; Stars indicate significant differences across categories (e.g. all boys versus all girls): ***p-value<0.01, **p-value<0.05, *p-value<0.1.

Figure 6 Single deprivation analysis (% of children 24-59 months)

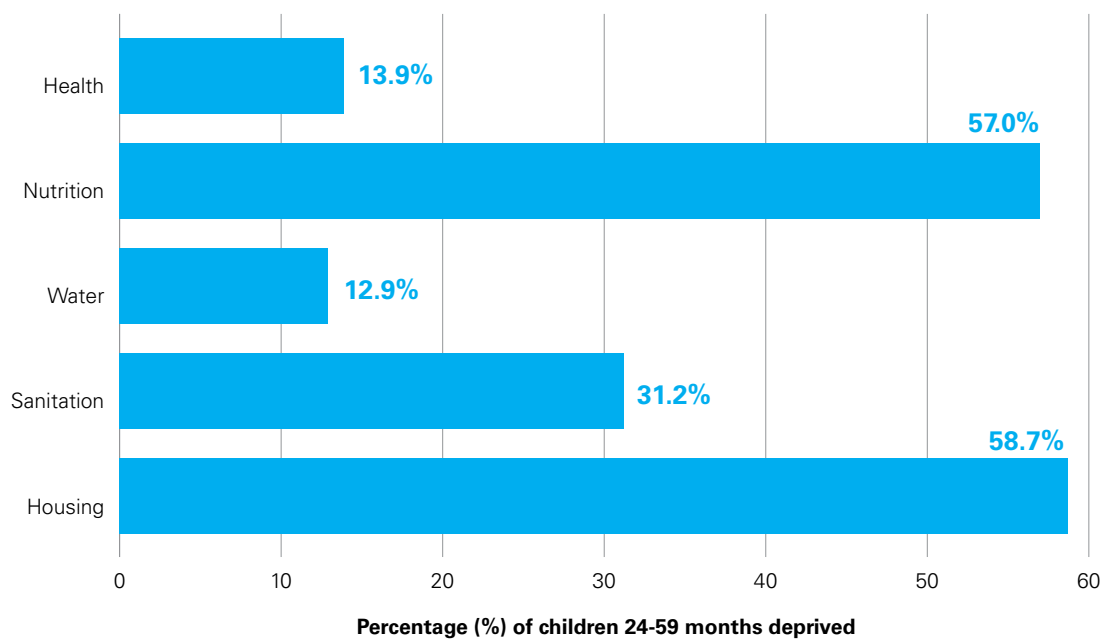
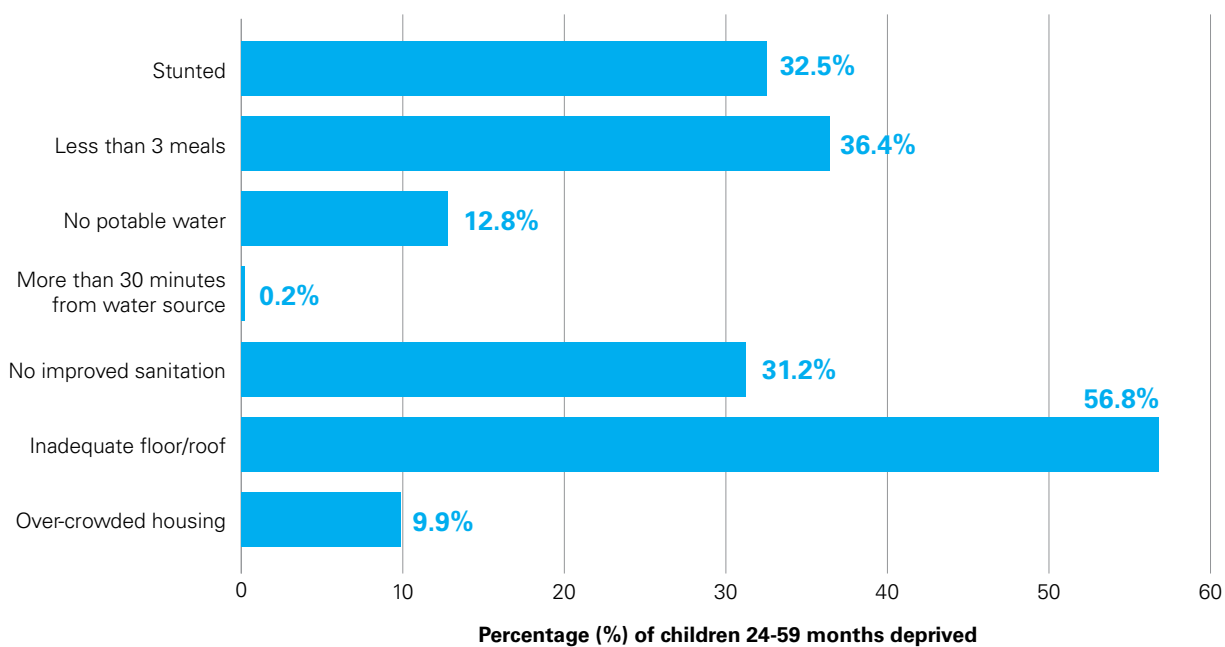


Figure 7 Deprivation rate by indicator (% of children 24-59 months)



The high rate of deprivation in nutrition dimension for children aged 5-14 years is dependent on the fact that close to 40% of the children did not have breakfast a day prior to the interview.

3.4 Children 5-14 years

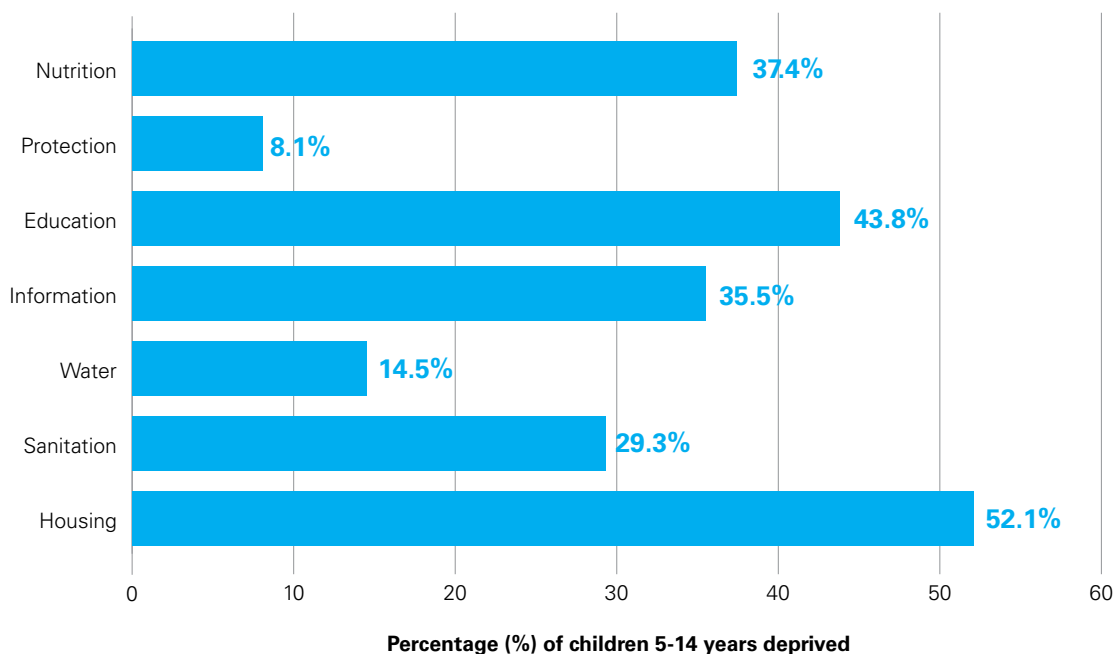
Figure 8 shows deprivation rates by dimension for children which are 5-14 years old. Deprivation rates range from 8% in the protection dimension to 52% in the housing dimension. The percentage of children deprived in education is the second highest after housing at 44% followed by information (36%), and sanitation (29%). The lowest deprivation rates in this age group are in the protection (8%) and water dimensions (15%).

Figure 9 shows a breakdown of the number of children that are deprived for each indicator related to the seven dimensions of poverty that are relevant to the 5-14 age group. Inadequate flooring/roof is the main driver of the high deprivation rate in the housing dimension. Close to 50% of the children in this age

group stay in houses with inadequate flooring and roofing. On the other hand, deprivation in education is explained more by delays in grade progression than by lack of enrolment in preschool (28% and 14% respectively). The high rate of deprivation in nutrition is dependent on the fact that close to 40% of the children aged 5-14 did not have breakfast a day prior to the interview.

The information dimension was included in measuring deprivation for the age group 5-14 years. Having no information devices at home accounted for 36% of the children deprived in information dimension.

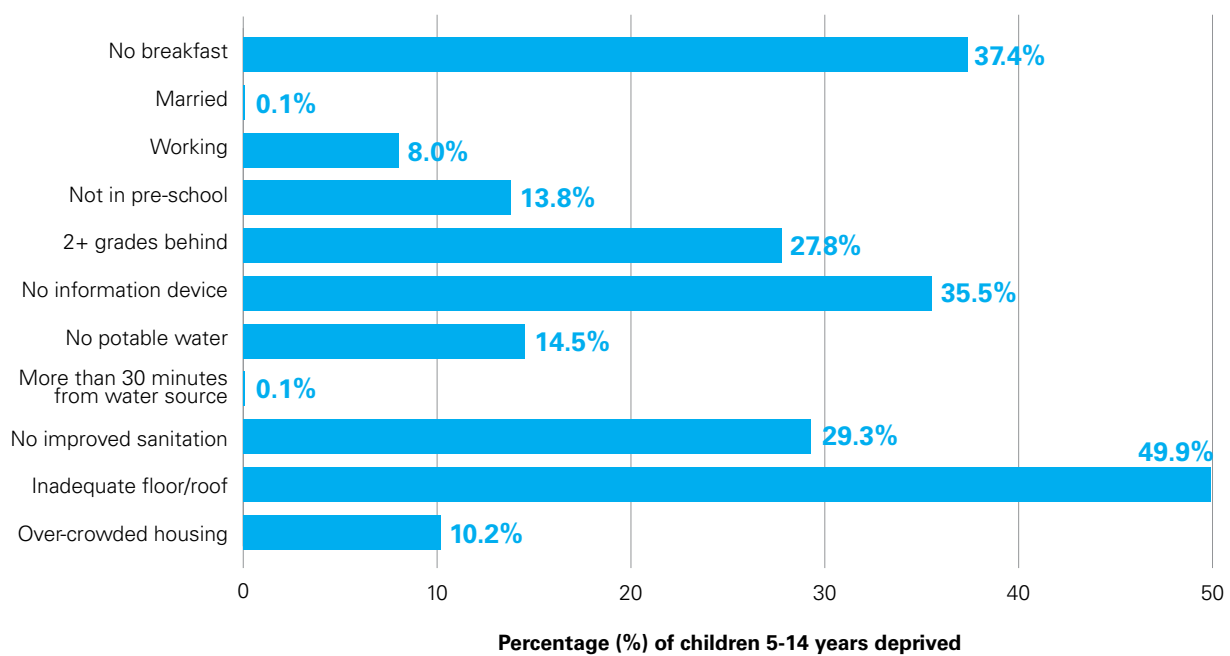
Figure 8 Single deprivation analysis (% of children 5-14 years old)





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Figure 9 Deprivation rate by indicator (% of children 5-14 years old)



Children in households where the head is not working are more deprived in all dimensions except protection and water.

Table 6 shows the deprivation rates for children aged 5-14 years by background characteristics. It can be observed that place of residence, size of household, education and employment status of the head of household are some of the factors driving deprivations in children aged 5-14 years. Children who reside in rural areas are significantly more deprived in all the dimensions as compared to their urban counterparts. The table further reveals that 59% of children residing in rural areas are deprived in housing dimension as compared to 17% residing in urban areas. As regards to education of the head of household, the table reveals that children whose parents have less than primary school education are significantly more deprived in all dimensions except in protection. The largest difference is found in the housing dimension. About 60% of

the children whose parents have less than primary school education are deprived in housing as compared to 29% whose parents have more than primary school education.

Children in households where the household head is not working are more deprived in all dimensions except protection and water. Interestingly, children in households where the household head is working are significantly more deprived in protection (10%) than in households where the head is not working (3%). Moreover, households with married household heads seem to be able to improve child wellbeing given that deprivation rates are lower in all dimensions except protection and water.

Table 6 Dimensional deprivation rates by background characteristics (% of children 5-14 years old)

Characteristics	Protection	Education	Nutrition	Information	Water	Sanitation	Housing
All children 5-14	8.1	43.8	37.4	35.5	14.5	29.3	52.1
All male 5-14	9.2	45.4	37.8	34.9	14.4	28.8	51.9
All female 5-14	6.9***	42.2***	36.9	36.1	14.6	29.8	52.2
HH with fewer than 3 children	7.5	42	34.6	35.6	14	28	49.4
HH with 3+ children	8.6*	45.7***	40.2***	35.4	15	30.7**	54.8***
HH head age below 60	8	43.4	37	33.4	13.9	28.9	52.2
HH head age 60+	8.5	46.8**	40.3	50.4***	18.8***	32.2	51.2
HH head is single	8.4	46.7	46.1	57.1	15.5	39.1	60.4
HH head is married	7.9	42.9***	34.6***	28.6***	14.2	26.2***	49.4***
HH head has more than primary education	8	29.1	19.7	13.1	10.6	18.7	29.4
HH head has less than primary education	8.1	49.2***	43.9***	43.8***	16***	33.2***	60.4***
HH head is working	9.5	43.2	35.5	33.8	14.3	28.2	50.3
HH head is not working	2.9***	46**	43.7***	41.5***	15.3	33.2***	58.2***
HH head is female	8.2	46.6	45.2	56.3	15.3	37.8	60
HH head is male	8	42.7***	34.3***	27.2***	14.2	25.9***	48.9***
HH is in urban area	2.7	28.3	15.2	10.2	7.3	22.4	17.1
HH is in rural area	9.1***	46.9***	41.9***	40.6***	16***	30.7***	59.1***

Note 11

11 a Household head is not currently married; Stars indicate significant differences across categories (e.g. all boys versus all girls): ***p-value<0.01, **p-value<0.05, *p-value<0.1.

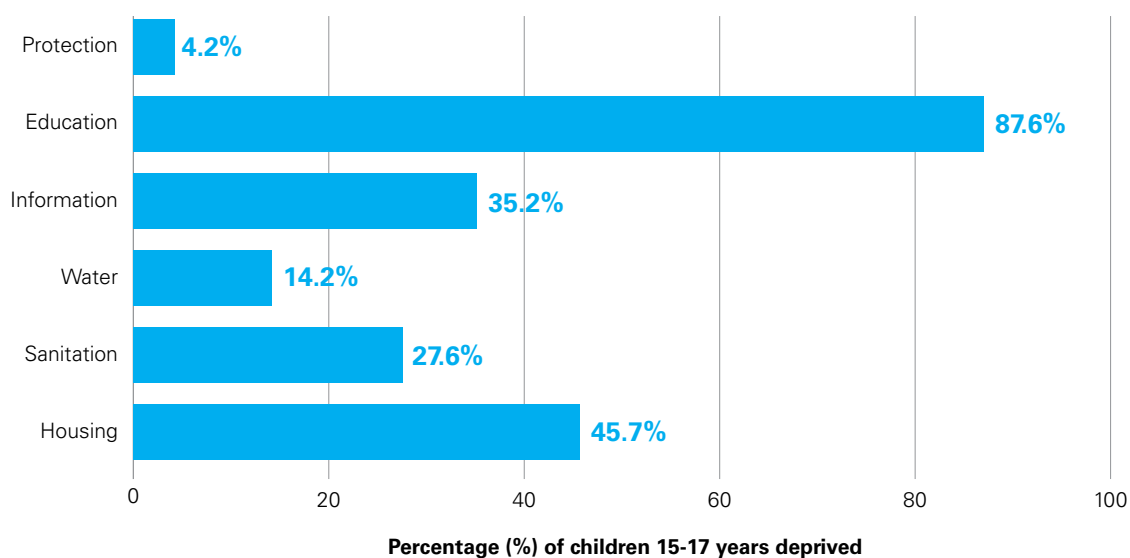
3.5 Children 15-17 years

Figure 10 shows deprivation rates among children aged 15-17 years. The dimension in which most children are deprived is education (87.6%), while the second highest deprivation rate is in the housing dimension (46%) followed by information at 35%. The percentage of children deprived in the protection dimension is the lowest at 4%. About 14% of children in this age group are deprived in the water dimension.



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Figure 10 Single deprivation analysis (% of children 15-17 years old)



Place of residence, education and age of the head of household are some of the factors driving deprivations amongst children aged 15-17 years.

Figure 11 shows that the high deprivation rates in the education dimension is mainly due to the fact that 85% of children 15-17 years old have not completed primary school education, and that 78% of children are two or more school grades behind for their age. On the other hand, 13% of children in this age group are illiterate, i.e. they cannot read and write in either English or Chichewa. Inadequate floor/roof is the main driving indicator for deprivation in the housing dimension (43%). Lack of potable water is the main contributing factor to deprivation in the water dimension.

Table 7 shows the dimensional deprivation rates for children aged 15-17 years old by background characteristics. As is the case with earlier age groups, place of residence, education and age of the head of household are some of the factors driving deprivations amongst children aged 15-17 years. Deprivation rates of children who reside in rural areas are significantly higher across all dimensions compared to their counterparts residing in urban areas. Similarly, children whose parents have less than primary school education are more deprived than those with parents who have more than primary school education.

Figure 11 Deprivation rate by indicator (% of children 15-17 years old)

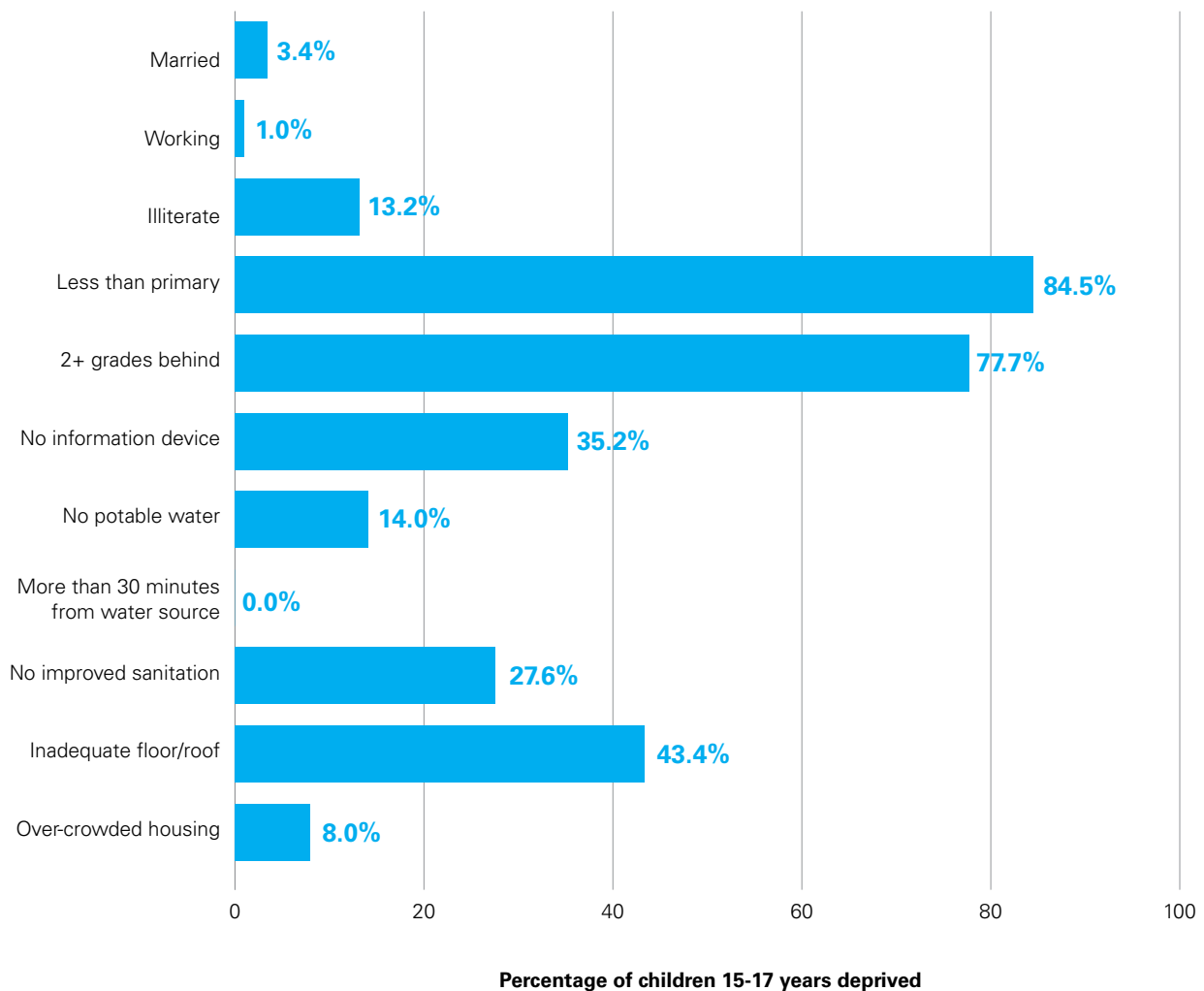


Table 7 Dimensional deprivation rates by background characteristics (% of children 15-17 years old)

Characteristics	Protection	Education	Information	Water	Sanitation	Housing
All children 15-17	4.2	87.0	35.2	14.2	27.6	45.7
All male 15-17	1.7	88	35.8	13.9	26.7	45.7
All female 15-17	6.7***	86	34.5	14.4	28.5	45.7
HH with fewer than 3 children	6.7	83.8	36.1	14.3	28.2	43.6
HH with 3 children	1.5***	90.5***	34.1	14	27	48*
HH head+ age below 60	4.6	86.1	31.9	12.6	26.8	45.8
HH head age 60+	2.4**	91.4***	50.1***	21.4***	31.2	45.3
HH head is singlea	3.1	86	53.9	14	37.9	53
HH head is married	4.6**	87.4	27.8***	14.2	23.6***	42.9***
HH head has more than primary education	2.8	70.5	11.2	10	17.4	22.1
HH head has less than primary education	4.7**	93.3***	44.3***	15.7***	31.5***	54.7***
HH head is working	4.2	86.4	32.5	14	25.6	44.5
HH head is not working	4.3	89.1*	44.1***	14.6	34.2***	49.8**
HH head is female	2.4	87.7	53.4	13.8	37.6	52.2
HH head is male	5***	86.7	26.9***	14.3	23***	42.8***
HH is in urban area	2.1	67.7	10.7	7.3	21.9	13.7
HH is in rural area	4.7**	91.2***	40.4***	15.6***	28.8**	52.6***

Note 12

The age of household head affects deprivation rates in education, information and water. About 50% of the children living in households headed by a person who is older than 60 years are deprived in information as compared to 32% of those living in households headed by a person who is less than 60 years. It can further be observed that 7% of all female children aged 15-17 years are deprived in protection as compared to 2% of all male in this age group. The table further reveals that 38% of the children aged 15-17 years from female headed household are deprived in sanitation as compared to 23% from male headed households.



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Multiple Deprivation Analysis

4

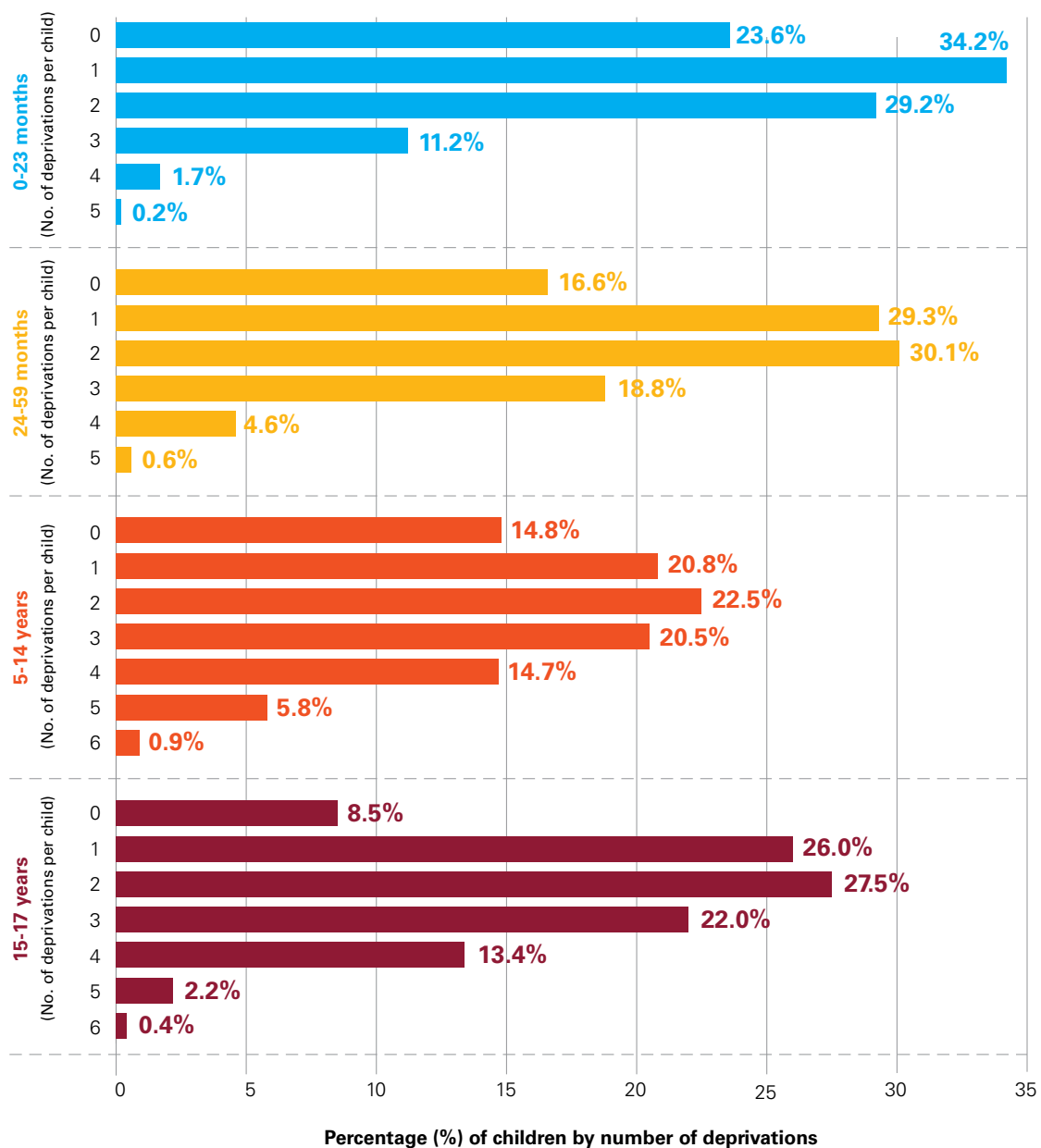
The analysis in this section focuses on the number of dimensions in which children are deprived in and the overlaps between them. The analysis of overlaps is an important element of multi-dimensional poverty analysis. A child who suffers from several deprivations at the same time is more vulnerable than a child who suffers from deprivation in only one dimension.

It is thus important to know not only how many children are deprived in each dimension but also which children are deprived in different dimensions and whether different subgroups of children experience different overlaps in dimensions, as this has implications for policy responses. For example, a case where 50% of children are out of school and 50% are stunted would require a different intervention if the high school dropout rate was observed in urban areas while stunting was highest in rural areas, or where both deprivations were concentrated amongst women. The overlaps in dimensions can thus assist in targeting interventions to children sub-groups and or to geographical areas where they are required.

4.1 Number of deprivations

Figure 12 shows that across all age groups the greatest percentage of deprivations ranges between 2 to 3 dimensions. Over 60% of children aged 5-14 and 15-17 years are deprived in two or more dimensions compared to 54% of children between the ages of 24-59 months and 42% of children aged 0-23 months.

Figure 12 Percentage of children deprived by number of deprivations and age group



61% of male children are deprived in two or more dimensions compared to 60% of female children in Malawi.

In urban areas, 40% of children are not deprived as compared to 10% of their counterparts in the rural areas. In rural areas, 68% of children are deprived in 2 or more dimensions compared to 25% in urban areas.

Figure 14 shows that deprivation rates vary by region in Malawi. In the Central region, about 63% of children are deprived in 2 or more dimensions as compared to 61% in the Southern region and 45% in Northern region.

Figure 15 shows a similar distribution of number of deprivations amongst male and female children. It can be observed from the graph that 61% of male children are deprived in two or more dimensions compared to 60% of female children in Malawi. In addition, amongst both sexes, a small percentage of children are deprived in 6 or more dimensions.

Figure 13 Percentage of children by number of deprivations and place of residence

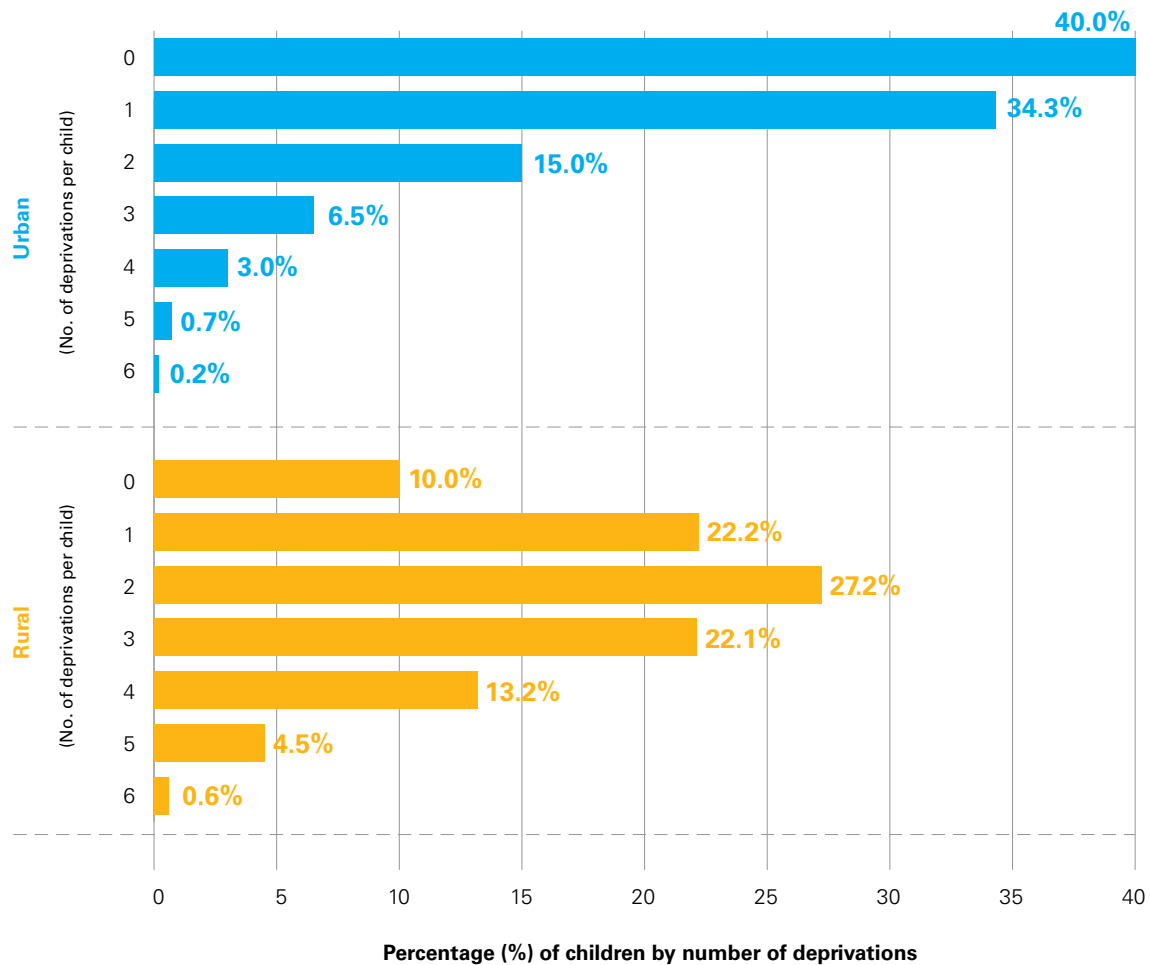


Figure 14 Percentage of children by number of deprivations and region

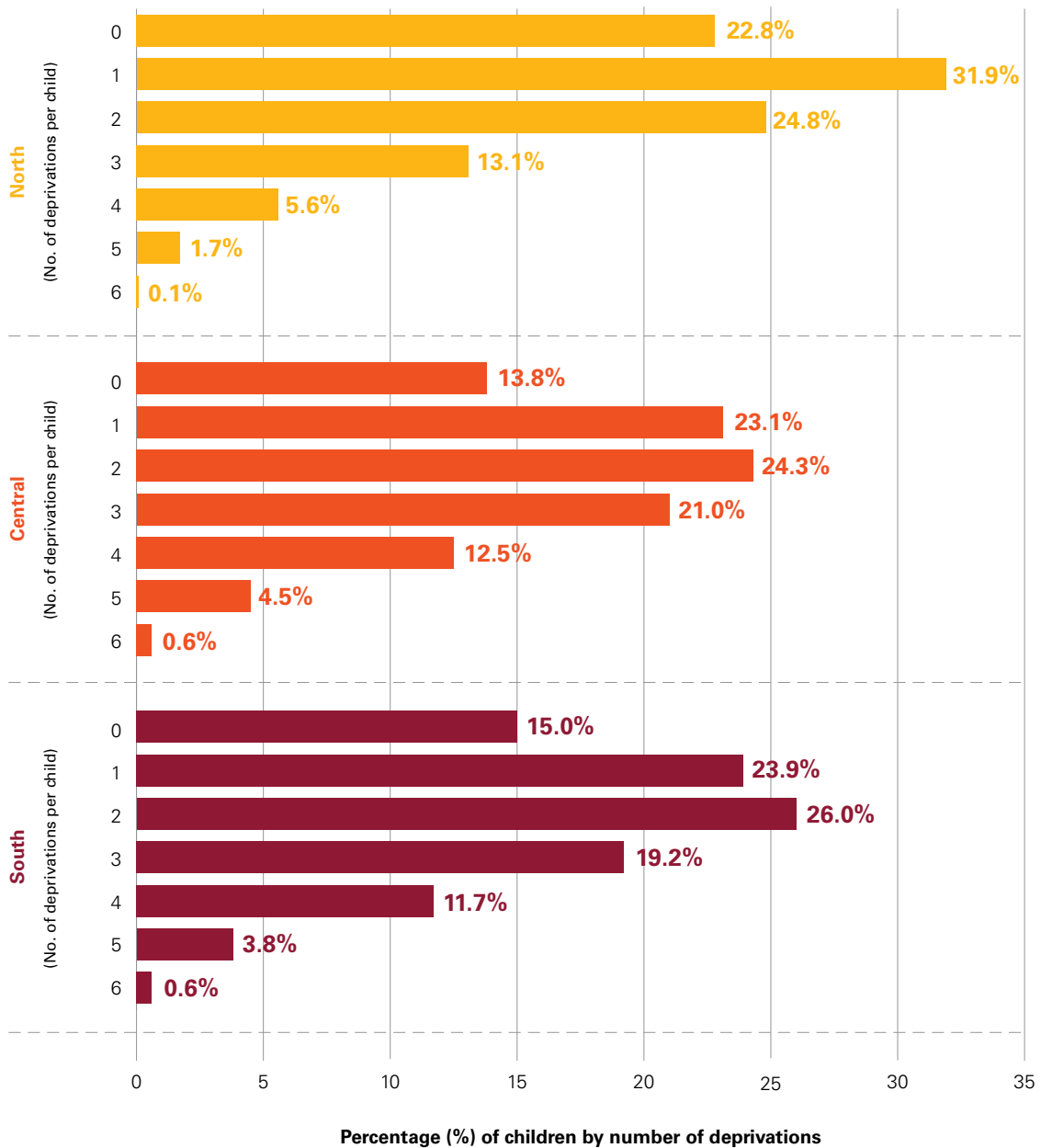
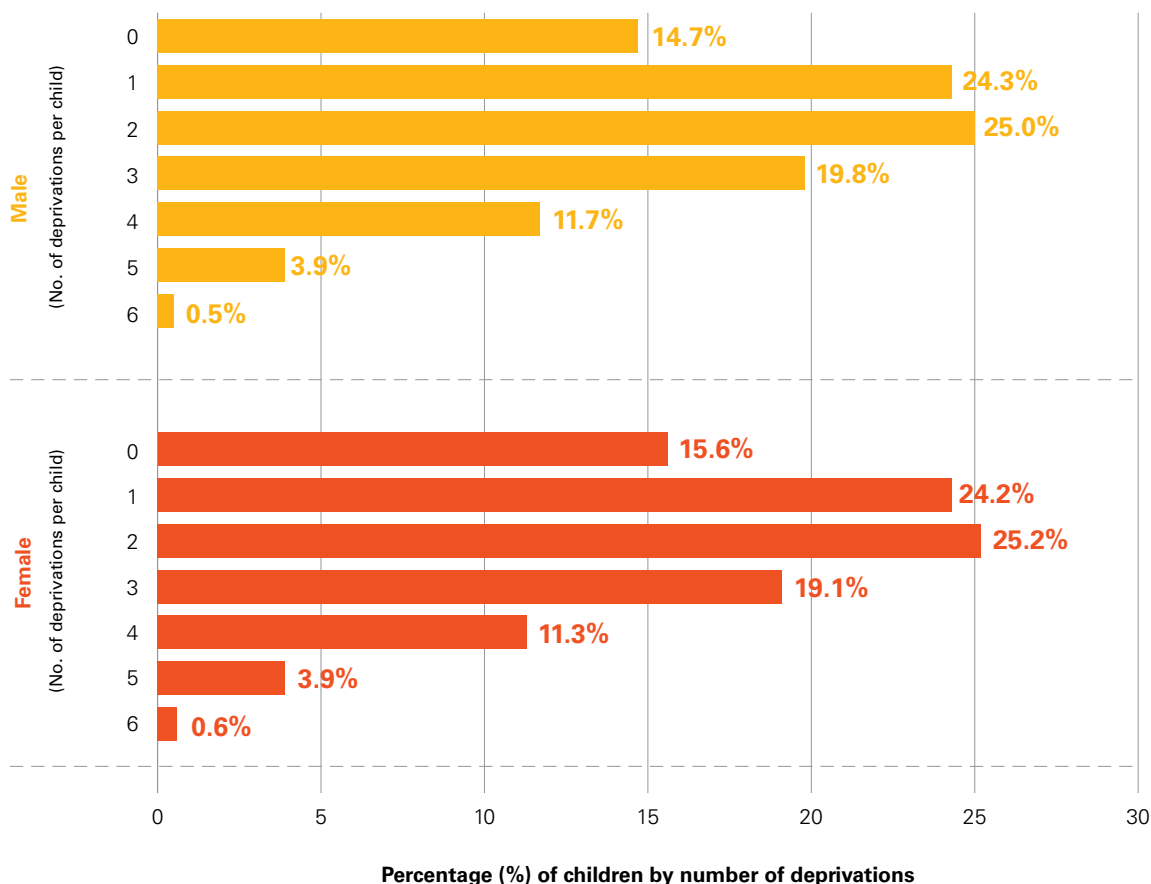


Figure 15 Percentage of number of deprivations per child by gender of child (% of children)**Table 8** Multidimensional poverty headcount, intensity, and adjusted headcount (children aged 0-17)

Number of deprivations (k)	Headcount (H)	Intensity (A)	Adjusted headcount ratio (M0)
Deprived in 1+	84.8	37.6	0.32
Deprived in 2+	60.5	46.0	0.28
Deprived in 3+	35.4	55.3	0.20
Deprived in 4+	16.0	64.6	0.10
Deprived in 5+	4.5	75.1	0.03
Deprived in 6+	0.6	87.6	0.01
Deprived in 7+	0.0	100.0	0.00

Table 8 shows the proportion of children who are poor according to various thresholds of deprivations (H). These thresholds indicate if a child is deprived in at least k dimensions, with k ranging from 1+ to 7+ dimensions. Table 8 also reports the intensity of poverty (A), and the adjusted headcount ratio (M0). The

poverty headcount (H) tells us how many children are affected by poverty, whereas the intensity (A) indicates how badly affected those children are. The overall poverty score (M0) is a combination of the incidence of poverty (H), that is the proportion of poor children deprived in at least k dimensions, and the intensity

of poverty (A), that is, the share of dimensions in which a poor child is deprived.

Most children in Malawi are deprived in at least one dimension (85%). On average, these poor children are deprived in three of the eight dimensions. This implies an adjusted headcount ratio of 0.32. On average, 61% of the children are poor with a threshold of two dimensional deprivations or more. As expected, the lower the number of deprivations, the higher the incidence rate.

Table 9 shows that children in rural areas experience greater poverty at each cut-off relative to children in urban areas. They also have higher intensities. With a threshold of 2 or more dimensional deprivations. Table 9 indicates that 68% of children in rural areas are

multidimensionally poor compared to 26% in urban areas. These poor children suffer on average deprivation in 41% and 46% of dimensions respectively.

Table 10 shows the spatial profile of poverty among children in Malawi. There are clear differences across the three regions. For instance, with a threshold of 2 or more dimensions, the Central region exhibits a higher incidence rate (63%) compared to the Southern region (61%) and the Northern region (45%). Interestingly, however with this threshold, we find a similar intensity rate of poverty across the three provinces. This leads to a higher adjusted headcount ratio in the Central region (0.30) as compared to Southern region (0.28) and Northern region (0.19)

On average, poor children in Malawi are deprived in three of the eight dimensions.

Table 9 Multidimensional poverty headcount, intensity and adjusted H by area of residence (children aged 0-17 years)

Number of deprivations (k)	Headcount (H)		Intensity (A)		Adjusted headcount ratio (M0)	
	Urban	Rural	Urban	Rural	Urban	Rural
Deprived in 1+	59.7	90.0	26.9	39.1	0.16	0.35
Deprived in 2+	25.5	67.7	41.1	46.4	0.10	0.31
Deprived in 3+	10.4	40.6	54.3	55.4	0.06	0.22
Deprived in 4+	3.9	18.5	64.3	64.6	0.03	0.12
Deprived in 5+	0.9	5.2	77.0	75.1	0.01	0.04
Deprived in 6+	0.2	0.7	90.1	87.5	0.00	0.01
Deprived in 7+	0.0	0.0	.	100.0	.	0.00

Table 10 Multidimensional poverty headcount, intensity and adjusted headcount by region, for all k values

Number of deprivations (k)	Headcount (H)			Intensity (A)			Adjusted headcount ratio (M0)		
	N	C	S	N	C	S	N	C	S
Deprived in 1+	77.2	86.2	85.0	31.2	38.7	37.7	0.24	0.33	0.32
Deprived in 2+	45.3	63.0	61.2	41.6	46.8	45.9	0.19	0.30	0.28
Deprived in 3+	20.5	38.7	35.2	53.0	55.6	55.3	0.11	0.22	0.19
Deprived in 4+	7.4	17.7	16.0	64.1	65.0	64.1	0.05	0.11	0.10
Deprived in 5+	1.8	5.1	4.3	74.4	75.6	74.7	0.01	0.04	0.03
Deprived in 6+	0.1	0.7	0.6	85.7	87.1	88.3	0.00	0.01	0.01
Deprived in 7+	0.0	0.0	0.0	.	100.0	100.0	.	0.00	0.00

N=Northern, C=Central and S=Southern

Table 11 Multidimensional poverty headcount by age group

Number of deprivations	Headcount (H)			
	0-23 m	24-59 m	5-14 yrs.	15-17 yrs.
Deprived in 1+	76.4	83.4	85.2	91.5
Deprived in 2+	42.2	54.2	64.4	65.5
Deprived in 3+	13.0	24.1	41.9	38.0
Deprived in 4+	1.9	5.3	21.4	16.0
Deprived in 5+	0.2	0.6	6.7	2.6
Deprived in 6+	.	.	0.9	0.4
Deprived in 7+	.	.	0.0	.

Table 12 Multidimensional poverty Intensity by age group

Number of deprivations	Intensity (A)			
	0-23 m	24-59 m	5-14 yrs.	15-17 yrs.
Deprived in 1+	35.0	40.2	37.0	39.0
Deprived in 2+	47.1	51.1	44.3	47.8
Deprived in 3+	63.1	64.9	52.8	58.3
Deprived in 4+	81.9	82.4	62.3	69.7
Deprived in 5+	100.0	100.0	73.5	85.7
Deprived in 6+	.	.	86.5	100.0
Deprived in 7+	.	.	100.0	.

Table 13 Multidimensional poverty Adjusted Headcount by age group, for all k values

Number of deprivations (k)	Adjusted Headcount (M0)			
	0-23 m	24-59 m	5-14 yrs.	15-17 yrs.
Deprived in 1+	0.27	0.34	0.32	0.36
Deprived in 2+	0.20	0.28	0.29	0.31
Deprived in 3+	0.08	0.16	0.22	0.22
Deprived in 4+	0.02	0.04	0.13	0.11
Deprived in 5+	0.00	0.01	0.05	0.02
Deprived in 6+	.	.	0.01	0.00
Deprived in 7+	.	.	0.00	.

Table 11 compares headcount ratios by age group. The analysis shows that children aged 15-17 years are more likely to be deprived in at least one dimension (92%) compared to the other age groups. This is expected since amongst the younger age groups fewer dimensions are relevant. About 66% of children 15-17 years are deprived in two or more dimensions compared to 42% amongst children within age group 0-23 months.

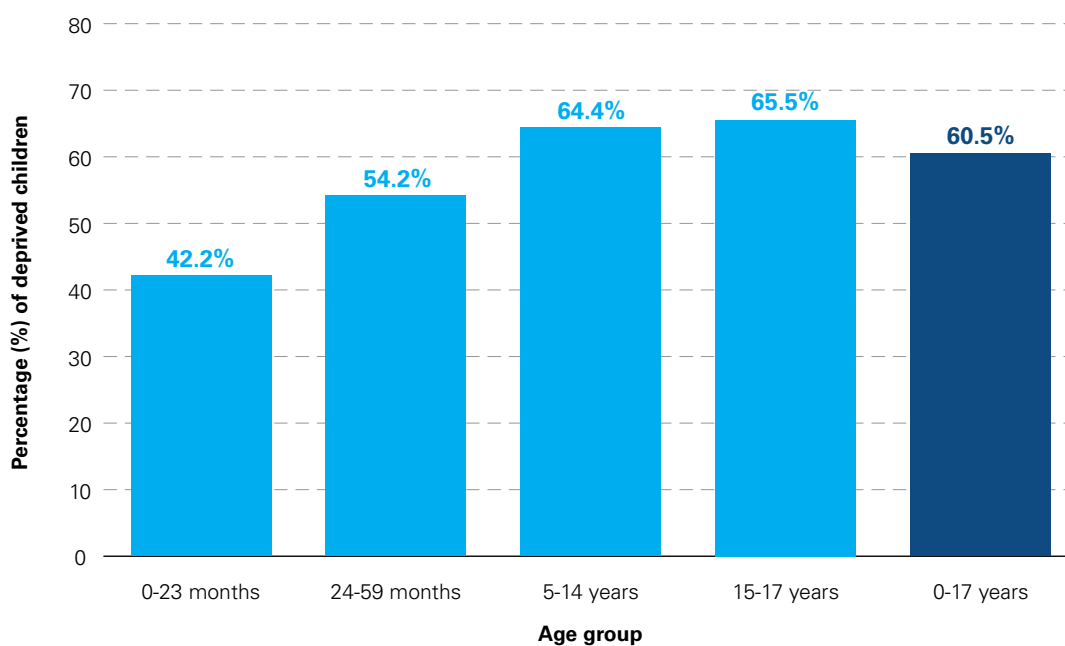
Table 12 shows the intensity of deprivation across age groups. For a poverty threshold of 2 indicators or more, we see that across all age groups children who are poor suffer deprivations in a range of 44 % to 51% of dimensions. The highest intensity of poverty corresponds to children aged 24 to 59 months. Table 13 above highlights the adjusted headcount ratio that summarises the incidence and intensity of poverty. For a poverty threshold of 2 indicators or more, we see

that children aged 15 to 17 are the group that ranks as the poorest (0.31). This is followed by children aged 5 to 14 (0.29), children aged 24 to 59 months (0.28) and lastly children aged 0 to 23 months (0.20), the latter being the group with lowest poverty .

Figure 16 plots the values of the multidimensional poverty headcount for a poverty threshold of 2 indicators or more across age groups. The results show that 61% of children aged 0-17 years in Malawi are multidimensionally poor. Looking at different age categories, it can be observed that 66% of children aged 15-17 years, 64% percent of children aged 5-14 years, 54% of children aged 24-59 months, and 42% of children aged 0-23 months are multi-dimensionally poor.

About 66% of children 15-17 years are deprived in two or more dimensions compared to 42% amongst children within age group 0-23 months.

Figure 16 Multidimensional poverty headcount (k=2), by age group



51% of multidimensionally poor children aged 0-23 months are deprived in both housing and sanitation dimension while 14% of them are deprived in both housing and water dimension.

4.2 Overlap in dimensions for multidimensionally poor children (k=2)

In this sub-section, the focus is on multidimensionally poor children, i.e. those children deprived in two or more dimensions, and the degree of overlap for each dimension separately.

4.2.1 Children 0-23 months

Figure 17 shows that children aged 0-23 months are more deprived in housing and sanitation dimensions. Over 60% of these children are deprived in housing and one other dimension while roughly 40% are deprived in sanitation and one other dimension. Over 20% of children in this age category are deprived in housing and two more dimensions. Similarly, over 20% of children aged 0-23 months are deprived in sanitation and two more dimensions.

Figure 18 shows the overlaps among water, sanitation, and housing dimensions through a Venn diagram. The diagram reveals that 51% of multidimensionally poor children aged 0-23 months are deprived in both housing and sanitation

dimension while 14% of them are deprived in both housing and water dimension. Figure 18 also shows that 10% of multidimensionally poor children aged 0-23 months are deprived in all the three dimensions.

4.2.2 Children 24-59 months

Figure 19 shows that children aged 24-59 months are mostly deprived in housing and nutrition dimensions. It also shows that over 40% of these children are deprived in housing and one more dimension and that over 30% of them are deprived in housing and two more dimensions. The graph further shows that over 35% of these children are deprived in nutrition and one more dimension and that close to 30% of them are deprived in nutrition and two more dimensions. Furthermore, over 20% of children aged 24-59 months are deprived in sanitation and two more dimensions.

Figure 17 Overlap of dimensions (% of multidimensionally poor children (k=2) 0-23 months)

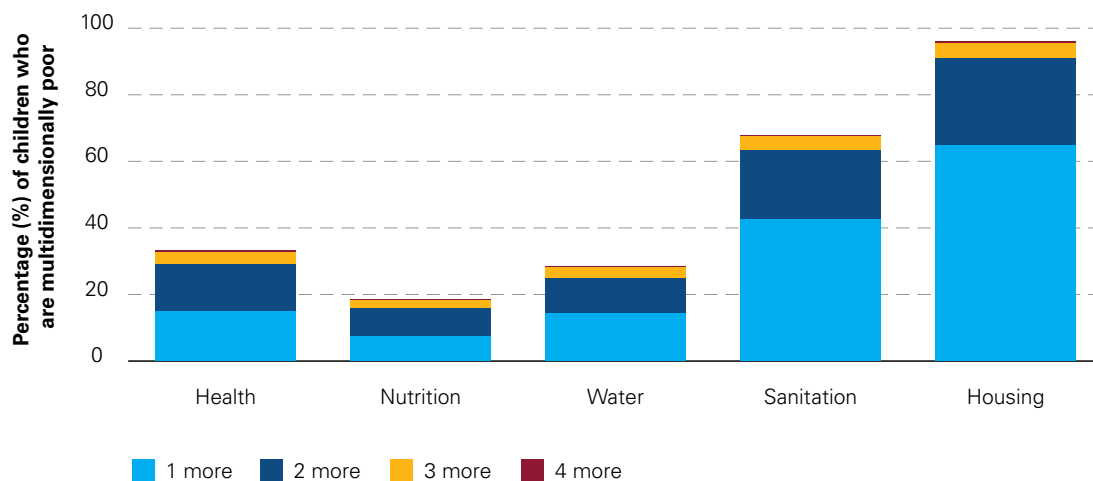


Figure 18 Overlap among water, sanitation and housing dimensions (% of multidimensionally poor children (k=2)) 0-23 months

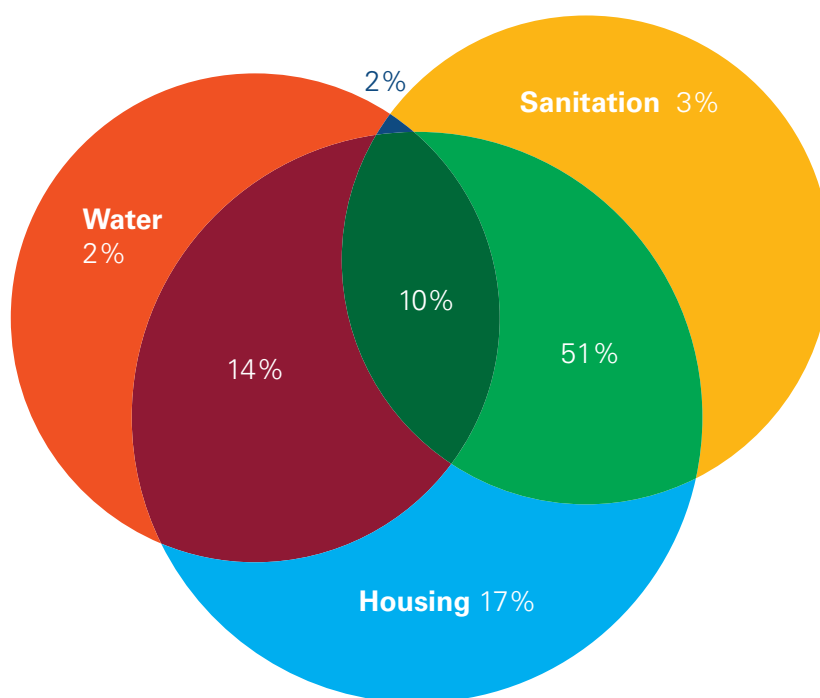


Figure 19 Overlap of dimensions (% of multidimensionally poor children (k=2)) 24-59 months

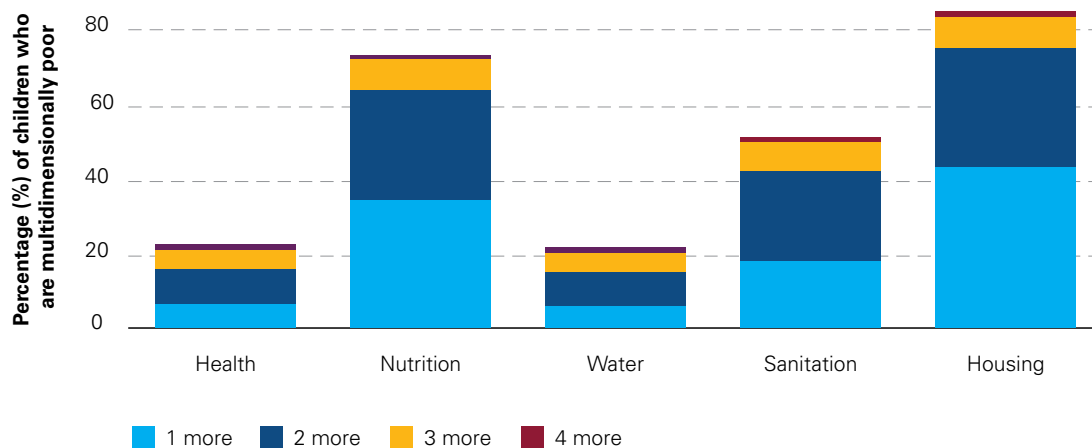


Figure 20 Overlap among housing, water, and sanitation dimensions (% of multidimensionally poor children (k=2)) 24-59 months

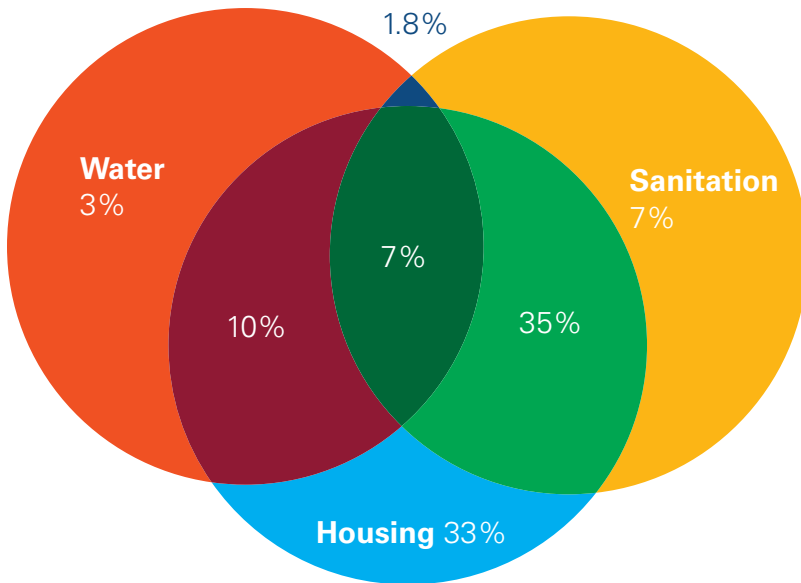


Figure 20 shows the Venn diagram that depicts the overlaps in three dimensions, namely: water, sanitation, and housing for multidimensionally poor children aged 24-59 months. The results show that 7% of these children are deprived in all the three dimensions with 35% of them deprived in both housing and sanitation dimensions, with 10% deprived in both housing and water dimension.

4.2.3 Children 5-14 years

Figure 21 shows that over 20% of the children aged 5-14 years are deprived in housing and two more deprivations. The graph also shows that over 20% of the children who are deprived in housing are deprived in other three dimensions. Over 10% of multidimensionally poor children in this age group who suffer from education, nutrition, information, or sanitation deprivation are deprived in three more dimensions.

Figure 21 Overlap of dimensions (% of multidimensionally poor children (k=2)) 5-14 years

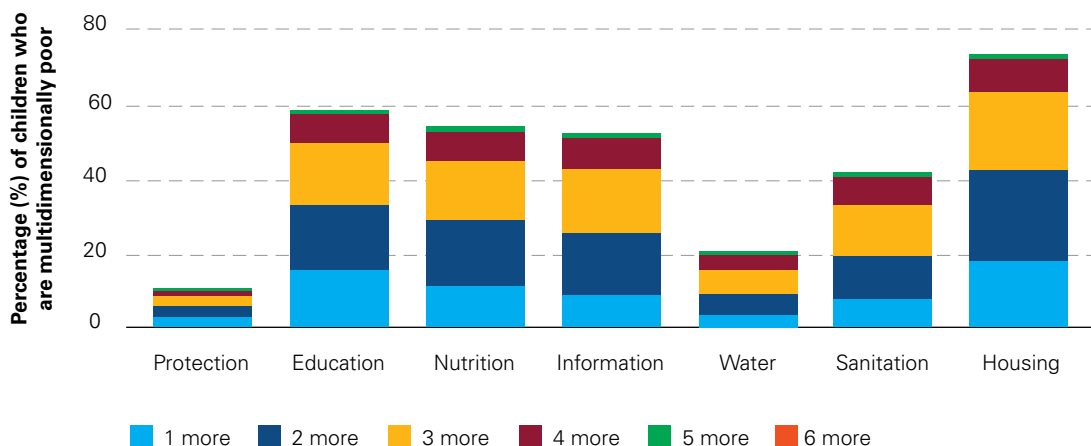


Figure 22 shows the Venn diagram depicting overlaps among three dimensions, namely: housing, education, and nutrition. An estimated 20% of multidimensionally poor children aged 5-14 years are deprived in all three dimensions simultaneously. The diagram further shows that 21% of multidimensionally poor children in this age category are deprived in both education and housing dimensions, 18% of them are deprived in both nutrition and housing, and, finally, 9% in both nutrition and education.

4.2.4 Children 15-17 years

Figure 23 shows that education, housing, and information are the dimensions with most overlaps. 40% of the children are deprived in education and one more dimension with over 30% of them deprived in education and two more dimensions. The figure further shows that over 20% of multidimensionally poor children who are 15-17 years old are deprived in information and two or more dimensions. Furthermore, over 20% of them are deprived in housing and two or more dimensions.

Figure 22 Overlap among nutrition, education, and housing dimensions (% of multidimensionally poor children (k=2)) 5-14 years

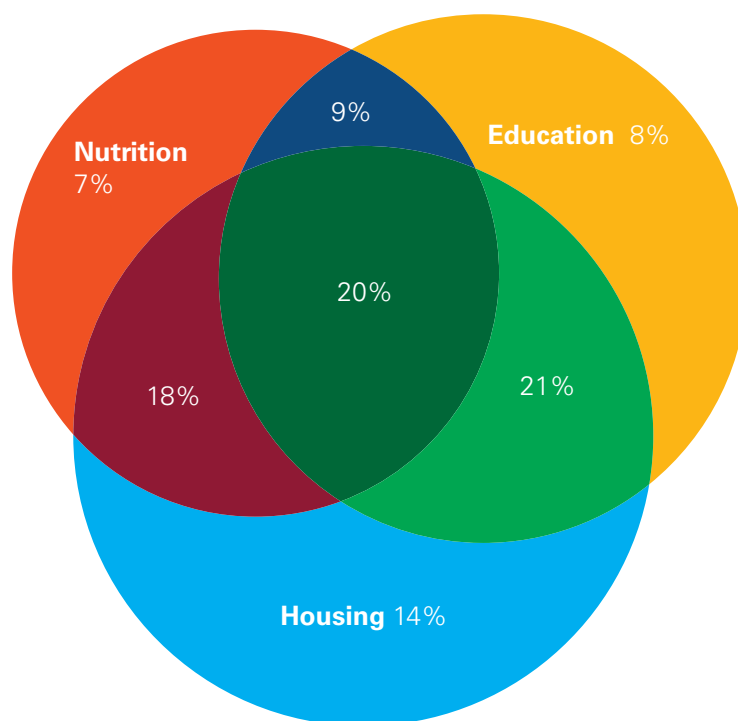


Figure 23 Overlap of dimensions (% of multidimensionally poor children (k=2)) 15-17 years

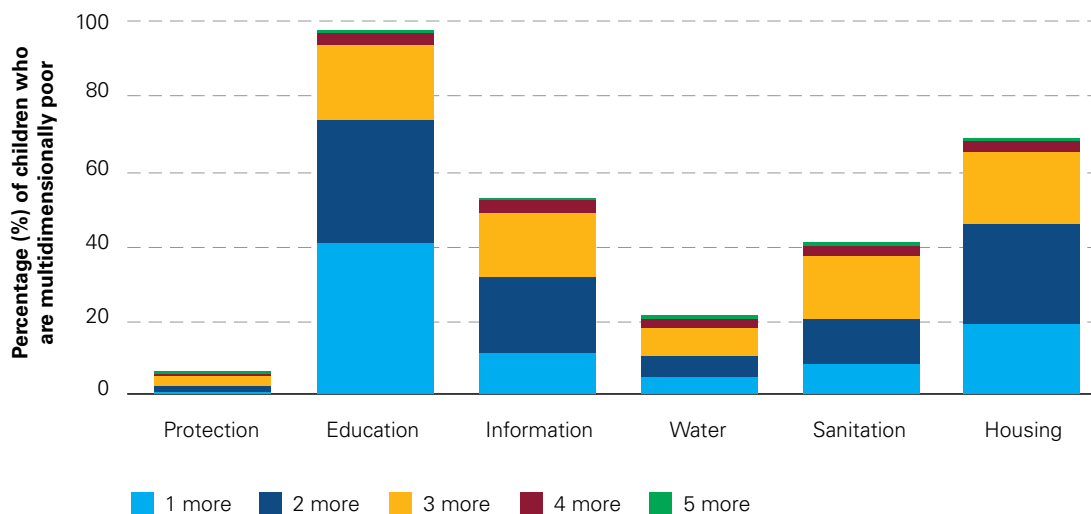


Figure 24 Overlap among housing, education, and information dimensions (% of multidimensionally poor children (k=2)) 15-17 years

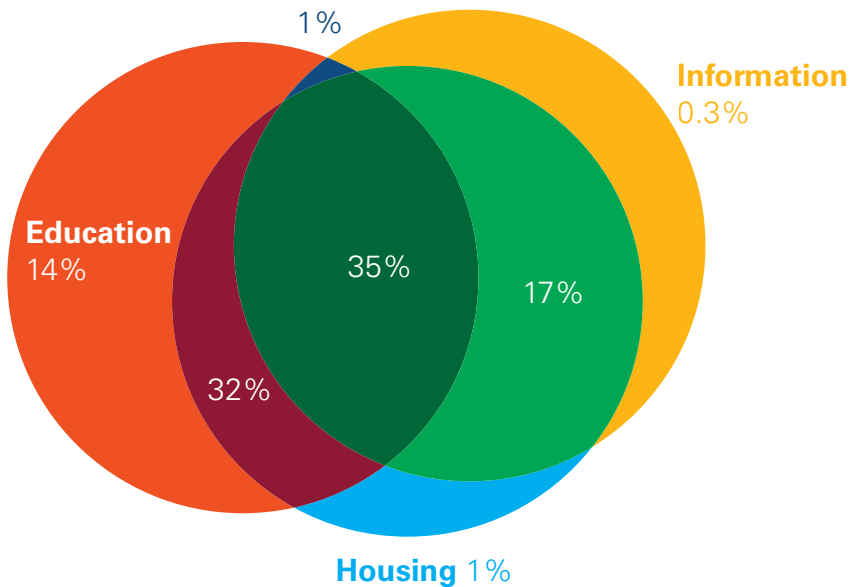


Figure 24 shows the Venn diagram depicting overlaps among three dimensions, namely: housing, education, and information. The analysis found that 35% of multidimensionally poor children between 15-17 years old are deprived in all three dimensions simultaneously. The diagram further shows that 32% of the children are deprived in both education and housing dimension, 17% of them are deprived in both information and housing, and only 1% of them are deprived in both information and housing dimensions.



Monetary poverty and deprivations

5

5.1 Monetary child poverty

Table 14 shows monetary poverty and ultra-poverty rates¹³ by age group and by area of residence. At national level, the highest monetary poverty rate is amongst children 5-14 years with 60% of them being monetary poor and 25% being ultra-poor. The figures are higher than the national poverty and ultra-poverty rates for the entire population. For the same age group residing in urban areas, 22% are poor and 6% are extremely poor compared to 67% of children who are poor and 29% who are extremely

poor amongst those residing in rural areas. Children between 0-17 years old have a poverty rate of 58% compared to approximately 52% for the overall population and an ultra-poverty rate of 24% compared to 20% for the overall population. Interestingly, child poverty rate 0-17 in urban areas is considerably higher in the population as a whole than overall urban poverty rate with 23% of children being poor compared to 18% of the overall population. In rural areas, monetary child poverty stands at 28% compared to 60% for the overall population.

Table 14 Monetary poverty by area of residence and age group

Children Age	National		Urban		Rural	
	Poor	Ultra-poor	Poor	Ultra-poor	Poor	Ultra-poor
0-23 months	56.4	24.0	21.0	4.7	63.2	27.7
24-59 months	56.9	24.3	19.3	5.1	63.9	27.9
5-14 years	59.6	25.3	21.5	5.5	66.7	29.0
15-17 years	53.8	20.9	17.9	3.5	61.6	24.7
All children 0-17 years	57.7	23.9	22.6	5.5	27.6	27.6
Total population	51.5	20.1	17.7	4.1	59.5	23.8

¹³ Poverty rates are defined with reference to poverty and ultra-poverty lines as set by the Malawian NSO.

Children account for 62% of the total population who is ultra-poor.

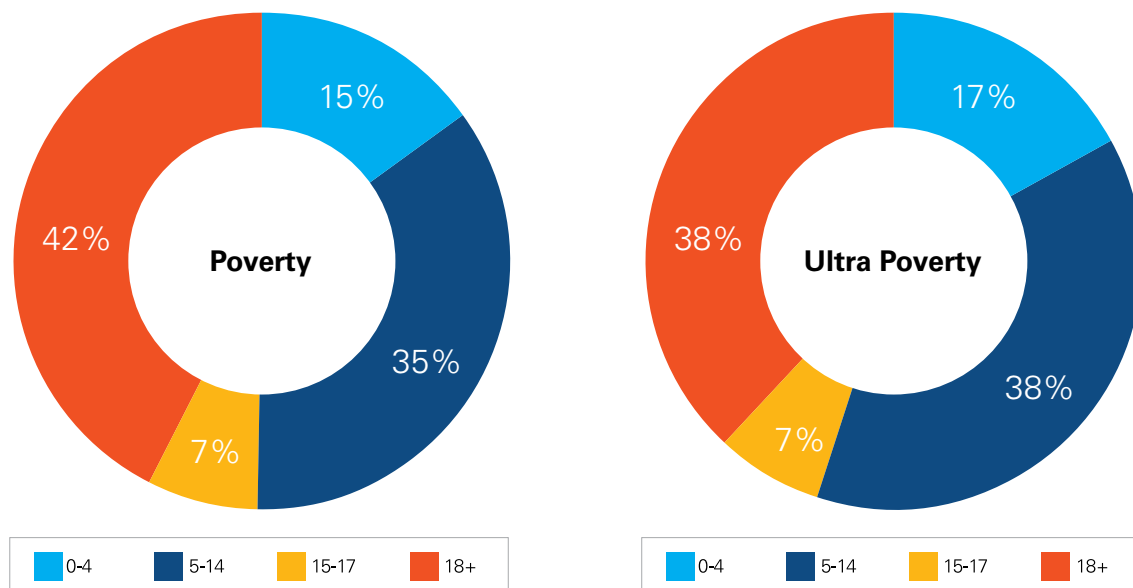
Table 15 shows that poverty and ultra-poverty rates among children are the highest in Southern region at 63% and 29% respectively. Central region has the lowest monetary child poverty rates (53% poor and 20% ultra-poor) while in Northern region 55% of children are poor and 22% ultra-poor. The table also shows that, out of all age groups, children in age group 5-14 years have the highest poverty and ultra-poverty rates across all regions.

Figure 25 shows the distribution of monetary poverty and ultra-poverty across age groups. The pie charts reveal that children aged 0-17 years account for 58% of the people who are monetary poor in Malawi. Children also account for 62% of the population who is ultra-poor. The pie charts further reveal that children aged 5-14 years account for the largest share amongst the poor and ultra-poor, 35% and 38% respectively.

Table 15 Child monetary poverty rates by region and age group

Children	North		Centre		South	
	Poor	Ultra-poor	Poor	Ultra-poor	Poor	Ultra-poor
0-23 months	52.3	20.4	50.7	19.9	62.1	28.3
24-59 months	52.6	20.0	53.6	21.9	61.0	27.8
5-14 years	56.5	21.6	55.9	22.0	63.9	29.6
15-17 years	50.5	16.8	50.8	18.8	57.7	24.5
All children 0-17 years	55.2	21.7	53.2	19.7	62.9	28.5
Total population	49.5	18.2	47.5	16.4	56.0	24.2

Figure 25 Distribution of monetary poverty across age groups



5.2 Overlap between monetary and multidimensional poverty

In this section, the report looks at the association between monetary and multidimensional child poverty. In most cases, there is a close connection between monetary and multidimensional poverty, since financial constraints remain one of the main barriers to accessing essential goods and social services required to achieve wellbeing outcomes. However, financial constraints are not the only factor affecting wellbeing. Environmental, cultural, legal, political, physiological and mental constraints can be just as powerful in shaping a child's destiny as lack of money. Indeed, much of the value added of the multidimensional approach lies in identifying and understanding mismatching cases, in which children manage to achieve satisfactory outcomes despite overwhelming financial constraints or, on the contrary, where financial resources fail to translate into expected outcomes.

Table 16 shows that children who are monetarily poor are often deprived in several dimensions. Children who are ultra-poor suffer, on average, from about 3 deprivations. In addition, the share of deprivations that ultra-poor suffer (43%) is much higher compared to the one of the monetary poor and non-poor (36% and 22% respectively.)

The Venn diagram in Figure 26 shows that 43% of children aged between 0 to 17 years suffer from both monetary and multidimensional child poverty. About 14% of children are monetary poor only while 17% of them are multidimensionally poor (deprived in two or more dimensions). However, about 25% of the children aged 0 to 17 years are neither multidimensionally nor monetary poor.

Table 16 Average number and share of deprivations by monetary poverty status children 0-17 years

Monetary poverty status	Average number of deprivations	Average share of deprivations
Not poor	1.4	22.4
Poor	2.3	35.6
Ultra-poor	2.8	43.5

Figure 26 Overlap between monetary and multidimensional poverty (k=2) children 0-17 years

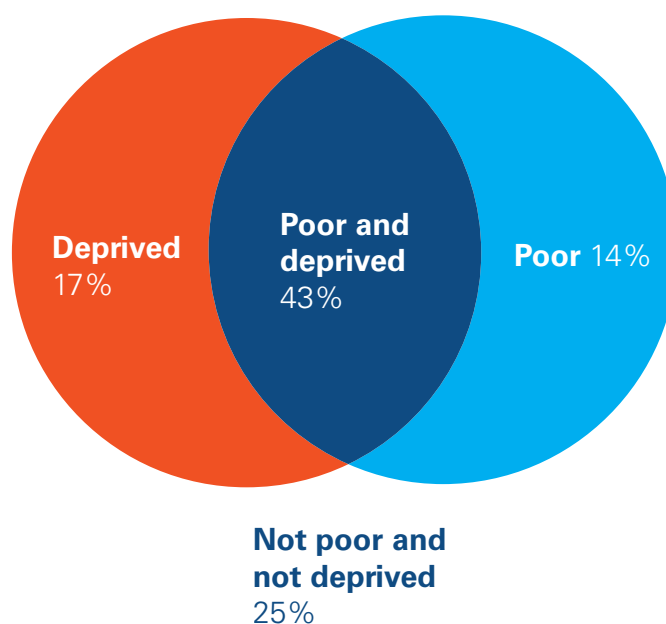


Table 17 Overlap between monetary and multidimensional poverty (k=2) by area of residence and region (% of children)

Status	National	Urban	Rural	North	South	Central
Monetary poor only	14.3	9.5	15.3	22.7	10.5	16.5
Multidimensional poor only	17.1	12.4	18.1	12.8	20.3	14.8
Both monetary and multidimensional poor	43.4	13.0	49.6	32.5	42.7	46.4
Not poor nor deprived	25.1	65.0	17.0	32.0	26.5	22.4

Table 18 Overlap between monetary and multidimensional poverty (k=2) by age group (% of children)

Age	Monetary poor only	Multidimensionally poor only	Both monetary and multidimensionally poor	Not poor and not multidimensionally poor
0-23 months	27.1	12.3	29.9	30.8
24-59 months	18.3	15.6	38.5	27.5
5-14 years	11.9	17.4	47.1	23.7
15-17 years	10.2	21.6	43.9	24.3

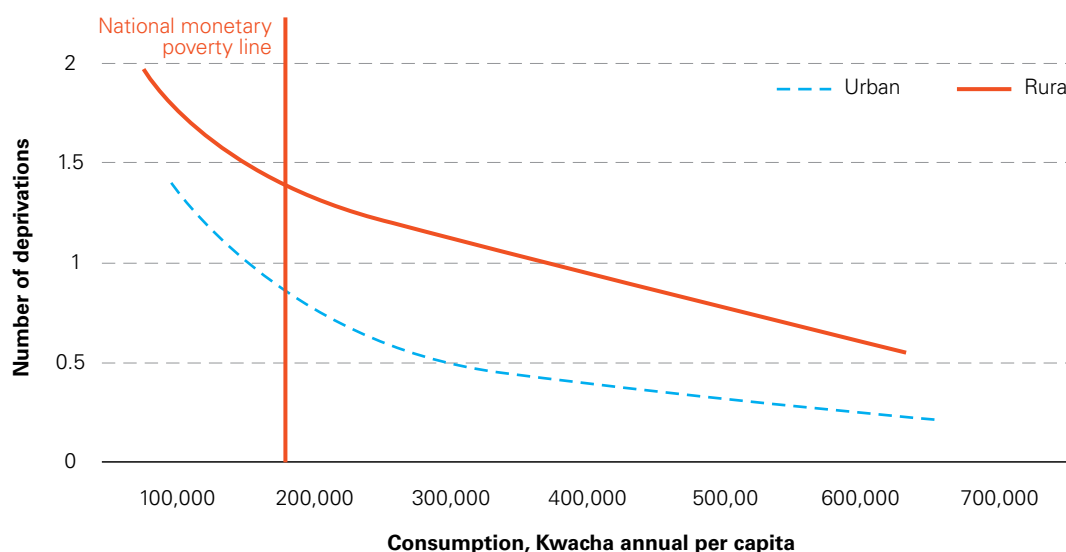
Figure 27 Association plot between monetary poverty and multidimensional poverty, by area of residence for all children 0-17 years

Table 17 extends the analysis of the Venn diagram by showing the overlap between monetary and multidimensionally poor children by region and place of residence. There is a higher proportion of children that are both monetary and multidimensionally poor in rural areas (50%) as compared to their urban counterparts (13%). Amongst the regions, the highest proportion of children who are both monetary and multidimensionally poor can be observed in the Central region where 46% are both monetary and multidimensionally poor followed by Southern Region at 43% and then Northern region at 33%. Northern region registered the highest proportion (23%) of children who are monetarily poor only as compared to Central region and Southern region at 17% and 11% respectively. About 65% of children in urban areas are neither monetary nor multidimensionally poor as compared to 17% of those in the rural areas. Southern region registered the highest percentage of children not monetary poor (20%), while the same figure in the Central and Northern region is 15% and 13% respectively. The percentage of children who are neither monetary nor multidimensionally poor is as high as 32% in the Northern region, while in the Central and Southern region stands at 27% and 22% respectively.

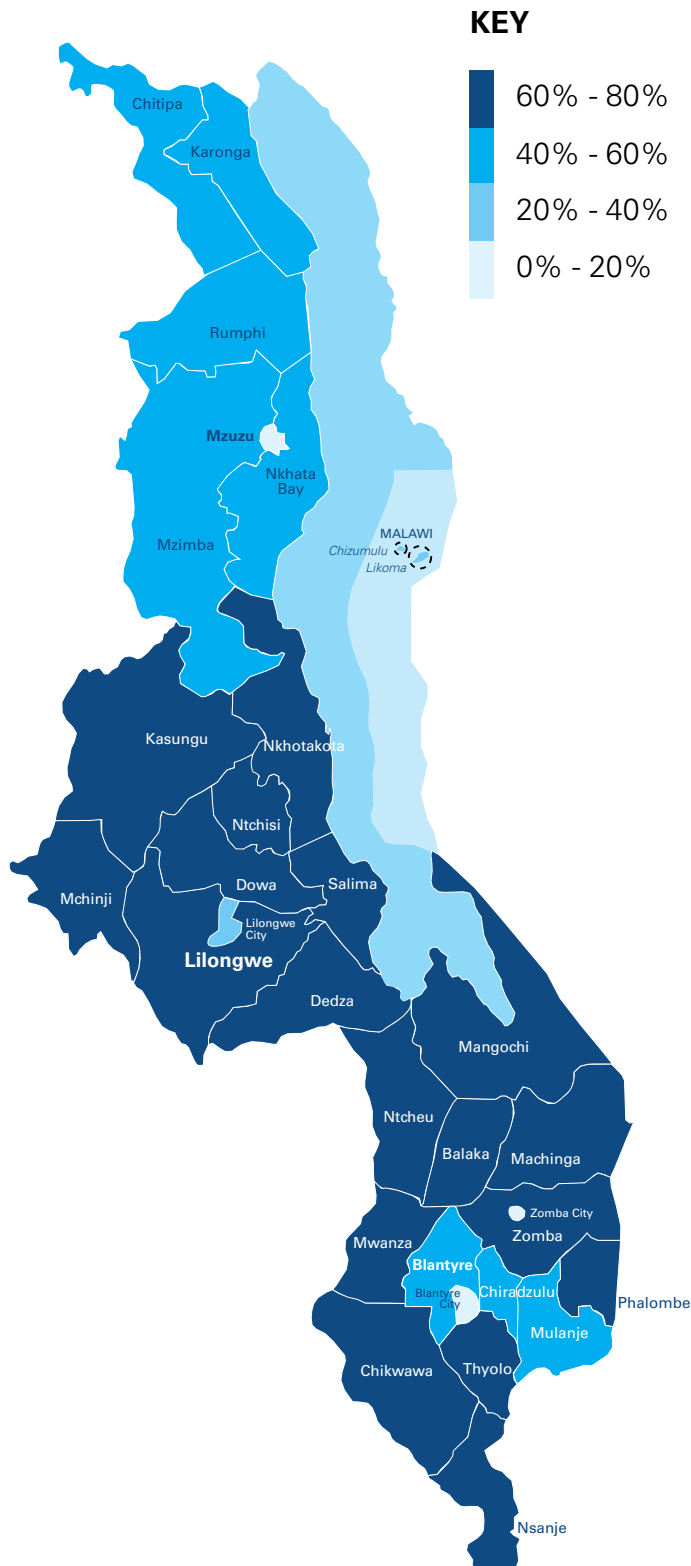
Table 18 shows that children aged 0 to 23 months are most likely to be monetary poor only (27%), while children 15-17 years old are most likely to be multidimensionally poor only. The percentage of children who are both monetary and multidimensionally poor is the highest amongst children aged 5-14 years (47%).

The link between monetary and multidimensional poverty is also shown by looking at the association between household consumption and the number of dimensions children are deprived in. In Figure 27 the association for children living in rural area is represented by the red line while the association for children living in urban areas by the dotted blue line. The vertical line in red represents the national monetary poverty line: children to the left of this line live in households that are below the national poverty line, while children to the right live in households that are above the poverty line.

The graph shows that the number of deprivations decreases with increasing consumption levels and that the association is stronger below the poverty line. The steeper the slope of the lines, the stronger the link between the consumption and deprivation. Below the poverty line, the lines are steeper for both rural and urban households, thus as household income increases, the number of deprivations experienced by children decreases. Above the poverty line the relationship becomes weaker and the lines flatten out. Moreover, at any level of consumption, the number of deprivations experienced by children in rural areas exceeds the corresponding number for children in urban areas.

Amongst the regions, the highest proportion of children who are both monetary and multidimensionally poor can be observed in the Central region where 46% of the children are both monetary and multidimensionally poor followed by Southern Region at 43% and then Northern region at 33%.

Figure 28 Multidimensional poverty by district for children 0-17 years



The map in Figure 28 shows that children aged 0-17 years in Central region are more likely to be multidimensionally poor than those in Southern and Northern region. Lilongwe city registers a higher percentage (20-40%) of multidimensionally poor children than Blantyre, Zomba, and Mzuzu cities (0-20%). It can also be observed that Blantyre, Chiradzulu, and Mulanje rural districts register lower percentage (40-60%) of multidimensionally poor children than other rural districts the Southern region (60-80%).

Table 19 Background characteristics by monetary and multidimensional poverty status for all children

	Monetary poor only	Multidimensionally poor only	Both monetary and multidimensionally poor	Not poor in either	All children
% Male	49.5	50.2	50.0	48.8	49.6
% Orphan	7.1	11.5	11.4	8.6	10.1
% with absent parents	29.3	37.7	36.3	29.7	33.9
Mean age	6.8	8.9	8.7	7.9	8.3
% in rural areas	88.7	87.7	94.9	56.0	83.0
% in North region	14.7	7.0	7.0	11.8	9.3
% in Centre region	33.2	53.9	44.6	47.8	45.4
% in South region	52.1	39.1	48.4	40.3	45.3
Mean HH size	6.1	4.9	5.8	5.4	5.6
% with female head	23.1	27.9	34.2	18.5	27.6
Mean Age of head	42.0	41.2	42.7	41.0	41.9
% with married head	82.7	76.1	71.5	84.9	77.3
% with head below primary education	70.8	72.5	88.1	43.4	71.7
% with head who is not working	23.8	21.3	24.9	16.2	21.9

Table 19 provides a profile of children who are monetarily poor, multidimensionally poor, both multidimensionally and monetary poor, and neither multidimensionally nor monetary poor. The table highlights that orphans (about 10% of the child population) tend to be more represented among multidimensionally poor children (12%) and among children who are both multidimensionally and monetarily poor (11%). The average age of all children in Malawi is 8.3 years. The average age of multidimensionally poor children (8.9 years) is higher than the one of those monetary poor (6.8 years).

Children in rural areas account for 83% of all children in Malawi. Moreover, children in rural areas account for a very large share of children who are monetary (89%) and multidimensionally poor (88%), as well as representing almost all children who are both monetary and multidimensionally poor (95%). The regional distribution of the poor reflect some interesting patterns: 52% of monetary poor children reside in Southern region, with 54% of multidimensionally poor children residing

in the Central region. The analysis also finds that children who are monetary poor only reside in larger households (6.1 household members) relative to those that are multidimensionally poor only (4.9 members).

Children in households that are female headed are more likely to be both monetary and multidimensionally poor (34%). The mean age of the household head does not vary relative to the poverty status of the household. On the other hand, there seems to be a correlation between marital status of the household head and poverty. Children in households where the household head is married tend to be either monetary poor or not poor. Household head's education is clearly correlated with poverty with 88% of children in households with head with less than primary school education both monetary and multidimensionally poor. Finally, we see that only 16% of children in households where the household head is not working are not poor suggesting that unemployment of the household head is correlated with increased vulnerability.

Children in rural areas account for a very large share of children who are monetary (89%) and multidimensionally poor (88%).

5.3 Consumption and deprivation analysis

In this section the study examines the association between deprivation and consumption for the dimensions of wellbeing relevant to each age group. In each figure the continuous red line indicates the association between deprivation and consumption in rural areas while the dotted blue line shows the same association in urban areas. A steeper line indicates stronger relationship between deprivation and consumption. The vertical red line represents the poverty line for Malawi. Children to the left of this line live in households that are below the poverty line, while children to the right live in households that are above the poverty line.

Figure 29 shows the association between deprivation and consumption for the five dimensions relevant for the 0–23 months' age group. It can be seen from the graphs that there is a remarkable negative association between housing deprivation and consumption especially in rural areas. For sanitation and health deprivation this association is also pronounced for households below the poverty line in both rural and urban areas. In the dimensions of nutrition and water, the flatness of the lines suggests virtually no association.



Figure 29 Association plot between monetary and multidimensional child poverty by area of residence for children 0-23 months

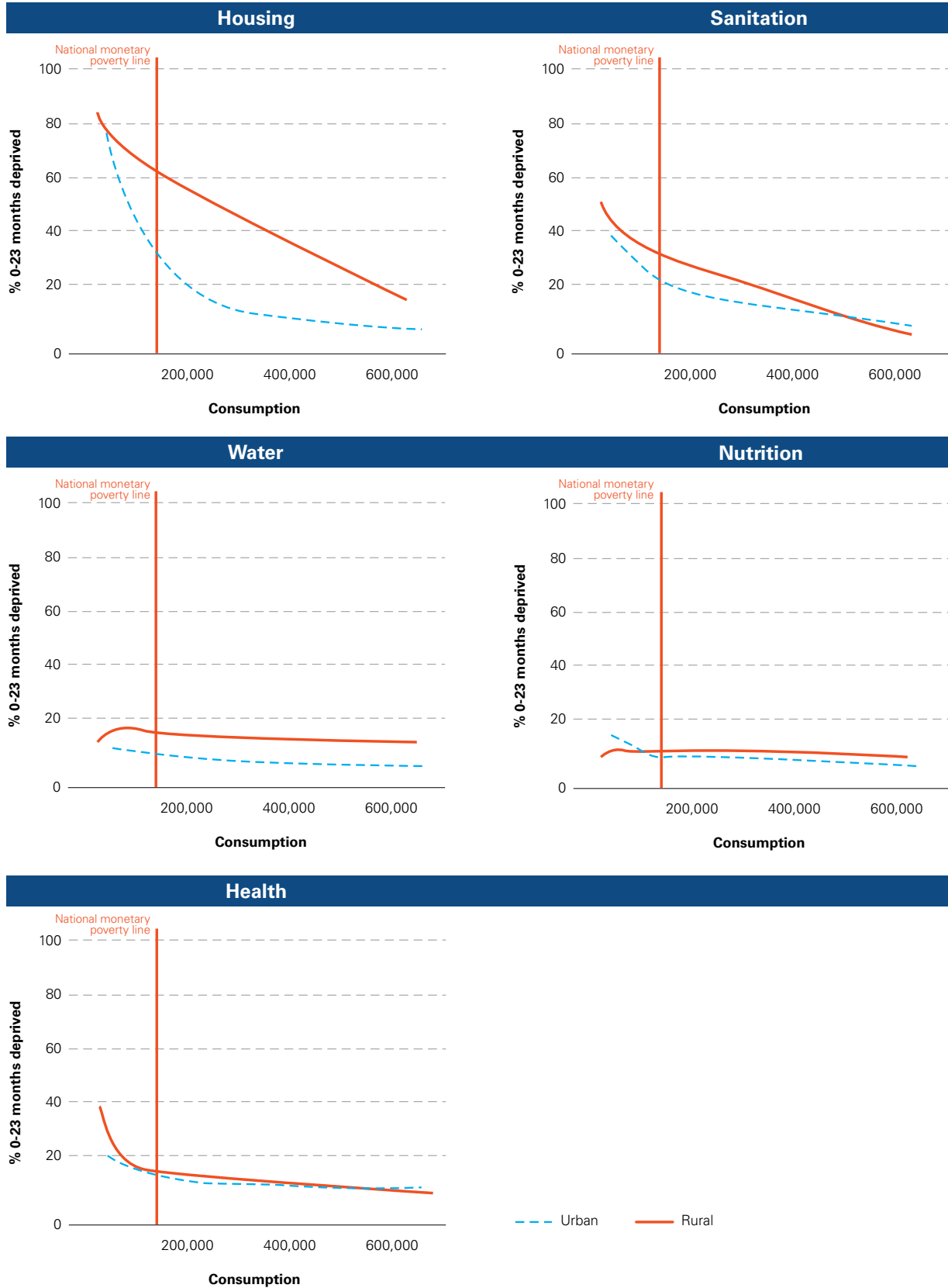


Figure 30 Association plot between monetary and multidimensional child poverty by area of residence for children 24-59 months

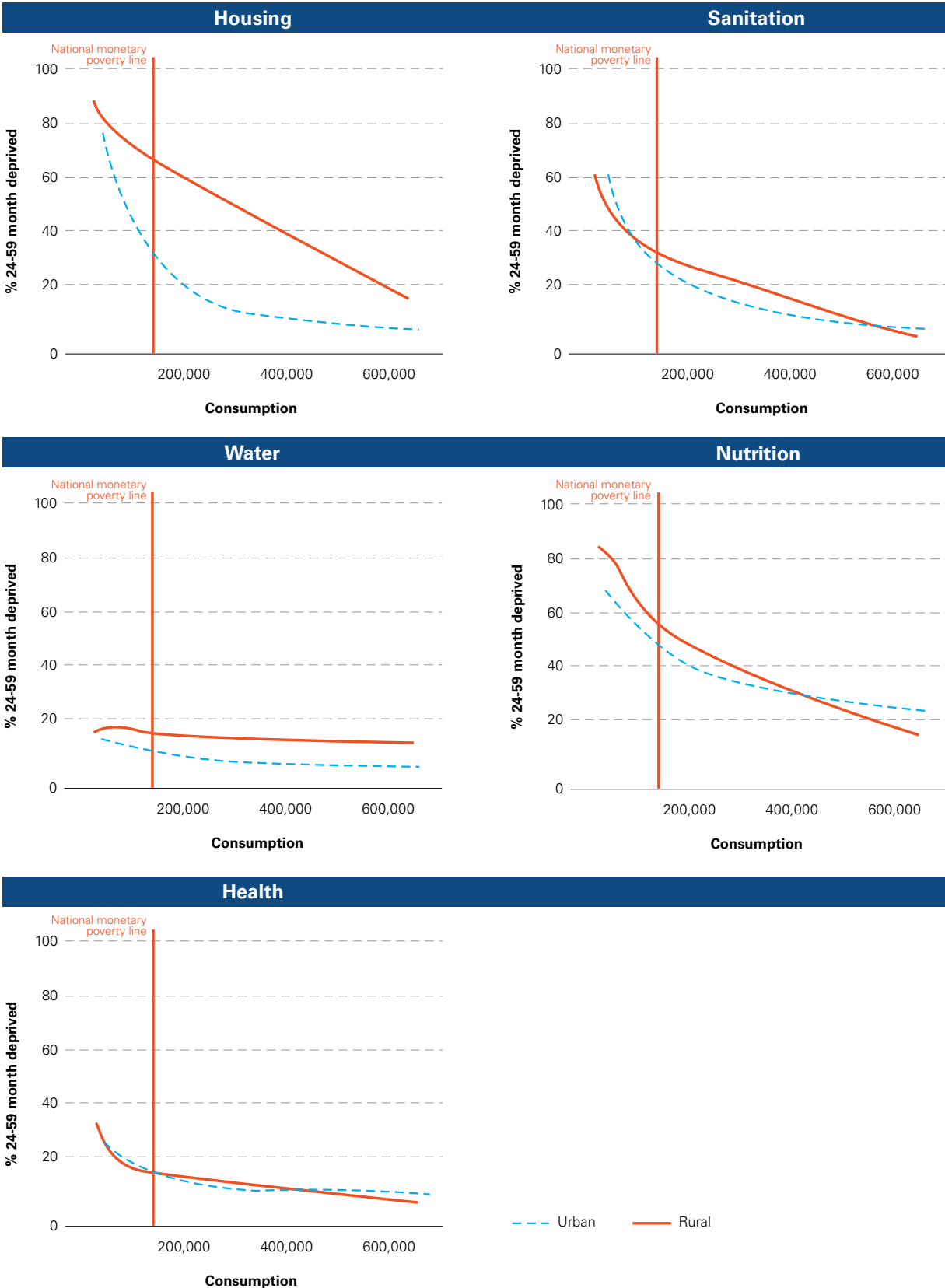
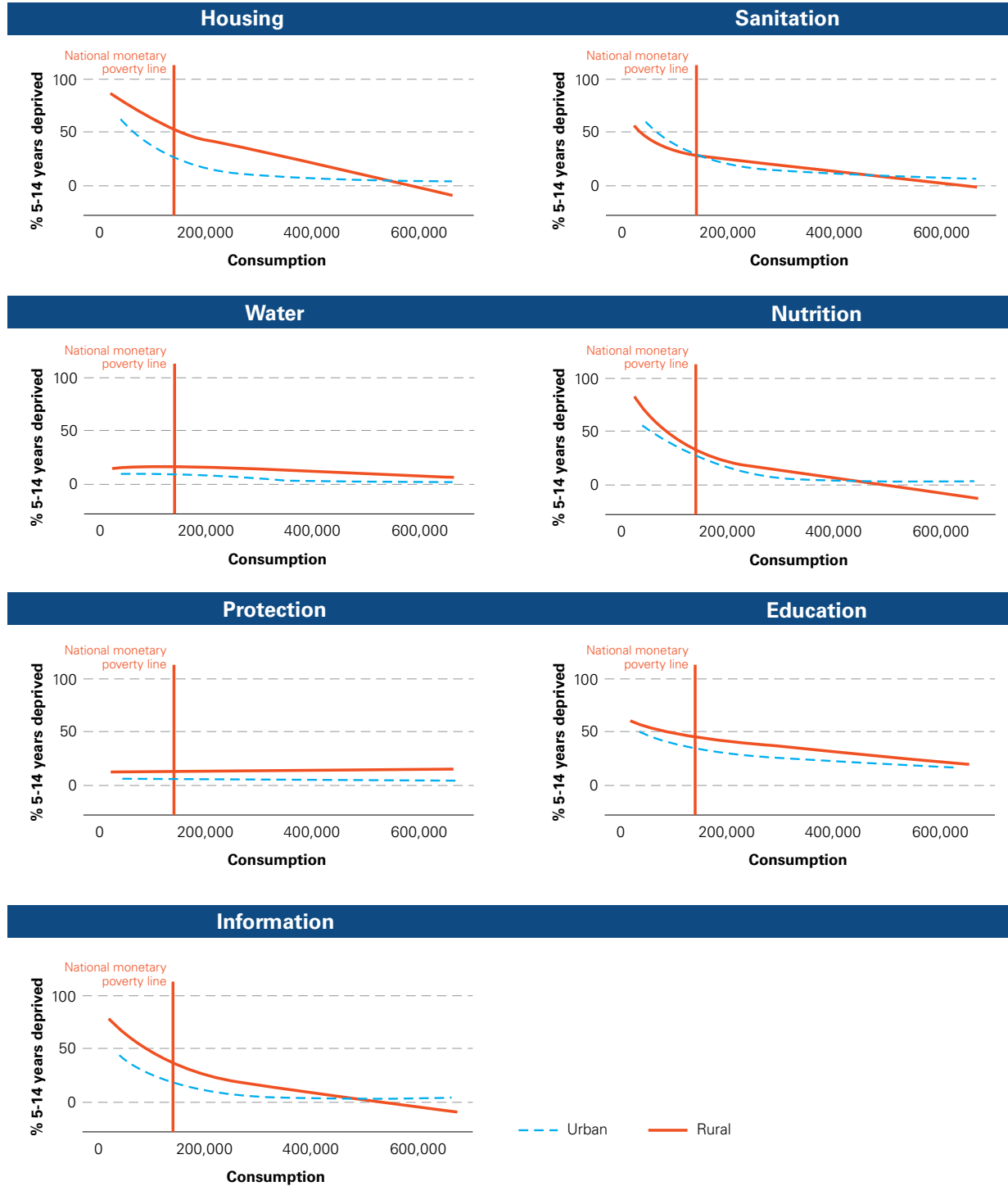


Figure 31 Association plot between monetary and multidimensional deprivation by area of residence for children 5-14 years





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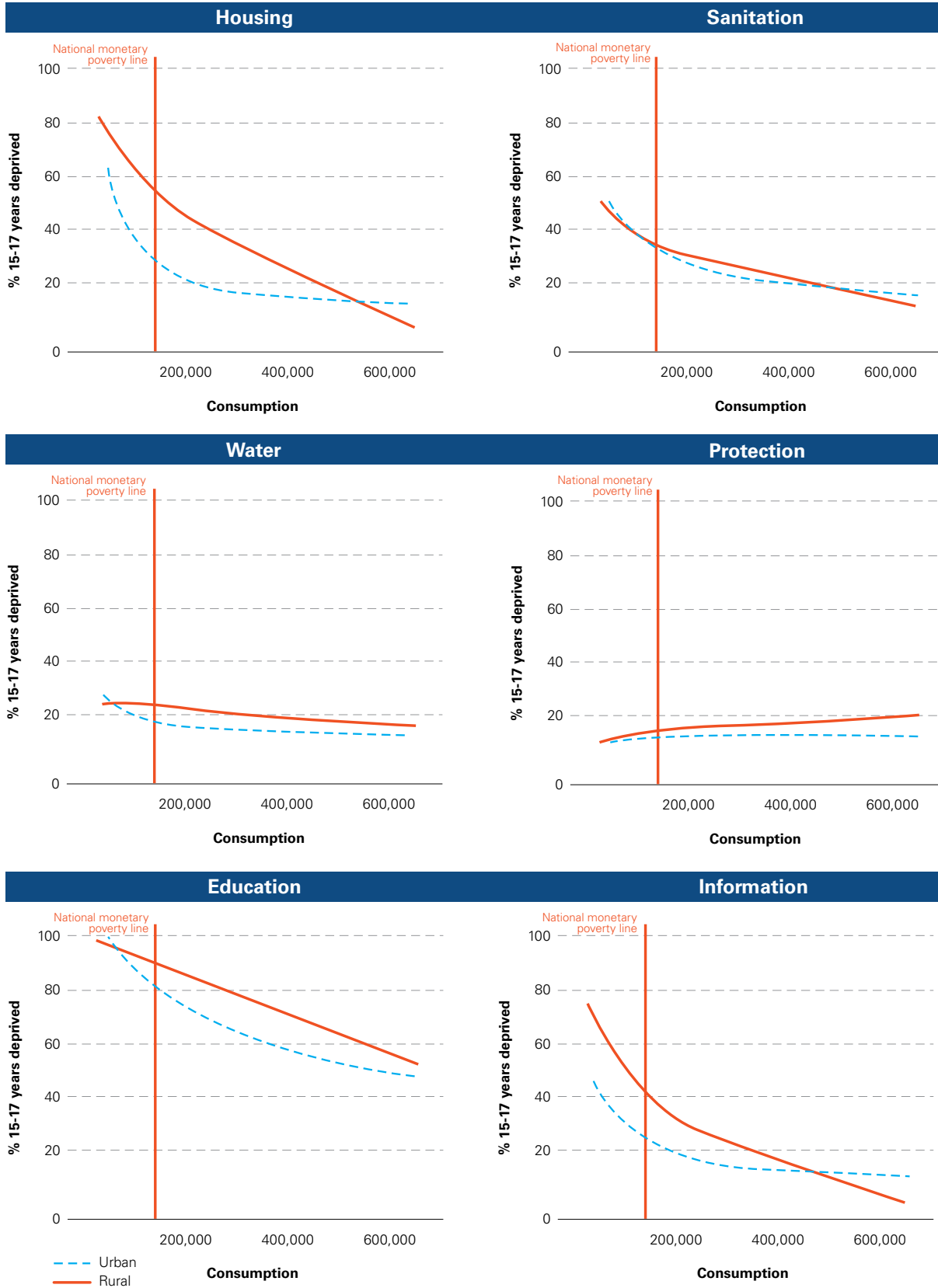
Figure 30 shows the association for children 24-59 months old. It shows that the association between deprivation and consumption is most pronounced in housing, sanitation, and nutrition dimensions. In the dimensions of health, nutrition, and sanitation the relationship is strongest amongst those households below the poverty line suggesting that for poor children an increase in consumption can assist in reducing deprivations in these areas. As with the younger age group, the association in the water dimension is flat suggesting a very weak connection between consumption and deprivation in water.

Figure 31 presents the analysis of the association between consumption and deprivations for the age group 5-14 years. The analysis finds a strong association between housing, sanitation, nutrition, and information deprivation and consumption and to a lesser extent between education deprivation and

consumption. In the dimensions of water and protection, the flatness of the lines amongst both rural and urban households suggest virtually no relationship between deprivations and consumption.

Finally, Figure 32 presents results for the oldest age group. Amongst the age group 15-17 years there is a large variation in the relationships between the six dimensions of deprivation and consumption. The strongest association is between education deprivation and consumption where both the rural and urban lines are very steep. In the dimensions of housing, sanitation, and information, the relationships are stronger amongst households below the poverty line suggesting that an increase in income for this age group could result in a reduction in deprivation in these dimensions. As with other age groups, the association between consumption and deprivation is very weak for the protection and water dimension.

Figure 32 Association between monetary and multidimensional deprivation by area of residence for children 15-17 years



Conclusions and Recommendations

6

6.1 Conclusions

Although multi-dimensional child poverty has declined from 63 percent in 2012 to 60.5 percent in 2017, most children in Malawi still suffer from multiple and overlapping deprivations.

Deprivations were found to be very high in housing, sanitation and education. There are also significant overlaps amongst dimensions. For example, a child with ill-health is also likely to be deprived from education. This underscores the importance of a multi-sectoral approach to child poverty which adopts a holistic definition of child wellbeing and concentrates on access of children to various goods and services which are crucial for their survival, protection and development.

Deprivations amongst children vary with age, hence the need for a life cycle approach when designing poverty eradication strategies and programs.

A life cycle approach to poverty reduction recognizes that as children grow from birth to adolescence they experience age-unique deprivations which require targeted interventions. For example, whilst children in the 0-24 months' age group suffer deprivations mainly in health and sanitation, those in the 15-17 age group have higher deprivation rates in the education dimension (87%).

Several deprivations are influenced by socio-economic circumstances and demographics of households which children live in.

Children who live in a household whose head is single, over the age of 60, not working, and resides in rural areas, are more likely to be deprived. The analysis also showed that children in female headed households, especially single female adults, experience higher multi-dimensional poverty than those living in male headed households. The level of education of the household head also matters. Children living in households headed by persons with less than primary education are more likely to be multi-dimensionally poor than those in households headed by someone with secondary and/or tertiary education. In addition, multidimensional child poverty is high among children living in larger households (6 or more persons).

About 17% of children are multi-dimensionally poor despite living in households that are not monetarily poor.

Thus, interventions aimed at eradicating child poverty should seek to assess individual specific deprivations and vulnerabilities irrespective of where children live and whom they live with. The needs of children are often unique and not always directly linked to the financial resources available to a household. While lack of income is one of the most important determinants of child deprivation, being multidimensionally poor is much more than just lacking money and assets.

Children who live in a household whose head is single, over the age of 60, not working, and resides in rural areas, are more likely to be deprived.

The level and type of deprivations experienced by children vary from place to place. In almost all dimensions, children in rural areas were more deprived than their urban counterparts. For example, children in rural areas are three times more likely to be deprived in housing and four times more in information than those living in urban areas. In rural areas, nearly 50% of children are both monetarily and multidimensionally poor, compared to 13% in urban areas. Disparities were also found between regions and districts. Children in the Northern Region were less likely to be deprived in any dimension than those from the Central and Southern Regions. In eight of the 32 sub-national authorities in Malawi, the multidimensional child poverty rate was above 70% whilst deprivations were less than 20% in districts such as Mzuzu City (18%) and Blantyre City (20%).

6.2 Recommendations

6.2.1 Strategies to address child poverty must be inherently multi-sectoral and broad-based, given the multiple and overlapping nature of deprivations experienced by children.

The multidimensionality of child poverty calls for an appropriate mix of interventions to be implemented in a complementary fashion by multiple ministries, departments and agencies (MDAs). These interventions may include direct sector-specific initiatives such as early childhood development, free

primary education, immunization and micro-nutrient supplementation as well as income support through programs such as cash transfers targeting the poorest and labour-constrained households.

6.2.2 Sector-specific poverty eradication programs should take into consideration age-specific vulnerabilities and deprivations.

As children grow from birth through to adolescence and ultimately to adulthood, their needs and wants tend to change. These changes warrant age-appropriate interventions. Within the education sector, for example, the Government should ensure each level of education, that is, early childhood development, primary, secondary and tertiary education should receive a fair share of available public resources. Deliberate effort should also be made to identify age-specific deprivations and needs, such as access to information by adolescents. Planning and budgeting should therefore be informed by the latest data and statistics which provide information on the characteristics that make children vulnerable to identified deprivations.

6.2.3 Strategies to tackle multi-dimensional child poverty should focus on the individual child as well as the household.

Whilst some deprivations reflect the socioeconomic status of households, others are specific to the individual. This report shows that a sizeable number of children (17%) are still deprived despite living in households that are not

In eight of the 32 sub-national authorities in Malawi, the multidimensional child poverty rate was above 70%.

The Agenda 2030 for Sustainable Development requires all governments to create equal opportunities for all people, including children, to access essential services regardless of where they live.

monetarily poor. A child living with wealthy parents or guardians can still suffer abuse and violence. A focus on the individual child also entails looking at issues of gender. Several studies have shown that girls are more likely to be deprived in protection, for example through early marriages, than boys. Children living with disabilities face unique development and protection challenges compared to those without.

6.2.4 Poverty eradication strategies and budgets should be more responsive to geographic disparities.

To address geographic disparities, resource allocation decisions should be informed by the latest data about the situation of children, demographics and other place-specific factors that drive deprivations. The Agenda 2030 for Sustainable Development requires all governments to create equal opportunities for all people, including children, to access essential services regardless of where they live. Reducing geographic disparities may require adoption of affirmative action policies and strategies. For example, the supply of education, information and health services in rural areas requires special focus.

6.2.5 A comprehensive dataset is needed to effectively institutionalize multi-dimensional child poverty measurements in Malawi.

The IHS is a very rich dataset which allows for a detailed understanding of both monetary and multi-dimensional child poverty. However, it does not contain comprehensive information on some dimensions such as health (especially for the 6-17 age group). Thus, the analysis in this study was limited by the data

available. There is therefore a need to find ways of bridging identified data gaps, for instance through the addition of a small number of questions in future IHSs, or utilize data from other social sector surveys.

6.2.6 There is need to enhance domestic resource mobilization and improve efficiency and effectiveness of public spending to reduce child poverty.

Addressing multi-dimensional child poverty calls for government budgets to be pro-poor, child friendly and also economic growth oriented. Achieving these goals makes a strong case for all relevant MDAs to look at the allocation mix of programs, interventions and inputs required to address specific deprivations faced by children. Mechanisms should also be put in place to ensure efficient utilization of available resources, to minimize wastage and leakage. It is only through sufficient, equitable and effective public spending on sectors and programs supporting the development of children that the Government can eradicate multi-dimensional child poverty.

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Annex

Annex 1 Regional Results

Table 20 Deprivation rates by region, Children 0-23 months

		North	Centre	South
Indicator	No Skilled birth attendance	5.3	4.2	6.5
	No Bed-net	9.2	15.6	9.1
	Underweighted	3.1	7.7	8.0
	Wasted	3.4	6.0	6.5
	No Safe potable water	15.0	14.8	12.5
	Time to water	0.3	0.3	0.2
	Traditional latrine w/o roof, no latrine, other types of toilets	25.8	30.9	36.8
	Natural roof and floor	49.1	64.1	54.9
	Over-crowding	2.9	9.4	10.6
Dimension	Health	13.6	19.3	14.7
	Nutrition	5.5	9.9	10.5
	Water	15.3	15.2	12.5
	Sanitation	25.8	30.9	36.8
	Housing	49.7	65.9	57.5
Number of deprivations	Deprived in 0	31.5	19.9	25.6
	Deprived in 1	37.0	36.9	31.3
	Deprived in 2	23.3	29.0	30.3
	Deprived in 3	7.2	11.5	11.6
	Deprived in 4	0.8	2.3	1.3
	Deprived in 5	0.2	0.4	0.0
H	Deprived in 1+	68.5	80.1	74.4
	Deprived in 2 +	31.5	43.2	43.2
	Deprived in 3+	8.2	14.2	12.8
	Deprived in 4+	1.0	2.7	1.3
A	Deprived in 1+	32.0	35.1	35.4
	Deprived in 2 +	46.0	48.0	46.5
	Deprived in 3+	63.0	64.3	62.0
	Deprived in 4+	84.5	82.7	80.0
M	Deprived in 1+	0.2	0.3	0.3
	Deprived in 2 +	0.1	0.2	0.2
	Deprived in 3+	0.1	0.1	0.1
	Deprived in 4+	0.0	0.0	0.0

Table 21 Deprivation rates by region, Children 24-59 months

		North	Centre	South
Indicator	Bed-net	9.2	19.4	9.7
	Stunting	23.0	34.3	32.5
	Less than 3 meals a day	20.1	34.4	41.6
	No safe water	12.8	13.8	11.8
	Time to water	0.1	0.3	0.2
	Traditional latrine w/o roof, no latrine, other types of toilets	27.2	29.7	33.4
	Natural roof and floor	42.7	61.1	55.4
	Overcrowding	3.4	10.9	10.3
Dimension	Health	9.2	19.4	9.7
	Nutrition	38.8	57.3	60.0
	Water	12.8	14.0	12.0
	Sanitation	27.2	29.7	33.4
	Housing	43.3	63.1	57.5
Number of dimension	Deprived in 0	26.9	14.9	16.2
	Deprived in 1	36.2	27.5	29.6
	Deprived in 2	25.0	29.9	31.2
	Deprived in 3	9.0	21.0	18.6
	Deprived in 4	2.4	5.6	4.2
	Deprived in 5	0.4	1.1	0.2
H	Deprived in 1+	73.1	85.1	83.8
	Deprived in 2 +	36.9	57.6	54.2
	Deprived in 3+	11.8	27.8	23.0
	Deprived in 4+	2.8	6.7	4.4
A	Deprived in 1+	34.2	41.9	39.5
	Deprived in 2 +	48.2	52.3	50.2
	Deprived in 3+	65.4	65.6	64.1
	Deprived in 4+	83.0	83.3	81.1
M	Deprived in 1+	0.2	0.4	0.3
	Deprived in 2 +	0.2	0.3	0.3
	Deprived in 3+	0.1	0.2	0.1
	Deprived in 4+	0.0	0.1	0.0

Table 22 Deprivation rates by region, Children 5-14 years

		North	Centre	South
Indicator	No breakfast	24.5	37.1	40.3
	Early marriage	0.2	0.1	0.1
	Child labour	8.7	8.3	7.5
	Pre-school	12.7	14.4	13.4
	Time attendance (> 2 grades behind)	16.2	29.8	28.2
	No information device	22.1	35.2	38.6
	No safe water	14.2	15.6	13.3
	Time to water	0.0	0.1	0.2
	Traditional latrine w/o roof, no latrine, other types of toilets	22.7	28.3	31.8
	Natural roof and floor	36.9	56.1	46.2
	Overcrowding	3.0	12.1	9.9
Dimension	Nutrition	24.5	37.1	40.3
	Protection	8.9	8.3	7.6
	Education	32.7	46.2	43.7
	Information	22.1	35.2	38.6
	Water	14.3	15.7	13.4
	Sanitation	22.7	28.3	31.8
	Housing	37.7	58.4	48.5
Number of dimension	Deprived in 0	22.7	14.0	13.9
	Deprived in 1	28.9	19.3	20.5
	Deprived in 2	23.8	21.7	23.0
	Deprived in 3	14.9	22.0	20.3
	Deprived in 4	6.9	15.5	15.5
	Deprived in 5	2.5	6.4	5.9
	Deprived in 6	0.2	1.0	0.8
	Deprived in 7	0.0	0.1	0.0
H	Deprived in 1+	77.3	86.0	86.1
	Deprived in 2 +	48.4	66.6	65.5
	Deprived in 3+	24.5	45.0	42.5
	Deprived in 4+	9.7	23.0	22.2
	Deprived in 5+	2.8	7.5	6.7
	Deprived in 6+	0.2	1.1	0.9
A	Deprived in 1+	30.1	38.1	37.2
	Deprived in 2 +	39.6	45.0	44.3
	Deprived in 3+	50.2	52.9	52.9
	Deprived in 4+	61.6	62.5	62.1
	Deprived in 5+	72.7	73.6	73.3
	Deprived in 6+	85.7	86.6	86.4
MO	Deprived in 1+	0.2	0.3	0.3
	Deprived in 2 +	0.2	0.3	0.3
	Deprived in 3+	0.1	0.2	0.2
	Deprived in 4+	0.1	0.1	0.1
	Deprived in 5+	0.0	0.1	0.0
	Deprived in 6+	0.0	0.0	0.0

Table 23 Deprivation rates by region, Children 15-17 years

		North	Centre	South
Indicator	Early marriage	2.1	2.4	4.8
	Child labour	0.5	0.9	1.2
	Time attendance (> 2 grades behind)	65.7	80.9	76.9
	Timely primary completion	79.8	87.1	82.8
	Literacy	6.5	15.0	12.8
	No information device	18.6	36.1	37.8
	No safe water	14.3	15.1	13.2
	Time to water	0.0	0.0	0.0
	Traditional latrine w/o roof, no latrine, other types of toilets	20.9	27.3	29.4
	Natural roof and floor	29.4	50.7	38.9
	Overcrowding	2.6	9.1	8.1
Dimension	Protection	2.5	3.0	5.8
	Education	81.7	89.8	85.3
	Information	18.6	36.1	37.8
	Water	14.3	15.1	13.2
	Sanitation	20.9	27.3	29.4
	Housing	30.4	52.8	41.7
	Number of dimension	Deprived in 0	12.3	7.2
Deprived in 1		36.4	24.8	25.0
Deprived in 2		29.8	26.0	28.6
Deprived in 3		14.1	24.1	21.5
Deprived in 4		6.8	15.0	13.3
Deprived in 5		0.6	2.8	2.0
Deprived in 6		0.0	0.2	0.6
H	Deprived in 1+	87.7	92.8	90.9
	Deprived in 2 +	51.3	68.0	65.9
	Deprived in 3+	21.5	42.0	37.3
	Deprived in 4+	7.4	18.0	15.9
	Deprived in 5+	0.6	3.0	2.6
A	Deprived in 1+	32.0	40.2	39.1
	Deprived in 2 +	42.9	48.8	47.6
	Deprived in 3+	56.1	58.4	58.5
	Deprived in 4+	67.9	69.6	70.1
	Deprived in 5+	83.3	84.3	87.4
MO	Deprived in 1+	0.3	0.4	0.4
	Deprived in 2 +	0.2	0.3	0.3
	Deprived in 3+	0.1	0.2	0.2
	Deprived in 4+	0.0	0.1	0.1
	Deprived in 5+	0.0	0.0	0.0

Annex 2 District Level Results

Table 24 Deprivation rates by district - North region

		Chitipa	Karonga	Nkhata Bay	Rumphi	Mzimba	Likoma	Mzuzu City
Dimension	Health	3.5	1.9	3.0	1.3	4.3	2.2	3.1
	Nutrition	24.3	23.8	21.2	17.0	26.5	11.1	12.2
	Protection	12.4	7.0	4.1	3.8	3.7	0.5	3.2
	Education	30.6	30.7	34.9	29.1	34.1	38.4	26.1
	Information	29.0	15.1	15.3	18.8	16.7	10.9	1.1
	Water	15.4	6.0	22.2	18.3	17.3	9.4	7.1
	Sanitation	23.0	29.6	32.4	19.3	16.3	19.4	14.5
	Housing	50.0	35.4	42.2	49.8	46.1	17.0	9.8
Number of deprivations	Dep. in 0	14.3	23.3	15.4	20.8	19.2	30.6	46.3
	Dep. in 1	28.8	31.4	32.2	31.2	31.5	40.0	36.2
	Dep. in 2	26.0	26.9	27.9	26.0	25.9	21.8	13.8
	Dep. in 3	19.6	11.9	14.5	15.3	15.0	5.7	2.3
	Dep. in 4	8.7	4.3	6.9	6.1	6.6	1.4	1.1
	Dep. in 5	2.5	1.9	2.8	0.6	1.6	0.0	0.3
H	Dep. in 1	85.7	76.7	84.6	79.2	80.8	69.4	53.7
	Dep. in 2	57.0	45.3	52.4	48.1	49.3	29.3	17.5
	Dep. in 3	30.9	18.4	24.4	22.0	23.4	7.5	3.7
	Dep. in 4	11.4	6.4	10.0	6.7	8.3	1.8	1.4
A	Dep. in 1	34.1	30.7	32.7	31.3	32.2	24.5	22.6
	Dep. in 2	43.0	40.8	42.9	41.0	42.3	36.5	35.8
	Dep. in 3	52.3	53.2	54.8	51.2	52.7	50.6	54.7
	Dep. in 4	63.4	64.8	65.5	62.4	62.7	66.1	67.2
M	Dep. in 1	0.29	0.24	0.28	0.25	0.26	0.17	0.12
	Dep. in 2	0.25	0.18	0.22	0.20	0.21	0.11	0.06
	Dep. in 3	0.16	0.10	0.13	0.11	0.12	0.04	0.02
	Dep. in 4	0.07	0.04	0.07	0.04	0.05	0.01	0.01

Key: Dep. = Deprived

Table 25 Deprivation rates by district - Central region

		Kasungu	Nkhota-kota	Ntchisi	Dowa	Salima	Lilongwe	Mchinji	Dedza	Ntcheu	Lilongwe City
Dimension	Health	3.1	8.7	8.8	3.8	5.8	3.5	4.7	8.9	4.2	4.9
	Nutrition	28.4	28.9	31.4	25.7	42.1	38.4	39.0	45.1	35.5	14.0
	Protection	10.0	5.8	7.3	9.4	4.6	5.0	4.0	4.9	3.9	0.9
	Education	42.8	43.4	42.1	42.0	40.6	44.5	40.9	41.4	35.8	28.8
	Information	27.6	16.3	21.9	29.4	36.6	29.3	21.8	42.0	32.8	6.1
	Water	26.3	14.2	16.0	27.9	10.6	12.9	13.3	17.4	8.8	5.0
	Sanitation	26.9	14.1	12.5	25.5	33.1	34.1	39.8	34.7	31.5	20.2
	Housing	69.3	62.5	63.4	67.1	71.0	66.2	67.9	68.8	59.9	14.1
Number of deprivations	Dep. in 0	7.5	15.4	10.4	7.9	8.2	9.7	8.3	7.2	13.3	41.0
	Dep. in 1	22.4	23.8	26.3	22.1	18.1	20.7	20.1	15.3	23.2	36.7
	Dep. in 2	26.4	28.3	28.1	27.4	27.1	24.7	28.8	23.0	24.7	13.6
	Dep. in 3	24.0	21.0	23.7	23.0	24.0	23.0	24.4	26.3	21.5	6.1
	Dep. in 4	13.7	8.0	8.6	14.2	15.3	16.0	12.5	19.9	12.0	2.0
	Dep. in 5	4.7	3.1	2.5	5.2	5.8	5.2	5.3	7.5	4.7	0.4
H	Dep. in 1	92.5	84.6	89.6	92.1	91.8	90.3	91.7	92.8	86.7	59.0
	Dep. in 2	70.2	60.8	63.3	70.1	73.7	69.6	71.6	77.6	63.5	22.4
	Dep. in 3	43.8	32.6	35.2	42.7	46.6	44.9	42.7	54.6	38.8	8.7
	Dep. in 4	19.7	11.5	11.5	19.6	22.6	21.9	18.3	28.3	17.3	2.6
A	Dep. in 1	39.6	36.3	36.2	39.4	41.9	40.4	39.7	44.5	39.0	25.4
	Dep. in 2	47.0	44.0	44.3	46.6	48.0	47.5	46.1	50.0	47.1	40.3
	Dep. in 3	55.4	53.5	53.2	55.7	56.3	55.7	55.0	57.2	56.2	52.8
	Dep. in 4	65.6	65.4	63.3	64.7	65.2	64.1	65.5	65.9	65.7	65.7
M	Dep. in 1	0.37	0.31	0.32	0.36	0.38	0.37	0.36	0.41	0.34	0.15
	Dep. in 2	0.33	0.27	0.28	0.33	0.35	0.33	0.33	0.39	0.30	0.09
	Dep. in 3	0.24	0.17	0.19	0.24	0.26	0.25	0.23	0.31	0.22	0.05
	Dep. in 4	0.13	0.08	0.07	0.13	0.15	0.14	0.12	0.19	0.11	0.02

Key: Dep. = Deprived

Table 26 Deprivation rates by district - Southern region

		Mangochi	Machinga	Zomba Non-City	Chiradzulu	Blantyre	Mwanza	Thyolo	Mulanje	Phalombe	Chikwawa	Nsanje	Balaka	Neno	Zomba City	Blantyre City
Dimension	Health	2.6	2.4	1.7	2.7	4.6	5.4	4.1	2.6	4.9	3.5	4.6	3.7	8.7	1.7	2.7
	Nutrition	24.9	43.2	38.3	39.1	37.2	28.1	42.8	38.6	50.6	40.5	39.9	33.2	27.0	13.7	14.7
	Protection	3.0	8.6	10.4	4.4	4.5	6.5	4.4	5.0	3.8	7.3	8.3	6.7	5.7	4.3	1.3
	Education	39.7	36.8	40.0	38.2	34.0	39.0	39.5	42.9	41.2	42.1	40.7	35.8	36.0	23.3	20.6
	Information	28.8	31.5	27.7	32.1	23.6	27.9	37.4	28.8	42.1	29.6	37.8	19.8	25.3	7.1	6.5
	Water	11.1	16.9	15.7	8.7	6.9	15.0	34.2	11.2	7.9	15.5	3.1	10.5	25.4	4.0	4.0
	Sanitation	37.9	49.1	37.1	31.0	35.2	31.3	26.5	21.7	32.9	26.5	49.4	31.7	30.4	13.3	20.6
	Housing	69.4	64.8	61.3	39.7	45.2	61.2	43.4	36.7	62.0	52.9	61.2	59.1	64.1	16.1	12.5
Number of deprivations	Dep. in 0	8.2	6.4	6.8	13.4	17.9	13.5	12.2	16.4	7.4	12.0	9.2	11.9	10.5	45.4	45.3
	Dep. in 1	22.5	17.7	24.0	26.4	24.0	21.6	20.0	26.2	19.8	22.2	17.8	25.5	22.8	35.3	34.4
	Dep. in 2	32.3	25.9	26.5	28.9	27.5	26.7	25.2	26.6	26.1	27.9	24.5	27.5	24.2	13.2	14.4
	Dep. in 3	19.9	26.6	24.0	18.2	15.2	19.6	21.8	18.2	22.1	19.0	25.1	23.5	23.9	3.5	4.5
	Dep. in 4	15.5	15.9	12.7	9.8	11.5	13.2	10.9	10.4	18.1	13.4	15.8	8.9	14.7	1.7	1.2
	Dep. in 5	1.4	6.1	5.3	3.0	3.1	5.2	8.1	1.9	6.4	5.0	6.8	2.4	3.4	0.8	0.2
H	Dep. in 1	91.8	93.6	93.2	86.6	82.1	86.5	87.8	83.6	92.6	88.0	90.8	88.1	89.5	54.6	54.7
	Dep. in 2	69.3	75.9	69.3	60.2	58.1	65.0	67.8	57.3	72.8	65.8	73.0	62.6	66.7	19.3	20.4
	Dep. in 3	37.0	50.0	42.8	31.4	30.5	38.2	42.6	30.8	46.7	37.9	48.5	35.1	42.5	6.0	6.0
	Dep. in 4	17.1	23.4	18.8	13.2	15.3	18.6	20.8	12.5	24.7	19.0	23.4	11.5	18.6	2.5	1.4
A	Dep. in 1	37.9	42.6	38.9	35.6	36.7	39.4	40.9	34.8	41.5	38.9	42.5	36.2	40.0	24.6	24.3
	Dep. in 2	44.7	48.6	46.6	43.9	45.1	46.8	48.2	43.1	48.1	46.4	48.9	44.1	48.1	39.7	37.7
	Dep. in 3	53.9	56.3	55.3	54.7	55.9	57.1	57.4	52.4	56.5	56.3	56.4	52.4	56.6	55.2	51.8
	Dep. in 4	61.1	65.3	65.2	62.5	64.3	64.8	68.9	61.4	63.2	64.5	64.6	63.0	66.4	63.9	60.6
M	Dep. in 1	0.35	0.40	0.36	0.31	0.30	0.34	0.36	0.29	0.38	0.34	0.39	0.32	0.36	0.13	0.13
	Dep. in 2	0.31	0.37	0.32	0.26	0.26	0.30	0.33	0.25	0.35	0.31	0.36	0.28	0.32	0.08	0.08
	Dep. in 3	0.20	0.28	0.24	0.17	0.17	0.22	0.24	0.16	0.26	0.21	0.27	0.18	0.24	0.03	0.03
	Dep. in 4	0.10	0.15	0.12	0.08	0.10	0.12	0.14	0.08	0.16	0.12	0.15	0.07	0.12	0.02	0.01

Key: Dep. = Deprived

Table 27 % Children regarded as monetary poor and multidimensionally poor (k=2) by district

District	Deprived	Poor	Overlap between deprived and monetary poverty			
			Poor only	Deprived only	Both poor and deprived	Not poor and not deprived
Chitipa	57.0	80.3	30.4	7.0	49.9	12.6
Karonga	45.3	67.4	27.2	9.0	36.2	27.5
Nkhatabay	52.4	64.9	25.2	16.6	35.8	22.4
Rumphi	48.1	60.0	27.4	15.6	32.5	24.5
Mzimba	49.3	48.0	15.5	17.8	31.5	35.2
Likoma	29.3	33.4	22.7	18.4	10.9	47.9
Mzuzu City	17.5	11.6	7.1	11.1	6.4	75.4
Kasungu	70.2	59.3	12.1	23.2	46.9	17.8
Nkhotakota	60.8	61.0	15.8	15.4	45.4	23.4
Ntchisi	63.3	60.4	14.8	18.3	45.0	21.9
Dowa	70.1	54.5	9.3	25.8	44.3	20.6
Salima	73.7	65.0	10.0	19.6	54.1	16.3
Lilongwe	69.6	53.0	7.3	25.1	44.5	23.1
Mchinji	71.6	55.0	10.6	26.3	45.3	17.9
Dedza	77.6	68.9	10.1	17.2	60.3	12.4
Ntcheu	63.5	61.9	13.3	16.8	46.7	23.2
Lilongwe City	22.4	18.6	10.1	10.3	12.1	67.5
Mangochi	69.3	66.3	17.8	20.6	48.7	12.9
Machinga	75.9	78.6	14.4	12.6	63.3	9.7
Zomba Non-City	69.3	61.3	13.5	21.5	47.8	17.2
Chiradzulu	60.2	70.7	23.5	12.5	47.8	16.3
Blantyre	58.1	46.2	10.2	23.0	35.0	31.7
Mwanza	65.0	57.7	11.9	18.6	46.4	23.1
Thyolo	67.8	70.8	18.2	12.9	54.9	14.0
Mulanje	57.3	74.2	24.4	8.8	48.5	18.2
Phalombe	72.8	86.9	21.5	7.2	65.6	5.7
Chikwawa	65.8	69.1	16.9	14.3	51.5	17.3
Nsanje	73.0	79.7	17.5	9.7	63.3	9.5
Balaka	62.6	67.9	19.1	13.9	48.6	18.3
Neno	66.7	52.6	11.2	26.3	40.5	22.1
Zomba City	19.3	17.8	11.0	10.1	9.2	69.7
Blantyre City	20.4	10.3	4.7	14.3	6.1	75.0



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