



Community health workers from Malawi's Chikwawa and Nsanje Districts.

Dear partners,

As someone who has dedicated my career to bringing quality care to all people through community health, I feel privileged to work in my country, Malawi. Here, 84% of our population lives in rural areas, with nearly one quarter of this rural population living more than eight kilometers from the nearest health facility. Often, community health workers offer the only bridge to the health system, and the Government of Malawi has recognized their power and potential in addressing its most urgent health priorities: reducing maternal and child mortality.

For community health workers to be effective, they need to be fully integrated into the primary health system and supported by strong, sustainable financing. Alongside funding and technical partners, the Government of Malawi is making big strides toward this goal—and ensuring community health workers have the support they need, even amid major reductions to foreign aid.

Malawi has recognized community health workers since the 1970s, and launched a new national community health worker program in 2017, designed with the aim of delivering integrated primary care to remote communities. The Government of Malawi worked in thoughtful collaboration with the Global



A community health worker conducts an antenatal checkup.

Fund to strengthen the community health program and deepen domestic financing, pairing Global Fund investments with a government commitment to place community health workers on the government payroll. The number of community health workers has increased twofold in the past four years, and community health workers' salaries are now part of the domestic budget.

This success story reminds us that community health worker programs are cost-effective and high-impact, but that impact can only be sustained if programs stay funded and community health workers are salaried and supported. As ministries of health across Africa grapple with foreign aid shifts, a domestically funded community health workforce

has provided much-needed resilience in Malawi. For instance, when foreign aid-funded mobile clinics were suspended over the past year, community health workers stepped in to maintain essential maternal health services.

But although community health workers' salaries are on the government payroll, the support they require to work at their best is not. To drive sustainable financing for integrated community-led primary care, the Ministry of Health and technical partner Last Mile Health are leveraging the work we've done through the Building Integrated Readiness for Community Health (BIRCH) Project, an initiative from the Global Fund that injects catalytic funding into community health programs to support governments in building and sustaining effective, resilient systems. Through this project, we've developed a costed operational plan for the community health program, breaking down the resources needed for it to function at a high level. We then completed resource mapping to provide a clear overview of who is funding what, where, and how. These tools equip the Ministry to identify what the program needs to succeed and where increased funding can fill gaps. We've been able to demonstrate where community health workers fit into the primary care system, making a clear case for the lifesaving value of the preventive care they deliver.

As governments and their partners search for sustainable solutions in a reality where resources are tight, Malawi is a country to watch. The government has made ambitious commitments toward increasing sovereign financing for health, putting us on track to achieve universal health coverage by 2030. With a new health financing strategy that centers community health workers, the Ministry of Health and partners have established clear plans to align funding with community health goals. The Ministry has committed to hiring and training more community and frontline health workers, and in partnership with Last Mile Health, they're strengthening training with a focus on maternal and child health and connecting community health workers to Malawi's digital health information system. Together, we continue to advocate for innovative domestic financing solutions.

Every country has unique challenges when it comes to community health, but in every context, strong financing is essential. Despite the upheaval of the past year, I'm indeed hopeful. Leaders are seeing the power of community health workers in action, and seeing how innovations in training, systems, and digital health can drive better patient care even while reducing costs. Across countries and communities, it's clear that **community health workers can provide the care women and children need to survive and thrive.** Putting this into action is a matter of strong financing, and with government will and trusted partnership, sustainable community health programs are achievable. I believe in a future where everyone can access quality primary care. Every day, we're working together to come closer to that future.

In partnership,
Victoria Munthali Chiumia
Manager, Community Health, Partnerships & Quality
Last Mile Health Malawi

GLOBAL NEWS

Last Mile Health's delegation at the [United Nations General Assembly](#) advocated for continued investment in community health workers to provide integrated, essential health services—and their potential to respond to the growing burden of non-communicable diseases in Africa.

As a co-sponsor of the [International Conference on Primary Health Care](#), Last Mile Health shared lessons learned from our work at sessions including a side event co-sponsored with the Gates Foundation's CEO Roundtable on [leveraging AI and blended learning](#) to upskill community health workers.

In a new [policy brief](#), Last Mile Health makes the case that community health workers are ideally positioned to address non-communicable diseases, using our training module in Ethiopia as a case study.

Africa Frontline First Co-Executive Director Nan Chen shares a vision for sustainable, resilient [community health systems](#)—and why “evidence-based optimism” is key.

Last Mile Health was featured in Unlock Aid's inaugural [Solutions Index](#), a list of the most promising organizations delivering results across global health supply chains.



A community health worker leads a mothers-to-mothers peer support group in Rivercess County, Liberia.



Last Mile Health's Abraham Zerihun Megentta speaks on a panel on the sidelines of the 2025 United Nations General Assembly.

PROGRAM NEWS

Digital innovations like blended learning are reducing costs and boosting learning gains for Ethiopia's community health workers. Now, we're working alongside the Ministry of Health to leverage [artificial intelligence](#) through a call center that provides evidence-driven support for community health workers.

In Liberia, new [peer support groups](#) led by community health workers bring mothers together to share best practices in maternal and child health and develop community-led solutions to challenges in accessing care.

Last Mile Health has [transitioned the direct management](#) of the National Community Health Program to Liberia's Ministry of Health in Grand Bassa and Grand Gedeh Counties, working closely with the Ministry to ensure a smooth handover and maintain program quality and coverage.

In Sierra Leone, the Ministry of Health is [institutionalizing community health workers](#) within the health system, drawing on Last Mile Health's technical partnership to chart a path toward full government ownership by 2030.

In our [annual letter](#), Last Mile Health CEO Lisha McCormick shares how the global health financing crisis underscores the need for sustainable, government-owned community-led primary care.

IMPACT

AS OF DECEMBER 31, 2025

Our guiding star is to improve **reproductive, maternal, newborn, and child health** at the last mile.

We do this by **professionalizing community health workers**, who represent the most cost-effective means of delivering primary care to women and children, particularly in the hardest-to-reach areas.

We use data to **evaluate our impact, strengthen our programming, and drive progress** towards realizing our strategy and mission.



8,851

estimated lives saved of children under five due to interventions provided by Last Mile Health-supported community health workers since July 2023¹



3.44 million

women with improved access to modern family planning services due to interventions provided by Last Mile Health-supported community health workers since July 2023

COVERAGE AND REACH

Last Mile Health supports more than **30,000** community health workers who extend primary healthcare to over **52 million** people across Ethiopia, Liberia, Malawi, and Sierra Leone

Africa Frontline First, a joint venture co-founded by Last Mile Health working across 17 countries, has directly supported more than **85,000** community health workers and indirectly supported more than **600,000** community health workers, serving more than **70 million** people and **300 million** people, respectively



GLOBAL INFLUENCE



Over **\$253 million** in funding has been unlocked for community health programs in Africa from multilaterals and philanthropy through Africa Frontline First

50 countries have professional community health worker policies in place, driven by evidence and advocacy from the Community Health Impact Coalition (co-founded by Last Mile Health)



TO LEARN MORE
ABOUT OUR IMPACT,
VISIT OUR **WEBSITE**

¹ Under-five lives saved model