Older people in urgent need of support in Malawi

Key messages

- The food, fuel and finance crisis has put Malawians at risk of increased poverty and food security.
- Most older people in our study had poor food consumption and lack dietary diversity, with older women registering especially low indicators.
- Nearly all older people interviewed indicated that their food security has worsened in the past six months prior to the research.
- The most common coping mechanisms adopted by older people in dealing with the worsening food insecurity include restricting the number of meals eaten per day, consuming less expensive food, and reducing meal portions.
- Older people have also been badly affected by the rising costs of energy, medicines, and financial services.
- Higher costs for diesel and petrol have limited the ability of older people to use transportation, which has affected their access to health services.
Malawi has experienced major shocks and disruptions in the recent years. Based on the World Food Programme (WFP) assessment\(^1\), the country has been affected by the global food price increases resulting from the COVID-19 pandemic as well as by the Russia-Ukraine war. These factors, as well as the impacts of climate change have all contributed to Malawi’s food, fuel and finance crisis. The prices of major food commodities, such as wheat, edible oil and maize have substantially risen and are likely to remain high and erratic into the coming year. As of May 2022, the price of bread in Malawi has increased by 50 per cent and the retail price of a 50 kg of wheat flour has risen by 42 per cent.\(^1\) As of July 2022, the country’s maize output declined by 18.9 per cent in the 2021/22 farming season, leading to price hikes and prompting protests by consumer groups.\(^2\) In October 2022, monthly food inflation reached 33.7 per cent.\(^3\)

This situation has aggravated the existing poverty and risk of falling into poverty\(^1\) in a context, where the country which has been classified as a low-income economy and faces many systemic and governance challenges.\(^4\) Based on an analysis by the World Bank, the national poverty rate has declined only marginally from 51.5 per cent in 2015-16 to 50.7 per cent in 2019-20. The poverty headcount ratio stood at 73.5 per cent, which is one of the highest in the world.\(^5\) The situation has been exacerbated by natural calamities, including droughts, floods, and tropical cyclones Ana and Gombe that Malawi experienced in 2022.

As this policy brief reports, the food, fuel and finance crisis has had especially severe consequences for older people, negatively affecting their food security, access to transport, medicines, and financial services, and their ability to lead a decent and dignified life.

Malawi, like many other countries, is experiencing a demographic transition with its ageing population. Much of this change has been and is likely to continue to be driven by a decline in fertility from a total fertility rate (TFR) of 6.9 children in 1960 and to presently 3.9 children per woman.\(^6\) Consistent fertility declines and mortality improvements are expected to transform the age structure of Malawi from a younger population, towards a much older population structure. As of today, Malawi has a population of 20.2 million.\(^6\)

Old age poverty and destitution often go hand in hand in Malawi. As some older people do not have any source of income, they resort to begging in order to survive. Without proper social protection, those who are able to work and can find a job continue working for as long as they can.\(^7\)

**The impact of food, fuel and finance crisis on older people in Malawi**

In July 2022, HelpAge International conducted a mixed-methods study to examine the impacts of the food, fuel and finance crisis on the wellbeing of older people in Malawi. This involved a survey of 413 households with at least one older person (60 years or older), in Malawi’s two districts of Blantyre and Balaka. The survey’s aim was to quantitively assess the impacts of the crisis on older people and their households within the six preceding months. Amongst the household survey participants, 32 per cent were in a monogamous relationship, 52 per cent were widowed, four per cent each were single and divorced while two per cent were separated.

In addition, 15 focus group discussions (FGD) and five interviews with key informants were carried out. Each FGD had between 8-12 participants – both men and women - drawn from
communities in which the sampled older people live. The key informants included national and local decision-makers working on social welfare issues.

Our research suggests that the crisis has had significant negative effects on older people’s wellbeing. The survey revealed that at the time of the research 87 per cent of older people in the study areas had poor food security status, which was measured through the Food Consumption Score (FCS) (Figure 1). The FCS was calculated by multiplying the number of days a food commodity was consumed and its relative weight, based on a seven-day recall period.

**Figure 1 Food Consumption Scores (FCS) for older people (per cent) in Malawi**

![Food Consumption Scores amongst older respondents in Malawi](image)

Note: poor (FCS=1 to 21), borderline (FCS=21.5 to 35) and acceptable (FCS>35).


As Figure 2 illustrates, 80 per cent of the respondents had poor dietary diversity (DD), measured by Dietary Diversity Score (DDS). The DDS was calculated by summing up the number of unique food groups consumed by the individual during the previous 24 hours. Each food group is assigned a score of 1 (if consumed) or 0 (if not consumed). The following categories were used to assess respondents’ dietary diversity: poor (DDS≤4), medium (4<DDS≤6), high (DDS>6).

The study findings show that more women (as compared to men) in in the study area suffer from food insecurity. Thus, women were worse-off than men both in their food consumption and dietary diversity indicators and registered lower values of DDS (89 per cent of women had poor DD) than men (69 per cent of men had poor DD). Only nine per cent of women had high DD.
Nearly all survey respondents indicated their food security had worsened in the six months preceding their interview. The survey suggests that in response to the rise in prices for food and basic commodities, nearly all respondents restricted the number of meals eaten per day, consumed less expensive food, and reduced meal portions (Table 1).

The survey findings were corroborated by the qualitative data. The majority of FGD participants revealed that they were struggling to eat food of sufficient quality and quantity to satisfy their needs. Most FGD participants indicated that they have resorted to buying less expensive food, eating less and skipping meals.

A testimonial by Susan M, an older woman from Mphilisi illustrates the difficulties that people of her age group endure as a result of rising food and transport prices. Scarcity of maize has led to a sharp rise in prices, which has also meant older people have had to travel long distances to buy food at markets. She and her family were compelled to only eat once a day and cut back their spending on transport and other necessities. Like others, she has limited coping strategies to draw on to sustain her livelihood. In situations like hers, people cannot rely on mutual support networks as financial pressures have affected everyone in their communities; they are also reluctant to borrow money as it is seen to be too risky in such a volatile economic situation. She said: “Money is scarce and older people are suffering as we don’t have the strength to hunt for jobs and sustain our day-to-day lives” (FGD1, Participant 2 Mphilisi, 5 July 2022). Box 1 provides a more detailed account of Susan M’s situation.
Table 1: Coping mechanisms adopted by households to deal with impacts of the crisis in the past six months in Malawi

<table>
<thead>
<tr>
<th>Household coping strategies</th>
<th>Per centage (per cent)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reducing number of meals eaten per day</td>
<td>97</td>
</tr>
<tr>
<td>Using less expensive food</td>
<td>94</td>
</tr>
<tr>
<td>Reducing food quantities eaten per meal</td>
<td>89</td>
</tr>
<tr>
<td>Skipping food entire day</td>
<td>82</td>
</tr>
<tr>
<td>Borrowing food from friends</td>
<td>68</td>
</tr>
<tr>
<td>Buying food in credit</td>
<td>66</td>
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<tr>
<td>Restricting food consumption for the sake of children</td>
<td>64</td>
</tr>
<tr>
<td>Sending family members to eat elsewhere/beg for food</td>
<td>36</td>
</tr>
<tr>
<td>Gathering wild fruits</td>
<td>27</td>
</tr>
<tr>
<td>Obtaining relief food from government</td>
<td>12</td>
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An older man in Blantyre Machinjiri described how the food shortage has led to his family skipping meals every day and sometimes having no meal at all; as an older person this has badly affected his health. He said: “We reduced the number of times we eat a day. We used to eat three times a day but now we eat two times, sometimes once and it even gets worse sometimes we do not eat at all” (FGD 12, Participant 2, Machinjiri, 7 July 2022).

Furthermore, older men and women are no longer eating certain types of food that they are used to due to price increases. One of the older men explained: “Fish used to cost Kwacha (K)200 (around 20 US cents) but now it is K400 (around 40 US cents) which has made us reduce the number of times we include fish in our meals. We used to drink milk tea every Sunday but now drinking tea is too luxurious and we cannot afford that anymore” (FGD 13, Participant 3, Chemusa, 7 July 2022).

Older people are especially vulnerable to price spikes of maize and other staple food commodities in Malawi as they often rely on buying their food rather than cultivating it themselves. The survey results indicated that most respondents did not produce food for their own consumption.

Climate change impacts such as droughts, floods and tropical cyclones are threatening food security by destroying food crops.

The majority of survey respondents (82 per cent) indicated that fuel prices had increased in the previous six months. This means that older people have to spend a larger share of their limited income on energy at the expense of other basic needs such as food. This has led some households to switch their energy sources for cooking and lighting to cheaper options, but the use of renewable energy sources such as solar power is low among older people.
A FGD participant from Mpilisi recounts: “Paraffin tin lamps are only lit for a few minutes to perform important tasks due to the expensive cost of paraffin, since a tin of paraffin used to cost K50 (around 5 US cents) and is now K200 (around 20 US cents).” (FGD5, participant 3, Mpilisi, 5 July 2022). Another FGD participant from Nkolokoti-Machinjiri shared: “I am unable to buy a 1 litre bottle of cooking oil which was K1,500 and is now K3000 (around USD 3). Instead, I buy a small sachet of oil which was K100 (around 10 US cents) but is now K500 (around 50 US cents)” (FGD11, participant 4, Nkolokoti-Machinjiri, 12 July 2022).

Box 1: Struggling to meet daily needs in Mpilisi, Malawi

Susan M is 65 years old and lives in Mpilisi. She talked about the rise in price for maize and how it has affected older people. Most people buy maize regularly, but it has become more scarce and difficult to afford. People need to travel longer distances to buy it and this incurs additional travel costs. She also notes that older people find it difficult to stand in long queues to buy scarce supplies.

“From January to June this year 2022, prices of things are going up on a daily basis - and it is very hard to know whether people who sell things are also just taking advantage of the situation - I think this is being caused by devaluation. [Previously] Maize was being bought at K14,000 (around USD 14) a bag and now it is being bought at K20,000 (around USD 20) a bag, which we cannot afford as old people because most of us earn less than that. I think it is being caused by the rise in transport prices. This year’s harvest is not good enough and most people have already finished eating what they harvested, and we are now buying. As older people, we don’t have the strength to hunt for jobs or a piece of work in order to get money for food. In the last six months, I have experienced changes in food availability… maize is scarce even at marketplaces and people are forced to travel long distances just to buy maize which costs us more.”

She observes that the increase in transport prices has also made it difficult for older people to visit their families and friends. Previously, they would pay K1,200 to travel to Utale, but now the same trip would cost treble that amount. Instead, people are forced to walk long distances.

In addition, many older people can no longer rely on others in their community to help as most people have little money. Susan M laments that “No one is helping one another anymore because things are difficult for everyone and those who [used to] help can no longer help because they also have their families [to support].” Older people also find it difficult to borrow money as the cost of borrowing has gone up as a result of poor harvest and money devaluation. She explained why her family no longer takes out loans: “We decided to stop borrowing money because we cannot afford to give back the money due to high-interest rates. We do not borrow money anymore because we are scared.”

Higher costs for diesel and petrol have prevented many older people from travelling - to shops, health centres and to run their businesses. A FGD participant from Chemusa explained how this has hit his business: “The increase in the price of fuel has led to the increased price of ordering goods for business and this has made me quit my business” (FGD13, participant 3, 12 July 2022).

The personal finances, health and wellbeing of older people have also been hit by the rise in medicine costs. 70 per cent of older people interviewed indicated that they had experienced an increase in out-of-pocket health expenditure in the past six months. This situation has
been caused by the acute shortages of medicines due to the downturn in the global logistics system triggered by the COVID-19 pandemic.

An older woman in Kwitanda observes: “Medicine prices have also gone up and it is affecting our health as older people. Sometimes we get a dosage that is not enough because the money is not enough” (FGD 6, Participant 2, Kwitanda, 5 July 2022). Another participant added: “Medicine is scarce and expensive in a way that we cannot afford to buy, and we think we are going to die. We get sick and we no longer go to the hospital due to high transportation costs and now we cannot even afford to just buy at the pharmacy the only thing left is for us to die” (FGD 6, Participant 3, Kwitanda, 5 July 2022).

Few people surveyed had a bank account, most - 77.8 per cent - had a mobile money account. This is a secure digital wallet that allows people to manage their money, i.e. deposit money and conduct financial transactions such as paying bills, shopping at offline merchants, sending money to friends and paying through various online platforms using their phone number and Sim card.

Over 86 per cent of the older people interviewed indicated that they didn’t have access to credit mainly on account of their age and ability to pay. However, respondents (about half those who participated in the FGDs) who had some form of credit reported an increase in the interest rate on the money they borrowed. Looking ahead, the rising cost of maintaining financial accounts and rising interest rates are likely to further erode the incomes of older people.

One participant summed up these challenges: “We are unable to borrow money because the interest rates are so high. We as older people have been affected because we can no longer take loans because we are unable to find money and give back with the high interest” (FGD 4, Participant 2, Nailuwa, 5 July 2022).

**Recommendations**

This policy brief highlights findings from HelpAge International research on the impacts of food, fuel and finance crisis on the wellbeing of older people in Malawi. To cope with soaring prices and increasing food insecurity, most older people had no choice but to buy less expensive food and fuel, reduce their food and fuel consumption, and avoid using transport, which affected their access to healthcare, markets, and even running their businesses. Based on these findings, we propose several policy recommendations to improve the dire situation of older people in Malawi.

1. The Ministry of Finance and Economic Planning and other development partners should develop comprehensive, inclusive, and shock-responsive social protection systems that seek to support older people among other population groups. Such systems can help build people’s resilience to risks by addressing their basic needs in a systemic and predictable manner; and they can provide a social safety net for those experiencing crises, enhancing their capacity to adapt. Key prerequisites for strengthening social protection in Malawi include increasing the government’s budget allocation for social assistance; improving the Unified Beneficiary Registry and Enrolment and Payment Systems; and linking social protection with the Disaster Risk Management Unit.

2. The Government of Malawi should accelerate efforts to stabilise food price inflation that is currently on the rise and tame the fluctuating Kwacha. The recent World
3. The Ministry of Agriculture (AIP) should allocate more funds to and expand their scope to offer subsidies to more crisis-vulnerable population groups and boosts food production. In addition, to improve older people’s food security as well as household income, the AIP should subsidise large-scale commercial farmers to incentivise greater agricultural production and employment of agricultural labour.

4. The research findings show that older people’s livelihoods have been threatened by climate related events, such drought, floods and cyclones. The AIP and Department of Disaster Management Affairs (DODMA) in the Ministry of Natural Resources and Climate Change (MNRCC) should enhance the agriculture sector’s resilience by improving farmers’ access to accurate and timely weather/market information as well as affordable agricultural inputs, such as credit and extension services.

5. To mitigate climate change impacts, the MNRCC and AIP should prioritise and promote the use of renewable energy, which could lead to less expenditure on food and could also stimulate household savings.

6. The Government and other development partners should support livelihood diversification of older people to ensure that when one source of income is affected, such as farming, they still have alternative sources. This can be achieved through training older people on alternative income-generating activities. The Malawi Network of Older Persons’ Organizations (MANEPO) has demonstrated that adopting alternative means of income-generating activities like the Goat Pass-on initiatives have improved older people’s income security.

7. There is a lack of data specific to older people in Malawi, which prevents effective policy interventions. The National Statistical Office (NSO) should continue to improve on data and statistics collection and compilation of age-segregated data for older people to enhance evidence and decision-making on matters relating to the well-being and welfare of older people.
Endnotes