

For every child
Health, Education, Equality, Protection
ADVANCE HUMANITY



UNICEF HUMANITARIAN ACTION MALAWI IN 2008



CORE COUNTRY DATA	
Population under 18 (thousands)	7286
U5 mortality rate (2006)	120
Infant mortality rate (2006)	76
Maternal mortality ratio (2000-2006, reported)	980
Primary school enrolment ratio (2000-2006, net, male/female)	92/97
% U1 fully immunized (DPT3)	99
% population using improved drinking water sources (rural/urban)	68/98
Estimated no. of people (all ages) living with HIV, 2005 (thousands)	940
% U5 suffering moderate and severe underweight/stunting	19/46

Source: *The State of the World's Children 2008*

Eight districts in Malawi have been identified as vulnerable based on floods, heavy rainfall and prolonged dry spells with a total of 519,200 people prone to be food insecure depending on worsening of economic conditions. Over 4 million children across the country live in poverty. The growing HIV crisis compounds poverty to increase poor people's vulnerability to risks and shocks. Consequently women and under-five children are exposed to natural disasters, malnutrition and infections as well as to abuse and exploitation.

Summary of UNICEF financial needs for 2008	
Sector	US\$
Health and nutrition	2,000,000
Water, sanitation and hygiene	1,000,000
Education	600,000
Child protection	600,000
Total*	4,200,000

* The total includes a maximum recovery rate of 7 per cent. The actual recovery rate on contributions will be calculated in accordance with UNICEF Executive Board Decision 2006/7 dated 9 June 2006.

1. CRITICAL ISSUES FOR CHILDREN

People in Malawi continue to face unacceptable levels of vulnerability. Malawi ranks as the world's eleventh poorest, and 52 per cent of its population lives on less than a dollar a day. Over 4 million children across the country live in poverty, which is deep and widespread, characterized by low income, low literacy, food insecurity and high rates of child malnutrition. Almost 50 per cent of under-five children are stunted, and the growing HIV crisis compounds poverty to increase poor people's vulnerability to risks and shocks. Nearly 13 per cent of the country's 7 million children under the age of 18 have lost their parents and other caregivers, many to HIV and AIDS. More than 50 per cent of children who should be in primary school have dropped out of school because of poverty, hunger and cultural barriers.

The final crop production estimates released by the Ministry of Agriculture and Food Security indicate an overall maize production at 3,445 million MT for the 2006/07 season. 2007 estimates were 32 per cent higher than previous year production and 64 per cent higher than the national requirement. The increase in crop production is attributed to good rainfall performance, use of improved seed variety and increased access to and uptake of fertilizer through the subsidy programme and commercial fertilizer sales. Despite the bumper harvest, the Malawi Vulnerability Assessment Committee (MVAC) in June 2007 identified eight districts based on floods, heavy rainfall and prolonged dry spells with a total of 519,200 people which are prone to be food insecure depending on worsening of economic conditions, such as maize prices being higher than MK30/kg. These districts include Balaka, Chikwawa, Karonga, Machinga, Mulanje, Mzimba, Nsanje and Ntchisi.

Climate experts from the Southern Africa Development Community, National Meteorological Services and the Drought Monitoring Centre have concluded that Malawi will have an increased chance of receiving normal to above-normal rainfall from October 2007 to March 2008 season. It is expected that the La Niña phenomenon, in addition to other factors, will influence the weather patterns in the region. The quality of school buildings and the geographical location of some districts make them vulnerable to natural disasters, such as floods and storms. Nsanje, Chikwawa, Mangochi, Salima, Nkhata Bay and Zomba districts are prone to such natural disasters. More than 40 schools and 32,000 schoolchildren are annually affected by natural disasters.

Cholera remains a major threat in Malawi with recurrent outbreaks during the rainy season from November to April and is particularly a major risk factor in flood situations because of the possible and immediate breakdown of water and sanitation facilities. Food insecurity and nutrition have a direct effect on individual susceptibility to diseases and thus the level of a possible epidemic will be directly related to people's access to diversified food and safe water. Greater vulnerability will materialize in rising abuse and exploitation and more children engaged in child labour, an influx of children on the streets and an increase of children in conflict with the law. A deterioration of the humanitarian situation will put an extra burden on households hosting orphans and more children are expected to drop out from schools in search of work. The long-term impact on households and communities is evident, as they are becoming less and less resilient and more and more vulnerable to shocks resulting from drought, floods and other natural disasters.

2. KEY ACTIONS AND ACHIEVEMENTS IN 2007

Even though limited funds were received for health and nutrition, water and sanitation, child protection and emergency response, UNICEF Malawi was able to carry out crucial activities in these sectors through a US\$ 1 million loan from UNICEF's internal Emergency Programme Fund in 2007.

A total of 30,000 moderately malnourished under-five children and 12,500 pregnant and lactating women benefited monthly from the supplementary feeding programme. Nutrition supplies were procured and distributed for the treatment of 20,000 severely malnourished children in nutrition rehabilitation units (NRUs). The 'Child Health Day' campaign for vitamin A and deworming reached 956,000 under-five children in July. A nutrition assessment for the Malawi Vulnerability Assessment Committee (MVAC) took place in June in parallel with MVAC field visits. The survey covered a total of five expanded programming areas which were food insecure based on vulnerability assessment. This way, UNICEF and partners established the nutrition situation in these livelihood zones during this post-harvest period.

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A total of 280 blocks of latrines, 56 urinals and 56 handwashing facilities were constructed in 28 schools giving access to about 16,800 schoolchildren to child-friendly and gender-sensitive sanitation facilities. Six thousand people have had access to safe water through chlorination during the cholera season. As a member of the National Cholera Task Force, UNICEF was involved in all activities of preparedness and response to cholera in 12 districts, distributing 50 tins of chlorine (50 kg each); assisting about 6,000 people with house-to-house chlorination of drinking water; procuring and distributing 20,000 hydrogen sulphide (H₂S) vials for testing of drinking water at household level. Various medical supplies, such as oral rehydration salts (ORS), Ringer's lactate and cannulas of various sizes were also distributed to cholera-affected districts throughout the crisis.

UNICEF rehabilitated four schools accommodating 3,500 schoolchildren and supported 17,326 schoolchildren in 24 flood-affected schools with school-in-a-box kits and large tents. The ownership of the sentinel site surveillance project has been undertaken by the Ministry of Education and is being integrated into one Ministry-owned monitoring and evaluation system. This outlines the Ministry of Education's plans to complement the existing monthly collection of information on school attendance and absenteeism with term reports. The road map of the sentinel site surveillance project also includes plans to disseminate these reports effectively, and to conduct stakeholders' meetings to assess utilization of and needs associated with these reports.

In response to the high incidence of sexual abuse and to build on and extend the scope of the 'Zero Tolerance' campaign UNICEF has supported the Ministry of Women and Child Development to launch a 'Stop Child Abuse' campaign in 2007. The campaign targets policy makers, service providers and the community to prevent child abuse, to protect children from abuse and to rehabilitate child victims of abuse. The 'Stop Child Abuse' campaign aims to mobilize leadership and commitment at all levels with a view to preventing and responding to violence, exploitation and abuse against children – including trafficking, child labour and harmful traditional practices. The campaign also targets children who are uniquely vulnerable to these abuses, such as those living without parental care and those in conflict with the law. UNICEF has produced 1.6 million copies of '*A Trolley Full of Rights*' and distributed the books to all children in schools. Currently UNICEF is supporting the printing of information, education and communication materials related to the 'Stop Child Abuse' campaign that will be distributed nationally.

UNICEF actively participated in the review of the country's inter-agency avian and human influenza preparedness and response plan. Emergency preparedness and response training sessions for UNICEF Malawi staff were conducted in Lilongwe in 2007. The emergency preparedness and response plan was submitted to the Regional Office and the Office of Emergency Programmes (EMOPS) for review. UNICEF provided assistance with non-food items and drinking water purification products to more than 1,500 flood-affected families in four districts. Non-food items were procured to replenish a contingency stock for more than 2,000 flood- or other natural disaster-affected families.

Malawi has started a Government social cash transfer pilot scheme in April 2006. Over 3,200 ultra poor and labour constrained households are being reached with a cash transfer of an average of US\$ 12 monthly in Mchinji and Likoma districts. The impact of these cash transfers shows great gains in the areas of health, education, nutrition and child protection. Social cash transfers can help very vulnerable households build their resilience and asset base, which allows them to better cope with and respond to risks and disaster-related shocks. Hence, although social cash transfers are a social protection instrument designed for long-term sustainable programming, they can also be interpreted as a tool for disaster risk reduction in the short and medium term.

3. PLANNED HUMANITARIAN ACTION FOR 2008

Coordination and partnership

UNICEF cooperates with the Government, UN agencies, NGOs and donors. It participates in national humanitarian coordination fora, the UN Country Team (UNCT), UN Disaster Management Groups and various technical working groups. UNICEF further ensures a coordinated action among partners in the areas of nutrition, child protection, education and water, sanitation and hygiene.

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Regular programme

To support the humanitarian action, existing activities/programmes will be expanded and adjusted as needed and will build on partnerships (Government, UN agencies and NGOs) developed through the Country Programme as well as on community mobilization and participation. Through a solid network of partnerships, UNICEF monitors changes in the environment in an attempt to ensure early warning and timely response within the limits of its cluster responsibilities (nutrition, child protection, education and water, sanitation and hygiene).

Health and nutrition (US\$ 2,000,000)

UNICEF will respond to an increase in severe and moderate malnutrition amongst women and under-five children and to a potential increase in susceptibility to diseases, such as cholera, measles and malaria. Efforts will be made to ensure visibility of children affected by HIV and AIDS. Key activities will include:

- Preposition emergency drugs, including oral rehydration salts (ORS) and chlorine as well as medical supplies for 15 cholera-prone districts to ensure a total treatment capacity of 5,000 cholera cases;
- Procure and distribute 15,000 insecticide-treated mosquito nets and drugs for pregnant women and under-five children who will be admitted to nutrition rehabilitation units (NRUs); intensify regular distribution of mosquito nets in all malaria-affected areas;
- Provide support to treat up to 3,500 severely malnourished under-five children per month in 95 NRUs and 201 community therapeutic care centres nationwide; in partnership with the World Food Programme (WFP), support the treatment of 40,000 moderately malnourished under-five children and 18,500 pregnant/lactating women each month through supplementary feeding activities;
- Continue to support the monitoring system established for the therapeutic and supplementary feeding centres, which allows district- and national-level nutritional managers to monitor trends in acute malnutrition and the quality of the centres' treatment;
- Run prevention, care and support programmes in the area of HIV and AIDS;
- Support the Ministry of Health in conducting nationwide vitamin A and deworming campaigns, targeting 956,000 under-five children.

Water, sanitation and hygiene (US\$ 1,000,000)

In an effort to prevent and reduce outbreaks of waterborne diseases, in particular cholera, UNICEF will continue to raise awareness on prevention of cholera and improve water and sanitation facilities, primarily at therapeutic feeding centres, school feeding centres and in communities, including community-based childcare centres. Key activities will include:

- Support the National Cholera Task Force to undertake national awareness campaigns on cholera prevention in all communities prior to and during the rainy season;
- Repair wells and adequate sanitary facilities in 150 communities, including community-based childcare centres and 200 schools;
- Conduct sanitary surveys of water sources and test with H₂S strips contamination of sources with *E. coli* at household level in 15 cholera-prone districts; initiate local solutions to improve water sources along with chlorination;
- Provide hygiene education and management support to 15 district health officials and 150 workers, 1,200 communities and 2,000 caregivers at 500 community-based childcare centres, 95 NRUs and 200 school feeding centres in order to complement existing water and sanitation services;
- Provide jerrycans/buckets with taps and enamel cups, along with user instructions and messages in local languages on safe handling of water and disposal of excreta and solid waste; provide soap and detergents; disseminate key hygiene messages on prevention of cholera and other diseases;
- Support post-mortem workshops at national and district level in the aftermath of the 2007/08 cholera season in order to incorporate lessons learned and experiences gained for the preparedness of the following season.

Education (US\$ 600,000)

UNICEF will continue to strengthen its efforts to prevent absenteeism among schoolchildren, especially among orphaned and other vulnerable children, in those areas that are considered at high risk of food insecurity and floods. Key activities will include:

- Supply basic school materials including notebooks, pencils and erasers for 32,000 primary schoolchildren and recreational kits for 30 schools and 30 youth centres;

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- Train 30 Ministry of Education staff and other stakeholders on managing education in emergency; train 240 primary schoolteachers, with particular attention to HIV and psychosocial care and support;
- Rehabilitate/construct school blocks and build water point sets of sanitation facilities which comprise latrines, urinals and handwashing facilities in 15 schools; support construction of 15 temporary school/classroom structures to accommodate 12,000 primary schoolchildren.

Child protection (US\$ 600,000)

UNICEF's 'Stop Child Abuse' campaign seeks to have an impact on all Malawi's children, directly and indirectly, through community- and national-level activities:

- Produce materials on child protection to prevent the exploitation of children in line with the 'Stop Child Abuse' campaign for national coverage; produce radio programmes including the radio version of '*A Trolley Full of Rights*' to raise awareness on child abuse;
- Support NGOs to conduct drama theatre on the issue of child abuse in each traditional authority area;
- Support the establishment of Police Victim Support Units at community level; train police from Victim Support Units on play therapy client-centred approach;
- Train 400 community child protection workers to advance the fight against child abuse.