Highlights

❖ Seven days after he took oath of office as the new President of the Republic of Malawi, Dr Lazarus Chakwera made a special address to the nation on 4 July 2020 in which he updated the nation on the alarming rate at which COVID-19 cases are increasing in the country and announced preventive measures to be followed at the inauguration and republic cerebration which was later cancelled. He also made commitment that his government will undertake measures to control the situation as a matter of priority.

❖ As the number of confirmed COVID-19 cases continues to increase steadily, further analysis of the cases indicates a drastic shift from having high numbers of imported to now a growing proportion of locally transmitted cases. As of July 6, 2020, 58 percent of the 1,877 cases registered were imported.

❖ A total of 59 stakeholders, including 34 traditional leaders and chiefs from across the country have with UNICEF support received training on COVID-19 prevention and mainstreaming of gender equality including prevention of gender-based violence (GBV) and HIV/AIDS in the context of COVID-19.

❖ With support from UNICEF, 64 returnees (from South Africa have benefited from Psychological First Aid. In addition, 137 people (54 females, 83 males), including the returnees who were found to be COVID-19 positive and their close relatives, have been provided with remote Psychological First Aid from 1 to 3 July.
Situation Overview

Confirmed COVID-19 cases continue to increase steadily. As of 6 July 2020, 1,877 cases have been confirmed, representing an increase of 48 percent since the last reporting date. Over 165 (8.8%) of the cases are health workers and 73 of the cases have no known epidemiological link. Further analysis of the cases indicates a drastic shift from having high number of imported to now a growing proportion of locally transmitted cases. Out of the total case load, 706 are imported infections and 1,098 are locally transmitted. This is a sharp contrast from the previous reporting where 80% of the cases were imported.

Malawi has so far conducted 17,693 COVID-19 tests in 39 testing sites. Cumulatively, 345 cases have now recovered bringing the total number of active cases to 1,508 with 24 deaths as of July 7, 2020. Malawi is now the second country in the SADC region with the highest number of COVID-19 cases after South Africa with reported community transmission.

Programme response by UNICEF and partners

Humanitarian Leadership, Coordination and Strategy

Humanitarian Strategy

UNICEF Malawi is working in the following areas of strategic priority against COVID-19:

- Public health response to reduce coronavirus transmission and mortality
- Continuity of health, education, nutrition and protection services
- Assessing and responding to the immediate secondary impacts of COVID-19
- Strengthening Risk Communication and Community Engagement (RCCE)

UNICEF maintains critical preparedness and response operations, including operational humanitarian access corridors, and delivery of services in Health, Education, Child and Social Protection, WASH, Nutrition and Communication for Development (C4D) areas to prevent and control infections, ensure continuity of education, promote positive behaviours, preventing transmission and ensuring the protection of children rights, especially of the most vulnerable one.

Humanitarian leadership and coordination

Government coordination mechanisms

- A rapid response team is in place under the Presidential COVID-19 Taskforce to oversee the reception of returnees and deportees from South Africa. The Presidential Task Force continues to engage in weekly meetings to coordinate measures of responding to the pandemic.
- With a new government now in place following the presidential elections that took place on 23 June, a new Minister of Health is yet to be appointed.
- The government continues to release daily situation reports to provide clear information on how the situation is changing.
❖ As per the national preparedness and response plans, several clusters remain "activated" at the national level for the response, of which UNICEF is co-leading four of the clusters (WASH, Nutrition, Education and Protection). All the clusters are meeting and are closely monitoring the situation in addition to updating the National Plan while at the same time supporting the implementation of preparedness and response actions. (https://calendar.google.com/).
❖ The National Disaster Preparedness and Relief Committee continues to meet weekly to review recommendations from the cluster system.

UN coordination mechanisms
❖ Due to the presidential elections, weekly Humanitarian Country Team and the Inter-Cluster Coordination Group did not take place in the week ending 3 July.
❖ Clusters continued to hold weekly meetings for better response coordination.

Malawi COVID-19 Supply Chain system
❖ The Supply Portal, managed by UNICEF, continues to facilitate requests by national authorities and humanitarian partners for strategic and critical supplies.
❖ The MoH has formed a national task force to review all requests for submission through the global supply portal. The first request of personnel protective equipment (PPEs) worth about USD 923,000 with funding from the World Bank Pandemic Emergency Financing (PEF) has been submitted.
❖ UNICEF has supported the MoH and development partners to forecast the PPEs needs for Malawi for the next nine months to ensure uninterrupted supply of the PPEs.
❖ The Procurement Working Group updated the Business Operations Strategy platform as part of the Procurement Opportunity Analysis for UN Agencies in Malawi. The working group identified the establishment of long-term agreements (LTAs) for PPEs as an opportunity to be pursued for 2020 to ensure that agencies obtain better value for money by consolidating requirements for all agencies.
❖ UNICEF is exploring options to potentially support the local production of community masks using funds from DFID. Discussions have been initiated to identify suitable community masks that are user friendly and environmentally safe.
❖ UNICEF continues to participate in the Logistics Cluster under the leadership of the Ministry of Transport and WFP and the Health Medical Supplies Committee. UNICEF is a key member of the cluster given its procurement services function and its role in the coordination of the supply chain portal requests in Malawi

Summary Analysis of Programme Response

Strengthening public health response to improve Infection and Prevention Control (IPC) and provide critical medical and WASH supplies

UNICEF continues to provide technical support to the National Emergency Operations Centre, Technical sub committees and Presidential Task Force on COVID-19 (PTF). Within the reporting period, UNICEF through Malawi Red Cross Society (MRCS) supported data entry and analysis to guide a more targeted district level response and improve contact tracing and active case search using MRCS volunteers. UNICEF further provided technical support to Surveillance and Case Management subcommittee to review the discharge protocol in line with WHO discharge criteria that requires no testing for COVID-19 of patients at discharge
In addition, through Surveillance subcommittee, UNICEF with other partners supported the development of training materials on community-based surveillance for health surveillance and health care workers (HCWs).

During the reporting period UNICEF with funding from UK Aid continued to support key interventions in COVID-19 surveillance and coordination. Through MRCS, 3,163 (1,714 females and 1,439 males) high risk travellers were screened by MRCS volunteers at the Mwanza, Karonga/Songwe and Kamuzu International Airport (KIA) points of entry (PoEs). As of 5 July, the number of travellers that have entered through the PoEs now stands at 23,888 (7,353 females and 16,525 males).

An additional 32,405 people were reached with WASH-related messages through mobile van messaging through different approaches, and another 24,255 people with proper handwashing demonstrations. Since some of the same people are being reached using different approaches, the cumulative figure so far reached remains at 2,615,000 people with WASH-related messages. Of these, about 630,000 are children under 18 years (300,510 girls and 329,495 boys), and about 1,985,000 are adults (1,069,745 women and 915,250 men).

**Strengthening Risk Communication and Community Engagement (RCCE)**

Since the last reporting date, over 30,000 people have been reached with COVID-19 messages through door to door, mobile van and community drama sessions bringing the total number to over 270,000 people. Additionally, 166,200 people have been reached through the social media pages. UNICEF continues to work with the partners on a rumour tracking tool as it has been established that there are a lot of rumours in circulation which calls for more community engagement sessions to clarify these rumours. UNICEF is further working with the partners to reprogram some of the mobile activities to more community engagement activities.

The National Social Mobilization Committee (NSMC), with UNICEF support, has commenced integrated orientation sessions using the Sexual and Reproductive Health and Rights (SRHR) platform on ending early marriage to disseminate COVID-19 prevention messages. The NSMC has been also engaged to conduct consultation workshops within Spotlight Initiative and trained 59 stakeholders, including 34 traditional leaders and chiefs (17 male and 17 female) from across the country on COVID-19 prevention and mainstreaming of gender equality including prevention of gender-based violence (GBV) and HIV/AIDS in the context of COVID-19.

Through the nutrition-sensitive agriculture programme which is implemented jointly with FAO and funded by the EU, UNICEF has reached over 200,000 people with key messages on maternal, infant and young child feeding and WASH using 8 community radio station across the 10 districts. UNICEF has also raised COVID-19 awareness among more than 7,000 community volunteers and 180 local leaders, in turn, reaching out to more than 15,000 households with key messages on COVID-19 prevention, exclusive and continued breastfeeding and complementary feeding in the context of COVID-19.

**Continuity of health, education, nutrition and protection services**

The Emergency Radio Education Program for primary learners (Standards 1-8) and the online learning platform for secondary learners (Form 1-2) are ongoing. Secondary school children are also routinely accessing online lessons through the free internet provided by service providers. UNICEF is working with
the Ministry of Education, Science and Technology to generate data on the number of children who so far accessed the services.

UNICEF continues to support the provision of basic Psychological First Aid (PFA) to callers as well as advice, referrals and follow-ups in cases of child protection and Gender-Based Violence (GBV), through YONECO (Youth Net and Counselling). During the reporting period, 14 Gender Based Violence (GBV) and child related issues were reported, including 4 ‘defilement’ and 2 child marriage cases through the GBV Crisis Line and Child Helpline. Thirty-eight calls were directly related to COVID-19. Among other things, school-age callers sought information on the school re-opening and shared their challenges due to closure of schools, including risky behaviours and child marriage. Other callers requested for the information on the prevention measures, the status of the pandemic, as well as the assistance for the sanitary materials. One suspected COVID case was reported, which was redirected to the health focal person. The cases were followed up and referred to necessary services, including police, social welfare, justice, and health, using an updated referral directory.

Moreover, a total of 64 returnees (10 females, 54 males) from South Africa at Machinga Teachers Training College returnee holding centre also benefited from Psychological First Aid (PFA). In addition, 137 people (54 females, 83 males), including the returnees who were found to be COVID-19 positive and their close relatives, were provided with remote PFA from 1 to 3 July. The District Social Welfare Officers (DSWO) also reported providing mediation and counselling services to 78 couples experiencing domestic disputes because of effects of COVID-19.

Support in the provision of community-based Mental Health and Psychosocial Support (MHPSS) and child protection services using a case management approach also continues. From 29 June to 3 July, in Machinga and Blantyre districts, the respective DSWO reached 230 children (125 girls, 105 boys), 291 parents (204 females 87 males), and 53 caregivers (29 females 24 males) with community based MHPSS. In Blantyre district, increased need for PSS was observed due the closure of schools, slow-down of economic activities, and parenting challenges. Blantyre DSWO followed up with two children (2 girls) who were reintegrated from Child Care Institutions to their families. Also 5 children (3 girls, 2 boys) without parental or family care were provided with appropriate alternative care. In Blantyre 53 children on the streets were provided information and other support by the DSWO.

UNICEF is also supporting the MoH to develop standard operating procedures (SOPs) to guide the implementation of nutrition programs to ensure continuity of service provision and prevent the spread of COVID-19 infections. A draft has been prepared and is undergoing review.

**Human Interest Stories and External Media**

The weekly radio programmes continue to be broadcast on Zodiak Broadcasting Station (92.7fm) every Tuesday at 6.30 PM and the next day at 3:30 PM. UNICEF has partnered with the Zodiak to produce a series of radio, TV and online programmes and news features on COVID-19 awareness, impact and prevention. In the Q&A session, they announced names of those who answered previous week’s questions correctly (to encourage community engagement and at the same increase awareness). Listeners are asked to SMS their response, or any other comments or questions.

Through its partnership with the Malawi Institute of Journalism (MIJ), UNICEF is supporting journalism students to produce COVID-19 programmes which are now being broadcast on MIJ national radio station
and four community radio stations. Through this exercise, the young journalists are building their capacity to produce content on children’s issues (more specifically on how COVID-19 is affecting children and young people), amplifying children’s voices and raising awareness about COVID-19 and its impact.

UNICEF continues to produce stories, multimedia contents, infographics, engage with celebrities and influencers to promote Covid-19 messaging, countering myths and misinformation, and documenting our response in the field. A story about the important role of traditional leaders (trained with support from UNICEF and other partners) in fighting COVID-19 was published in The Nation, a daily newspaper.

UNICEF is continuing to promote global, regional and local COVID-19 contents including on positive parenting (both in English and Chichewa) on the Internet of Good Things. The following articles; Become a COVID-19 Student Expert and More ways to learn on your phone have been added targeting students. More articles targeting students/young people will be added on the platform. Since 1st of June IoGT Malawi has had over 21,000-page views. The content can be accessed by audiences free of cost. UNICEF continues to push Covid-19 messages on its social media channels.

On social media, UNICEF continues to share messages on COVID-19 prevention and awareness, including new content on misinformation, physical distancing and the wearing of masks. UNICEF regularly updates its dedicated COVID-19 page on its website with latest news and information on UNICEF and its partners' response to COVID-19 in Malawi.

Challenges

❖ The Ministry of Health (MoH) has reported low stocks of COVID-19 test kits amidst increasing demand for testing suspected cases and screening of returnees. UNICEF together with Centre for Disease Control (CDC) and WHO are exploring ways to quickly procure test kits locally and work with the Logistic and Laboratory subcommittee to develop a forecasting tool for all supplies to avoid similar situation.

❖ Increasing of COVID-19 infection among front line health workers is raising concerns on continuity of health services. The MoH with support from UNICEF and other IPC partners is rolling out a training on strict adherence to protocol as per WHO guidelines.

❖ Sub-optimal implementation of COVID-19 case definition especially in outpatient department to detect COVID-19 cases continues to be a challenge. This is expected to improve because all health workers have been oriented to apply the case definition at outpatient departments to ensure the suspected cases are identified and isolated for testing.

❖ There is sub optimal operational support for the district teams to investigate alerts, rapidly respond, list and follow up of contacts. The MoH is rolling out RapidPro platform to improve on the electronic Integrated Disease Surveillance and Reporting (eIDSR). This is being done with support from UNICEF and funding from DFID.

❖ There is limited capacity to isolate cases with most of the isolation centres still under renovation apart from the Kamuzu Central hospital.

❖ More funding is required without which UNICEF’s ability to fully achieve planned results for children and women in response to COVID-19 will be constrained.

Next SitRep: 15 July 2020

# Annex A: Summary of Programme Results

<table>
<thead>
<tr>
<th>Sector</th>
<th>Target</th>
<th>Total results as of 8 July 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Health</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of healthcare facility staff and community health workers trained in Infection Prevention and Control (IPC)</td>
<td>400</td>
<td>357</td>
</tr>
<tr>
<td>Number of healthcare providers trained in detecting, referral and appropriate management of COVID-19 cases</td>
<td>400</td>
<td>357</td>
</tr>
<tr>
<td>Number of healthcare workers within health facilities and communities provided with PPEs</td>
<td>2,500</td>
<td>2,260</td>
</tr>
<tr>
<td><strong>WASH</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of people reached with critical WASH supplies (including hygiene items) and services</td>
<td>5000</td>
<td>3,999</td>
</tr>
<tr>
<td><strong>C4D</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of people reached on COVID-19 through messaging on prevention and access to services</td>
<td>8,000,000</td>
<td>8,000,000</td>
</tr>
<tr>
<td>Number of people engaged on COVID-19 through RCCE actions</td>
<td>300,000</td>
<td>198,096</td>
</tr>
<tr>
<td>Number of people sharing their concerns and asking questions/clarifications for available support services to address their needs through established feedback mechanisms</td>
<td>5,000</td>
<td>3,323</td>
</tr>
<tr>
<td><strong>Nutrition</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of caregivers of children aged 0-23 months reached with messages aiming to promote breastfeeding in the context of COVID through national communication campaigns</td>
<td>500,000</td>
<td>306,870</td>
</tr>
<tr>
<td>Number of children 6-59 months admitted for treatment of severe acute malnutrition (SAM)”</td>
<td>8,000</td>
<td>5,834</td>
</tr>
<tr>
<td><strong>Child Protection</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of children, parents and primary caregivers provided with community based mental health and psychosocial support</td>
<td>1,500</td>
<td>3,036</td>
</tr>
<tr>
<td>Number of children without parental or family care provided with alternative care arrangements</td>
<td>30</td>
<td>63</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of children supported with distance/home-based learning</td>
<td>2,139,311</td>
<td>60,432</td>
</tr>
<tr>
<td><strong>Social Protection</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of households benefitting from new or additional social assistance measures provided by governments to respond to COVID-19 with UNICEF support</td>
<td>457,000</td>
<td>0</td>
</tr>
</tbody>
</table>

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