



MALAWI

Humanitarian Situation Report

unicef 

HIGHLIGHTS

- As of 18th March 2015, 173 cases of cholera were reported by the Ministry of Health, with three deaths. The first round of the Oral Cholera Vaccine Campaign is expected to be undertaken in Nsanje district from 31 March until 3 April 2015.
- With UNICEF support UNICEF, 240,920 people in camps, schools and communities in affected districts have been reached with hygiene promotion and cholera and other diarrhea disease prevention messages
- 60 volunteer teachers that were recently trained have been deployed to schools in 5 affected districts to provide psychosocial support and counseling of learners and collect and provide data for real time monitoring. The total reach of education response now stands at 178,000 learners against an initial target of 105,000.
- The Special Representative of the Secretary General on Violence Against Children (Ms. Marta Santos Pais), visited the flood-affected areas of Chikwawa on 23rd March, specifically to Tizora Grain Camp.

SITUATION IN NUMBERS

25 March 2015

- 15** Districts affected
- 173,000** Displaced people in temporary sites
- 106** Deaths by floods
- 64,000** Hectares of land flooded*
- 173** Cholera cases reported
- 3** Cholera deaths**

UNICEF's Response with partners

* Department of Disaster Management Affairs (DoDMA)
United Nations Office of the Resident Coordinator
Situation Report No. 13 (as of 13 March 2015)
** Ministry Health Weekly Cholera Report, 20th
Epidemiological Week 16-22 March, 2015

Sector	Indicator	UNICEF		Sector/Cluster	
		UNICEF Target	Cumulative results (#)	Cluster Target	Cumulative results (#)
Education	Affected school children benefiting from school supplies	105,000	178,000 ¹	262,000	183,000
Nutrition	Children 6-59 months with SAM enrolled in OTP and NRU programmes	12,698	4,848	12,698	4,848
WASH	Provision of safe water to affected population through chlorination	35,000	92,215		

Situation Overview & Humanitarian Needs

- The process is still underway to finalize data analysis from Post Disaster Needs Assessments which were conducted in the 15 affected districts to inform the recovery and reconstruction interventions.
- As of 18th March 2015 which is 19th Epidemiological week (16 - 22nd March 2015) Malawi has registered 173 cholera cases with 3 deaths. The affected districts are Nsanje (132 cases, 3 deaths) Dedza (1 case), Lilongwe (5 cases) Chikwawa (24 cases with 0 deaths) Ntcheu (1 case, 0 death) and Mwanza (9 cases, 0 death)
- The Special Representative of the Secretary General on Violence Against Children (Ms. Marta Santos Pais), visited the flood-affected areas of Chikwawa on 23rd March, specifically to Tizora Grain Camp.

Humanitarian Leadership and Coordination

- A WASH cluster meeting was held on 23rd March, 2015. Partners discussed on emergency recovery plan and agreed that during the next cluster meeting which is expected to take place on 7th April, all partners will present their recovery plans.
- The Education Cluster finalized its early recovery planning process and 8 primary schools (6 in Nsanje and 2 in Mulanje) and one day secondary school in Nsanje have been identified for relocation and reconstruction. The plan has integrated capacity building for learners and communities in disaster risk management and environmental protection measures.

SUMMARY OF PROGRAMME RESULTS

WASH

- The number of people provided with safe water through UNICEF interventions is 92,215. This includes people reached with water supply through boreholes, water trucking and water chlorination and it has been achieved through Ministry of Irrigation and Water development, Catholic Relief Services and Concern Universal.
- Through partnerships with Goal Malawi, Population Services International, Catholic Relief Services and Concern Universal, UNICEF has reached 240,920 people in camps, schools and communities in affected districts with Hygiene promotion on cholera and other diarrhea disease prevention, hygiene and water treatment.
- UNICEF in partnership with Catholic Relief Services, Concern Universal and Goal Malawi, has so far reached a cumulative population of 111,768 people with sanitation services through the construction of 649 latrines.

Nutrition

- UNICEF partners in Nsanje district screened 735 children for Severe Acute Malnutrition (SAM) in camps of which 18 were referred for appropriate treatment. In addition, 612 pregnant and breast feeding women received Infant and Young Child Feeding (IYCF) support and 39 of them were referred to supplementary feeding centres for nutrition support. Furthermore, trained health workers and volunteers have continued to monitor the implementation of the international code of breast milk substitutes with no specific reports of its violation.

- To ensure continued supply of lifesaving therapeutic food for the treatment of severe acute malnutrition, UNICEF delivered 7,773 cartons of RUTF, 256 cartons of F-75 therapeutic milk and 400 blankets to Community Management for Acute Malnutrition (CMAM) centres in all the affected districts.
- A cumulative total of 4,848 children (boys and girls) suffering from severe acute malnutrition have benefited from UNICEF supported CMAM program. Overall, treatment outcome indicators in therapeutic feeding centres are in consistent with SPHERE standards of >75% recovery rate and <10% mortality rate.

Health and HIV

- Nsanje district has been briefed on the Oral Cholera Vaccine and this will be followed by training of vaccinators and volunteers. The first round of the campaign is expected to be undertaken from 31 March until 3 April 2015. Plans are also under way to conduct a cholera case management training for health workers in the district.
- A Mozambique-Malawi cross-border meeting is due to take place on 25th March 2015 in Mwanza district in Mozambique with UNICEF participation.
- UNICEF has distributed IEC materials on breastfeeding, immunization, nutrition and cholera through Health Surveillance Assistants (HSAs) in camps in Mulanje district.
- There continue to be reports of women being denied Ante Natal Clinic (ANC) services without purchasing a health passport (mobile and static facilities), or being charged fees-for-service (CHAM facilities). This puts women at risk of not knowing their HIV status and, if HIV positive, not being given ARVs for prevention of mother-to-child transmission of HIV.
- In Zomba and Mangochi, Banja La Mtsogolo (BLM) has reached 1,566 clients with HIV and sexual and reproductive health services, including 324 new family planning clients. Due to increased mobility within the camps, BLM is now extending its outreach services to neighboring communities.
- To date, approximately 147,119 displaced persons have been reached with HIV-related messages delivered through multiple channels.

Protection

- The orientation of 36 Children's Corner (CC) facilitators in children's CC concept was completed during the week of 16-20th March 2015 by Blantyre Synod Health and Development Commission. Out of these, 20 orientation sessions were held Phalombe and 16 in Blantyre. These facilitators are currently providing services to children in camps and surrounding communities. A detailed emergency budget and implementation plan for April and May was agreed with Blantyre Synod to fast track implementation of activities in Phalombe, Blantyre and Thyolo districts.
- The monitoring of Community Based Child Care Centre (CBCC) caregivers and children's corner facilitators in 10 camps (5 in Nsanje & 5 in Blantyre) was completed through Save the Children with UNICEF's support. It was noted that the caregivers are utilizing the skills gained during the orientation on child protection. Deliberate efforts were also made to encourage referrals on cases as deemed necessary. The numbers of children attending CBCC and CC centres has increased following the distribution of supplies. In addition, an awareness raising session with over 100 women at Mota Engil camp in Nsanje was conducted by Save the Children as a preventive measure on allegations of sexual exploitation during the distribution relief items.
- A total of 800 posters with various child protection messages were produced by Save the Children with UNICEF's support including 38 banners and distribution is in progress. The banners have already been distributed to most camps except East bank. In addition, Save the Children followed up on the unaccompanied child who was transferred to Open Arms Children's Home in Blantyre. The child was reported to be in good condition and is being well taken care of. Food supplies, clothes and toiletries were provided to the child during the visit. Furthermore, Save the Children continues to follow up on

individual reported cases of children referred to them by the UNICEF focal points including 2 children at Mota Engil camp.

- Hearing of a sexual abuse case which Save the Children has been supporting was adjourned to 25th March 2015 and witnesses from the camp will be expected to attend. Save the Children with support from UNICEF will meet the costs of travel and accommodation from East Bank to Bangula while the District Social Welfare Office has committed to providing transport from Bangula to Nsanje and back to Bangula. UN Women is covering the costs of the pro-bono lawyer who will be joining the complainant.
- 23 children in five child headed households were identified at Sekwere Camp in Zomba and they have been referred to Emmanuel International for follow up. In addition, the camp committee has been advised to prioritize the distribution of supplies to these children.

Education

- 60 volunteer teachers that were recently trained have been deployed to schools in Mulanje, Phalombe, Chikwawa, Thyolo and Nsanje East Bank schools to provide psychosocial support and counseling of learners and collect and report data for real time monitoring. This brings the total number of volunteer teachers deployed to 174 covering 148 schools and 13 camps. The total reach of this education response is now 178,000 learners surpassing the initial target of 105,000.
- Volunteer teachers deployed to the Zomba are following up with implementing partners and District Education Managers to find out the cause of delays in the distribution of supplies to some 30 schools in the district that are reported to have not received education supplies .
- A second set of questionnaires for real time monitoring have been sent to the first set of 90 volunteers to provide detailed data on school facilities including WASH, school population and protection issues for learners. UNICEF is supporting the real time monitoring initiative.
- District Education Clusters in Chikwawa and Nsanje have sensitized IDP communities on return and resettlement procedures and stressed the importance of IDP participation in decision making and the voluntary nature for return and resettlement.

Communications for Development (C4D)

- With Support from UNICEF, Chancellor College Community Radio continued broadcasting two jingles on cholera (one on prevention and another on treatment) 3 times daily while Malawi Broadcasting Corporation continued broadcasting a 57 second Chichewa language jingle on sanitation, and 2 minute Chichewa language jingle on immunisation, which were broadcast 4 times daily each on MBC Radio 1 and MBC Radio 2. MBC aired a 30 minute programme on “people’s experience of the floods”. In addition, Chancellor College Community Radio is broadcasting 4 30 minute programmes, each covering the following topics: the role of health surveillance assistants (HSAs) in promoting safe motherhood; malnutrition; water treatment and hygiene; and stigma and discrimination towards children living with HIV in camps. Each programme was aired once.
- A special health promotion and communication taskforce has been set up as part of the rapid cholera response plan to contain and prevent further spread of cholera in Nsanje. The taskforce is led by Nsanje District Health Office and comprises of UNICEF, MSF, GOAL, and PSI.
- PSI conducted a total of about 387 IPC Sessions in Phalombe, Chikwawa and Nsanje, reaching out to a total number of 19,987 people (5,092 males; 10,006 females and 4,889 children). These included cluster sector areas of WASH (including Diarrhea, Dysentery, Cholera, TB), HIV & AIDS, Maternal Health, Child Protection, Immunisation, Malaria, Nutrition and Emergency Response.
- PSI recruited 5 remaining IPC Agents (IPCAs) in the East Bank and provided them with basic orientation to equip them to start working while awaiting thorough training and orientation. Information Education and Communication (IEC) materials were given to the IPCAs for distribution during their sessions.

Special mobilisation sessions on cholera and immunisations were conducted in 6 clusters in Makhanga in Nsanje district.

- PSI has delivered special mobilisation messages on Cholera and Immunisation in all the 13 camps of the Western Bank of the Shire River. Due to the increase in cholera cases, PSI has refocused its Targeted Outreach Communication (TOC) video shows in communities around Lurwe, Ching'oma, Nthondo, Misavu and Kanyimbi.
- Goal has conducted hygiene promotion sessions with the aid of print materials and public address systems in 14 camps in Chikwawa, and 8 camps in Nsanje. In Nsanje, GOAL has reached a total of 6,088 people.
- Pakachere continued holding drama sessions with communities in camps, dialogue sessions with adolescents, and interpersonal communication sessions with adults in the camps.
- UNICEF has procured radios to be distributed to radio listening clubs in camps. Distribution and efficient utilisation will however hinge on partners mobilising radio listening clubs. Contracts and disbursement of funds to these organisations need to be expedited and this is ongoing.

Funding

UNICEF Malawi is appealing for US\$ 9,291,292 to support the response to the January floods for an initial three months. A total of US\$ 2,001,219 has so far been received against the appeal and through discussion with donors in country, a total of US\$ 5,128,238 has been reallocated from existing resources. A funding gap of US\$ 2,594,067 still remains to support the flood response as of 18 March, 2015.

Funding Requirements (as defined in Humanitarian Appeal of 19/01/2015 for a period of 3 months)						
Appeal Sector	UNICEF Requirements	Cluster Requirements	Funds received against UNICEF appeal	UNICEF Funds reallocated*	UNICEF Funding gap	
					\$	%
Communication	329,000	Cross Sectoral	100,000	0	229,000	70%
Coordination and Logistics	470,000	8,465,277	351,980	57,619	60,401	13%
Child protection	891,000	3,771,043	284,645	223,221	383,134	43%
Education	1,870,000	5,748,874	442,641	699,030	728,509	39%
Nutrition	1,592,542	2,313,227	218,457	944,987	429,098	27%
Health	2,218,750	5,225,000	179,844.44	1,274,981	763,925	34%
WASH	1,800,000	3,615,413	423,832	1,800,400	0	0%
HIV	120,000	Under Health	0	128,000	0	0%
Total	9,291,292	29,138,834	2,001,219	5,128,238	2,594,067	28%

* 'Funds 'reallocated' does not include new contributions or pledges.

** The original response plan for HIV covered 3 districts while the response was later scaled up to 3 additional flood-affected districts, requiring an additional \$8000.

Next SitRep: 01 April 2015

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