**Malawi Monthly SitRep #2**  
**Reporting Period: February 2014**

**Highlights**

A rapid food security monitoring exercise conducted by the Malawi Vulnerability Assessment Committee (MVAC) towards the end of January 2014 dispelled earlier concerns that the food insecurity situation was deteriorating especially in areas that are not part of the current humanitarian aid response. The number of food insecure people remains at 1,894,782.

Army-worms attacks disrupt crop production in some parts of the country. A total of 10,903 ha reported destroyed in 16 districts. However, crop stand looking promising with a high likelihood of higher food crop production than last year.

As of 28th February 2014, a total of 10,727 households (53,635 people) affected by floods and storms since the onset of the rainy season in November 2013.

**Situation Overview & Humanitarian Needs**

**Food security**

A rapid food security monitoring exercise conducted by the Malawi Vulnerability Assessment Committee (MVAC) towards the end of January 2014 dispelled earlier concerns from some stakeholders and districts that the food insecurity situation was deteriorating especially in areas that are not part of the current humanitarian aid response. The monitoring exercise found that the food security situation was generally stable in the areas visited with no further adjustment to the number of food insecure people expected until the end of the consumption season in March 2014. The number of food insecure people remains at 1,894,782.

Humanitarian assistance led by Government of Malawi (GoM) in coordination with the World Food Program (WFP) and Non-Governmental Organizations (NGOs) is ongoing for the affected households. Affected households are being targeted with monthly food1 or cash transfers2.

**2013/14 Seasonal outlook**

Although effective planting rains started late in most parts of the country, the 2013/14 agricultural seasonal outlook appears to be promising with prospects for better harvest this year than last year, if the existing conducive weather conditions persist. Overall, average total rainfall amounts have been recorded in most parts of the country although below normal rainfall has been received in few localized areas.

In addition, armyworm attacks have been reported in 16 districts. As at 11th February 2014, a total of 10,903ha (crop area and bush) hectares were reported to have been destroyed by army worms. Out of this, 8,350ha was mostly under maize; 247 ha under millet and 277 ha under sorghum in Shire Valley Agricultural Development Division (ADD); and 2,553 ha under natural pastures was also affected by the armyworms. The worst affected districts have been Machinga, Balaka, Mulanje, Phalombe and Dedza (Golomoti) as most farmers had to replant following the armyworm attacks. Despite the armyworm outbreaks in all ADDs except Mzuzu and Karonga, the Ministry of Agriculture and Food security has indicated that generally the crop stand looks very promising and there is a high likelihood that food crop production will be higher than last year.

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1 1.6 million people  
2 155,000 people
**Floods and Storms**

A total of 10,727 households (53,635 people) were as of 28th February 2014 affected by floods and storms since the onset of the rainy season in November 2013. Of these, 3,208 households (16,040 people) in Mangochi, Nsanje, Salima districts were affected by floods. The rest were affected by wind and rain storms with varying levels of damage on their houses and household property. Government continues to provide relief assistance to the affected households mainly food items and plastic sheeting.

**Nutrition**

An analysis of Community Management of Acute malnutrition (CMAM) data for January 2014 compared to the same period in 2013 indicates that 18 out of 24 food insecure districts targeted with the current nutrition emergency response showed higher Outpatient Therapeutic Programme (OTP)\(^3\) new admissions in 2014 compared to 2013. Districts that showed increased admissions are Blantyre, Chikhwawa, Dedza, Karonga, Kasungu, Machinga, Mchinji, Mzimba, Ntcheu, Salima, Thyolo, Nsanje, Neno, Mangochi, Balaka, Ntchisi, Nkhotakota and Dowa. Higher admissions are attributed to active-case finding by recently trained community volunteers and the shift to new cut-off points for admission from 11cm to 11.5cm for Mid Upper Arm Circumference (new WHO growth standards) where more severely malnourished cases are identified. Scaling up of CMAM by opening of new OTP sites also contributed to higher admissions.

Nutrition Rehabilitation Unit (NRU)\(^4\) admissions were lower in most districts in 2014 for January as compared to same month last year except for 9 districts namely; Thyolo, Nsanje, Machinga, Rumphi, Ntchisi, Nkhotakota, Kasungu, Karonga and Dowa where higher admissions were recorded High NRU admissions are mainly as a result of late presentation to the CMAM program leading to severe acute malnutrition (SAM) with complications. Reduced NRU admissions in 14 out 24 districts may be an indication that OTP program is performing well (cure rate >75%, death rate <10% and defaulter rate (<15%)\(^5\) and that SAM cases are identified and treated in a timely manner before complications that necessitate admission into in patient care occur.

**UNICEF and partners programming**

**NUTRITION:** The 2013/14 Nutrition Response Plan targets food insecure districts with the following activities; nutrition assessments, partner coordination, nutrition screening, community mobilization and advocacy, management of severe and moderate acute malnutrition, revised CMAM guidelines and Rapid SMS trainings, supplies chain management, Vitamin A supplementation and deworming, protection of infant feeding and nutrition messaging.

In preparation for the Response intervention, one coordination meeting for the 2014 CMAM trainings was convened by MoH. A stakeholder meeting for CMAM supplies is planned for March 2014. All these meetings aimed at strengthening joint planning, implementation and monitoring for improved response coordination.

**CHILD PROTECTION:** UNICEF is supporting the Ministry of Gender Children and Social Welfare in the provision of early childhood services through Community Based Child Care Centres. In the 24 food insecure districts, these centres continue to provide psychosocial services to children including those affected by food insecurity. The capacity of 480 Community Based Child Care Centres will further be strengthened through orientation of caregivers and provision of supplies for these centres to provide better psychosocial

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\(^3\) Treats severely acute malnourished children with appetite and without medical complications, with ready-to-use therapeutic food (RUTF) and systematic medications

\(^4\) Provides inpatient care to severely acute malnourished children with complications until the patients are stabilised and suitable for OTP

\(^5\) Performance of the therapeutic feeding programme for management of SAM for the period of October to December 2013 ; cure rate 88.8%, death rate 2.9% and defaulter rate 4.9% (Refer to Table 1)
services. UNICEF is working with Centre for Human Rights and Rehabilitation and Blantyre Synod to reach out to those affected by food insecurity through these centres.

Apart from the psychosocial services provided in community based child care centres, UNICEF is also supporting the provision of protection services in community victim support units, police victim support units and one stop centres as part of the normal UNICEF program on protection of vulnerable groups.

**Interagency collaboration and Partnerships**

UNICEF actively participates in the Humanitarian Country Team (HCT) which ensures strategic and cross-sectoral coordination in humanitarian response. At its meeting of 25th February 2014, the HCT shared information on the current situation, reviewed progress in the humanitarian response and held discussions on resilience building efforts that are under way in the country.

**Next sitrep**

The next SitRep will be issued within the first week of April covering the month of March 2014.

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