



Kauma ORP team leader Enock Mwenyeidi assists two years ten months Evenes Mchacha at Kauma ORP in Lilongwe.

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for every child

# Humanitarian Situation Report No. 5

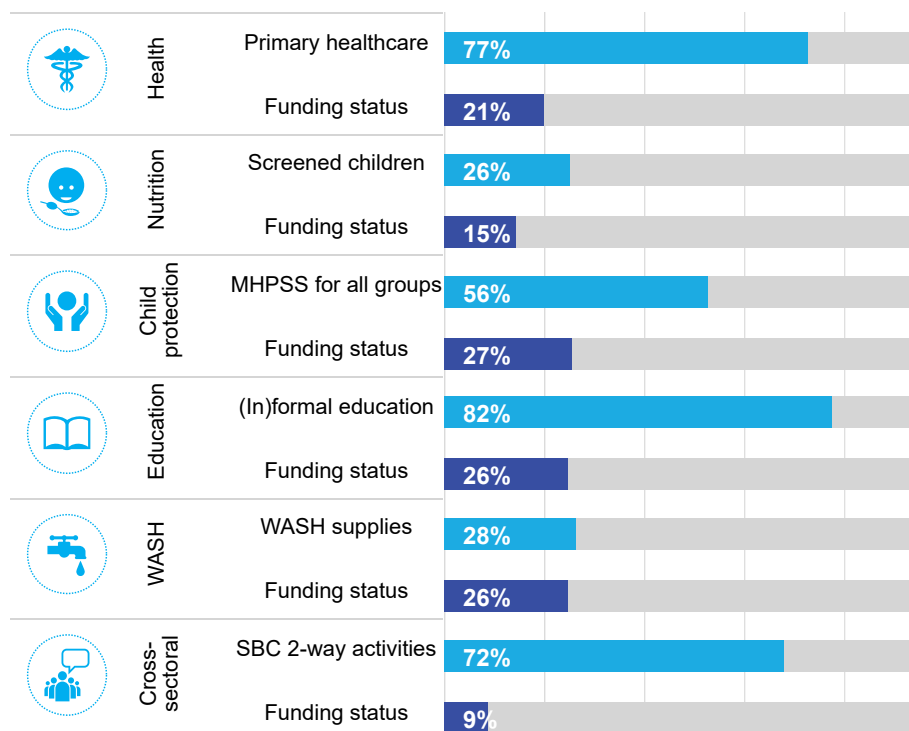
Reporting Period  
1 – 15 May 2023

## Malawi

### HIGHLIGHTS

- UNICEF amplified its Case Area Targeted Interventions (CATI) effort by launching 13 sessions in Blantyre's cholera hotspots, reaching 4,285 people. This dynamic approach delivers a comprehensive intervention package to cholera-stricken homes and surrounding high-risk areas, aiming to reduce transmission rates and curb the outbreak.
- In flood-affected districts of Nsanje, Phalombe, Mangochi, and Machinga, 28,724 adolescent girls aged between 10-19 years, from 57 schools, benefited from Iron Folic Acid supplements and dietary diversification education.
- The Government of Malawi has recently issued a 'Post Disaster Needs Assessment report, which was carried out to fully comprehend the effects and impact of Tropical Cyclone Freddy and to strategize recovery and resilience-building interventions. This report will guide recovery planning for UNICEF and other stakeholders.
- In collaboration with Save the Children and the District Health Offices (DHOs) in Nsanje and Chikwawa, 1,032 people received access to essential primary health care, nutrition, and psychosocial services through 10 integrated mobile clinics.

### UNICEF RESPONSE AND FUNDING STATUS\*



\* UNICEF response % is only for the indicator, the funding status is for the entire sector.

### SITUATION IN NUMBERS<sup>1</sup>



**5,900,000**  
People in need of humanitarian assistance



**2,950,000**  
Children in need of humanitarian assistance

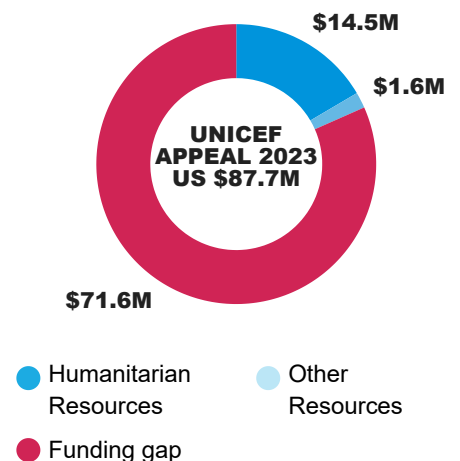


**659,278**  
Internally displaced people (IDPs)



**3,068,000**  
Women and girls in need of assistance

### FUNDING STATUS (IN US\$)\*\*



\*\* Funding available includes: funds received in the current year; carry-over from the previous year; and repurposed funds with agreement from donors

## FUNDING OVERVIEW AND PARTNERSHIPS

To support humanitarian action in 2023, UNICEF is appealing for US\$ 87,712,720 million. As of 16 May, UNICEF received US\$ 14,500,884 million against the Humanitarian Action for Children (HAC) appeal for 2023 and has reprogrammed US\$ 1,607,498, leaving a funding gap of US\$ 71,604,338 (82 per cent). UNICEF continues to engage with different donor partners for additional contributions and/or reprogramming existing grants to secure additional funds. This pursuit of additional funding is critical for extending UNICEF's reach and providing comprehensive, integrated support to foster children's survival, development, and well-being, along with enhancing their communities' resilience.

## SITUATION OVERVIEW AND HUMANITARIAN NEEDS



Christoph Jünger, Executive Director of the UNICEF National Committee in Austria, appreciates nutrition interventions Mukwala Village in Phalombe district

**Cholera cases:** The recent decline in the tally of new cholera cases and deaths continues, marked by a 0.4 per cent drop in cases and a 0.1 per cent reduction in deaths over the last two weeks. Nsanje district records the most significant share of new cases, accounting for almost 90 per cent; specifically, it registered 40 cases (37 per cent), followed by Chikwawa with 30 cases (28 per cent), and Blantyre with 23 cases (21 per cent). Meanwhile, Lilongwe and Mulanje recorded 9 and 5 cases, respectively.

As of 30 April, cholera has affected more than 16,000 children, culminating in 242 fatalities. The cumulative case fatality rate (CFR) remains at 3 per cent. However, there has been a notable decrease in the weekly CFR, dropping from 4.4 per cent in Epi-Week 17 (24 to 30 April) to 1.3 per cent in Epidemiological-Week 18 (1-7 May), according to the PHIM Cholera Weekly Update.

**Flood recovery plan and Funding requirements:** The Government of Malawi recently published a 'Post Disaster Needs Assessment' (PDNA) report, undertaken to gain comprehensive understanding of the aftermath and consequences of Tropical Cyclone (TC) Freddy, as well as to design recovery and resilience-building interventions. Working in collaboration with development partners, the Government conducted the PDNA in all 16 affected districts during the first two weeks of April.

According to the report, TC Freddy's overall impact on social,

economic, and infrastructure sectors amounts to roughly US\$ 506.7 million. This includes physical damage valued at US\$ 347.2 million and economic losses assessed at US\$ 159.5 million.

The water and sanitation infrastructure sector endured the second-highest damage at an estimated cost of US\$ 41.1 million. Simultaneously, total harm to the education subsector across all 16 affected local authorities is assessed at US\$ 42.1 million.

Leveraging these assessment findings, UNICEF will develop a recovery plan that will serve as the foundation for short, medium, and long-term recovery interventions in the WASH, Education, Nutrition, and Health sectors.

**Return and Resettlement of Internally Displaced Persons (IDPs):** With IDPs returning to their homes, as of 11 May, the count of reported IDP sites has shrunk to 177, down from the initial 747, with 53 still remaining at schools. According to the shelter cluster, 32 camps are expected to stay active for a few more weeks. In the meantime, inhabitants of 18 sites require resettlement to new locations, as their original villages have been rendered uninhabitable by the floods.

## SUMMARY ANALYSIS OF PROGRAMME RESPONSE

### Health and HIV/AIDS



Mobile van announcement at the marketplace about symptoms of cholera and seeing the timely treatment at the Cholera treatment center in Mangochi district.

**Provision of Primary Health Care:** A total of 1,032 individuals (364 males, 668 females) have received essential primary health care, nutrition, and psychosocial support services through ten integrated mobile clinics. These clinics are supported by Save the Children, in collaboration with District Health Offices (DHOs) in Nsanje and Chikwawa. Of the 1,032 individuals, 343 (99 males, 244 females) were children under five, and 140 were pregnant or lactating mothers.

With these mobile clinics, 74 infants under one year of age received vaccinations against various antigens. Additionally, 124 people, including 16 children under five, were diagnosed and treated for malaria. Furthermore, 56 individuals were treated for suspected acute watery diarrhea, 20 of whom were under five. As part of these services, 93 children under five were screened for malnutrition; three of them were found to be moderately malnourished and were referred to the health facility for additional support.

**HIV Prevention Interventions:** A total of 4,693 individuals have



received vital information on how and where to access interventions for HIV prevention, care, and treatment in Mulanje and Chiradzulu, thanks to UNICEF's partner, Mothers to Mothers. This figure comprises 2,623 adolescents and 2,070 women in different stages of pregnancy (1,090 post-natal and 980 ante-natal) who were identified as vulnerable and provided with appropriate assistance.

From the clients assisted, 142 ante-natal and 224 post-natal women were identified as HIV positive and subsequently linked to care. Additionally, 72 clients were referred for other services.<sup>2</sup>

**CATI Approach and WASH interventions:** UNICEF has trained 101 health workers on the Case Area Targeted Interventions (CATI) approach for cholera control in Blantyre, Chikwawa and Nsanje districts, in partnership with WHO and District Health Offices. The trained health workers have implemented CATI interventions in nine villages, targeting households with reported cholera cases. Along with these households, an additional 369 nearby households received the CATI package of interventions. This package comprised chlorine, buckets for water collection and storage, soap for handwashing, and messages on cholera prevention.

**Oral Rehydration Points:** UNICEF, through its partnership with the Malawi Red Cross Society (MRCS), has contributed to the training of 32 volunteers, including 8 Health Surveillance Assistants (HSAs), followed by the establishment of four (4) Oral Rehydration Points (ORPs)<sup>3</sup>. During the reporting period, 102 people benefitted from the ORP, which treats mild to moderate cases of diarrhea.

**Life Saving Supplies:** UNICEF distributed lifesaving supplies such as Acute Watery Diarrhea kits, intravenous fluids and oral rehydration solutions to flood-affected districts,<sup>4</sup> ensuring last-mile delivery to health facilities and Cholera Treatment Units (CTUs) and benefiting over 3,400 people. The health care workers were provided with infection prevention and control supplies like gumboots, aprons, and gloves.

## Nutrition



Sellina Banda, a 2-year-old girl treated for Cholera and SAM comorbidity at Pirimiti Nutrition Rehabilitation Unit-NRU in Zomba.

**Malnutrition screening in children:** Over the past two weeks, 140,307 children (62,298 males and 78,009 females) under the age of five underwent screening for acute malnutrition. Of them, 2,132 children (1.5% of the screened group) were found to be malnourished and subsequently referred to the nearest health facilities for further treatment. Of the referred group, 522 children (263 males and 259 females) were diagnosed with severe acute malnutrition (SAM), representing less than one per cent, while 1,610 children (782 males and 828 females) had moderate acute malnutrition.

As of 15 May, a total of 573,259 children (260,770 males and 312,489 females) under five have been screened for acute malnutrition. This resulted in the admission of 2,849 children (1,368 males and 1,481 females) for SAM treatment during the reporting period. This brings the cumulative total to 13,650 children (6,553 males and 7,097 females) admitted for SAM treatment among the under-five population. The performance indicators (94 per cent recovery, 1.6 per cent death rate and 2.9 per cent default rate) were all within the acceptable sphere standards (recovery of greater 75%, death below 10% and default below 15%).

**Caregivers' Counselling Sessions:** During the same two-week period, 37,497 caregivers (3,779 males and 33,718 females) of children aged 0-23 months received counselling on Infant and Young Child Feeding (IYCF) to foster optimal child feeding practices. This was achieved through care group sessions, one-on-one counselling at health facilities, growth monitoring and promotion sessions, as well as mass screenings in communities affected by cholera and floods.

In the Thyolo district, local leaders engaged in initiatives designed to promote the adoption of optimal nutrition, cholera prevention measures, and proactive health-seeking behaviours. UNICEF also continued its efforts to foster optimal nutrition and hygiene practices through the broadcasting of radio jingles on community radios, and the dissemination of messages via mobile vans.

From January 2023 to the present, a cumulative total of 260,821 caregivers (14,237 males and 246,584 females), equivalent to 42 per cent of the target or 607,877 caregivers, have been reached with IYCF messages in the affected districts.

**Supply Distribution:** UNICEF has distributed 1,788,219 Iron Folic Acid supplement tablets and 248,081 Albendazole tablets, with the aim of reaching 79,642 girls aged 10-19 years across 150 schools in seven districts. To date, 30,425 adolescent girls have benefitted from the Iron Folic Acid supplements and received messages about dietary diversity and iron-rich foods, designed to reduce anemia susceptibility. This represents a reach of 38 per cent of the expected 79,642 girls. Of the total number reached, 28,724 adolescent girls from 57 schools in Nsanje, Phalombe, Mangochi, and Machinga districts were served during the reporting week.

## Child protection, GBViE and PSEA



Community policing secretary supporting on community counselling and carrying 3-year-old Maria Ganiza at Jombo Primary School in Chikwawa district

**Supplies in hard-to-reach areas:** UNICEF arranged for the aerial delivery of supplies to inaccessible areas previously unserved,

allowing 18,000 people in Mulanje, Phalombe, Zomba, Nsanje, and Chikwawa to receive clothing donated by the Government of Zimbabwe.

**Personal and mass media awareness:** Through its partnership with the Development Broadcasting Unit of the Malawi Broadcasting Corporation, UNICEF has reached a total of 704,648 people with messages on protection from sexual exploitation and abuse (PSEA), the importance of returning to school, and the prevention of child marriages and violence against children in general. This was achieved through video shows conducted in four Traditional Authorities in Blantyre. Furthermore, 354 radio slots were aired on national radio (MBC Radio 1 and 2) as well as Mzati and Nyathepa Community Radios, covering all districts affected by Tropical Cyclone Freddy.

**Re-uniting Families:** Progress is being made in family tracing and reunification efforts for the 31 unaccompanied and separated children. Currently, six of these children have been identified as ready for family reunification.

## Education



Learners receiving Iron Folic Acid tablets (IFA) at Tafika Primary School in Blantyre district.

**Capacity Building of Teachers:** In partnership with the MRCS, 243 teachers have been trained on cholera infection, prevention, and management across 121 schools in Blantyre, Chikwawa, Chiradzulu, Mulanje, Phalombe, and Thyolo districts, benefiting 167,379 learners (85,081 males and 82,298 females). This initiative is part of the UNICEF supported 'Back-to-School' campaign, targeting 300 teachers in 250 schools.

**Provision of Iron Folic Acid and Nutrition Awareness in schools:** A total of 28,724 adolescent girls aged between 10-19 years from 57 schools across the Nsanje, Phalombe, Mangochi, and Machinga districts,<sup>5</sup> have received Iron Folic Acid supplements along with nutrition messages emphasizing dietary diversification. Additionally, 30,425 adolescent girls from four flood-affected districts<sup>5</sup> have benefited from similar initiatives till date. These efforts are part of the back-to-school campaign aimed at reducing susceptibility to anemia by promoting dietary diversity and consumption of iron-rich foods. The girls not only received Iron Folic Acid supplements, but also benefited from important nutrition education.

**Provision of Mental Health and Psychosocial Support (MHPSS) to learners:** A total of 539 (317 females and 222 males) primary school learners from 27 schools in the Chiradzulu district have been provided with Mental Health and Psychosocial services as part of the Back-To-School campaign. This is done in collaboration with our Child Protection colleagues.

## Water, sanitation and hygiene



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15-year-old Thewile Linkson is seen washing her hands at Jombo Primary School in Chikwawa southern Malawi

Water, Sanitation, and Hygiene (WASH) activities have continued to focus on utilizing water treatment supplies, providing additional resources, CATI (Case Area Targeted Intervention) for cholera control, and disseminating messages related to safe WASH behaviors. The following results have been achieved over the past two weeks:

**Access to safe water and sanitation:** Safe drinking water has been provided to 67,731 individuals (34,543 females and 33,188 males) in Cholera and flood-affected districts through household water chlorination. This effort has brought the cumulative total to 1,424,831 people who have received such services. Additionally, WASH supplies were distributed to 157,663 individuals (80,408 females and 77,255 males) in similarly affected districts, raising the total of supported people to 1,800,269. Sanitation services have reached 812 individuals (414 females and 398 males) living in IDP sites, making it a cumulative total of 111,729 people served.

**Awareness Sessions on Sanitation and Hygiene:** In cholera hotspot areas in Blantyre,<sup>6</sup> 13 new CATI sessions were carried out, benefitting 4,285 individuals (2,421 females and 1,684 males). In a collaborative effort, UNICEF, MRCS, and the Blantyre District Health Office conducted follow-up CATI exercises. These exercises covered 11 households affected by Cholera, extending their reach to 250 nearby households, which amounts to approximately 1,250 people.

**Capacity Building:** During the reported period, training on the CATI approach was conducted for 91 Facility Rapid Response Team (FRRT) members across Chikwawa (40), Nsanje (41), and Ntcheu (10) districts. These FRRT members are expected to carry out community sessions in their respective health facility catchment areas in the following week. To bolster cholera control measures and foster a healthier environment, 40 local market committee members in Neno, including 11 females and 29 males, were oriented on cholera prevention and messaging. This initiative was undertaken by the MRCS in collaboration with the District Health Office, further strengthening the response to the cholera outbreak.

In 2023, UNICEF has effectively trained 850 health workers on the CATI approach. This training initiative has culminated in the execution of 510 CATI community sessions, positively impacting around 1,530 cholera-affected households or approximately 6,120 individuals.



## Social Policy - Cash-based Programming

The Government of Malawi has finalized an Early Recovery proposal in response to the floods, which is now seeking US\$12 million in financial support from development partners. The plan aims to expand cash transfers to 78,601 households. The rollout of this project is expected to commence between July and September 2023, with preparations set to start as soon as donor commitments are secured. UNICEF, having supported the preparation of the proposal, will remain closely involved in the planning and implementation phases.

For the 2022/23 Lean Season Response, which addresses food insecurity, final payments have been processed for 20,921 households in Blantyre and Zomba districts. These disbursements will soon be followed by payments to another 24,688 households in Lilongwe and Mzuzu districts within the week. Once 2022/23 Lean Season ends, a post-distribution monitoring survey is expected to be conducted around June or July.

## Social and Behaviour Change (SBC), Accountability to Affected Populations (AAP) and Localization



As a part of accountability to the affected population, volunteers collect community feedback on WASH and Health services provided in their village in the Mangochi district.

**Community Feedback:** UNICEF has trained and supported 1,500 volunteers from nine districts impacted by TC Freddy and Cholera, focusing on collecting community feedback.

During this initiative, 6,324 questions, concerns, and instances of misinformation related to Cholera and flooding were gathered across 15 districts. The community primarily expressed concerns about inadequate supplies such as chlorine, an inability to purchase soap due to poverty, damage to latrines, and the inability to make necessary repairs. This feedback is being disseminated to relevant district and national stakeholders to inform appropriate responses and actions.

**Community engagement:** In the districts of Balaka, Machinga, and Mangochi, 1,210 community influencers have participated in interactive dialogue sessions. These discussions centered on the role of leaders and the actions necessary to halt the spread of Cholera. Following these sessions, participants developed action plans to engage with their community members. Additionally, as part of the CATI rollout in cholera hotspot areas like Blantyre, Nsanje, and Chikwawa, 22 community dialogue sessions have been

conducted, reaching approximately 14,000 people.

**Risk Communication Messaging:** in collaboration with the Blantyre District Health Office and WHO, UNICEF facilitated cholera prevention activities at the school level. These efforts involved various school structures, including parent-teacher associations (PTAs), mother groups, and school management committees. The activities emphasized improved WASH practices as part of back-to-school cholera prevention interventions. These activities have directly reached 1,049,729 people through risk communication activities promoting safe hygiene behavior in flood and cholera-affected areas. This two-way dialogue engagement included community dramas followed by focus group discussions and interpersonal communication.

## HUMANITARIAN LEADERSHIP, COORDINATION AND STRATEGY



SBC Specialist orienting around 20 CSO partners on emergency response and coordination in Blantyre.

**Four Key Sectors Coordinated by UNICEF:** UNICEF continues to provide an integrated and coordinated response to the ongoing cholera outbreak and flood relief efforts, supporting the Government across a wide range of sectors. These include Health, Water, Sanitation, and Hygiene (WASH), Nutrition, Child Protection, Risk Communication and Community Engagement (RCCE), and Supply and Logistics interventions. This comprehensive response strategy is coordinated across 11 sectors. UNICEF is playing a central role by co-leading four sectors - WASH, Nutrition, Education, and Protection - and making a significant contribution to the Health cluster and the RCCE pillar. The Department of Disaster Management Affairs facilitates coordination among these sectors via the inter-cluster coordination group.

The Presidential Task Force on COVID-19 and Cholera continue to orchestrate the cholera response efforts. This task force regularly issues daily situation reports to inform the public about cholera developments and provides advisories to the Nation. On a technical level, the Cholera Incident Management Team (CIMT), led by the Ministry of Health through the Public Health Institute of Malawi and backed by various partners across the critical pillars of the cholera response, convenes every Tuesday and Friday. The World Health Organization serves as the co-chair of this team. UNICEF participates in the CIMT meeting.

During the reporting period, UNICEF continued to produce multimedia content and stories and pitched them to media outlets to highlight the impact of Tropical Cyclone Freddy, Cholera, and UNICEF's response (see links below). The Nation, the Times, and the Montfort Media published six news stories highlighting UNICEF's support to the emergency response. Additionally, as part of the 'Back-to-School' campaign, UNICEF finalized two campaign videos featuring influencers encouraging children affected by Cyclone Freddy to return to school. UNICEF Malawi also organized a field mission with UNICEF Austria from May 1 to 5 in Blantyre, Chikwawa, and Phalombe districts to collect content for fundraising efforts, including emergencies.

During the reporting period, UNICEF Malawi's social media pages reached 52 million people, generated 77,000 reactions (engagement), and created 51,000 impressions on emergency-related content. The following stories and videos were published during the reporting period:

- Shielding cyclone survivors from waterborne diseases  
<https://www.unicef.org/malawi/stories/shielding-cyclone-survivors-waterborne-disease>
- Rebuilding lives after Cyclone Freddy's devastation  
<https://www.unicef.org/malawi/stories/rebuilding-lives-after-cyclone-freddys-devastation-0>
- Displaced but not forgotten  
<https://www.unicef.org/malawi/stories/displaced-not-forgotten>
- Video: Mobile clinics to support Cyclone Freddy survivor  
<https://www.youtube.com/watch?v=a9U99GlckKw>
- Video: Child protection services to help children affected by Cyclone Freddy  
[https://www.youtube.com/watch?v=rQQC\\_nZEAy](https://www.youtube.com/watch?v=rQQC_nZEAy)
- Video: Back to School Campaign featuring Malawian influencers  
<https://web.facebook.com/watch/?v=617645513620779>
- Video: Back to School Campaign featuring celebrity influencer  
<https://web.facebook.com/watch/?v=765898635089356>

## HAC APPEALS AND SITREPS

- Malawi Appeals  
[www.unicef.org/appeals/malawi](http://www.unicef.org/appeals/malawi)
- All Humanitarian Action for Children Appeals  
<https://www.unicef.org/appeals>
- All Situation Reports  
<https://www.unicef.org/appeals/situation-reports>

## ANNEX A SUMMARY OF PROGRAMME RESULTS

Sector			UNICEF and IPs response		
Indicator	Disaggregation	Total needs	2023 targets	Total results	Progress
<b>Health</b>					
Children and women accessing primary healthcare in UNICEF-supported facilities	Total	-	800,000	613,770	<span>▲ 9%</span>
Healthcare workers trained in case management, infection prevention and control, and water and sanitation for health facility improvement (WASHFIT)	Total	-	14,000	11,626	<span>▲ 7</span> <span>0%</span>
Children and adults accessing treatment for cholera in cholera treatment units provided with UNICEF supplies	Total	-	36,000	21,788	<span>▲ 10%</span>
Adolescents who have appropriate and life-saving information on how and where to access interventions on HIV prevention, care and treatment	Total	-	31,900	5,463	<span>▲ 13%</span>
<b>Nutrition</b>					
Children 6-59 months with severe wasting admitted for treatment	Total	-	62,067	13,650	<span>▲ 5%</span>
Children 6-59 months screened for wasting	Total	-	2.2 million	573,259	<span>▲ 6%</span>
Primary caregivers of children 0-23 months receiving infant and young child feeding counselling	Total	-	607,877	260,821	<span>▲ 6%</span>
Adolescent girls 10-19 years old receiving iron/folic acid supplementation	Total	-	79,642	30,425	<span>▲ 36%</span>
<b>Child protection, GBVIE and PSEA</b>					
Children, adolescents and caregivers accessing community-based mental health and psychosocial support	Total	-	1.4 million	793,793	<span>▲ 13%</span>
Women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions	Total	-	341,638	38,293	<span>▲ 10%</span>
People with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations	Total	-	6.5 million	1.7 million	<span>▲ 12%</span>
Children who have received individual case management	Total	-	181,863	845	<span>0%</span>
<b>Education</b>					
Children accessing formal or non-formal education, including early learning	Total	-	550,000	450,599	<span>▲ 8</span> <span>0%</span>
Children receiving individual learning materials	Total	-	150,000	9,180	<span>▲ 6%</span>
Children accessing mental health and psychosocial support in their schools/learning programmes	Total	-	20,000	6,769	<span>▲ 34%</span>
Schools implementing safe school protocols (infection prevention and control)	Total	-	500	386	<span>0%</span>
<b>Water, sanitation and hygiene</b>					
People accessing a sufficient quantity and quality of water for drinking and domestic needs	Total	-	3.3 million	1.4 million	<span>▲ 2%</span>

Sector			UNICEF and IPs response		
Indicator	Disaggregation	Total needs	2023 targets	Total results	Progress
People accessing appropriate sanitation services	Total	-	450,000	111,729	0%
People reached with critical WASH supplies	Total	-	6.5 million	1.8 million	▲ 2%
Learning facilities and safe spaces reached with basic WASH services	Total	-	350	150	▲ 43%
<b>Social protection</b>					
Households benefitting from new or additional social assistance (cash/in kind) measures from governments with UNICEF-technical assistance support	Total	-	244,444	143,636	▲ 59%
Households reached with UNICEF-funded humanitarian cash transfers across sectors	Total	-	24,222	-	0%
<b>Cross-sectoral (HCT, C4D, RCCE and AAP)</b>					
People reached through messaging on prevention and access to services	Total	-	9.7 million	7 million	▲ 11%
Women's rights, adolescent girls and youth groups that have been consulted and/or participated in all phases of the programme cycle	Total	-	30	-	0%
People sharing their concerns and asking questions through established feedback mechanisms	Total	-	777,600	171,103	▲ 18%



## ANNEX B FUNDING STATUS

Sector	Requirements	Funding available			Funding gap	
		Humanitarian resources received in 2023	Other resources used in 2023	Resources available from 2022 (carry over)	Funding gap (US\$)	Funding gap (%)
<b>Health</b>	12,012,754	1,842,829	704,941	-	9,464,984	79%
<b>Nutrition</b>	8,181,969	605,000	624,016	-	6,952,953	85%
<b>Child protection, GBViE and PSEA</b>	3,242,592	882,703	-	-	2,359,889	73%
<b>Education</b>	2,997,648	566,896	223,852	-	2,206,900	74%
<b>Water, sanitation and hygiene</b>	31,842,720 <sup>9</sup>	8,379,940	54,688	-	23,408,092	74%
<b>Social protection</b>	5,435,424	50,000	-	-	5,385,424	99%
<b>Cross-sectoral (HCT, SBC, RCCE and AAP)<sup>10</sup></b>	23,999,613	2,173,515	-	-	21,826,098	91%
<b>Total</b>	<b>87,712,720</b>	<b>14,500,883</b>	<b>1,607,497</b>	<b>0</b>	<b>71,604,340</b>	<b>82%</b>

\*repurposed other resources with agreement from donors

### Who to contact for further information:

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## ENDNOTES

1. Malawi Cholera and Floods Flash Appeal 2023, Source: <https://humanitarianaction.info/plan/1151>
2. 2 mental health issues, 20 HIV exposed children and the rest (50) growth monitoring and immunizations.
3. Mwima and Namanolo in Balaka district, Mwananjobvu and Machacha in Chikwawa district bordering Nsanje.
4. Zomba, Chiradzulu, Nsanje, Phalombe, Blantyre and Chikwawa districts.
5. 8 schools in Mangochi, 9 schools in Nsanje, 29 schools Phalombe, and 11 schools in Machinga.
6. Ndirande, South Lunzu, Nyambadwe, Machinjiri and Makhetha.
7. UNICEF is currently awaiting the delivery of a training report from the MRCS. However, at the time of publication of this SitRep, they had yet to share this document.
8. There has been no change in the results for this indicator largely due to the fact that we have not distributed materials for the past two weeks. We are currently waiting for materials that we are procuring from offshore sources. Once received, these materials will be distributed as part of our ongoing Back-to-School (B2S) campaign.
9. The WASH budget has increased significantly due to the extent of infrastructure damage caused by the flooding. The people targeted for WASH increased slightly, because most people were already targeted in the previous response.
10. The MCO HAC is gender transformative addressing health, WASH, education gender needs as well as knowledge, attitudes and practices with gender transformative budget contribution. This budget includes US\$13.2 million for SBC/RCCE/accountability to affected populations, US\$250,000 for communication, US\$1 million for coordination, and US\$2.4 million for preparedness and resilience building.