Malawi

HIGHLIGHTS

• While new Cholera cases have decreased, 118 cases were reported in June in some districts. In October 2023, a new rainy season will require enhanced steps to end the outbreak and avoid future Cholera outbreaks.

• UNICEF is supporting the construction of 29 water schemes and five boreholes in flood-prone districts. The boreholes will give 14,000 people clean water. UNICEF cannot reach 1.3 million people in urgent need of safe water without more funding to repair and rebuild damaged water facilities.

• 22,473 people have accessed essential health services through 16 mobile clinics operated by UNICEF partners in three flood affected districts. Currently, 16 health facilities are still non-functional as they were completely damaged by floods from Tropical Cyclone Freddy.

• 687,789 flood-affected school children returned to school with UNICEF support. The back-to-school initiative will expand to 100 more schools when schools reopen in September 2023.

UNICEF RESPONSE AND FUNDING STATUS*

<table>
<thead>
<tr>
<th>Sector</th>
<th>UNICEF Response %</th>
<th>Funding Status (US$)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Cholera treatment</td>
<td>85%</td>
<td>$18.1M</td>
</tr>
<tr>
<td>Nutrition Wasting admissions</td>
<td>27%</td>
<td>$1.6M</td>
</tr>
<tr>
<td>Child protection Community based MHPSS</td>
<td>59%</td>
<td>$68.1M</td>
</tr>
<tr>
<td>Education Learning materials</td>
<td>6%</td>
<td></td>
</tr>
<tr>
<td>WASH Access to safe water</td>
<td>45%</td>
<td></td>
</tr>
<tr>
<td>Cross-sectoral Messages on services</td>
<td>85%</td>
<td></td>
</tr>
</tbody>
</table>

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

SITUATION IN NUMBERS

- 2,950,000 Children in need of humanitarian assistance
- 5,900,000 People in need of humanitarian assistance
- 3,068,000 Women and girls in need of assistance

FUNDING STATUS (IN US$)**

- $18.1M Humanitarian Resources
- $1.6M Other Resources
- $68.1M Funding gap

** Funding available includes: funds received in the current year; carry-over from the previous year; and repurposed funds with agreement from donors.
UNICEF Malawi requested US$ 87.7 million through the 2023 Malawi Humanitarian Action for Children (HAC) appeal to provide lifesaving assistance to children and women in Malawi. As of midyear, UNICEF Malawi has secured US$ 18.1 million through generous contributions from USAID, European Civil Protection and Humanitarian Aid Operations (ECHO), Global Humanitarian Thematic Fund, Government of Korea, Bill and Melinda Gates Foundation, Latter-day Saint Charities (LDSC), USAID’s Bureau for Humanitarian Assistance (BHA), the Swedish International Development Coordination Agency (SIDA), the government of Norway, CANADA, SWISS National committee for UNICEF, Irish Aid, UK Foreign, Commonwealth & Development Office (FCDO), Government of Japan, Government of Korea and the United Nations Central Emergency Response Fund (CERF). UNICEF sincerely thanks all public and private donors for the contributions received. A funding gap of US$ 68.1 million (78 percent) remains after including an amount of US$ 1.7 million, which UNICEF has reallocated from regular resources to meet critical needs. An internal Emergency Programme Fund (EPF) loan of US$ 2.5 million has also been obtained. Malawi urgently requires additional flexible multi-year funding to deliver integrated packages of support for children’s survival, protection, and education in the context of the multiple shocks that the country is facing, while improving community resilience for better preparedness in addressing increasingly frequent and severe emergency-related events in the future.

SITUATION OVERVIEW AND HUMANITARIAN NEEDS

Malawi is still grappling to contain a Cholera outbreak that was declared on March 3, 2022. With the assistance of UNICEF and its partners, Cholera cases have reduced significantly. Still, new cases are being reported. Malawi reported a total of 118 new cases in June, 39 of which were confirmed by culture and sensitivity testing and 79 by Rapid Diagnostic Tests (RDTs). As of the 30th of June, there have been 58,912 cases of Cholera since the outbreak began, with 1,763 fatalities. The cumulative case fatality rate (CFR) has decreased from its initial value of 3.2 percent to 2.99 percent, but remains above the WHO threshold of 1 percent.

In March 2023, Malawi was severely impacted by Tropical Cyclone Freddy, which displaced 659,278 people, injured 2,186, killed 679, and left 537 individuals unaccounted for. In light of the devastation caused by the floods, on 13 March 2023 the government of Malawi declared a state of calamity in the 16 local governments of the Southern Region. As of 19 June, 49 active internally displaced persons (IDP) sites housed 82,181 individuals. At least 25 communities were identified as requiring relocation, whereas 11 were identified as requiring longer-term support in their current locations. UNICEF will continue to provide integrated lifesaving services to those still in IDP sites and to those who have returned to their homes, while also investing in medium- and long-term interventions to support strengthening of preparedness, restoration and recovery efforts, with better rebuilding as a central consideration in the design of medium- and long-term programs.

In the first three months of the year, the country responded to the needs of an estimated 3.8 million people who were food insecure and required humanitarian assistance in 21 of the country’s 29 districts due to low levels of food production caused by multiple shocks, such as tropical cyclones and inflation. Due to low agricultural productivity during the 2022/23 season, high food and non-food commodity prices, and the disruption of livelihoods caused by the effects of Tropical Cyclone Freddy, the majority of southern Malawi’s districts are anticipated to experience crisis food security outcomes until January 2024. During the forthcoming crop-growing season (October 2023 to March 2024), Malawi will likely experience El Niño-induced dry weather. If it prevails, El Niño will have a devastating effect on the population, whose coping capacities have already been severely undermined by multiple shocks in 2023 and the years prior.

SUMMARY ANALYSIS OF PROGRAMME RESPONSE

Health

Since the beginning of the year, 797,595 children and women have accessed primary health care in UNICEF-supported health facilities, with 22,473 accessing services through 16 mobile clinics operated by UNICEF partners, including Save the Children, Mothers to Mothers, and Partners in Health. The majority of beneficiaries were 11,462 children, with prevalent conditions including malaria, upper respiratory tract infections, musculoskeletal conditions, and acute watery diarrhea. Although the UNICEF target of 800,000 is almost fully achieved, the needs remain high considering that the target for the health Sector is more than 2.2 million.

UNICEF also supported interventions to ensure continuity of HIV care to clients in the areas affected by the Tropical Cyclone Freddy, reaching 11,105 people, including 3,906 children and 7,199 adults. Out of these, 3,842 people were brought back to HIV care after they lost their health profiles. About 7,199 people (1918 men 5281 women) have benefited from the HIV services, with 3,842 defaulting on treatment. Support was provided to defaulters to resume antiretroviral therapy (ART) and provide vital information on how and where to access interventions for HIV prevention, care, and treatment.

As part of Cholera control efforts, UNICEF set up and operationalized 39 Oral Rehydration Points (ORPs) in Cholera hotspot areas from which 5,246 persons with mild to moderate Cholera received care. These ORPs were operated by the Malawi Red Cross Society (MRCOS) and Save the Children, helping to identify and treat mild cases and facilitate the timely referral of moderate to severe cases to Cholera treatment centers/units. UNICEF also provided technical and financial support to the national integrated COVID-19 and Cholera campaign Tithete Kolela (End
Cholera), which started in March 2023.

Water, sanitation and hygiene

Since the beginning of the year, 1.5 million people, representing 45 per cent of UNICEF target of 3.3 million, have received safe water through UNICEF supported interventions implemented by UNICEF partners, including the Hygiene Village Project (HVP) and United Purpose (UP). These interventions include rehabilitation and disinfection of boreholes, water quality testing, and household-level water treatment in flood and Cholera-affected districts. UNICEF has rehabilitated 112 boreholes, benefiting 270,250 people. Additionally, UNICEF partners conducted 3,138 water quality monitoring tests at households and water points using bacteriological test kits.

In addition, 1.25 million people, including 612,500 children, in 14 districts have benefited from mass household water treatment conducted at IDP sites and affected villages. UNICEF also provided supplies for water treatment at household level and buckets for water collection and storage. Construction of 29 water schemes and five boreholes in affected districts is underway in five districts, which altogether will reach 14,000 people when completed.

The cyclone has disrupted access to safe water for over 1.3 million people, with 900,000 people requiring urgent services. Without additional resources, UNICEF will not be able to scale up the rehabilitation and reconstruction of damaged water facilities.

UNICEF also facilitated access to improved sanitation and hygiene by providing supplies such as bars of soap for hand washing, tarpaulins for temporary latrines and bath shelters, temporary latrine super structures, and squatting plates. Overall, 1.9 million people have benefited from these supplies by the end of June, against a UNICEF target of 6.5 million people.

As part of Cholera control efforts, UNICEF supported the implementation of case area targeted interventions (CATI) in areas identified as Cholera hotspots. The CATI approach aims to reduce the risk of Cholera infection in affected households and surrounding areas. By the end of June, these exercises covered 128 Cholera-affected households and up to 2,569 nearby households, reaching approximately 12,137 people. UNICEF trained health workers in the targeted districts and 15,000 local market committee members in 10 districts were sensitized on Cholera prevention and messaging, further strengthening the response to the Cholera outbreak.

Cross-sectoral (HCT, C4D, RCCE and AAP)

UNICEF has reached 8.3 million people in flood and Cholera-affected areas through various communication channels, including radio, television, social media, SMS, and interactive voice response. Around 50% of the 8.3 million people were reached through two-way dialogues, community cinema, focus group counseling, and door-to-door sessions. UNICEF also engaged with community leaders, faith leaders, and youths to encourage positive behaviors and practices in the fight against Polio and Cholera, and protection of children’s rights.

To address rumors and misinformation, UNICEF collaborated with faith-based leaders to raise awareness and promote the use of chlorine and soap, as well as the uptake of COVID-19, Polio, and oral Cholera vaccines. UNICEF leveraged its existing network of 300,000 U-Reporters across 10 districts, providing them with information on Cholera, the Polio campaign, and the back-to-school initiative.

UNICEF supported a social and behavioral change (SBC) assessment in 11 flood-affected districts to assess the status and existing bottlenecks for communities to adopt healthy practices and gather community feedback. Two rounds of rapid qualitative assessments were conducted to understand the determinants of delays in seeking treatment at Cholera treatment centers (CTCs), uptake of Cholera vaccine, and integration with COVID-19 vaccination.

UNICEF conducted two rounds of U-Report polls to understand the behavioral determinants of back-to-school efforts and vaccine uptake during the integrated "measles-rubella, Polio, typhoid conjugate vaccine, and vitamin A" campaign. The findings were shared with stakeholders to adjust back-to-school interventions and inform the upcoming Polio campaign.

UNICEF, in collaboration with the Health Education Services Unit of the Ministry of Health and inter-agency collective services, established an inter-agency community feedback mechanism to address risk communication and community engagement in response to floods and Cholera emergencies. The feedback highlighted key issues, such as unavailability of soap and chlorine, lack of funds and skills for constructing sustainable latrines, difficulties in finding suitable land for latrines, lack of access to safe water sources, affordability issues related to education materials, inconsistencies in HSAs’ visits to share health promotion messages, transportation challenges to seek treatment at CTUs, and improper disposal of children’s diapers, leading to environmental concern.
UNICEF partnered with the NGO Gender Coordination Network (NGO-GCN) to create a space for women and adolescent girls to input into the development and delivery of humanitarian interventions that respond to their needs and mitigate gender-based risks.

Nutrition

In flood-, Cholera-, and food-insecure areas, UNICEF prevented, early-detected, and treated severe wasting and other life-threatening acute malnutrition. Mass nutrition screening, newborn and young child feeding counseling, and Community Management of Acute Malnutrition (CMAM) refresher training were the approaches used during the period.

Care groups and growth monitoring sessions have screened 1.55 million under-5 children (721,860 M and 825,353 F) since January. Health Surveillance Assistants (HSAs) and community volunteers conducted mass screening and family Mid-Upper Arm Circumference (MUAC) in IDP settlements and adjacent towns. By June 2023, 20,459 children (9,823 M and 10,636 F) had joined the CMAM program. With a cure rate of 93 percent, a death rate of 2 percent, a default rate of 3 percent, and a non-response rate of 1.5 percent, performance measures are within international standards. UNICEF supplied 23,174 boxes of ready-to-use therapeutic food (RUTF), 190 cartons of Formula 75 milk, and 40 cartons of Formula 100 milk to treat Severe Acute Malnutrition (SAM) children. These supplies are adequate to treat more than 23,000 children with SAM.

UNICEF trained health workers in outpatient SAM management, including Cholera, to improve treatment of CMAM children. 586 health workers have been trained¹. Pharmacists, data clerks, facility in-charges, nurses, and physicians have acquired improved SAM management, reporting, and supply management skills.

UNICEF also supported efforts to provide Infant and Young Child Feeding (IYCF) counselling to promote uptake of optimal Maternal, Infant and Young Child Feeding Nutrition (MIYCN) behaviour as well as raise awareness on prevention and early seeking care in the floods and Cholera affected areas. This was achieved through care group sessions, one-on-one counselling at health facilities, growth monitoring and promotion sessions, and mass screenings in communities affected by Cholera and floods. Since January, 306,188 (17,934 M and 288,254 F) caregivers of children aged 0-23 months were reached with life-saving nutrition messages. These messages aimed to promote optimal child feeding practices through various platforms such as care group sessions, growth monitoring and promotion sessions, mass screenings in Cholera and flood-affected communities.

UNICEF has provided early childhood development (ECD) kits to community-based childcare centers (CBCCs) in affected communities to continue early stimulation and learning for three- to five-year-old’s. 95 ECD kits were delivered at CBCCs to promote early learning for 4,750 flood-affected youngsters. Early stimulation and nurturing counseling through CBCCs and community care group platforms have supported positive parenting for 38,000 children in Phalombe, Blantyre, and Nsanje districts.

In seven districts², UNICEF supplied 1.78 million iron and folic acid supplement pills and 248,081 albendazole tablets to 40,768 girls aged 10-19 in 150 schools. UNICEF’s 79,642 target was reached by 51 percent. The supplies and nutrition messaging on dietary diversity and iron-rich foods have helped 1,701 girls in Mangochi avoid anemia.

Education

UNICEF has provided support to 690,724 school-going children affected by Tropical Cyclone Freddy, enabling them to return to school and access safe, equitable, inclusive, and quality learning opportunities. The Back-to-School (B2S) Campaign, implemented by UNICEF, integrated education, water, sanitation and hygiene (WASH), nutrition, health, child protection, communication, and social behavioral change interventions in targeted schools. The campaign distributed tents for temporary learning spaces, school-in-a-box kits, individual learning materials, blackboards, and recreation kits in six districts³, benefiting an estimated 37,080 children, including 19,281 girls. UNICEF also provided iron and folic acid supplements to 40,768 adolescent girls from 59 schools in Mangochi, Machinga, Phalombe, and Blantyre districts.⁴

Under the WASH component of the B2S initiative, learners from 503 primary schools in five flood-affected districts⁵ received support to implement safe school protocols, ensuring infection prevention and control in the context of the Cholera outbreak. The schools were supported with WASH supplies, and 271 teachers were trained in Cholera infection prevention and management in 135 primary schools. Hygiene awareness campaigns were conducted in the communities surrounding the targeted schools, sensitizing community members and equipping them with accurate information on Cholera prevention and good hygiene practices.

UNICEF also supported the desludging of 88 pit latrines in five schools in Traditional Authority (TA) Nkulumbe in Phalombe district, benefiting 7,534 learners. Existing toilets and classrooms in 71
schools situated in flood-affected areas were disinfected, enabling 71,000 learners to safely resume their education in a clean school environment after the departure of IDPs.

Mental health and psychosocial support (MHPPS) was also provided to 6,769 primary school learners from 29 schools in the targeted districts. Overall, UNICEF’s efforts have significantly improved the lives of children affected by Tropical Cyclone Freddy and have significantly improved the quality of education for these children.

Child protection, GBViE and PSEA

UNICEF has provided protection services to 5,237,804 people in IDP sites and surrounding communities, including case management, mental health and psychosocial support services, support to unaccompanied and separated children, gender-based violence (GBV) risk mitigation, prevention and response, and community mobilization and awareness activities on prevention of sexual exploitation and abuse (PSEA). At least 210,063 children have been reached with psychosocial support (PSS), life skills, and recreation activities in IDP sites and affected communities through children’s corners (CCs) and CBCCs. UNICEF supported the training of 420 children’s corner facilitators, caregivers, and case managers from district social welfare offices, civil society organizations, children’s corners, and ECD centres.

A total of 834,558 children, adolescents, and adults accessed community-based mental health and psychosocial support (MHPSS) services. UNICEF trained 742 psychosocial first aid (PFA) providers in Zomba, Machinga, and Blantyre, focusing on mental health services for children in children's corners, IDP sites, and surrounding communities. UNICEF also provided financial and technical support for the deployment of 46 frontline workers in six districts of Blantyre, Nsanje, Chikwawa, Mulanje, Phalombe, and Chiradzulu.

At 318 IDP sites, UNICEF supported the deployment of 1,088 police officers to enhance protection, safety, security, and response to protection issues. UNICEF also oriented the police officers in prevention of sexual exploitation and abuse, and gender-based violence risk mitigation. The Malawi Police established 318 community policing structures across 14 districts, ensuring safety and security for 64,536 people.

Some 5,237,804 people were reached with protection messages on Cholera, GBV, PSEA, and violence against children (VAC). The messages were delivered through various approaches, including engagement with affected people in IDP sites and dissemination on radio and television channels, facilitated by Malawi Broadcasting Corporation (MBC) and Nkhoma Synod.

UNICEF also supported the identification, family tracing, and reunification of unaccompanied and separated children whose families were displaced by the floods. As of the end of June, out of the 99 confirmed unaccompanied and separated children, social welfare workers reunited 90 children with their caregivers, while family tracing continued for the remaining 9 children. Through partnerships with district social welfare offices and Save the Children, families were assisted with cash, non-food items (NFIs), and referrals to other essential support services. These efforts helped address socio-economic challenges and ensured the successful reintegration, safeguarding, and return to school for the affected children.

Social protection

In the first quarter of 2023, UNICEF continued its support of the urban lean season response which had started in November 2022. Under the response, a total of 156,000 ultra-poor households (702,000 people, including 358,020 children) received cash transfers in Nkhata Bay district and the city councils of Mzuzu, Lilongwe, Zomba, and Blantyre. Households received US$48 for two months (February and March 2023) through the e-payment modality facilitated by mobile network operators (TNM and Airtel). UNICEF’s technical support centred on the planning and rollout of the operations at the district level of the Social Cash Transfer Programme (SCTP). These activities included sensitisation, targeting and enrolment of participants, payments execution and ensuring linkages with other sectors such as nutrition and health. Following the end of the lean season, UNICEF supported the closure activities: the After-Action Review in which central and local government officials and development partners reviewed the programme’s success and challenges, and the post-distribution monitoring survey aimed at garnering beneficiaries’ feedback on the e-payment modality and how households used the funds.

As part of the Cholera response, UNICEF disseminated Cholera messages through the SCTP Call Centre and at community meetings and pay points. Over 730,376 beneficiaries of the lean season response received Cholera awareness and prevention messages in Chichewa via SMS. An additional 37,390 people in five (5) districts received Cholera awareness and prevention messages through face-to-face interaction during community meetings and at pay points, an activity that was facilitated by UNICEF partners: MRCS and the Centre for Development Communication.

UNICEF collaborated with the Government of Malawi to finalize a funding proposal for the expansion of social protection to meet the
recovery needs of people affected by the impact of Cyclone Freddy. Preparations for the rollout of the plan, which includes cash transfers of US$144 per month for a period of 3 months to 47,935 ultra-poor households (215,707 people), have begun at central level with UNICEF support.

UNICEF inputted into the government’s Food Security Crisis Preparedness Plan, which outlines the expansion of social protection initiatives (cash transfers, in-kind assistance, public works and inputs for winter cropping) expected to occur once acute levels of food insecurity have been identified. The analysis of food insecurity is in its final stages and, once shared with the President, will spark the preparations for the 2023/24 Lean Season Response. UNICEF is conducting resource mobilisation for cash transfers and operational support.

HUMANITARIAN LEADERSHIP, COORDINATION AND STRATEGY

UNICEF will continue 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 sectors include Health, WASH, Nutrition, Child Protection, Risk Communication and Community Engagement (RCCE), and Supply and Logistics.

In flood affected areas, UNICEF will continue to provide support in the IDP camps that are still active. In the areas where IDPs have resettled, UNICEF will also continue to provide services, including mobile clinics, nutrition screening, IYCF counselling, and community engagement on hygiene practices and other positive behaviours. A second phase of the back-to-school campaign will be conducted to encourage learners to return to school for a new school year which will start in September 2023. Cholera control efforts will continue, including the implementation of the CATI interventions and oral rehydration points in the hotspot areas and the provision of supplies for Cholera case management. UNICEF will also support the restoration of services through rehabilitation and reconstruction of damaged facilities including water sources, health facilities and school infrastructure. At the centre of this work will be strengthening of strategies that can ensure the affected communities build back better to be more resilient against future shocks. Preparedness and anticipatory actions will therefore also be a key focus of UNICEF efforts with particular attention to the El Niño alerts in the forthcoming rainy season.

UNICEF will also continue to play a central role in interagency coordination by co-leading four sectors - WASH, Nutrition, Education, and Protection.

HUMAN INTEREST STORIES AND EXTERNAL MEDIA

Responding to the multiple crises and their devastating impacts, UNICEF Malawi issued global, regional, and national press releases to highlight the situation of affected children and their families, and garner support to safeguard the rights of children.

UNICEF proactively engaged the media and successfully pitched stories and pictorial spreads, which were published in leading newspapers in Malawi and abroad, including The Nation and The Daily Times. Altogether, there were more than 150 news articles related to UNICEF’s support on the Cholera, Polio and the floods emergency response during the reporting period. The news articles, including human interest stories, carried by more than 30 media outlets, highlighted UNICEF’s emergency response actions and the prevailing needs of the affected communities, especially children. Some of the international media outlets that published the stories include Al Jazeera, BBC, AFP, Reuters, Voice of America, Voice of Africa and Newsroom Afrika.

Further, about 40 news stories on child rights issues and UNICEF work in the emergency response, and four newsletters with stories of Malawian children, were published by UNICEF during the reporting period. The stories and newsletters were shared with different stakeholders, including development partners, government officials and other humanitarian actors to support awareness-raising and resource mobilisation efforts.

UNICEF consistently posted multiple emergency-related multimedia content on all of its social media platforms, generating more than 145 million content reach and 222,000 content engagement cumulatively.

On the U-Report platform, UNICEF Malawi carried out four polls and four SMS blasts on different emergency-related topics that reached more than 300,000 U-Reporters with awareness-raising and preventative messages. Some 739 people triggered the U-Report Chat Bots to access information on Cholera prevention, signs, and symptoms, treatment, and vaccines during the reporting period.

A partnership with MBC’s Development Broadcasting Unit (DBU) enabled UNICEF to reach more than 10 million people with Cholera awareness-raising and preventive messages through jingles and discussion programmes on about 10 national and community radio stations and three national television stations in three languages.

The following are some of the human-interest stories published on UNICEF Malawi website:

- Newsletter with Stories of Children in Malawi
  https://shorturl.at/mFRy8

- Older people feel full brunt of Covid-19 in Malawi

- A Village Chief at the forefront of COVID-19 vaccination campaign

- Children risk malnutrition in undersupplied camps

- Cyclone Slows Community Race against Malnutrition

- UNICEF deploys child protection services among cyclone survivors

- ADDA alumni aid cyclone response with swift tech solutions
Classrooms turn into spaces for displaced families, but school goes on at Chumani Primary School

Overburdened school accommodates displaced students in the aftermath of Cyclone Freddy

Health workers launch pre-emptive attack on Cholera

How tackling misinformation is key to Cholera response

Racing against time to save Cholera patients

Tukombo puts up a collective fight to contain Cholera

Drones fly to stop Polio in Malawi
https://www.unicef.org/malawi/stories/drones-fly-stop-Polio-malawi

HAC APPEALS AND SITREPS

Malawi Appeals
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

NEXT SITREP: 1 JULY - 31 JULY 2023
# Consolidated Programme Results

<table>
<thead>
<tr>
<th>Sector</th>
<th>UNICEF and IPs response</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Indicator</td>
</tr>
<tr>
<td>Health and HIV/AIDS</td>
<td>Children and women accessing primary healthcare in UNICEF-supported facilities</td>
</tr>
<tr>
<td></td>
<td>Healthcare workers trained in case management, infection prevention and control, and water and sanitation for health facility improvement (WASHFIT)</td>
</tr>
<tr>
<td></td>
<td>Children and adults accessing treatment for cholera in cholera treatment units provided with UNICEF supplies</td>
</tr>
<tr>
<td></td>
<td>Adolescents who have appropriate and life-saving information on how and where to access interventions on HIV prevention, care and treatment</td>
</tr>
<tr>
<td>Nutrition</td>
<td>Children 6-59 months with severe wasting admitted for treatment</td>
</tr>
<tr>
<td></td>
<td>Children 6-59 months screened for wasting</td>
</tr>
<tr>
<td></td>
<td>Primary caregivers of children 0-23 months receiving infant and young child feeding counselling</td>
</tr>
<tr>
<td></td>
<td>Adolescent girls 10-19 years old receiving iron/folic acid supplementation</td>
</tr>
<tr>
<td>Child protection, GBVIE and PSEA</td>
<td>Children, adolescents and caregivers accessing community-based mental health and psychosocial support</td>
</tr>
<tr>
<td></td>
<td>Women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions</td>
</tr>
<tr>
<td></td>
<td>People with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations</td>
</tr>
<tr>
<td></td>
<td>Children who have received individual case management</td>
</tr>
<tr>
<td>Education</td>
<td>Children accessing formal or non-formal education, including early learning</td>
</tr>
<tr>
<td></td>
<td>Children receiving individual learning materials</td>
</tr>
<tr>
<td></td>
<td>Children accessing mental health and psychosocial support in their schools/learning programmes</td>
</tr>
<tr>
<td></td>
<td>Schools implementing safe school protocols (infection prevention and control)</td>
</tr>
</tbody>
</table>

Water, sanitation and hygiene
| **People accessing a sufficient quantity and quality of water for drinking and domestic needs** | Total | - | 3.3 million | 1.5 million | ▲ 45% |
| **People accessing appropriate sanitation services** | Total | - | 450,000 | 120,000 | ▲ 27% |
| **Learning facilities and safe spaces reached with basic WASH services** | Total | - | 350 | 187 | ▲ 53% |
| **People reached with critical WASH supplies** | Total | - | 6.5 million | 1.9 million | ▲ 29% |

### Social protection

| **Households benefitting from new or additional social assistance (cash/in kind) measures from governments with UNICEF-technical assistance support** | Total | - | 244,444<sup>10</sup> | 143,636 | ▲ 59% |
| **Households reached with UNICEF-funded humanitarian cash transfers across sectors** | Total | - | 24,222 | - | 0% |

### Cross-sectoral (HCT, SBC, RCCE and AAP)

| **People reached through messaging on prevention and access to services** | Total | - | 9.7 million<sup>11</sup> | 8.3 million | ▲ 85% |
| **Women's rights, adolescent girls and youth groups that have been consulted and/or participated in all phases of the programme cycle** | Total | - | 30 | 25 | ▲ 83% |
| **People sharing their concerns and asking questions through established feedback mechanisms** | Total | - | 777,600 | 213,430 | ▲ 27% |

*Progress in the reporting period 1 January to 30 June 2023*
### Annex B — Funding Status

Consolidated funding by sector

<table>
<thead>
<tr>
<th>Sector</th>
<th>Requirements</th>
<th>Humanitarian resources received in 2023</th>
<th>Other resources used in 2023</th>
<th>Resources available from 2022 (carry over)</th>
<th>Funding gap (US$)</th>
<th>Funding gap (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health</td>
<td>12,012,754</td>
<td>2,366,472</td>
<td>704,941</td>
<td></td>
<td>8,941,341</td>
<td>74%</td>
</tr>
<tr>
<td>Nutrition</td>
<td>8,181,969</td>
<td>1,307,543</td>
<td>624,016</td>
<td></td>
<td>6,250,410</td>
<td>76%</td>
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<tr>
<td>Child protection, GBVIE and PSEA</td>
<td>3,242,592</td>
<td>1,032,920</td>
<td>-</td>
<td></td>
<td>2,209,672</td>
<td>68%</td>
</tr>
<tr>
<td>Education</td>
<td>2,997,648</td>
<td>1,308,511</td>
<td>223,852</td>
<td></td>
<td>1,465,285</td>
<td>49%</td>
</tr>
<tr>
<td>Water, sanitation and hygiene</td>
<td>31,842,720</td>
<td>9,003,409</td>
<td>54,688</td>
<td></td>
<td>22,784,623</td>
<td>72%</td>
</tr>
<tr>
<td>Social protection</td>
<td>5,435,424</td>
<td>443,686</td>
<td>-</td>
<td></td>
<td>4,991,738</td>
<td>92%</td>
</tr>
<tr>
<td>Cross-sectoral (HCT, SBC, RCCE and AAP)</td>
<td>23,999,613</td>
<td>2,588,844</td>
<td>-</td>
<td></td>
<td>21,410,769</td>
<td>89%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>87,712,720</strong></td>
<td><strong>18,051,385</strong></td>
<td><strong>1,607,497</strong></td>
<td><strong>0</strong></td>
<td><strong>68,053,838</strong></td>
<td><strong>78%</strong></td>
</tr>
</tbody>
</table>

*repurposed other resources with agreement from donors

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Who to contact for further information:

Gerrit Maritz  
Deputy Representative, UNICEF Malawi  
T +265-1770770  
gmaritz@unicef.org

Bhawna M Vajpai  
Chief Community Development, UNICEF Malawi  
T +265-1770770  
bmvajpai@unicef.org

Fungma Fudong  
Chief of Communication, UNICEF Malawi  
T +265-1770770  
ffudong@unicef.org
1. 251 from Blantyre, 78 from Chikwawa, 22 from Mwanza, 79 from Phalombe, 68 from Balaka, 146 from Thyolo and 110 from Nsanje
2. Nsanje, Phalombe, Blantyre, Machinga, Chikwawa, Zomba, and Mulanje
3. Phalombe, Mulanje, Chikwawa, Nsanje, Zomba and Blantyre
4. Nsanje, Phalombe, Mangochi, and Machinga
5. Nsanje, Chikwawa, Phalombe, Mulanje, and Blantyre
6. UNICEF will support Integrated Management of Childhood Illness (IMCI), Antenatal Care (ANC), and vaccination. This will be done through the support to fixed health facilities and mobile health and nutrition teams.
7. Supplies for Cholera treatment will be provided to CTC/CTUs.
8. 75 per cent of the severe acute malnutrition burden (62,067), calculated at a prevalence rate of 0.7 per cent.
9. This figure has increased in comparison with previous targets, due to high number of people (at least 2.3M) affected by the floods. This includes children in schools and people returning to their communities.
10. GoM is targeting 82,380 households as per proposal.
11. Estimated based on radio listenership, mobile and internet coverage. People reached with gender- and age-sensitive, socially, culturally and linguistically appropriate life-saving information (health, nutrition, education, child protection, hygiene and sanitation)
12. 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.
13. 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.