



# Malawi

## Humanitarian Situation Report No. 13

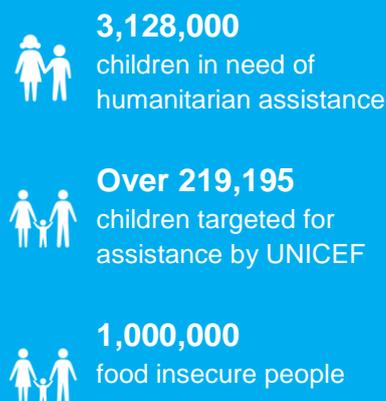


Reporting Period: 11 October 2019 to 11 November 2019

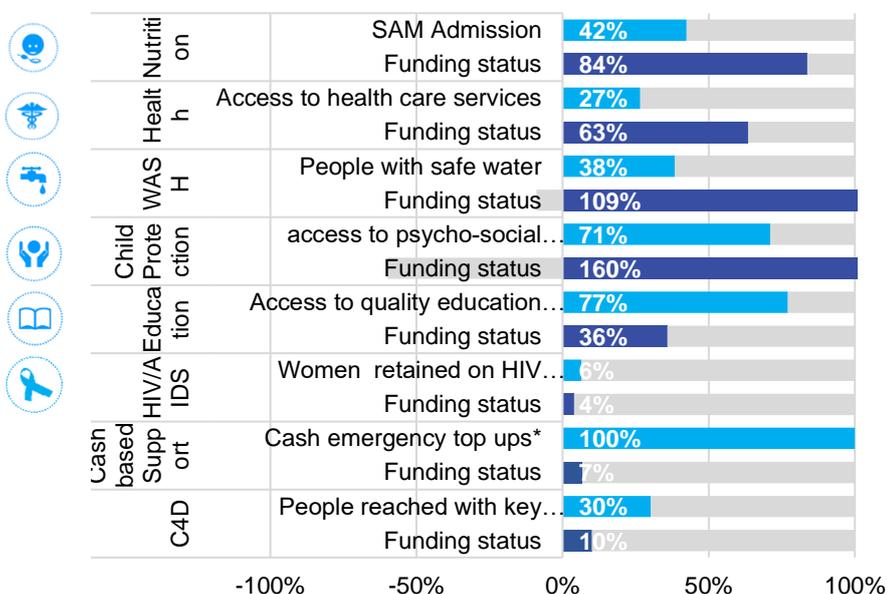
### Highlights

- A single case of cholera was detected on 31 October 2019 in Lilongwe district in central Malawi. This is the first cholera case registered in the cholera season of 1 November 2019 to 31 October 2020. The case has been successfully treated and discharged. Since then no additional cases have been identified. UNICEF is supporting preparedness efforts in the cholera prone districts.
- Following the release of the 2019 Malawi Vulnerability Assessment Committee (MVAC) Annual Assessment, which projects that 1,062,674 people in 27 districts are food insecure and would require humanitarian assistance during the period of November 2019 to March 2020, a national response plan has been prepared and was launched on 20 October 2019.
- Although the nutrition situation seems to be within acceptable levels based on the prevalence of global acute malnutrition (GAM) per the June 2019 SMART survey, there is need keep a constant watch of the nutrition situation to maintain levels within acceptable ranges given the MVAC projected number of one million food insecure people.
- Since the last report, UNICEF's support to community management of acute malnutrition has enabled 5,328 more children to receive treatment for severe acute malnutrition (SAM), bringing the total number of children so far admitted in the programme in the period of January to September 2019 to 30,109 children with SAM.

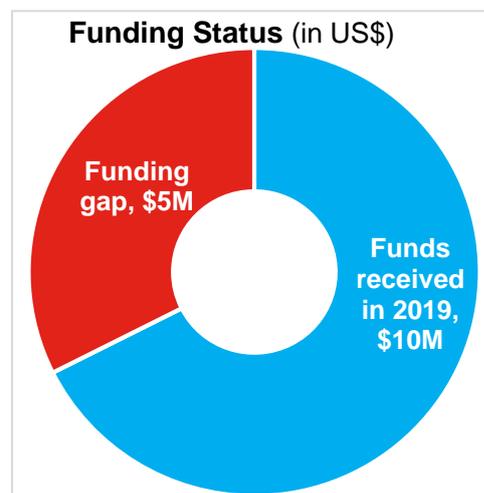
### Situation in Numbers



### UNICEF's Response and Funding Status



### UNICEF Appeal 2019 \$15,297,130



\*The initial plan was that UNICEF will receive the funds for cash disbursements as well as assessments and monitoring. This was later changed, and UNICEF received funds for only assessments and monitoring while the funds for cash disbursements were channelled through WFP. It is for this reason that UNICEF achieved all intended results with much smaller funding compared to the initially indicated requirement.

## Funding Overview and Partnerships

Against the 2019 Malawi Humanitarian Action for Children (HAC) funding appeal of US\$ 15.29 million, UNICEF has so far received US\$ 10.3 million. UNICEF expresses its sincere gratitude to all public and private donors for the contributions received. In addition, UNICEF reallocated an amount of US\$ 1,097,891 from regular resources at the beginning of the response to Cyclone Idai related floods to kickstart the initial lifesaving interventions. A funding gap of 36 per cent remains.

## Situation Overview & Humanitarian Needs

A Food Insecurity Response Plan has been developed led by the Department of Disaster Management Affairs leveraging the architecture of the humanitarian cluster system. The plan, which was launched on 20 October 2019, identifies the Food Security, Nutrition, Protection, Education and Transport and Logistics clusters as the key priority clusters to address immediate needs. This follows the release of the 2019 Malawi Vulnerability Assessment Committee (MVAC) Annual Assessment which has projected that 1,062,674 people in 27 districts are in Integrated Phase Classification Phase (IPC) 3 or worse and would require humanitarian assistance ranging from a two to five month-period during the period from November 2019 to March 2020. The SMART nutrition survey conducted in June 2019, soon after the May 2019 MVAC assessment, reported very low prevalence of malnutrition in the surveyed areas (0.5%), and, a decline from the last assessment where global acute malnutrition (GAM) prevalence was almost thrice as high (1.3%). Although the nutrition situation seems to be within acceptable levels based on the prevalence of GAM, there is need to keep a constant watch of the nutrition situation to maintain levels within acceptable ranges given the MVAC projected one million food insecure people.

A single case of cholera was detected on 31 October 2019 in Lilongwe district TA Chadza. The case has been successfully treated and discharged. Since then no additional cases have been identified.

Ebola Virus Disease (EVD) continues to be a threat to the region, owing to unabated outbreak in the Democratic Republic of the Congo (DRC). One suspected case was seen in mid-October 2019 at Kaporo in Karonga district, which eventually came out negative for Ebola.

## Summary Analysis of Programme Response

### Nutrition

UNICEF continues to support timely and consistent distribution of nutrition therapeutic supplies including Ready-to-use Therapeutic Food (RUTF), F75 and F100 to the last mile ensuring availability and access of these lifesaving commodities. From January to September 2019, a total of 30,109 children with severe acute malnutrition (SAM) were admitted into the Community-Based Management of Acute Malnutrition (CMAM) programme across 728 health facilities, representing 51 per cent SAM coverage. There has been a 22 per cent decrease in admissions compared to the same period in 2018 when 35,074 SAM children were admitted into the program. A total of 72,494 children with moderate acute malnutrition (MAM) were admitted for Supplementary Feeding, compared to 68,611 admitted in the same period in 2018 representing a 6 per cent increase. MAM admissions in the month of September 2019 compared to the same month in 2018 declined by 4 per cent from 5,821 in 2018 to 5,613. Performance indicators remained within the acceptable minimum SPHERE standards with the SAM cure rates at 93.9 per cent in September 2019. SAM death rate from January to September 2019 was at 1.5 per cent, (within the SPHERE thresholds of less than 10 per cent). The stable nutrition status is largely due to an institutionalized integrated nutrition response which has been implemented over the past few years.

### Health

With financial support from DFID, UNICEF in partnership with WHO, the Ministry of Health and Population and the Society of Medical Doctors in Malawi have implemented several EVD prevention and preparedness activities. Through this project, a Malawi Country Office (CO) Contingency Plan has been prepared, surveillance and case management training of more than 500 health workers has been completed, Malawi Defence Forces personnel from nine barracks have been supported for screening and case management trainings and border crossing officials and port health workers have been trained on screening and surveillance at border crossing points. Also, EVD prevention and response supplies were procured. These preparedness activities have culminated into a simulation exercise conducted from 4-6 November 2019 in the districts of Chitipa and Karonga. Preliminary reports indicate that it was a successful exercise which had demonstrated adequate capacity and skills in the country.

UNICEF continues to provide technical support to the cholera technical work group and the health cluster presently engaged in developing contingency plans. UNICEF has also procured supplies in readiness for the new emerging cholera cases which started on 1 November 2019.

## Education

A joint monitoring visit conducted in October by the Education cluster has confirmed the positive impacts brought by volunteer teachers. UNICEF supported 109 volunteer teachers and continues to provide psychosocial support to affected learners and assist school authorities and communities to implement recovery activities. In line with improving the school learning environment, these activities include preparing school gardens and planting vegetables, fruit trees and flowers; rehabilitating toilets; cleaning school surroundings and water points; establishing school clubs and reading competitions and mobilising learners for recreation and play-based activities. Cumulatively in 2019, with UNICEF support, a total of 77,565 school-aged children and adolescents (37,379 boys and 40,186 girls) in disaster affected areas gained access to quality education services. In addition, UNICEF supported the Ministry of Education, Science and Technology successfully to conduct an Education in Emergencies (EiE) Refresher training for 12 district education officials. The training covered a number of areas including disaster risk management concepts; EiE frameworks, principles, and standards; EiE coordination mechanisms; protection and inclusiveness in EiE; stakeholder mapping and referral systems; code of conduct and work ethics for teachers; prevention of sexual exploitation and abuse in emergencies; and preparedness planning. The 12 district officials have also been supported to develop district EiE preparedness plans making use of the lessons learnt from the previous disaster.

## Child Protection

As part of flood recovery interventions, UNICEF and its partners continue to work in communities in disaster-affected districts to ensure continuity of child protection services and strengthening of social welfare and justice systems. One focus is strengthening the provision of psychosocial support for children through Children's Corners by building the capacity of Children's Corner caregivers. Cumulatively, 790 caregivers have been trained during the period of emergency response and recovery.

UNICEF is also strengthening the police capacity to prevent and respond to violence against children and gender-based violence. In October, 40 Malawi Police Service Criminal investigators (20 males, 20 females), who will be deployed to all the districts including emergency affected districts, were trained on how to deal with sexual and gender-based violence. UNICEF also supported knowledge sharing between One Stop Centres (where victims of sexual violence can access multiple services, including health, legal, and social welfare) through a learning visit to improve capacity in dealing with the victims of sexual and gender-based violence. Also, UNICEF and the Malawi Police Service launched a new and improved SMS reporting system to capture the cases of violence against children and gender-based violence. This system facilitates effective and speedy collection and analysis of the data to prompt immediate actions both during emergency and regular operations.

## Cash-based Programming

Following the release of the MVAC report on the food security situation, UNICEF is working with key ministries to scale up the Social Cash Transfer Program where systems are ready and in areas affected by food insecurity. In addition, support is provided to align the humanitarian response to Social Cash Transfer Programme Mechanisms.

## Communication for Development (C4D)

In six districts affected by floods, UNICEF reached over 204,865 people (61,459 males, 143,406 females) with integrated messages through radio, community dialogues, interpersonal communication by teachers and volunteers, community action theatre, and road shows have been conducted. Each of activities synchronized message and promoted protective practices by engaging flood survivors and surrounding communities with integrated messages around child protection, education, health, nutrition and WASH through various channels. In total, 98 per cent of people living in camps surveyed were reached with at least one C4D intervention that included posters, leaflets, drama, music, counselling, health talks, and radio. UNICEF partnered with the Centre for Development Communication and the Story Workshop to implement activities in the camps. UNICEF also supported the Ministry of Information to coordinate and monitor integrated interventions through District Social Mobilization Committees that comprise several Civil Society Organisations and government departments.

Results of monitoring for C4D activities indicate that among the individuals that had access to soap in the camps, 98 per cent used it in crucial moments (after visiting the toilet, after changing nappies, before eating and before preparing food), 84 per cent of breastfeeding mothers maintained breastfeeding while 83 per cent of individuals who had bed nets, slept under them the previous night. The results of the survey have helped to design a plan for longer-term resilience building efforts with these disaster-prone communities.

## Humanitarian Leadership, Coordination and Strategy

UNICEF is the co-lead agency for the Education, Nutrition, and Water, Sanitation and Hygiene (WASH) Clusters and the Child Protection Sub-Cluster, while also playing a key role in the Health Cluster. Apart from supporting the Lead Ministries/Departments in achieving the cluster lead responsibilities, UNICEF participates in Humanitarian Country Team and the Inter-Cluster Coordination meetings which provide a platform for cross-sectoral coordination. During the 2019 floods response, UNICEF established an operational hub in Blantyre to ensure close coordination with other actors on the ground. This also enabled UNICEF better to engage with sub-national clusters as well as regional inter-cluster group under the leadership of the Department of Disaster Management Affairs.

In support of interagency coordination, UNICEF participated in a contingency planning workshop held from 28 October to 1 November. The contingency plan establishes operational procedures for response to identified likely hazards (floods; prolonged dry spells; disease outbreak; pest infestation; strong winds; and civil unrest) based on risks and scenarios identified. It will also facilitate readiness among the humanitarian agencies/organizations in the country to respond to any disasters that may occur in the period of November 2019 to October 2020.

## Human Interest Stories and External Media

UNICEF has used social media and online channels to document the impact of response efforts. In its communications UNICEF has acknowledged the support of partners and will focus on documenting recovery interventions in the next few months. All materials, including press releases, photos, videos and human-interest stories, can be found here:

Website: [www.unicef.org/malawi](http://www.unicef.org/malawi)

Blog: [unicefmalawi.blog](http://unicefmalawi.blog)

Twitter: @MalawiUNICEF; Dropbox: [bit.ly/2NWS85K](https://bit.ly/2NWS85K)

Facebook: UNICEF Malawi

## Next SitRep: 10 December 2019

### Who to contact for further information:

Rudolf Schwenk  
Representative, Malawi  
Telephone: 265 998 939 413  
Facsimile: 265 1 773 162  
Email: [rschwenk@unicef.org](mailto:rschwenk@unicef.org)

Margarita Tileva  
Deputy Representative, Malawi  
Telephone: +265 992 961 100  
Facsimile: 265 1 773 162  
E-mail: [mtileva@unicef.org](mailto:mtileva@unicef.org)

Matteo Frontini  
Community Development and Resilience  
Chief of Section  
Telephone: +265 990 089 385  
Facsimile: 265 1 773 162  
E-mail: [mfrontini@unicef.org](mailto:mfrontini@unicef.org)

## SUMMARY OF PROGRAMME RESULTS

Sector	Cluster/Sector Response			UNICEF and IPs		
	2019 target	Total results*	Change since last report ▲▼	2019 target	Total results*	Change since last report ▲▼
<b>Nutrition</b>						
Children under 5 years old with severe acute malnutrition admitted into therapeutic feeding programme	58, 421	30,109	▲ 5, 328	58, 421	30,109	▲ 5, 328
Children aged 6 to 59 months provided with Vitamin A supplementation	400,075	310,091*	▲ 197,391	400,075	310,091	▲ 197,391
<b>Health</b>						
Children and women in humanitarian situations provided with access to health care services	424,071	308, 538	No change			
Children immunized for measles	379,195	179,220**	No change			
<b>WASH</b>						
People affected by drought, floods and cholera provided with safe water per agreed standards	495,960***	190,362	No change	695,000	191,977	No change
People affected by drought, floods and cholera provided with sanitation services per agreed standards	40,000	56,041	No change	45,000	56,041	No change
<b>Child Protection</b>						
Number of children with access to psycho-social support (PSS), socialization, play and learning	150,000	106,547	▲ 86,968			
People reached by gender-based violence (GBV) prevention and response services	7,000	3,138	▲ 468			
<b>Education</b>						
Disaster affected school-aged children including adolescents with access to quality education services	95,500	77,565 (37,379 boys, 40,186 girls)	3,917	135,000	92,316 (44,767 boys, 47,549 girls)	3,917
Disaster affected adolescent children, in and out of school, with access to relevant alternative education services	2,000	0****	No change	8,000	0*	No change
<b>HIV/AIDS</b>						
Women in disaster affected areas retained on HIV treatment for 6 months	10,000	647	No change			

CASH BASED PROGRAMMING						
Vulnerable households receiving cash emergency top ups	29,277	29,277	No change			
COMMUNICATION FOR DEVELOPMENT						
Disaster affected people reached with key messages and call to action on life saving practices	495,960	204,865	No change			

\* UNICEF supported growth monitoring, nutrition messaging and screening. Vitamin A supplementation and deworming exercise for children under 5 years old took place in July 2019 but the report was had not yet been received so results had not been reflected until now.

\*\* Report does not include September measles immunization achievement. More than half of the health unit data from flood affected districts for August is not captured as well. This information will be captured in subsequent reports.

\*\*\*2019 HAC was originally including response for both droughts (lean season) and floods. 2019 floods in Malawi have been significantly resource consuming and this has shifted the focus from the lean season response. Collection of data on these performance indicators will continue until the end 2019, although no significant changes are expected considering that there are no additional financial resources available for Q4.

\*\*\*\*No alternative education centres were set up as earlier planned because the required education services could be provided to the affected children through the formal system by enhancing its capacity with the deployment of volunteer teachers and provision of material support.

## Annex B

### Funding Status\*

Sector	Requirements	Funds available		Funding gap	
		Received Current Year	Carry-Over	\$	%
WASH	\$2,800,000	\$3,051,905	\$0	\$0	0%
Education	\$2,050,000	\$735,278	\$0	\$1,314,722	64%
Health	\$2,563,130	\$1,625,276	\$0	\$937,854	37%
Nutrition	\$4,450,000	\$3,723,531	\$0	\$726,469	16%
Child protection	\$600,000	\$959,681	\$0	\$0	0%
HIV/AIDS	\$150,000	\$5,885	\$0	\$144,115	96%
Cash Based Support	\$1,500,000	\$100,850	\$0	\$1,399,150	93%
Communication for Development	\$500,000	\$50,000	\$0	\$450,000	90%
Cluster coordination	\$684,000	\$86,030	\$0	\$597,970	100%
<b>Total</b>	<b>\$15,297,130</b>	<b>\$10,338,437</b>	<b>\$0</b>	<b>\$ 4,958,693</b>	<b>32%</b>

\* As defined in Humanitarian Appeal of 08/May/2019 for a period of January to December 2019.