Malawi: Floods

Department of Disaster Management Affairs (DoDMA) United Nations Office of the Resident Coordinator Situation Report No. 2



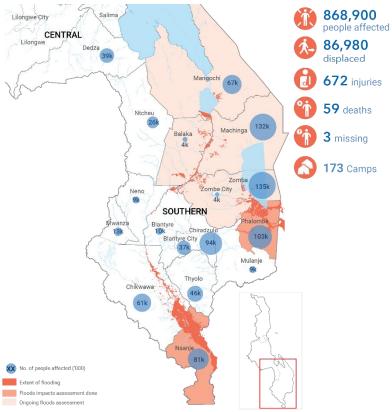


(as of 22 March 2019)

This report is produced jointly by the Department of Disaster Management Affairs (DoDMA) of Malawi and the United Nations Office of the Resident Coordinator in Malawi, in collaboration with humanitarian partners. It covers the period from March to 18-22 March 2019. The next report will be issued on or around 29 March 2019.

Highlights

- As of 22nd March, relief assistance in form of food and NFIs deployed to affected districts but still a significant gap exists.
- A response Plan targeting all activated clusters has been developed. Total cost of plan is US\$42,338,536.71. Contributions and pledges made total US11,016,370.71, leaving a gap of US\$31,322,166.
- Partners are making an application to the Central Emergency Response Fund of the UN Office for Coordination of Humanitarian Affairs to complement on-going response efforts.
- An inter-agency assessment team, including national and international partners, has been deployed to Mangochi, Machinga, Balaka and



Zomba districts to conduct verifications of areas reporting internally displaced persons. This is to complement information already captured by the inter-agency team in Nsanje and Phalombe.

- Early recovery cluster has been activated. This will work on identifying and addressing recovery needs of the affected population.
- The Humanitarian Country Team met on 22nd March to maximize coordination with the Department of Disaster Management Affairs (DoDMA) and the various humanitarian partners. The HCT reviewed the draft response plan.

15 Affected districts 868,895
Affected throughout the country

731,879 People in need 86,976
People displaced in IDP camps

677 Injuries 59 Deaths

Situation Overview

Following the declaration of the State of Disaster on 8 March, an appeal for support from local and international organisations was made. This triggered response operations aimed at meeting the immediate and life-saving needs of the affected people. So far, food and non-food items have been provided to the affected populations with an estimated coverage of at least 95% of the sites. The main challenge however is inadequacy of the distributed food. Most of the food items lasted 3 to 7 days and considering that most of the IDPs will likely be displaced for a period of a month to two, food remains a big gap. All affected areas are now passable by road. T/A Mlolo which was cut off and only accessible by boat and air, is now accessible through the Chikwawa-Thabwa road.

The government, through the Department of Disaster management Affairs has facilitated the development of a Flood response Plan. The plan is costed at US\$42,338,536.71. Contributions and pledges made so far total US11,016,370.71, leaving a gap of US\$31,322,166. The plan seeks to support response interventions around Food security, Agriculture, Nutrition, Protection, WASH, Education, Health, Shelter and Camp Management and Coordination clusters. The HCT met on 22 March and reviewed the response plan.

The Department of Disaster Management Affairs (DoDMA) deployed a national level interagency assessment team to Balaka, Mangochi, Machinga and Zomba districts. The mission is working on verifying the extent of damage, identifying realistic options for humanitarian response and providing clear recommendations to government, international community and humanitarian decision-makers on appropriate response interventions. The verified figures will be used to revise the figures of affected population. So far, the assessment indications show that close to 50% of the people that were initially displaced and seeking temporary shelter in camps have gone back to their communities to try and start the recovery process (rebuilding). In Zomba, displacement camps are mainly in schools and churches. While most have made an arrangement where IDPs use the school blocks in the night, in a few schools such as Sunuzi Primary School in Zomba district, there has been disturbances in school session as four classes are learning outside in order to accommodate the IDPs in the school blocks. A block in Sunuzi primary school also collapsed.

While some schools have adequate toilet facilities to cover the pupils and IDPs, there are some schools that critically need additional toilet. In Nantchegwa primary school in Zomba, there is only one toilet as the others are damaged. This has resulted in open defecation which is a health hazards and may cause health related diseases such as cholera. Almost all displacement sites do not have bathrooms.

Critical needs remain food and shelter-wash to accommodate the IDPs. Familly tents are the most suitable as IDPs are most likely to require shelter for the next two months. Reconstruction will most likely commence in May after cessation of rains. Other needs include NFIs such as kitche utensils, mosquito nets.

With the recent rains that fell in the southern districts of the country, DoDMA issued a press release for people in Zomba district and city to be on high alert as Chagwa dam in Zomba Mountain was about to collapse. The embarkment on the downstream has significantly eroded causing excessive leakage of water. The dam is currently at full capacity and chances of collapsing are still high and likely to affect settlements located along the Mulunguzi river. Although the number of people at risk is yet to be determined, communities have been alerted. Close monitoring of dam levels is ongoing.

Particular attention must be paid to the affected women - including pregnant and lactating mothers- girls, boys and men, adolescents and youths, the elderly, and people with disabilities, while also protecting them from violence, abuses and exploitation and maintaining their dignity. To best inform response programming, there is an urgent need to establish gender/age disaggregated data and to apply an agegender-diversity mainstreaming tool across the clusters.

Resource Mobilization

- DFID announced a contribution of USD 4.5 million to respond to the humanitarian Needs of floodsaffected population in Nsanje, Chikwawa, Phalombe, Mulanje, Zomba and Machinga. This funding will go to UNICEF and WFP and Red Cross to support WASH (for 250,000 people, Shelter, Camp Coordination Camp management 13,889 households, Health (Mobile Outreach Clinic) targeting 139,347 people and food and cash transfers for 2 months targeting 150,000 people prioritizing the most-affected households in three most affected districts (Nsanje, Chikwawa, Phalombe) with priority given to displace people living in camps.
- The African Union announced a contribution of 100,000 USD.
- The Government of Tanzania provided 200 tons of maize and 215 tons of medical supplies.
- The Government of Germany provided 50,000 EUR worth of support.
- The Government of Ireland pledged Euros 1 million.
- The office of Flanders has pledged support to the humanitarian window of the newly established SDG Acceleration Fund (approximately 500,000 USD).
- JICA provided shelter materials and NFIs (blankets, plastic sheets, sleeping mats). There were handed over to DoDMA for distribution by the Malawi Red Cross
- The South African government provided medical doctors and a helicopter. The helicopter is being used to transport both medical and other relief items
- CERF for Malawi is under preparation for USD 3,2 million.
- UN agencies have mobilized internal emergency resources to support the immediate on going response (i.e, WFP, FAO, UNICEF, UNDP, UNHCR)
- Close to USD11.000 million has been mobilised for the flood response, leaving a gap of about USD31 million

All humanitarian partners, including donors and recipient agencies, are encouraged to inform DoDMA by e-mailing:fmwafongo@gmail.com

Humanitarian Response (Based on findings from the assessments conducted in Nsanje and Phalombe)



Shelter & Camp Management

Cluster Lead: Ministry of Lands and Housing

Co-Lead: Malawi Red Cross

Needs:

With close to 86,000 people in displacement centres including people who have erected temporary shelter in their original locations to restore their lives, there is need to provide temporary shelter for those households whose homes have been completely destroyed. Most affected households lost all their belongings. There is an urgent need to provide mosquito nets, kitchen utensils, buckets, lighting materials and blankets.

86,976 people displaced in need of immediate shelter countrywide

In addition, there is need to support in the repair or reconstruction of damaged and destroyed structures, taking into account building guidelines and standards for resilience and future shocks.

Response:

- World Vision Supporting 80,000 people in 9 districts with shelter and NFIs. The "build back better approach" is most advised in the Malawi context as most houses collapsed due to persistent rains for 5-7 days.
- UNICEF has provided 48 tents to cover Nsanje, Chikwawa, Phalombe, Mulanje and Zomba districts. These will be mounted in schools to ease the pressure on school blocks by IDPs.
- IOM is planning to carry out a detailed assessment in Zomba, Chikwawa and Nsanje to get detailed shelter needs of the displaced population.

- DoDMA with support from IOM to train camp committees on camp coordination and camp management (CCCM)
- Japan Government through JICA has provided 250 family tents, 1,025 blankets, 50 tarpaulins and 1,000 sleeping pads to DoDMA for distribution in Chikwawa and Zomba through the Malawi Red Cross Society (MRCS).

Gaps & Constraints:

- Most sites remain without shelter and people are accommodated in classrooms which is disrupting learning and compromising sanitation.
- Of the total required US\$2,392,465, US\$871,698 has been mobilised leaving a gap of US\$1,520,767.



Food Security Cluster Lead: DoDMA

Co-Lead: WFP

Needs:

Immediate food needs need to be urgently addressed to prevent rapid deterioration in nutritional status, health and well-being of the worstaffected people with precipitating factors such as a possible increase in water-borne disease and limited access to safe water. Early restoration of food security should include support to livelihoods and agricultural

731,879 affected people countrywide in need of immediate food assistance

production, by re-planting fields for those communities that can use this window of opportunity and/or residual moisture

Response:

- DoDMA, Malawi Red Cross Society and other partners are distributing food (Maize flour, Salt, soya pieces, rice). Close to 95% of the displacement sites have been reached with initial food assistance. However, the distributed food is inadequate. Random sampling shows that the distributed food lasted for between three days to one week. There is need however to also focus on displaced people who are residing within their communities in addition to those in camps.
- Most of households whose houses have collapsed will need food supplies for the next two months. There is need for additional food supplies.
- WFP has started to respond through food distributions in IDP camps in Chikwawa, Nsanje, Phalombe and Zomba. 779 households in two IDP camps in Chikwawa have been reached with a cereal, pulses and vegetable oil rations. Household food basket is composed of 50Kg cereal, 10kg pulses and 2 litres vegetable oil per month.

Gaps & Constraints:

- Response has started but supplies distributed remain inadequate. Although markets are functioning, and food stocks are available, commodity prices have increased. IFPRI and WFP estimate that prices have increased by close to 20%.
- Households who have returned to their communities to start rebuilding need to be considered as well.
- District councils such as Nsanje have run out of fuel to facilitate distributions.
- Of the total required US\$17,558,926, a total of US\$2,799,850 has been mobilised leaving a gap of US\$14,559,076.

Agriculture

Cluster Lead: Ministry of Agriculture

Co-Lead: FAO

Needs:

With 80% per cent of sampled communities reporting farming as the primary source of income, the most urgent needs are to distribute seeds. There still is a window for re-planting through irrigation for those close to water bodies However, the farm families will need support in form of seeds and implements.

Response:

FAO activated its emergency facility to support livestock based interventions. FAO and partners are working to explore options for fast tracking the procurement and distributions of inputs to take advantage of the residual moisture in the fields. Inputs are expected to be distributed beginning of May. The cluster will meet in the coming week to review areas to focus.

Gaps and Constraints

Of the total required US\$10,000,000, US\$628,833 has been mobilised leaving a gap of US\$8,971,167.



Cluster Lead: Ministry of Transport and Public Infrastructure

Co-

Needs:

Transportation of goods and personnel has eased in most areas as roads have become passable. However, the only challenge is that with some roads still damaged, people have to use longer alternative roads. Traditional Authority Mlolo which was cutoff has become accessible through Chikwawa-Thabwa road.

Response:

- A helipad positioned in Bangula is being used by the Malawi Defence Force for delivery of relief items. Additionally, UNICEF and WFP partners provided boats for movement to locations on the eastern side of Shire River.
- Delivery of relief supplies in other districts is being done through trucks.

Gaps & Constraints:

- T/A Mlolo has become accessible through Chikwawa-Tabwa road. Only challnge is that the route is long (some 3-4 additional hours) and will require significant fuel resources. Reaching the affected population with essential lifesaving support is also made difficult by the poor road conditions.
- The cluster requires US\$898,000 and so far US\$336,921 has been mobilized, leaving a gap of US\$561,079.



Health, Reproductive Health & HIV

Cluster Lead: Ministry of Health

Co-Lead: WHO

Needs:

- Primary health care drugs for running integrated outreach clinics
- Strenthening disease survellance to detect and treat waterborne, vectorborne and skin disease outbreaks.
- Support the districts with medicines and medical supplies
- Support districts to conduct outreach clinics or deploy health workers in the camps

- Mosquito nets and malaria rapid diagnostic kits
- There is need to quatify other medical commodities (RH Kits etc).

Issues

- Based on the number of people affected, UNFPA estimates 230,000 women of child bearing age and about 12,000 expected deliveries.
- One maternal death has so far been reported due to inaccessibility of the roads from health center to the district hospital
- Pregnant women are delivering in the camps with unskilled birth attendants and four complicated cases, one dead, have so far been reported.
- Health facilities are far from each other and the flooded roads are impassable to access health care services. Two facilities have been submerged destroying drugs, condoms, and equipment and health
- Health workers have also been displaced creating a situation of non-availability of staff to provide services
- Limited information available on where the women can get the services in the absence of community outreach

Response:

- Disease surveillance was strengthened by training 300 health worker (target 600) in Phalombe, Balaka, Blantyre, Machinga, Mangochi and Chikwawa.
- Support (fuel and lunch allowance) was provided to six districts (Phalombe, Balaka, Blantyre, Machinga, Mangochi and Chikwawa) to conduct integrated outreach clinics in the camps.
- 107, 500 mosquito nets have been from the Ministry of Health which remained during the Mass Net Distribution Campaign in 2018 have been distributed to the districts based on their needs.
- UNFPA has received Reproductive Health Kits on 22 March, that have been procured by the CERF funds previously allocated for the lean season food insecurity response. The RH Kits received are for clean delivery, rape treatment, STI/HIV treatment; equipment for assisted delivery such as cesarean section and management of miscarriage and complications of abortions. UNFPA is working with the Ministry of Health on a detailed RH kits distribution plan adjusted to the needs and priorities of the flood affected districts, aiming to start their distribution as soon as possible.
- UNFPA is working with DHOs to distribute condoms in camps.
- UNFPA is also working with the Ministry of Health and Population- Reproductive Health Directorate to facilitate a comprehensive assessment on the capacity of health facilities to provide safe deliveries. This assessment will start as early as next week.

Gaps & Constraints:

- Medicines and medical supplies to support Mobile Outreach Clinics in camps and additional drugs for health facilities serving the displaced people
- Malaria rapid diagnostic kits
- Mosquito nets.
- More medical supplies and RH kits.
- There is no precise information on list of facilities including their immediate needs to resume the provision of sexual and reproductive health services
- The cluster requires US\$1,830,934 for the immediate emergency response.

Protection Cluster Lead: Ministry of Gender, Children and Social Welfare UNICEF

Co-Lead:

Co-

Needs:

- Insecure camp settings and shortage of food increase the risk of trafficking, violence, especially gender based-violence for young girls and women. Child marriage was another risk noted for teenage girls. 30% of IDPs are not aware of what constitute sexual violence, according to the interagency assessment mission in Nsanje and Phalombe.
- Inadequate access to sanitary amenities and facilities for women and girls (they lost items such as sanitary pads, underwear, soaps by the floods)
- The affected population have been psychologically affected. Children and youth have been left idle in the camps. None of the camps had children corner, youth club, nor safe spaces where children and adolescents can access with psychosocial support or recreation.
- From the affected population, there are 230,000 women and girls of reproductive age.

Response:

- As an entry point to management of gender based violence, 5,000 dignity kits have been ordered to address women and girls sanitary and dignity needs in the camps. Contents of the kits include Soaps, underwear, sanitary pads, sanitary cloth, wrapping cloth, tooth pastes, shavers, plastic bucket, and plastic cup, among others. Distribution is to start as early as next week in collaboration with the Ministries of Gender and Health and Population and partners on the ground.
- More kits are yet to come as efforts are still underway to secure CERF funding to procure 10,000 extra dignity kits ensure the dignity of more women and girls is secured.
- NGOs are being engaged as partners to provide information on prevention and management of GBV to address limited information available on where the women can get SRH and GBV related services in the absence of community outreach. To ensure coordinated response to GBV, the GBV sub-cluster co-led by the Ministry of Gender and UNFPA is scheduled to meet on Tuesday 26
- UNHCR will provide support (NFIs) for 2,000 Mozambican Persons of Concern.

Gaps & Constraints:

- The demand for dignity kits is far much higher than the ones procured and those that might be procured using CERF funds.
- There are no safe spaces established to manage GBV cases coupled with lack of access to any possible referral mechanisms
- The displacement camps are overcrowded, poorly lit and unsanitary. This poses serious risk to women and girls safety.
- The cluster requires US\$1,626,275.71 and so far nothing has been mobilized except for reprogramming.

Water & Sanitation Lead: UNICEF

Cluster Lead: Ministry of Water Development and Irrigation

Needs:

- Based on the number of people affected, about 3,691 water points will be needed in order to provide safe water to the affected population. This could be new boreholes or rehabilitation, water trucking, and provision of water treatment chemicals, and regular water quality monitoring and testing.
- Water points in the affected areas have been submerged in flood affected areas and this has facilitated contamination.

- Due to high population pressure on the available water points in the areas the IDP have camped there is a likelihood chance of water points breakdown.
- About 600 chlorine 50 kgs drums will be needed for water treatment.
- Provision of safe water in the IDP camps is of importance to prevent water borne disease and cholera outbreaks.
- About 40,000 set of latrines and bathroom shelters and hand washing facilities will be required in IDP camps to avoid open defecation and prevent sanitary related diseases including cholera outbreak.

Response:

- UNICEF through implementing partners Ministry of health and United purpose has responded by:
 - o Providing water treatment chemicals (water guards and Chlorine) to all affected districts in the IDP
 - Facilitating water quality monitoring and testing for water sources and household water storage with bacteriological testing kits and chlorine residual testing in the IDP camps.
 - Provision of over 5000 water collection and water storage buckets to IDPs.
 - Provision of 178 latrines and bathroom shelters including hand washing facilities.
 - Provision of 20,000 tablets of soaps and distribution is in progress in the IDP camps.
 - Provision of 15, 000 hygiene promotion posters and flier to be distributed in IDP camps

Gaps & Constraints:

- More water point facilities for affected people in IDP camps and communities.
- Water treatment chemicals for IDPs and communities.
- More sanitary facilities in the IDP camps.
- Hygiene promotion partners in the IDP camps.
- The cluster requires US\$4,700,000 and so far US\$1,641,679 has been mobilized, leaving a gap of US\$3,165,000.



Nutrition

Cluster Lead: Department of Nutrition

Co-Lead: UNICEF

Needs:

- Improve and increase integrated community outreach services, together with MCHN services, IYCF and other essential package of care services.
- Provision of sachets of RUTF, registers, report forms, NCST guidelines and health profiles.
- Improve access to OTP and NRU services by providing ambulance services (boats for those that need to cross over to the other side).

Response:

- The Nutrition cluster is in the process of finalizing a flood response plan, that will enable it to prioritize and mobilize additional resources required for the response. In the plan, UNICEF and partners plan to scale-up the management of acute malnutrition, across 11 most affected districts, with daily mass screenings in the CAMPs and monthly active case findings in all affected communities.
- UNICEF, WFP and partners will provide lifesaving nutrition support to at least 4832 (Flood targeted caseload, over and above the regular caseloads) wasted children (1040 SAM, 3792MAM) and 857 pregnant and lactating women in the 11 districts for 3 months.
- Currently nutrition mass screening is happening in Nsanje districts, carried out by GOAL Malawi, through the Health surveillance Assistants.
- UNICEF together with partners will actively engage in community mobilization and orientation of health workers, using the human resources, such as field monitors and health surveillance assistance, currently on the ground. It will work with the C4D unit, to scale on nutrition key messaging and intervention, to ensure that mothers and caregivers can effectively access integrated nutrition services such as screening and other MNCH services, including outreach clinics.

- UNICEF will procure and distribute CMAM supplies, including 3,500 cartons of RUTF, 1000 cartons of F75 and F100 therapeutic diet. It will also procure additional essential medications such as Amoxicillin (about 30000 bottles of powder/oral suspension).
- UNICEF will work with nutrition partners and the department of Nutrition, HIV and AIDS to support National and district Nutrition Cluster Coordination efforts to ensure that the response is well coordinated, resources prioritized, and results achieved.

Gaps & Constraints:

- Resource constraint for a comprehensive screening in all the camps. The cluster has agreed to conduct mass screening in the camps and do targeted active case finding across the affected
- Disaggregated data (under 5s, pregnant and lactating women) remains a challenge in some of the affected districts.
- The cluster requires US\$1,080,936 and nothing has been mobilized so far.

Education UNICEF	Cluster Lead: Ministry of Education, Science and Technology	Co-Lead:	
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Needs:

Schools sessions have resumed in all schools. The challenge for schools that are accommodating IDPs is that lessons happen in the open, as the building that is now used by the IDPs. While most school blocks did not collapse, one school, Nantchengwa primary in Zomba had a collapsed wall of a block.

Response:

UNICEF has provided 143 school-in-a-box kits, 80 recreation kits and 130 black-boards to cater for Nsanje, Chikwawa, Mulanje, Phalombe and Zomba districts.

Gaps & Constraints:

- The use of some schools as camps continues to cause classroom shortages in most districts where IDPs are still camped causing a strain the available resources including water and sanitation.
- The cluster requires US\$2,400,000 and so far US\$560,000 has been mobilized, leaving a gap of US\$1,840,000.

Early Recovery Cluster Lead: Department for Disaster Management Agency Co-Lead: UNDP

Needs:

The impact of the heavy rains is characterised by partial and complete damage of structures particularly houses. In addition, roads and bridges have also been washed away. While a full damage assessment will need to be conducted to assess the loss and damage, there is an urgent need to support communities with early recovery activities.

Response:

UNDP crisis group will provide US 500,000 to support early recovery. UNDP, EU and World Bank are working to better manage the early recovery strategy and will focus on building back better to incentivize return in a more sustainable manner, (housing, reallocation, critical infrastructure, agriculture).

Gaps & Constraints:

Early Recovery to fully determine the financial requirement for the cluster.

General Coordination

The Government of Malawi is leading the response, through the Department of Disaster Management Affairs (DoDMA), with support from humanitarian partners, including NGOs, the UN System and donors. An inter-agency assessment in Nsanje and Phalombe districts was conducted from 11-15 March while for Mangochi, Balaka, Machinga and Zomba district is underway. The objective of the assessment was to validate and determine the scope of the crisis and to identify the main and immediate needs of the affected population. The cluster system was activated and continues to function while inter-cluster meetings will be held weekly to ensure proper operational cross-sector coordination. The UN Resident Coordinator in collaboration with DoDMA is convening weekly Humanitarian Country Team meetings to ensure coordinated response operation. The HCT met on 22nd March to review the drafted response plan. Cluster system has been replicated in the districts to better coordinate the response operations. The District Commissioner, with support from the Director of Planning and Development and the District Civil Protection Committee are leading the response efforts at district level. For information management, 4W and funding tracking Matrices and cluster leads contacts have been developed and shared with DoDMA for circulation.