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Emergency Plan of Action (EPoA) Malaysia: Floods



International Federation
of Red Cross and Red Crescent Societies

DREF Operation n°	MDRMY006	Glide n°:	FL-2021-000061-MYS
Date of issue:	30/05/2021	Expected timeframe:	3 months
		Expected end date:	31/08/2021
Category allocated to the of the disaster or crisis: Yellow			
DREF allocated: CHF 235,405			
Total number of people affected:	5,782	Number of people to be assisted:	5,500
Provinces affected:	1	Provinces/Regions targeted:	1
Operating National Society presence (n° of volunteers, staff, branches): 6,000 volunteers, 74 staff, and 16 branches			
Red Cross Red Crescent Movement partners actively involved in the operation:			
<p>Malaysian Red Crescent Society (MRCS) has over 6,000 volunteers and staff, and 16 branches all over the country. The National Society is well known and respected in the country and works closely with the Government. The MRCS mandate is outlined in Directives No. 18, No. 20 and No. 21 of the National Security Council, where among its role is to support other government agencies in rescue and evacuation efforts and providing emergency medical services. International Federation of Red Cross and Red Crescent Societies (IFRC) has a dedicated team collocated with MRCS, at the national headquarters. The IFRC Malaysia Support Team is working closely with the MRCS headquarter counterparts in monitoring the situation and enhancing readiness measures. IFRC supported the MRCS with pre-positioned stocks that funded under Red Ready, that can be utilized to response to the flood.</p>			
Other partner organizations actively involved in the operation:			
<p>Government of Malaysia (GoM), National Disaster Management Administration (NADMA), Malaysian Fire and Rescue Department, National Security Council (NSC) and the Social Welfare Department of Sabah (JKM), Malaysian Civil Defence Force (APM).</p>			

A. Situation analysis

Description of the disaster

Sabah state in Malaysia had been experiencing heavy rainfalls since 20 May 2021, causing two districts (Beaufort and Tenom) being inundated by floods. The rain was nonstop for a few days resulting in two rivers collision between the Pagalan River and the Padas River. People fled from their homes and evacuated to the temporary shelters. The total number of people affected by flood have reached to 1,552 families (5,782 people) in those two districts. No casualties reported based on the released information from Social Welfare Department (JKM) as of 25 May 2021. The government has opened 39 temporary shelters in these two districts, and provided food, water and blanket to the affected people. Other local NGOs and private sectors also provided water and food for the people in the temporary shelters. Click [here](#) to see the map of affected areas.



Flood in Kampung Paka Paka, Sabah.
(Photo: Bernama)

State	# of temporary shelter	# of families affected	# of people affected	Male	Female	Child	Senior Citizen	Disabled
Sabah	39	1,552	5,782	2,009	2,045	1,728	43	12
Total	39	1,552	5,782	2,009	2,045	1,728	43	12

Villages affected by the flood have been covered by water since 20 May 2021, and the water was slowly rising due to heavy rainfall up to 26 May in the affected areas. A total of 47 villages in Tenom and 75 villages in Beaufort were affected by the floods.

The houses are covered by muds, but no heavy damages reported due to this flood. People reported their household appliances and furniture were broken or damaged. The farmlands and plantations were destroyed due to the flood. This flood is unprecedented, as the usual monsoon season is between November to February. Considering the overstretched capacity of the government to provide support to the affected people due to the current overwhelming response to COVID-19, the government requested MRCS to support the affected people.



Flood in Tenom, Sabah. (Photo: MRCS)

Currently, Malaysia is experiencing a third wave of COVID-19 cases, especially in the past two weeks, with total cases of 549,514 and Sabah state has the second highest number COVID-19 cases in the country with total 61,274 cases as of 27 May 2021. The Government of Malaysia stated that the current intensive care units (ICUs) occupancy in the whole country has reached 91 per cent. The government recently declared a third full Movement Control Order (MCO 3.0) for the whole country due to the spike of the COVID-19 cases. People in Sabah already has limited access to their livelihoods' activities due to the MCO, and with the current flood, they were not able to get engaged in their livelihoods' activities. This has resulted in either no income or reduced income for households in Beaufort and Tenom. Additionally, due to inundation of farmlands, they will not undertake farming activities.

Summary of the current response

Overview of operating National Society Response action

The MRCS along with IFRC Asia Pacific regional Office (APRO) is closely monitoring the situation and coordinating the response with the Government of Malaysia (GoM) at district level. MRCS staff in Sabah branch throughout the affected areas have been active since 20 May 2021 to monitor the situation in the temporary shelter and supporting the District's Social Welfare Department as part of its initial response.

MRCS recently completed the DREF Flood operations in five states that includes Johor, Pahang, Kelantan, Terengganu, and Sabah that reached approximately 2,650 families. The current flood areas targeted by this DREF are not the same areas with the previous DREF flood operation. This flood is unprecedented, as the usual monsoon season is between November to February. Considering the overstretched capacity of the government to provide support to the affected people due to the current overwhelming response to COVID-19, the government requested MRCS to support the affected people. The distribution of hygiene kits, and provision of cash was implemented during the DREF Flood operations from January to May 2021. With this recent flood response, MRCS has trained staff and volunteers on response, cash and voucher assistance (CVA), community engagement and accountability (CEA), mental health and psychosocial support (MHPSS) and are on standby in case of a need for deployment.

Furthermore, over the past two years, the MRCS have received support to enhance their response capacities as part of the Red Ready Programme, which is funded by USAID's Bureau for Humanitarian Assistance (BHA). The Red Ready programme helps to improve MRCS's capacity to respond to disasters and emergencies. In addition to training and equipping the National and State Disaster teams, it also assists with the prepositioning of hygiene kits in Sabah in anticipation of the annual monsoon floods. As part of the Red Ready project, Sabah have had members of their State Disaster Response Team (SDRT) trained. MRCS Sabah has a pre-positioned stock of 500 sets of hygiene kits and distributed 174 sets of hygiene kits to the people affected by floods in the temporary shelters in Beaufort and Tenom.

The MRCS Sabah branch is conducting assessment on the ground, based on that assessment, there may be a revision of the current response plan. MRCS distributed 174 hygiene kits in the temporary shelters in both Beaufort and Tenom

districts. Staff and volunteers were assessing the villages affected by the flood, to get more in depth information and continue to coordinate with the local authorities.

Overview of Red Cross Red Crescent Movement actions in country

IFRC APRO has a dedicated team stationed with MRCS, at the national headquarters. The IFRC Malaysia Support Team is working closely with the MRCS headquarters counterparts in monitoring the situation and enhancing readiness measures. The IFRC continues to support MRCS in implementing the Red Ready Programme, with a key focus currently on enhancing cash readiness of the National Society's headquarters and branches.

Overview of other actors' actions in country

The Social Welfare Department (JKM) and National Disaster Management Administration (NADMA) are coordinating the initial response with State and Federal governments and other local NGOs in those two districts affected by flood and had set up temporary flood relief centers. These agencies provided assistance for basic needs, which included food, water, hygiene items, blankets to the people affected by flood which sheltered in the temporary flood relief centers. Based on the coordination with those government authorities, they requested MRCS to cover the needs of the people affected by flood in those areas after they return back to their village. Currently, the government only covered basic needs in the temporary shelter.

COVID-19 safe operation

MRCS will ensure that all staff and volunteers will abide to the national disaster management guidelines with regards to measures to minimize transmission of COVID-19 that was released in November 2020. With reference to the NADMA webinar on 24 November 2020, the distribution of goods must be approved by Movement Control Order as per the latest distribution guide. The Malaysian government is very concerned about the current COVID-19 transmission in line with the impending flood disaster. However, there will be no concern for MRCS to implement a CEA activity and CVA which have been implemented as in previous years during the flood response. MRCS is allowed to continue work as an essential service and have trained volunteers in COVID-safe behaviour and provided them with PPE during the previous DREF floods operations. MRCS has informed and coordinated with local governments and the Social Welfare Department on the MRCS target locations, recipients to avoid duplication of effort. Data and requirements will be informed by district with the cooperation of the government. MRCS will adjust their implementation strategy with using virtual approach such as phone, conference call, social media when the movement is restricted.

MRCS will follow the [IFRC COVID-Safe Guide](#) for social mobilization for community health workers including volunteers. The guidance was designed with limited face to face contact in mind, according to the restrictions that COVID-19 has imposed; The guidance can be adapted for flexible delivery in one-on-one, in groups, in person or on-line, or using mixed modalities.

Needs analysis, targeting, scenario planning and risk assessment

Needs analysis

The MRCS Sabah staff and volunteers conducted initial assessment in Beaufort and Tenom districts and coordinated with the Social Welfare Department (JKM), National Disaster Management Administration (NADMA) that lead the response in those two districts. From the assessment, there were no significant damages on infrastructures. The houses are covered by muds, but no heavy damages reported due to this flood. People reported their household appliances and furniture are broken or damaged. The farmlands and plantations were destroyed due to the flood. The road access to Tenom and Beaufort can still be accessible by villagers to get their daily supplies.

The majority of the people affected by this flood has household income less than CHF 432 (less than MYR 2,000) per month. In Malaysia, people with a monthly income below MYR 3,000 falls under the B40 category families, which is the bottom 40 per cent of population below national average income. The main livelihoods activities in Beaufort and Tenom districts are dependent on farming. People expressed concerns mostly on not having enough financial resources to meet their daily basic needs that includes food and personal hygiene items to clean or to repair their houses after the flood.

Beside the floods, the current movement restrictions due to the COVID-19 pandemic are becoming the reason that the people lost their access to perform their livelihoods activities and their income, or limiting their activities to earn income for their families. Access to financial resources will be needed for the affected families to enable them to purchase their daily basic needs, to clean and to do small repair of their houses.

There are no significant health issues found while the people are staying in the temporary flood relief centers. Only fewer than 20 people reported having diarrhoea and was referred to the health clinic nearby. Currently, the COVID-19 cases in Malaysia are spiking, especially in the last two weeks, with the daily cases of more than 8,000 cases as of 28 May

2021. The Government of Malaysia stated that the ICU capacity in the country has reached 91 per cent. The situation of COVID-19 pandemic puts evacuees in an even more vulnerable position. Given the probability of rapid spread of diseases in tight spaces such as temporary flood relief centers. Thus, access to handwashing facilities, hygiene kits, and PPE, in particular face masks, will be essential to minimize and curb the risk of further transmission.

The effects of the disaster will affect the water, sanitation and hygiene of the area. Social Welfare Department (JKM) has provided temporary shelter to ensure the sanitation needs of the residents can be well taken care of. MRCS will conduct hygiene promotion activities by focusing on the 1,100 most vulnerable households affected by the floods. Ongoing assessments will identify those affected and will implement health and wellness awareness through hygiene promotion. The health systems were already overstressed due to COVID-19 pandemic, and the resources were strained. The ongoing flood is causing additional burden to the health system, battling the coronavirus on one hand and water-borne diseases and health issues on the other hand.

The people also raised concern that they were feeling stressful and worried because of this flood, but also due to the current COVID-19 movement restrictions. After they return back to their homes, they worry about not being able to perform their livelihoods activities or losing their jobs, not being able to earn income for their families, their children's education, and also about their damaged properties which includes their houses, furniture, and their household appliances. There will be a need to support these people with mental health and psychosocial support (MHPSS). MHPSS sessions will be given in the targeted villages. The current MRCS COVID-19 MHPSS intervention is through the PSS care centers located in Kota Kinabalu, Sabah. MRCS will also promote the PSS care center, for the people to reach during MHPSS sessions in the targeted villages.

Targeting

Two districts (Beaufort and Tenom) in Sabah, with a total 47 villages in Tenom and 75 villages in Beaufort were affected by the floods. Through coordination with Social Welfare Department (JKM) and based on the initial assessment, MRCS has identified the worst affected villages in Tenom and Beaufort to be targeted for this floods response. In total, there are 13 villages from Beaufort and Tenom districts, with an estimated of 1,100 households (approximately 5,500 people) to be targeted for this flood response. The selection of the villages is based on the damages caused by the flood and severity of the damages.

MRCS will coordinate closely with agencies on the ground to engage the affected communities and will ensure the selection of beneficiaries for the distribution of assistance is well-targeted based on clear criteria, targeting those who are most in need. General criteria will be the households affected by the flood and the most vulnerable families (under B40 group).

MRCS will also ensure that activities under this operation are aligned with their gender commitments as well as with [IFRC's minimum standards for protection, gender and inclusion in emergency programming](#). Specific considerations will be given for the elderly, pregnant and lactating women, women-headed households, and households caring for persons with disability. The sex, age and disability-disaggregated data for population targeted is not yet available during the needs assessment. This data will be collected during the implementation of this operation.

Scenario planning

Scenario	Humanitarian consequence	Potential Response
There is potential COVID-19 outbreak in evacuation centers and among volunteers responding.	This may lead to COVID-19 related deaths in the affected community as well as increasing transmission rates in the affected areas, placing additional stress on an already burdened health system.	MRCS will include COVID-19 safe SOPs into their response and ensure continuous COVID-19 messaging throughout health promotion activities. MRCS will ensure coordination with government agencies, especially the Department of Health to conduct health promotion to the affected communities regarding health protocols.
With increased cases of COVID-19 in Malaysia, movement restrictions apply to the whole country.	This will slow down the implementation rate of the operation.	MRCS will adjust their response plan, to accommodate the restrictions in place, and a having contingency plan to continue the response.
MRCS personnel contract COVID-19 while responding.	This will slow down the implementation rate of the operation and place personnel at risk of death and ongoing health complications	Ensure MRCS staff members and volunteers are insured under the operation and well oriented on COVID-19 safe implementation approaches.

Operation risk assessment

Apart from the difficulty of road access in some affected areas, movement restriction (due to MCO 3.0) and increased health risks considering on-going COVID-19 crisis, mosquito and water-borne diseases, debris and vehicle accidents,

there are no major threats in Malaysia which may directly interrupt the implementation of operational activities. However, to mitigate the security risks, adequate measures will be put in place. There is already a field implementation guide for MRCS branches and volunteers considering the current COVID-19 context which will be followed for this operation to minimize risks. During the implementation of this operation, MRCS will follow the existing government and movement guidance related to COVID-19. MRCS will follow the IFRC COVID-19 Safe Guide for social mobilization of community health workers including volunteers. The guidance was designed with limited face-to-face contact in mind, according to the restrictions that COVID-19 has imposed. The guidance can be adapted for flexible delivery in one-on-one, in groups, in person or online, or using mixed modalities.

B. Operational strategy

Proposed strategy

The primary objective of the operation is to meet the immediate needs of 1,100 households in flood affected villages of two districts (Beaufort and Tenom) in Sabah through distribution of unconditional multipurpose cash grant, mental health and psychosocial support (MHPSS) services, and hygiene promotion.

Multi-purpose Cash Assistance (MPCA)

Multi-purpose cash assistance (MPCA) will be provided to 1,100 targeted families, who will return to their homes. The amount of cash assistance will be MYR 650 (approximately CHF 145) per family and will be given in two tranches through bank transfer or other means if the family does not have a bank account. The amount of cash defined is based on 60 per cent of the minimum expenditure basket for one household for one month in the targeted areas ([Annex 1](#)), which covers food, hygiene items, medical expenses, etc. Based on the post-distribution monitoring report from the previous DREF flood operation that was implemented between January to May 2021, the majority of cash utilization by the households were on food, hygiene items, medical expenses, school fees, and utilities.

The CVA will be implemented with the assumption that the market is back to its full operation after the flood, and the community has access to the markets. Cash assistance will be pivotal for those returning to their homes. Families to be targeted are those who evacuated to the designated government temporary shelters. Cash assistance is planned to be provided once they leave the temporary shelters. Cash assistance aims to support immediate basic needs (food, hygiene items and daily necessities) once they return back to their respective houses when flood water recedes and/or to compensate the loss in income while they are in the temporary shelters or recover lost household items affected by the flooding. Some of the villagers from the affected districts are farmers and employed as informal workers, and are paid on daily basis. Days spent at evacuation centers meant a considerable loss of income to them. The cash assistance will enable support to families for their immediate recovery needs including purchasing of food, drinking water, hygiene products, repair materials for their house's minor repair needs etc. The cash grant is expected to revive the local market as well, which in turn create multiplier effects of increased livelihood opportunities and flow of cash in the local markets system.

MRCS has the required capacities to distribute cash assistance with the support of IFRC. MRCS has prior experience and capacity with cash and voucher assistance using direct bank transfer to beneficiaries' bank account. MRCS completed cash assistance to 2,962 families in response to COVID-19 in mitigating socioeconomic impact in December 2020, and to 2,650 families in the recent flood response under DREF between January to May 2021. Experienced staff on CVA will be dedicated to support the operations and cash assistance for a period of three months. Cash in emergencies toolkit will be used throughout the operation. MRCS will continue to use the Red Rose data management system, that previously had been used for cash assistance under COVID-19 and DREF floods from January to May 2021. This CVA approach is inline with the MRCS goal to be a cash ready organization for emergency response.

Health and WASH activities

MRCS will provide mental health and psychosocial support to 1,100 households in the target villages when the people has returned to their villages. There will be MHPSS session for adults and children, which the MRCS volunteers will provide mental health awareness, coping mechanism, and to promote the utilization of MRCS Sabah PSS careline center. MRCS Sabah developed the PSS careline center in November 2020 and started in January 2021. Until May 2021, some 1,700 people contacted the careline center in Sabah.

MRCS will implement health and wellness awareness through hygiene promotions to the same 1,100 targeted families. The health systems were already overstressed due to COVID-19 pandemic, and the resources were strained. The ongoing flood is causing additional burden to the health system, battling the coronavirus on one hand and water-borne diseases and health issues on the other hand. The health and hygiene promotion material will have greater emphasis on COVID-19 and water-borne disease. MRCS has available IEC materials that was used for the recent DREF floods operation in January 2021.

Community engagement and accountability (CEA)

MRCS aims to mainstream the [Movement-wide commitments and minimum actions for CEA](#) throughout their operation. Community feedback mechanisms are integrated to relief operations to ensure that affected communities can share their questions, suggestions and concerns MRCS volunteers are responding to questions and other feedback based on their training. In this DREF operation, MRCS has started to implement community engagement activities. MRCS volunteers are part of their communities and their knowledge and experience about their peers are key to build and strengthen trust. MRCS also identified appropriate communication and feedback channels, that were identified from the previous COVID-19 perception survey conducted by MRCS. Based on feedback from the cross-sectoral feedback mechanism, MRCS will share information on the nature and scope of services provided by MRCS and other topics the affected community asks.

It is important to incorporate sustainable behaviours and practices within this operation. Actions taken should cause no harm to the communities being supported. Staff and volunteers will be oriented and trained in CEA as part of the response. Throughout the operation, MRCS is ensuring a regular flow of information between the community, MRCS district units and departments at national headquarters to maintain transparency and address the immediate needs, questions, concerns and suggestions of the most vulnerable people. Key messages for the cash assistance were developed with community input and is being used for the IEC material development. Staff and volunteers are sensitized on gender, age, disability-specific needs and on how to communicate respectfully with persons with physical, sensory and intellectual disabilities, persons with mental health disabilities, and elderly. Female staff and volunteers were encouraged to organize the community information sharing sessions with a focus group of women in the communities. In the case of movement restriction due to COVID-19 cases, the information flow will be share virtually, either using social media, phone call or other means.

Communications

IFRC will support the communications team of MRCS to communicate with external audiences with a focus on the floods and highlighting Red Crescent humanitarian action assisting people affected by the disaster. The communication will generate visibility and support for the humanitarian needs and the Red Cross Red Crescent response. Close collaboration will be maintained between the IFRC Asia Pacific regional communications unit, IFRC Malaysia Support Team and the National Society to ensure a coherent and coordinated communications approach. Written and audio-visual content will be produced, along with relevant social media and digital products, as appropriate. Communications content will be promoted on regional and global IFRC channels and shared with National Societies in the IFRC network. Media and social media scanning will aim to increase effectiveness and contribute to assessing and managing risks. The relief operation will maintain Red Crescent visibility in the field through appropriate branding such as banners, flags and clothing.

Human resources

Selected MRCS branches have technical capacity and experience to deliver the interventions planned in this DREF-supported response but with substantial technical assistance from the national headquarters. Relief activities in targeted states will be led and carried out by MRCS staff and volunteers at the branch level, with support of disaster management, the health focal point staff, the cash focal point staff at the national headquarters, the IFRC operations manager and IFRC Regional Cash Coordinator. To complete the DREF operation within the timeline, MRCS appointed focal persons for the DREF operation in the Sabah branch and headquarters to mobilize its staff and engage volunteers as required and appropriate. Existing IFRC staff (including an Operations Manager and a Senior Operations Support Officer for Malaysia operations) are assisting MRCS in terms of planning, coordination, information management, needs assessment, etc. In addition, IFRC staff will provide technical support for operational management. With the support of IFRC APRO, additional technical surge capacities may be engaged when there is a need.

Information Technology and Information Management

For accurate, reliable and timely data collection, KoboToolbox was used for the needs assessment. The mobile data collection tool also will be used to collect information from the beneficiaries on post-distribution monitoring after providing assistance. Cooperation will be with Information Management (IM) and program personnel to analyse data and evaluate actual targeted population requires for assistance. WhatsApp group and online sessions are in place for sharing regular operational information among the MRCS and IFRC. IFRC APRO IT & Telecommunications team is in Kuala Lumpur to provide technical support at any situation to the volunteers about any communication issues. IT facilitation is ensured in both the IFRC and MRCS ICT sections. IT complications and technical solution in field areas will advise and closely monitor through all the deployed volunteers. For CVA implementation, MRCS will use Red Rose Data Management Platform, that MRCS had used previously in their COVID-19 and DREF floods operation.

Logistics and supply chain

Procurement for cash related services will be done by MRCS in accordance with the operation's requirements, and aligned to IFRC's logistics standards, processes and procedures. Logistics for the MPCA programming will include the bank transfers to the recipient affected families via national banks considering all banking services are fully operational in the affected states. The DREF budget will cover the bank and other fees related to these transfers. Considering the MRCS procurement policies and procedures, and the cost of the financial service (that will not be higher than CHF 100 per person), MRCS will use the cash related service with partner banks, which has a valid agreement to procure this kind of service to MRCS with national coverage and lower fees than other banks. This procurement process complies with IFRC procurement policies and has been evaluated with the technical support provided by the Global Humanitarian Services and Supply Chain Management (GHS&SCM), Asia Pacific in Kuala Lumpur. Logistics also involves the distribution of hygiene kits. The role of logistics will ensure that all requirements can be implemented including vehicles and others.

Quality programming

PMER activities will be rolled out to ensure quality of implementation throughout the operational management cycle. MRCS will be responsible for the day-to-day monitoring of the operation, primarily at the branch/unit level. MRCS and IFRC monitoring teams, including the volunteers, will visit operation sites on a regular basis to measure the progress of the implementation and provide support for the better accomplishment of the proposed actions in the intervention areas. In the event that physical monitoring is unable to be conducted, remote monitoring approached will be used. After the encashment, post-distribution survey will be conducted. The survey will enable the gathering of information about the impact of the assistance and other feedback from recipients of the relief. An internal lesson learned workshop is planned under this DREF to reflect the achievements, challenges and learnings from the operation. There will be adherence to protection, gender and inclusion (PGI) measures, the collection of sex, age and disability-disaggregated data, application of Minimum Standards on PGI in Emergencies through the project cycle (including monitoring and reporting). There will be efforts made to ensure equitable balance of male and female staff and volunteers; as well consideration made to promote the participation of women, men, girls and boys of all ages and backgrounds, and of people with disabilities in the affected population. In case physical monitoring visits are not possible due to the COVID-19 movement restrictions, the verification process and monitoring process will be conducted virtually either through phone or other means.

Administration and Finance

IFRC and MRCS operations and finance teams will work closely to ensure the supply chain of cash towards the field. The operation will rely on existing financial management and administration systems in MRCS and IFRC. Provisions have been made for communication costs related to the operation as well as financial charges and general expenses.

Security

The National Society's security framework will be applicable for the duration of the operation to their staff and volunteers. For personnel under IFRC security's responsibility, including surge support deployed to the area, the existing IFRC country security plan, including security regulations, contingency plans for medical emergencies, relocation and critical incident management will be applicable. All IFRC staff must, and RCRC staff and volunteers are encouraged, to complete the IFRC Stay Safe e-learning courses; for example, Stay Safe Personal Security, Stay Safe Security Management and Stay Safe Volunteer Security online trainings. Staff and volunteers are to be aware of the security situation and briefed on reactions in emergency before deployment to the operational area.

C. Detailed Operational Plan



Livelihoods and basic needs

People targeted: 5,500 (1,100 households)

Male: 3,300

Female: 2,200 people

Requirements (CHF): 178,372

Needs analysis: The affected households no longer have access to basic needs or may have lost all their belongings during the floods. Trauma and severe damage to property have impacted their livelihoods resulting in loss of income. Households and communities need support to address their immediate needs to recover with dignity. MRCS has identified the most urgent needs to be food, water and household items. MRCS will focus on 1,100 most vulnerable households affected by the floods. This multipurpose cash grant is expected to cover basic needs upon return to their homes in the coming weeks. The cash delivery mechanism will be through direct bank transfer to families or other means if they do not have bank account. It is still early to quantify the full extent of damage caused on livelihoods. Needs assessments will further identify those needs, and further activities will be elaborated when information becomes available. The assessment planned will cover livelihoods, WASH and health sectors.

Risk analysis: Risk of implementing disaster relief during COVID-19 pandemic must comply with government (NADMA) guidelines.

Population to be assisted: Up to 1,100 households to receive multipurpose cash assistance to ensure availability of basic needs, includes foods and hygiene needs during the emergency and recovery phases. The cash assistance can also be used to do minor repair or to clean their houses, and to pay their urgent health service needs. Prioritization will be given to the most vulnerable families who will have spent extended timeframe in evacuation centers, women-headed households, households with pregnant and lactating women, infant family members, disabled people and/or primary school children within the pre-agreed locations in coordination with local authorities. The transfer value per family is defined based on 60 per cent of the minimum expenditure basket for one household for one month in the targeted areas (Annex 1), which covers food, hygiene items, medical expenses, etc.

Programme standards/benchmarks: This operation will seek to meet Sphere standards, ensuring calculated minimum expenditure basket is defined and adhered to.

P&B Output Code	Livelihoods and basic needs Outcome 1: Communities, especially in disaster and crisis affected areas, restore and strengthen their livelihoods								# of targeted households that have enough (food, cash, income) to meet their survival threshold (Target: 1,100)									
	Livelihoods and basic needs Output 1.5: Households are provided with unconditional/multipurpose cash grants to address their basic needs								# of households reached with cash for basic needs (Target: 1,100)									
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP081	Unconditional/multipurpose cash distributions.			x	x	x	x	x	x	x								

AP081	Continued assessment of needs	x	x			x												
AP081	Carry out market assessment	x	x															
AP081	Identify, verify and register target households according to set criteria and prepare beneficiary lists	x	x															
AP081	Community meetings and consultation with local authority	x	x															
AP084	Dissemination of IEC materials and community engagement			x	x	x	x	x	x									
AP081	Engage a suitable money transfer facility for cash distribution			x	x	x	x	x	x									
AP081	Disburse cash grants to targeted households			x	x	x	x	x	x									
AP081	Price and marketing monitoring	x					x											
AP081	Conduct post-distribution monitoring on the usage of cash transfers and reporting (covering at least 10% of target households)											x	x	x				



Health

People targeted: 5,500 people (1,100 households)

Male: 3,300 people

Female: 2,200 people

Requirements (CHF): 23,217

Needs analysis: The people also raised concerns that they were feeling stressful, worried, and trauma because of this flood, but also due to the current COVID-19 movement restrictions. They are worrying about not being able to perform their livelihoods activities or losing the jobs, not able to earn income for their families, their children's education, and also about the damages to properties which includes their houses, furniture, and their household appliances. There will be a need to support these people with mental health and psychosocial support (MHPSS).

Risk analysis: For disaster management this time, the risk is very high as health system is overwhelmed by increase in cases of COVID-19. MRCS needs to comply with the SOPs for disaster management and deliver hygiene promotion more carefully according to established procedures.

Population to be assisted: MRCS will provide MHPSS to 1,100 households in the target villages when they have returned to their villages. There will be MHPSS sessions for adults and children, which the MRCS volunteers will provide mental health awareness, coping mechanism, and to promote the utilization of MRCS Sabah PSS careline center.

PFA-trained volunteers will provide psychological first aid to the people affected by the floods by incorporating the "look, listen and link". Those requiring further assistance will be referred to other agencies for more specialized support. There will also be provision of duty of care for all staff and volunteers working on the ground for this response to ensure their wellbeing.

Programme standards/benchmarks: MHPSS/PFA guidance from IFRC/MRCS.

P&B Output Code	Health Outcome 1: The immediate risks to the health of affected populations are reduced								# of targeted households at evacuation centers and affected districts (Target: 1,100)									
	Health Output 1.1: Community-based disease control and health promotion is provided to the target population								# of households, volunteers and villages involved in the disaster (Target: 1,100)									
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP082	Assessment on targeted villages		x															
AP021	Orientation of volunteers and staff involved in disaster response on COVID-19 safe practices		x	x														
AP021	Adaptation and translation of NADMA guidelines and protocols on prevention of diseases and COVID-19 safe guide		x	x														
AP023	Staff and volunteers' wellbeing and duty of care- proper PPE, orientation on COVID-19 and regular monitor of symptoms, PFA support. COVID-19 prevention kits will be provided for staff and volunteers.			x	x	x	x	x	x	x	x	x	x					
AP021	Reproduce and distribute IEC materials on community-based disease prevention, epidemic preparedness and health promotion, complemented by the use of social media and youth as agents of behavioural change (YABC).		x	x	x													
P&B Output Code	Health Outcome 6: The psychosocial impacts of the emergency are lessened								# of targeted household at evacuation center and district that are affected and volunteer (Target: 1,100)									
	Health Output 6.1: Psychosocial support provided to the target population as well as to RCRC volunteers and staff								# of household, vol, and village that involve in the disaster (Target: 1,100)									
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP023	Conduct training for volunteers in psychosocial support		x	x														
AP023	Assessment of PSS needs and resources available in the community		x	x														
AP023	Provide PSS to people affected by the crisis/disaster through provide MHPSS sessions in the target villages and through PSS careline center.					x	x	x	x	x	x							
AP023	Provide PSS to staff and volunteers					x	x	x	x	x	x							



Water, sanitation and hygiene

People targeted: 5,500 people (1,100 households)

Male: 3,300 people

Female: 2,200 people

Requirements (CHF): 5,498

Needs analysis: The effects of the disaster will affect the water, sanitation and hygiene of the area. Social Welfare Department (JKM) has provided temporary shelter to ensure the sanitation needs of the residents can be well taken care of. MRCS will conduct hygiene promotion activities by focusing on the 1,100 most vulnerable households affected by the floods; Ongoing assessments will identify those affected and will implement health and wellness awareness through hygiene promotions. The health systems are already overstressed due to COVID-19 pandemic, and the resources are strained. The ongoing flood is causing double burden to the health system, battling coronavirus and water-borne diseases and health issues.

Risk analysis: Risk of implementing disaster relief during COVID-19 pandemic must comply with government (NADMA) guidelines.

Population to be assisted: Up to 1,100 households to receive hygiene promotion. MRCS will conduct assessments to ensure that priority is given to the most vulnerable families who had spent long hours in temporary shelters, women-headed households, households with pregnant and lactating women, infant family members, disabled people and/or primary school children within the pre-agreed locations in coordination with local authorities. MRCS distributed 174 hygiene kits from their pre-positioned stocks to the people affected by flood in the temporary shelter during the early days of the response. This hygiene kit will be replenished by this DREF.

Programme standards/benchmarks: Program evaluation is based on the promotion of hygiene that has been implemented previously under community service. This promotional target will be implemented in evacuation centers under JKM regulations.

P&B Output Code	WASH Outcome 1: Immediate reduction in risk of waterborne and water related diseases in targeted communities	# of households reached with WASH services (Target: 1,100)																
	WASH Output 1.4: Hygiene promotion activities are provided to the entire affected population Hygiene promotion activities which meet Sphere standards in terms of the identification and use of hygiene items provided to target population.	# of people provided with hygiene promotion (Target: 5,500)																
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP030	Conduct needs assessment: define hygiene issues and assess capacity to address the problem		x															
AP030	Select target groups, key messages, and methods of communicating with beneficiaries (mass media and interpersonal communication)		x															
AP030	Develop a hygiene communication plan. Train volunteers to implement activities from communication plan			x	x	x	x	x	x	x	x							
AP030	Implement activities from communication plan				x	x	x	x	x	x	x							
AP030	Print IEC materials				x	x												

AP030	Assess progress and evaluate results.								x				x	x					
P&B Output Code	WASH Output 1.5: Hygiene-related goods (NFIs) which meet Sphere standards and training on how to use those goods is provided to the target population	# of people provided with hygiene kits (Target: 870)																	
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	
AP030	Distribution of hygiene kits		x																
AP030	Conduct post-distribution monitoring												x	x					
AP030	Replenishment of hygiene kits distributed to temporary shelters									x	x								



Protection, Gender and Inclusion

People targeted: 5,500 people (1,100 households)

Male: 3,300 people

Female: 2,200 people

Requirements (CHF): (incorporated in other sectors)

Needs analysis: While assessment is ongoing, MRCS is currently using assessment forms that facilitate the capture of sex and disability-disaggregated data to inform this relief operation. MRCS will deploy both female and male volunteers during all stages of the operation including assessments, distributions, awareness activities and post-distribution monitoring in the communities.

Risk analysis: Risk of implementing disaster relief during COVID-19 pandemic must comply with government (NADMA) guidelines.

Population to be assisted: Measures will be taken in order to ensure that the operation will comply with the minimum standards for protection, gender and inclusion in emergencies. Should assessments prove that there are specific protection risks, targeted activities will be considered.

Program standards/benchmarks: Rapid assessment tools.

P&B Output Code	Protection, Gender & Inclusion Outcome 1: Communities become more peaceful, safe and inclusive through meeting the needs and rights of the most vulnerable.	<i>The operation demonstrates evidence of addressing the specific needs to ensure equitable access to disaster response services (Target: Yes)</i>																	
	Protection, Gender & Inclusion Output 1.1: Programmes and operations ensure safe and equitable provision of basic services, considering different needs based on gender and other diversity factors.	<i>NS ensures improved equitable access to basic services, considering different needs based on gender and other diversity factors. (Target: Yes)</i>																	
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	

AP031	Support sectoral teams to include measures to address vulnerabilities specific to gender and diversity factors (including people with disabilities) in their planning	x	x	x	x													
AP031	Support sectoral teams to ensure collection and analysis of sex, age and disability-disaggregated data (see guidance in Minimum Standards)			x	x	x	x											
AP031	Orientation to staff and volunteers on PSEA and child safeguarding policy of IFRC.	x	x															

Strategies for Implementation

Requirements (CHF): 28,319

P&B Output Code	S1.1: National Society capacity building and organizational development objectives are facilitated to ensure that National Societies have the necessary legal, ethical and financial foundations, systems and structures, competences and capacities to plan and perform	# of NS branches that are well functioning in the operation (Target: 1)																
	Output S1.1.4: National Societies have effective and motivated volunteers who are protected	# of volunteers involved in the operation provided with briefing/orientation (Target: 20)																
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP040	Provide insurance for volunteers		x	x														
AP040	Provide complete briefings on volunteers' roles and the risks they face		x	x														
AP040	Provide psychosocial support to volunteers				x	x	x	x	x	x	x	x	x	x				
AP040	Provide orientation to volunteers on their rights and responsibilities		x	x	x	x												
AP040	Provide allowances and COVID-19 prevention kits		x	x	x	x	x	x	x	x	x	x	x	x				
AP040	Provide training for volunteers on specific topic needed for this operation		x	x	x	x	x	x	x	x	x	x	x	x				
P&B Output Code	Output S2.1.3: NS compliance with Principles and Rules for Humanitarian Assistance is improved	% of CEA activities are carried out according to the operation timeline (Target: 100%)																
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP084	Community communication activities ensure people are kept informed of operational plans and progress and have they information they need about the response		x	x	x	x	x	x	x	x	x	x	x	x				
AP084	Community feedback systems (including rumour and/or perception tracking) are established, and feedback acted upon and used to improve the operation		x	x	x	x	x	x	x	x	x	x	x	x				

P&B Output Code	Output S2.1.4: Supply chain and fleet services meet recognized quality and accountability standards								<i>% of procurement is carried as per IFRC standards and items replenished in the operation timeline. (Target: 100%)</i>									
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP050	IFRC office provides procurement support as needed to the National Society's logistics unit for replenishment		x	x	x	x												
P&B Output Code	Outcome S3.2: The programmatic reach of the National Societies and the IFRC is expanded.								<i># of NS workshops launched and conducted (Target: 1)</i>									
	Output S3.2.1: Resource generation and related accountability models are developed and improved								<i># of assessments at state-level (Target: 1)</i>									
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP058	Conduct need assessment		x	x														
AP058	Conduct lesson learned workshop												x					
AP058	Prepare final report												x	x				
P&B Output Code	Output S4.1.3: Financial resources are safeguarded; quality financial and administrative support is provided contributing to efficient operations and ensuring effective use of assets; timely quality financial reporting to stakeholders								<i>Finance Department provides consistent support to the National Society to ensure quality to financial reporting (Target: Yes)</i>									
	Activities planned	Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP064	IFRC APRO will support MRCS finance team to comply with financial procedures and reporting standards		x	x	x	x	x	x	x	x	x	x	x					

Funding Requirements

International Federation of Red Cross and Red Crescent Societies

*all amounts in
Swiss Francs
(CHF)*

DREF OPERATION

MDRMY006 - MALAYSIA - FLOODS

30/5/2021

Budget by Resource

Budget Group	Budget
Water, Sanitation & Hygiene	3,632
Medical & First Aid	18,200
Teaching Materials	1,660
Cash Disbursement	155,485
Relief items, Construction, Supplies	178,977
National Society Staff	8,100
Volunteers	16,840
Personnel	24,940
Professional Fees	13,120
Consultants & Professional Fees	13,120
Workshops & Training	500
Workshops & Training	500
Travel	3,500
General Expenditure	3,500
DIRECT COSTS	221,037
INDIRECT COSTS	14,367
TOTAL BUDGET	235,405

Reference documents



Click here for:

- [Previous Appeals and updates](#)

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How we work

All IFRC assistance seeks to adhere to the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable. The IFRC's vision is to inspire, **encourage, facilitate and promote at all times all forms of humanitarian activities** by National Societies, with a view to **preventing and alleviating human suffering**, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:



Save lives,
protect livelihoods,
and strengthen recovery
from disaster and crises.



Enable **healthy**
and **safe** living.



Promote **social inclusion**
and a culture of
non-violence and **peace**.

Annex 1

Minimum Expenditure Basket for one Households per month

Estimated household expenditure for food (1 month)

No	Food Item	Unit	Estimated Cost
1	Rice	10 kg	27.00
2	Coarse Sugar	1 kg	3.00
3	Oil (in bottle)	1 kg x 2	16.00
4	Tea	100 g	3.50
5	Canned Sardine	(425g) x 2	3.40
6	Infant Formula Milk	900g	28.00
7	Chicken	1 kg	10.00
8	Buffalo Meat	1 kg	20.00
9	Eggs (Grade A)	12 pcs x 2	9.60
10	Fish	1 kg x 2	24.00
Total			144.50

Estimated household expenditure for household items (1 month)

No	Non-food Item	Unit	Estimated Cost
1	Bath Soap	1 bar x 4pcs	5.60
2	Toothpaste	1 tube (big) x 2 pcs	13.00
3	Toothbrush	1 pc x 5 pcs	17.50
4	Washing Powder	1 kg	13.00
5	Sanitary Pad	Sanitary Pad	16.00
6	Razor	1 pc	2.80
7	Baby diapers	1 pack / 40 pcs	35.00
8	Kerosene	1 liter	10.00
9	Floor Brush	1 pc	6.00
10	Disinfectant	1 liter	40.00
11	Water Bucket	1 pc	9.00
12	Water dipper	1 pc	2.00
13	Floor Cleaner	3 liter	21.00
Total			190.90

Other costs

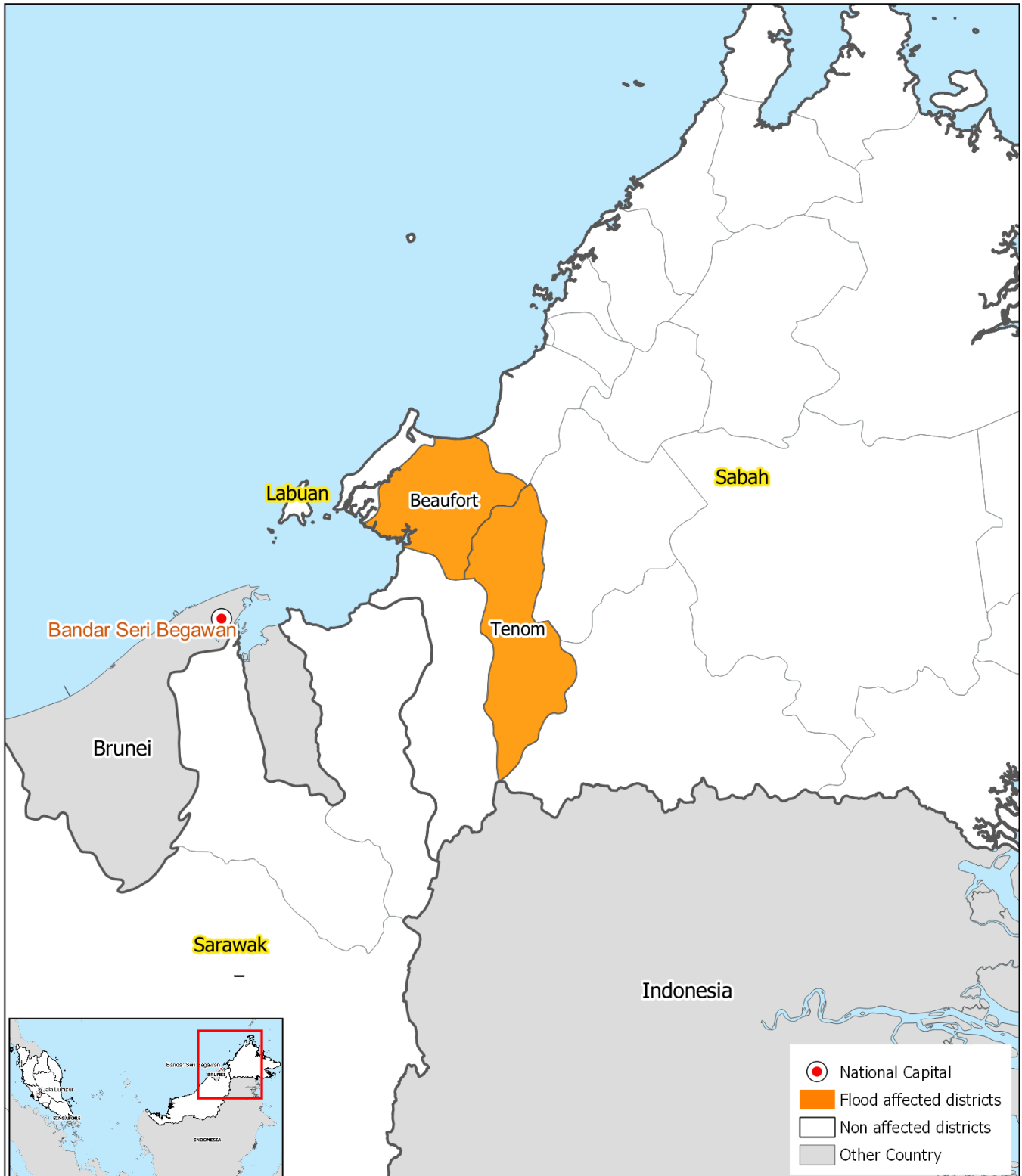
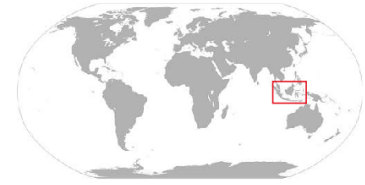
No	Items	Unit	Estimated Cost
1	Medical Cost	1	100.00
2	Utilities	1	400.00
3	Communications	1	50.00
4	Education	1	100.00
5	Transportations Cost to clinic	1	100
Total			750.00

Total Minimum Expenditure Basket per household per month	1,085.40
60%	651.24



Malaysia: Floods Emergency Plan of Action (EPoA)

29 May 2021



The maps used do not imply the expression of any opinion on the part of the International Federation of the Red Cross and Red Crescent Societies or National Societies concerning the legal status of territory or its authorities. Map data sources: OCHA, OSM Contributors, ICRC, IFRC

