

Final Report

Malaysia: Floods

DREF operation	Operation n°: MDRMY006
Date of Issue: 27 November 2021	Glide number: FL-2021-000061-MYS
Operation start date: 1 June 2021	Operation end date: 31 August 2021
Host National Society: Malaysian Red Crescent Society (MRCS)	Operation budget: CHF 235,405
Number of people affected: 5,782 ¹ People	Number of people assisted: 6,167 ² People
Red Cross Red Crescent Movement partners currently 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. Its role is to support other government agencies in rescue and evacuation efforts and provide 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 worked with the MRCS headquarter counterparts in monitoring the situation and enhancing readiness measures. IFRC supported the MRCS with prepositioned stocks funded under Red Ready, which was utilized to respond 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

Heavy rainfall was experienced in Sabah on 20 May 2021. This heavy rainfall has caused the two districts (Beaufort and Tenom) to be inundated. This occurred due to the overflowing of the banks of the Pagalan River and Pada River caused by strong water currents and exacerbated by poor drainage in these two districts. People fled from their homes and were evacuated to temporary shelters. The total number of people affected by the flood had reached 1,552 families (5,782 people) in these two districts. No casualties were reported based on the released information from the 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 blankets to the affected people. Other local NGOs and private sectors also offered water and food for the people in the temporary shelters with the coordination of the MRCS Sabah Team. A total of 47 villages in Tenom and 75 villages in Beaufort were affected by the floods.



¹ Initial figures by the Social Welfare Department (JKM)

² Figures are based on more accurate and updated assessment information by MRCS.

Summary of response

Overview of Host National Society

The Malaysian Red Cross Society (MRCS), in cooperation with the International Federation of Red Cross and Red Crescent Societies (IFRC), closely monitored the situation and was coordinating the response with the Government of Malaysia (GoM) through the respective Sabah State and State Civil Defence Force (Flood Response Taskforce) at state and municipal levels.

MRCS volunteers in Sabah state throughout the affected areas were activated since 20 May 2021 and throughout the operation. MRCS Sabah mobilized its district network to work alongside the authorities in addressing community needs. Comprehensive online monitoring and discussion were held daily for better information and coordination in the field.

To meet the immediate needs of families in relief centres, MRCS Sabah released 174 hygiene kits from prepositioned stocks for immediate distribution to families in relief centres in the first two weeks of the response. Furthermore, the Sabah MRCS team conducted necessary field assessments in the affected areas of the two districts (Tenom and Beaufort). MRCS identified the worst affected villages in Tenom and Beaufort to be targeted for this response. In total, 13 villages in the Tenom and Beaufort Districts were targeted for this flood response. Villages were selected based on damages caused by the flood and the damage severity. This operation has reached 1,274 households (6,167 people, with an average of five family members per household), with 1,100 households receiving multipurpose cash grants and COVID-19 prevention kits and 174 households receiving hygiene kits. The operation started in June 2021 and was completed by 31 August 2021.

During this operation, MRCS followed the existing government and movement guidance related to the COVID-19 crisis. During the Movement Control Order (MCO), MRCS staff and volunteers were still allowed to operate as the National Society provided essential services to people. MRCS was still able to offer planned assistance under the DREF operation, including distributing hygiene kits, COVID-19 prevention kits, and cash assistance to the targeted affected people. MRCS Sabah coordinated well with government agencies as most government agencies and district officers were aware of the branch's responsibility and support.

Overview of Red Cross Red Crescent Movement in-country

The IFRC Asia Pacific regional office (APRO) in Kuala Lumpur has a dedicated team based at the national headquarters, alongside MRCS. The IFRC Malaysia support team cooperated closely with their MRCS counterparts at the headquarters to monitor the situation and improve readiness measures. The IFRC continues to assist the MRCS in implementing the Red Ready Programme, with a current emphasis on developing cash readiness at the National Society's headquarters and branches. IFRC (APRO) ensures that the MRCS and their states branches have full operational capacity and can respond to any disaster.

Needs analysis and scenario planning

Staff and volunteers from the MRCS Sabah branch conducted an initial assessment in the Beaufort and Tenom districts, coordinating with the Social Welfare Department (JKM) of the National Disaster Management Administration (NADMA), which also led the response in these two districts. From the assessment, there were no significant damages to infrastructure and services. Some houses were covered in mud, but no considerable damages were reported due to the flood. People reported broken and damaged household appliances and furniture. The flood destroyed farmlands and plantations. Nevertheless, villagers could still get their daily supplies using the access roads to Tenom and Beaufort.



MRCS Sabah volunteer delivering hygiene kits to one of the relief centres in Beaufort. Photo: MRCS

A significant percentage of those impacted by this flood have a monthly salary of less than CHF 432 (MYR 2,000). Malaysians with a monthly salary less than MYR 3,000 belong to the B40 category, symbolizing the bottom 40 per cent of the population earning less than the national average. The agriculture sector is the primary source of income in the Beaufort and Tenom districts. People were primarily worried about not having enough money to meet their daily needs, including food, household and hygiene products to clean or restore their residences after the flood.

Aside from the floods, the movement restrictions caused by the COVID-19 pandemic became difficult for people who lost access to their livelihood activities, which limited their activities to earn money for their families. Financial resources are necessary for families to purchase their essentials, clean, and repair their homes. There were no significant health concerns discovered while people stayed in temporary flood relief centres. Only about 20 people reported diarrhoea and vomiting and were referred to a nearby health clinic. COVID-19 cases in Malaysia was on the rise, with daily cases totalling over 8,000 as of 28 May, 2021. As for Sabah State, the current new active cases were at 308, bringing the total to 61,582 in Sabah.



Meeting with PKOB Beaufort to gain information regarding the flood situation. Photo: MRCS

The disaster affected the water, sanitation and hygiene (WASH) situation in the area. At Tenom and Beaufort, the local community faced slow running water on their taps plus a lack of clean treated water. The state-run water cooperation (Jabatan Air Sabah) mobilized their water tanker to the affected locality. Social Welfare Department (JKM) provided temporary shelter to ensure the sanitation needs of the residents were well taken care of, while MRCS conducted hygiene promotion activities focusing on the most vulnerable households affected by the floods. The health systems were already overstressed due to the COVID -19 pandemic and strained resources. On the other hand, the ongoing flood caused an additional burden to the health system, battling the coronavirus, waterborne diseases and health issues.

The people also raised concern that they felt stressed and worried because of this flood due to the current COVID-19 movement restrictions. When they returned home, they were worried about their livelihoods or losing jobs, earning an income for their families and about their children's education. They were also concerned about damaged properties, including their houses, furniture, and household appliances. There was a need to support people with mental health and psychosocial support (MHPSS). MHPSS sessions were given in the targeted villages.

Risk Analysis

There are no significant threats in Malaysia that may directly interrupt the implementation of operational activities. However, there are difficulties in road access in some affected areas, movement restriction (due to MCO 3.0), increased health risks with the ongoing COVID-19 crisis, mosquito and waterborne diseases, debris and vehicle accidents. Adequate measures were put in place to mitigate security risks. There was already a field implementation guide for MRCS branches and volunteers considering the current COVID-19 context, followed for this operation. During implementation, MRCS abided by the existing government and movement guidance related to COVID-19. MRCS adhered to the IFRC COVID-19 Safe Guide for the 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. It can be adapted for flexible delivery in one-on-one, in groups, in person or online, or using mixed modalities. During the MCO, MRCS staff and volunteers were still allowed to operate as MRCS provided essential services to people. MRCS was still able to offer planned assistance under the DREF operation, including distributing hygiene kits and providing cash assistance to the targeted affected people.

B. OPERATIONAL STRATEGY

Proposed strategy

The operation's objective was to meet the immediate needs of 1,274 families in flood-affected rural communities in Sabah's Tenom and Beaufort districts by allocating hygiene kits from preposition stocks and unconditional multipurpose cash over three months.

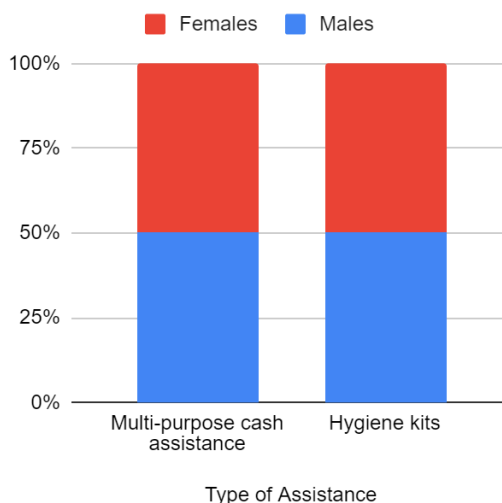
MRCS conducted mental health and psychosocial support (MHPSS), hygiene promotion and provided COVID-19 prevention kits. The operations benefited 1,274 households (6,167 people, with an average of five family members per household; 50 per cent male, 50 per cent female), with 1,100 households receiving multipurpose cash grants and 174 households receiving hygiene kits. Out of 1,274 families reached by this operation, 57 per cent had a male head of household, and 43 per cent had a female head of household (refer to tables and charts).

Despite the country's integration of movement control orders (MCO), MRCS volunteers could conduct activities directly in the community in the first two months and through community committee representation in the last one month of operations. The increased COVID-19 cases in Sabah precipitated this change of approach. The MRCS volunteers designed and developed different ways to share information with the community, including applying posters and signage, hand washing techniques, and MHPSS posters toward all flood-affected households.

Sex disaggregated data by households

Type of assistance	Male-headed HHs	Female-headed HHs	Total no. of HHs
Multi-purpose cash assistance	660	440	1,100
Hygiene kits	61	113	174
Total	721	553	1,274
Percentage	57%	43%	100%

Percentage females and males reached with assistance



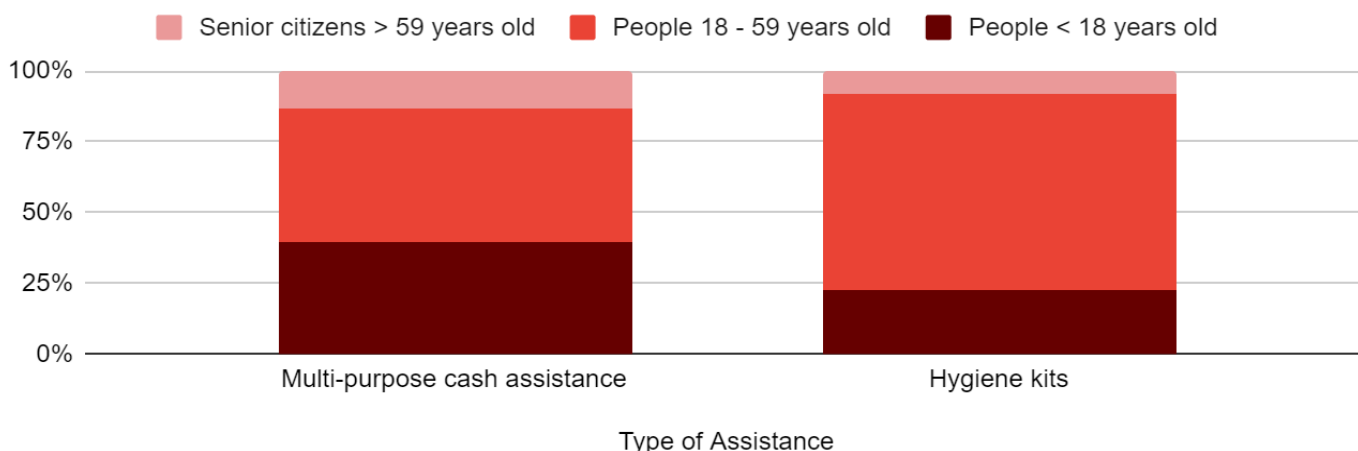
Number of people reached by type of assistance

Type of Assistance	Males	Females	# of people
Multi-purpose cash assistance	2,651	2,646	5,297
Hygiene kits	435	435	870
Total	3,086	3,081	6,167
Percentage	50%	50%	100%

Age disaggregated data by the number of people reached with the assistance

Type of assistance	People < 18 years old	People 18 - 59 years old	Senior citizens > 59 years old	# of people
Multi-purpose cash assistance	2,094	2,496	707	5,297
Hygiene kits	197	604	69	870
Total	2,291	3,100	776	6,167

Age-disaggregated data on people reached in percentages



At the beginning of this operation, MRCS prepared IEC materials with descriptions of MRCS activities in this operation, including the recipient selection criteria, type of assistance provided, the mechanism of support offered to recipients, the timeframe of the operation, and the feedback channels available for communities to contact MRCS for comments or feedback. MRCS volunteers conducted community engagement and provided IEC materials to the targeted

community before assisting. After the community engagement was conducted, MRCS began to register the potential recipients to receive multipurpose cash assistance (MPCA).

As this operation was implemented during the COVID-19 pandemic time, MRCS ensured the safety of staff and volunteers by giving them orientation on the Movement and mobilization guidance during the COVID-19 pandemic, providing them with personal PPE, including masks and hand-sanitizers, and facilitating regular COVID-19 tests after the fieldwork.

The MRCS MHPSS programme deployed qualified psychosocial support (PSS) volunteers to work with more than 20 other volunteers at the RedCrescent4U Careline in Sabah. Over 60 volunteers in Sabah received basic psychological first aid (PFA) training, focusing on the three PFA principles of look, listen, and the ability to connect to communities. Volunteers were trained how and where to approach people who were in distress. PSS activities for children would include empathic interviewing, calming techniques, mindfulness breathing and grounding, arts and crafts, and games. Every interaction with villagers was used to promote MRCS RedCrescent4U Carelines, and signage was placed in public places to increase awareness. Furthermore, the careline was used to monitor the impact of intervention activities during the DREF.



*Volunteers conducted recipient registration.
Photo credit by MRCS.*

Communication

The IFRC communication team from the APRO office assisted the MRCS media team in engaging with external audiences about the situation to draw attention and support for humanitarian issues and the Red Cross and Red crescent response.

MRCS developed internal communication mechanisms specific for this operation, including a weekly team call involving all MRCS Sabah officers, field coordinators, sector focal-focal persons, and created a WhatsApp group for daily communications.

Human resources

The operations in Sabah were led and carried out by MRCS staff and volunteers at the branch level, with support from the disaster management department, cash focal point at the national headquarters and the IFRC operations manager and regional cash coordinator. To accomplish the DREF operation on time, MRCS appointed areas of focus for the DREF operation in Sabah and national headquarters to deploy personnel and engage volunteers as requested and needed. Existing IFRC Malaysia support staff aided MRCS with planning, coordinating, information management (IM), needs assessment, and other tasks. Furthermore, IFRC personnel provided technical support for strategy implementation.

Information technology and information management

The MRCS used mobile data collection to rapidly assess the targeted areas through the KOBO platform. The MRCS, with support from IFRC, developed the assessment tools and uploaded them to the KOBO platform. Volunteers and staff were trained on the assessment tools and on collecting data with mobile phones. From the Kobo platform, a quick analysis could be generated from the data collected during the assessment. Mobile data collection was used to register recipients and conduct post-distribution monitoring, while a Red Rose data management platform aided the distribution of hygiene kits and multipurpose cash grants. All collected data were stored in the Red Rose data management platform, which managed all the cash transfer processes, included the review and verification process, cash transfer requests from the programme, approval from the management, until the cash transfer process by the finance department. This Red Rose platform also provided a feature to conduct a PDM (Post Distribution Monitoring) like the KOBO platform.

Logistics and Supply Chain

IFRC, through the Global Humanitarian Services and Supply Chain Management (GHSSCM) in Kuala Lumpur, supported the MRCS to procure 174 hygiene kits. These 174 hygiene kits were delivered to MRCS to replenish the prepositioned stocks of hygiene kits distributed for this operation. The prepositioned stock of hygiene kits will enable MRCS to respond quickly to the needs of disaster-affected people in the early phase of a new emergency response.

One of the recommendations from the lesson learned workshop from the current and previous DREF was for MRCS to consider contextualizing the content of the hygiene kits to suit and cater to local needs. The National Society will continue to discuss the contextualization of hygiene kits and involve the logistic unit to improve their disaster preparedness capacity.

In this operation, MRCS worked with one financial service provider (FSP), Maybank, to support the CVA activities. MRCS conducted a procurement process to select the FSP, with a specific scope of work (SOW). The procurement

process was endorsed by IFRC APRO and in compliance with IFRC Procurement Procedure. As the CVA is still a relatively new process in Malaysia, in this partnership, Maybank was not yet able to provide a maximum result as expected by the SOW. In this operation, Maybank facilitated the unbanked families to open a bank account but could not offer cash to the unbanked families in remote places. Based on this first partnership, MRCS, with the support of IFRC, will continue to explore finding a suitable FSP to support MRCS on the CVA. This is already included in the MRCS Cash Preparedness Plan.

Quality programming

The Post Distribution Monitoring (PDM) exercise was carried out to evaluate the overall degree of satisfaction of those who received assistance. Respondents were randomly selected. Out of the targeted 1,100 households for cash and hygiene kit assistance, the predetermined sample size for the PDM was 169 households. This sample size avails the PDM with a margin of error at 5 per cent, confidence level at 95 per cent, and response distribution at 50 per cent, which are above the recommended sampling parameters.

When most participants had used cash assistance to address their self-identified necessities, the MPCA goal was deemed to be met. The assistance also aided them in reducing negative coping mechanisms, especially in limiting their quality food intake and making use of their savings. In the PDM, 94 per cent of respondents said they were delighted with the cash assistance provided by MRCS, and 72.2 per cent said the MPHSS was helpful. The majority (99.4 per cent) said the hygiene promotion offered relevant information that improved their overall hygiene and protection against waterborne disease (94.1 per cent). This operation's experience has also enhanced the capabilities and competencies of the relevant MRCS branches in relief efforts.

From these operations, MRCS identified key operational constraints in several segments from this operation, including the overall planning, operational management, and coordination. Community engagement and hygiene promotion implementation and MHPSS programmes were also acknowledged. There were opportunities for improvements in identifying targeted recipients, distributing kits and MPCA, notification to the recipients of the assistance status, and the timeliness of the response.

Below are the findings:

Targeting

All respondents reported being affected by the floods, either temporarily relocated or had their household income affected due to the floods. A significant number of respondents also reported damaged houses. This DREF response reached the most vulnerable households where senior citizens and families with infants were prioritized.

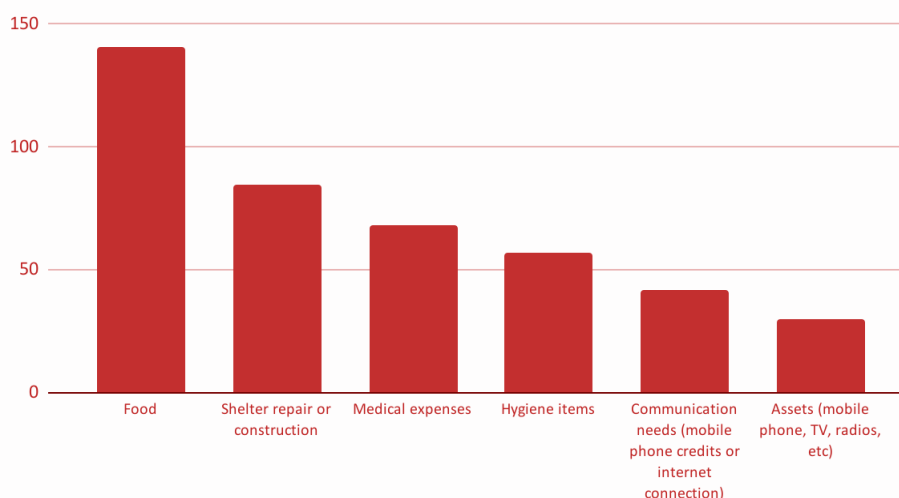
- A total of two districts in Sabah were covered geographically for both the cash assistance and hygiene kits. As observed, geographical targeting was clear, as decisions on districts to be covered was considered based on the severity of the flood situation and its impact on the community.
- Timing and synergy improved from the last DREF mission in ensuring that targeting for both assistances was well understood and coordinated to the branches. It was planned that the affected households were to receive both cash and hygiene kits; however, the complementarity of the cash assistance and hygiene kits could not be established from the result of the PDM.
- A total of 67.5 per cent are male respondents, while 32.5 per cent are female. The majority (27.8 per cent) of the respondents belong to the older age group, 60 years old and above, while a significant proportion also belonged to the 40-49 years old age group. The age group of the recipients need to be considered in future programme design, especially on planning technology-based solutions in receiving assistance and communicating and gathering feedback.

Cash and voucher assistance

- Ninety-four per cent of the respondents reported receiving the full amount of cash assistance amounted to RM 650, 2 per cent received RM 300 cash assistance, 1 per cent received RM 350, while 2 per cent could not confirm the amount received. It can be noted during the PDM field activity that some respondents were not aware that the cash assistance was transferred to their bank accounts already.
- A total of 48.5 per cent reported that the cash assistance was not enough to cover their monthly needs. This was attributed to prolonged community quarantine, loss of income due to COVID-19 and bigger family size.
- The top five cash expenditures were on food (83%), shelter repair or construction (50%), medical expenses (40%), hygiene items (33%) and communication needs such as mobile phone credits or internet connection (24.8%).
- PDM survey results and case stories both highlighted that the recipient's needs were met. The assistance gave a sense of relief for a couple of weeks without worrying about reducing the quantity and quality of food and purchasing basic household items, using up their savings, and seeking help from others by borrowing or relying on donations and other humanitarian assistance.
- The timeliness of cash assistance can be improved. While the majority reported that the assistance came on time, it was difficult to gauge since most of the respondents were still very positive and grateful for the cash

received, noting that it was their first time to receive cash assistance. It was noted that some of the respondents were not aware of the cash assistance and were only informed during the first monitoring activity and the PDM.

Cash assistance utilization



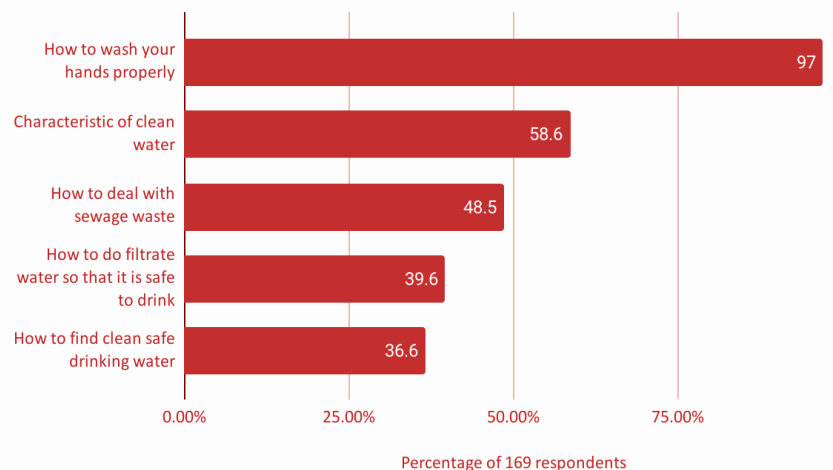
MHPSS

- A high 89 per cent were aware of the MRCS Sabah careline centre, with 72.2 per cent utilizing the call centre careline. 80.5 per cent had taken part in the MHPSS activities.
- 74.6 per cent had given a positive review on the helpfulness of the psychosocial support provided by MRCS throughout the disaster response. The activities mentioned are breathing exercises, calling the call centre and house visits. The people who received the PSS support were affected by both the flood and COVID-19 strict movement restrictions.

Hygiene promotion

- 80.5 per cent stated they received an IEC booklet, face mask and hand sanitizer, 17.8 per cent said they only received an IEC booklet, and 1.8 per cent reported only receiving face mask and sanitizers. The discrepancies in items received likely came from the district office used for distributions due to the national lockdown.
- Hygiene promotion activities were found to be relevant to the beneficiaries, percentage segregation by the topic shared are as per the table shown.
- Up to 92.3% shared that the information helped improve overall hygiene in their household.
- The majority (94.1 per cent) said the information helped to increase understanding on COVID-19 and waterborne diseases,
- The distribution of hygiene kits was not part of the PDM, as the MRCS team in Sabah could not be on the field due to the movement restrictions, and the volunteers needed to adhere to the COVID-19 protocol of the district office.

Relevance of hygiene promotion information



Community engagement and accountability (CEA)

- One hundred per cent of respondents mentioned that they encountered posters from MRCS in their community area. 99.4% said the IEC booklet and/or posters were easy to navigate. All respondents also found the material appealing.
- Eighty-four per cent stated they were fully satisfied with the information received on the overall process and only 16 per cent responded that they were somewhat satisfied. Amongst those who responded somewhat satisfied, respondents would prefer house visits (51%), a community gathering (33%), to have options of calling or sending messages (8%) and a complaints box (8%). The survey showed that a community gathering is still the preferred means of getting information or even house to house visits. Given the distribution timing with the

3rd national lockdown imposed in Malaysia, house visits and community gatherings were highly discouraged and unsafe for the volunteers and the respondents. These can be considered when times are better situated.

- MRCS developed community feedback mechanisms with hotlines and brochures printed and a dedicated email ID set-up. An added advantage for Sabah was that the MHPSS Call Centre was operating in the state, making it easier to perform a feedback mechanism.

Planning, Operational management and coordination

- The planning indicated that the beneficiaries would receive cash assistance amounted to RM650 (CHF 143) in two tranches, RM300 (CHF 66) for the first tranche and RM350 (CHF 77) on the second tranche, followed by the hygiene promotion and MHPSS activities.
- All 1,100 beneficiaries received the same items. Hence for this PDM, the respondents were randomly selected from the total beneficiary pool.
- There is room for improvement in the communication structure and information about the project budget between MRCS national headquarters and MRCS Sabah. The state should have been informed of the maximum budget so that they could strategize the spending efficiently.
- Notification to beneficiaries on their selection at the very early stage of the project implementation was not done, resulting in the beneficiaries not knowing the cash assistance was channelled to them. This shortcoming was compensated by active participation from the MHPSS Call Centre in Sabah.
- The EMCO in Beaufort and Tenom made it challenging for MRCS national headquarters and state staff and volunteers to go down to the affected site. Our volunteers were denied entry to the targeted areas. That made it difficult for MRCS to perform most activities.

Recommendations

Given the findings above, the following are the recommendations:

Targeting

- Guidance on targeting needs should be developed for the reference of local authorities and village committees, which includes a decision matrix on geographical targeting and steps to consider in household selection.
- Programme design to accommodate older age groups regarding technology-based solutions and in communicating the programme objectives and activities.
- Community participation should be highlighted/emphasized from planning to implementation and monitoring

CVA

- Timeliness of cash assistance can still be improved, and that recommended timing of cash assistance distribution should be aimed from three to four weeks after the onset of flooding.
- Strengthen disaster preparedness, including cash preparedness, and systemically capture lessons learned and address bottlenecks to improve programming efficiency and quality.

MHPSS

- The presence of the MHPSS Call Centre in Sabah made it easier for MRCS to reach out to the beneficiaries. The similarity in verbal language between Call Centre agents and the beneficiaries helped in community engagement and building trust amongst the beneficiaries towards the project.
- The constraints of the movement of volunteers to the affected villages during EMCO had affected the operations. Hence the MHPSS activities had to be carried out without physical gatherings.

Hygiene promotion

- There was a need to involve WASH specialists to advise and review existing PDM questionnaires on measuring WASH outcomes.
- Hygiene promotion (HP) sessions can be further improved. While IEC materials printed and distributed are of high quality, the effectiveness of the HP sessions could not be established. IEC materials related to HP and orientation packages should be standardized, and volunteers should be trained to ensure effective delivery and communication of key hygiene messages.

CEA

- The feedback mechanism could be improved, and the systems should have been set up early. The investments in this operation, however, could be easily rolled-out in future responses.
- While community gathering was best identified as a key in providing information, COVID-19 realities should always be considered. It was also recommended to maintain several options for community feedback, feedback design and mechanisms, which should consider means to achieve transparency.

Operational management and coordination

- The MRCS Sabah is an experienced team running disaster relief projects as they were also involved in the previous DREF project. However, minimum standard training on needs assessments, community mobilization,

and basic programme and project management was needed as a refresher. Standard training also needed to incorporate CEA, CVA and information management (IM). These can be designed in disaster response mechanisms like the National Disaster Response Team (NDRT) and State-level response team (SDRT).

- Group WhatsApp was established as the official communication channel. Official or designated email for staff involved in operations can document decisions beyond the WhatsApp messaging. However, the practice of using emails and Google Drive could be emphasized. The operations teams also should decide what communication tools are required, and, when WhatsApp is used, a moderated function such as admin only can be set up.

On 28 August 2021, the MRCS IPN Sabah, IPK and IFRC had a lesson workshop on the discussion for DREF Sabah. This lesson learned was to have a better understanding and more detail-oriented tasking for better responses in the future. The lesson learns workshop comprises National Headquarters Staff, Sabah State Staff and volunteers, and IFRC country support team facilitated by IFRC PMER Staff.

Recommendation from the lesson learn workshop

Coordination

- The MRCS NQ must consult with the MRCS Sabah state and national headquarters on the overall action plan. National headquarters should have an extensive description concerning the budget, implementation plans, and resource mobilization, as the IFRC provides technical assistance to the National Society.
 - Develop stronger collaborative relationships with local government agencies and other stakeholders. Establish communication skills with all relevant parties before the disaster occurs.
- Increase collaboration with the national headquarters in Kuala Lumpur to improve communication, disaster readiness, situation reports, and overall mission coordination before a disaster.

Involvement with the media

- Sabah DREF, Sabah MRCS and national headquarters to have better media engagement and build awareness on the implementation plan and operational response for better media exposure.
- Improve MRCS headquarters and Sabah states receipt of media attention on Facebook, Twitter, and Instagram.
- More local media outlets, such as community newspapers and flyers, and collaborative partnerships with local governments.

Volunteers' safety and wellbeing

- To provide telephone allowances to staff and volunteers.
- To provide personal field kits (raincoats, backpacks, vitamins, etc.) to the volunteers involved.
- To provide for the cost of obtaining vaccines for infectious diseases such as malaria and dengue before undertaking fieldwork.
- To provide COVID-19 swab test after each fieldwork.
- To ensure the staff and volunteers are always insured with insurance before the start of the operations.

C. DETAILED OPERATIONAL PLAN



Livelihoods and basic needs

People reached: 1,100 households

Male: 660

Female: 440

Indicators:	Target	Actual
# of targeted household that have enough (food, cash, income) to meet their survival threshold	1,100	1,100
# of household reached with cash for basic needs	1,100	1,100

Narrative description of achievements

MRCS provided multipurpose cash assistance (MPCA) to 1,100 households affected by floods in Beaufort and Tenom districts in Sabah state between June to August 2021. The recipient selection criteria were households affected by the flood, households evacuated to the evacuation centre, households with vulnerability criteria such as senior citizen as head of household; women-head of households, families with pregnant and or with lactating women, with ill members, and families with people with disabilities (PWD). The MRCS pre-set the value of cash assistance at RM 650 (CHF 145) per household. The cash assistance was given in two tranches to address needs self-identified and prioritized by the households, hence the decision to use multipurpose cash assistance.

The amount of cash is defined based on the 60 per cent of the minimum expenditure basket for one household for one month in the targeted areas, which covers food, hygiene items, medical expenses etc.

Maybank, to support the CVA activities. In this operation, MRCS was working with one Finance Service Provider (FSP). MRCS conducted a procurement process to select the FSP, with specific Scope of Work (SOW). As the CVA is still relatively new in Malaysia, in this partnership, Maybank was not yet able to fully provide for the expectations in the SOW. In this operation, Maybank facilitated the unbanked families to open a bank account but could not offer cash to the unbanked families in remote places. Based on this first partnership, MRCS, with the support of IFRC, will continue to explore a suitable FSP to support MRCS on the CVA. This is already included in the MRCS Cash Preparedness Plan.

MRCS conducted post-distribution monitoring (PDM) in the last month of the operations (May 2021). Based on the PDM result, below are the main findings:

- 94% of the respondents shared that they have received the total amount of RM650. The other 2% mentioned that they only received RM350, which was the second tranche. Upon investigation, we found that the respondents did not know the first tranche received in their bank account was from the MRCS.
- 80% of the respondents have fully spent the cash assistance to cover their basic needs, while 19% had spent it partially. Only 1% of the respondents had not expended the money at the time the PDM was conducted.
- 51.5% agreed that the cash was sufficient, while the remaining 48.5% said it was insufficient. Out of 48.5% said it is not sufficient, 66 respondents think the amount is not enough to cover basic needs, 51 respondents have a big household (more than six members) which requires more spending, while the other 27 respondents need an additional round of cash aid distribution because of the flood.
- Four main negative coping mechanisms by the respondents were mitigated with the support provided. Without the cash assistance from the MRCS, 73 respondents would have chosen to limit food consumption among adults and prioritize children, and 67 respondents may have used their savings. Concurrently, 60 might have sought family support, while 21 would have reduced spending on non-essential items.
- All the respondents (100%) unanimously shared that they preferred cash instead of in-kind assistance.
- Up to 70.4% of the respondents responded that they were satisfied with the cash assistance. The remaining respondents who were somewhat satisfied shared that they would have liked to receive higher amounts (45%) for the sum to be according to the size of the household (25%) and to receive a more extended period of support (22%). 7% of them would require in-kind assistance to be added with the cash grant.
- The majority of the respondents agreed that the cash assistance was given at a timely and useful time. A good percentage of 89.9% said Yes to the question, and only 10.1% said No. From the respondents who answered No, 12% felt they could have received the cash assistance one week earlier, 35% thought they should have received it two weeks ago, and 47% three weeks earlier. Up to 28% agreed that the assistance was transferred expediently upon registration, and 70% agreed that the waiting time was acceptable. Only a small 2% commented that the waiting time was too long.

To address the PDM findings, it was recommended that the MRCS:

- Improve the timeliness of cash assistance, and that the cash assistance distribution should be timed for week three to four after the onset of flooding.
- Strengthen disaster preparedness, including cash preparedness, systemically capture lessons learned and address bottlenecks to improve programming efficiency and quality.

Challenges

There was no notification system for beneficiaries to inform MRCS that cash assistance was received in their accounts. The lack of notification resulted in staff and volunteers receiving many questions on when the cash assistance will come in. Additionally, the current COVID-19 situation made it difficult for the team to conduct face-to-face interviews and discussions.

Lessons Learned

More training is needed for the volunteers to improve understanding and communications. Recipient data must be entered correctly to avoid information errors such as identity card and bank account number. Plus, the community must be aware of cash transactions.



Health

People reached: 6,167

Male: 3,086

Female: 3,081

Indicators:

	Target	Actual
# of targeted household at evacuation centre and district affected by flood	1,100	1,274
# of household, vol, and village that involve in the disaster	1,100	1,274
# of volunteers involved in health programmes	20	20

Narrative description of achievements

Despite facing problems with indirect distribution to recipients, MRCS Sabah successfully distributed COVID-19 prevention kits to 1,100 targeted households through the assistance of JPKK and their respective village heads. The MRCS conducted hygiene promotion to a total of 1,274 households (6,167 people).

The MRCS MHPSS programme deployed qualified psychosocial support (PSS) volunteers to work with more than 20 other volunteers at the RedCrescent4U Careline in Sabah. Over 60 volunteers in Sabah received basic psychological first aid (PFA) training, focusing on the three PFA principles of look, listen, and link. Volunteers were trained how and where to approach people who were in distress. The PSS activities would include empathic interviewing, calming techniques, mindfulness breathing and grounding, arts and crafts, and games with children. Every interaction with villagers was used to promote MRCS RedCrescent4U Carelines, and signage was placed in public places to increase awareness. Furthermore, the careline has been used to monitor the impact of intervention activities during the DREF.

From PDM result:

- Up to 89 per cent said they were aware of the MRCS Sabah careline centre, and 10.7 per cent said they were not.
- Aside from receiving information on psychosocial support, respondents were asked whether they or their household members participate in other activities. 80.5 per cent answered Yes, they took part, followed by 27.8 per cent said No. The activities most mentioned are breathing exercises, with one response mentioning house visits.
- When asked how helpful they find the psychosocial support provided by MRCS throughout the disaster response, a good number said they found it Helpful (74.6%), followed by Somewhat Helpful (23.7%) and Unhelpful (1.8%). The most helpful activities mentioned were breathing exercises, calling to call centre and house visits. A significant portion of the response just answered "Good" and did not provide further clarification.

Challenges

Constraints exist in movement due to the current ongoing COVID-19 pandemic and movement control order (MCO) imposed by the Malaysian government. The specific district had elevated levels of lockdowns that hindered the MRCS to conduct the activities in the targeted villages. Special permission for MRCS was provided by the authorities, and coordination with the local authorities was made to address this movement's challenges.

Lessons Learned

Ready to provide interactive, face-to-face programme implementation through mass and social media. To enhance impact by having more trained staff and volunteers on the ground.



Water, sanitation and hygiene

People reached: 6,167

Male: 3,086

Female: 3,081

Indicators:	Target	Actual
# of households reached with WASH services	1,100	1,270
# of people provided with hygiene promotion	5,500	6,167
# of people provided with hygiene kits	870	870

Narrative description of achievements

The MRCS distributed 174 hygiene kits in the evacuation centres in the early days of the flood, taken from their pre-positioned stocks in Sabah. Through this DREF, the IFRC APRO procured of 174 hygiene kits, which were delivered to Sabah within the duration of the DREF operation. The content of the hygiene kit were as per the table below:

Items In The Hygiene Kit	Quantity
Washing powder, 1 kg bag	3
Sanitary napkin, pack 20 pcs	2
Disposable razor, pack	5
Shaving cream, 100 g	1
Toilet paper, pack	4
Toothpaste, 75 ml tube	3
Toothbrush	5
Body soap, 100 g piece	10
Dishwashing liquid, 500 ml bottle	2
Shampoo, 500 ml	1
Bath towel, 60 x 40 cm	1
Nail clipper	1
Sponge for washing dishes, pack	4
Tissue paper for face, 150 pcs, pack	2
Carton box	1

At the beginning of this operation, the MRCS prepared IEC materials with descriptions of MRCS activities, including the recipient selection criteria, type of assistance, the mechanism of assistance, the timeframe of the operation, and the feedback channels available for communities to provide feedback or comments to MRCS. These IEC materials were distributed to the target communities who received the MPCA and hygiene kits and were showcased in public places. Concerning WASH, information was focused on hygiene kit content and messaging related to personal hygiene during COVID-19. During the hygiene promotion, the MRCS team demonstrated handwashing steps, hand sanitizer and face mask use, and most importantly, their care and hygiene during recovery. Waterborne diseases such as cholera and typhoid are commonly associated with floods. Most importantly, the village head and the local community leaders are aware of and support the need for hygiene promotion for waterborne diseases and COVID-19 prevention.

Challenges

Due to logistical challenges resulting from localized MCO, the COVID-19 prevention kits were not immediately distributed to beneficiaries in Tenom and Beaufort. All assistance had to be approved by the District Officer and his office (for reasons mentioned above). Due to MCO restrictions, hygiene promotion activities could not be carried out face-to-face with the targeted communities. However, after discussions with the local district office, the MRCS Sabah team managed to have a hygiene promotion session with all relevant community leaders. This activity was conducted with the local health team and the district office personnel to ensure the team follow the strict COVID-19 protocol from the state health department.

Lessons Learned

The MRCS Sabah IPN should have planned hygiene promotion activities ahead of schedule in the operations rather than wait until the middle of the implementation. Given the current COVID-19 pandemic, more creative options for conveying hygiene promotion and MHPSS sessions and ideas catering to all gender and age ranges are necessary. The lesson learned workshop recommended that MRCS (re) orient and provide refresher training to MRCS on disaster response SOP, which includes providing quick situational reports and rapid assessment. MRCS should also (re)orient and provide refresher training to MRCS staff and volunteers on mission logistical issues, preparedness, forecasting, and early warning. This would improve distribution planning and logistic support for in-kind distribution programming, including stock prepositioning in disaster-prone areas.



Protection Gender and Inclusion

People reached:

Male: 660

Female: 440

Indicators:	Target	Actual
<i>The operation demonstrates evidence of addressing the specific needs to ensure equitable access to disaster response services</i>	Yes	Yes
<i>NS that ensure improved equitable access to basic services, considering different needs based on gender and other diversity factors.</i>	Yes	Yes
Narrative description of achievements		
<p>The MRCS included vulnerability criteria in the recipient's selection to ensure minority groups in the community would be targeted. Vulnerability criteria included senior citizens as heads of household, women-headed households, families with pregnant and/or lactating women, those with ill members, and families with persons with disabilities. The MRCS collected sex-age disability desegregated (SADDD) data on recipients' registration to capture information on specific groups and analyze it for programme decisions.</p>		
Challenges		
<p>MRCS has a limited understanding of PGI issues and how to integrate PGI approaches into their programming. It will be essential to continue to facilitate MRCS in helping to improve their knowledge of PGI and incorporate it into their activities.</p>		
Lessons Learned		
<p>Before commencing operational processes, the MRCS will need to consider PGI approaches in the design of their operations and provide an orientation to volunteers and staff. It is relevant for the MRCS to train volunteers and staff in PGI issues. Supporting the PGI mandate is another form of understanding vulnerable communities, their challenges and needs.</p>		

Strengthen National Society

Indicators:	Target	Actual
<i># of NS branches that are well functioning in the operation</i>	1	1
<i># of volunteers involved in the operation provided with briefing/orientation</i>	20	20
Narrative description of achievements		
<p>The Flood Response Team was activated in Kota Kinabalu (MCS IPN) to implement the operation. MRCS conducted a kick-off meeting with the Sabah IPN team and the national headquarters technical group and was briefed on the DREF operations. A weekly call was set up between them to discuss the progress of the implementation and the challenges faced by the team. A daily updated communication system channel was activated through the WhatsApp group, to ensure that the operations in the field received the necessary support from the national headquarters and IFRC country support team. Good communication and accountability were always emphasized for better mission performance.</p>		
Challenges		
<p>The capacity of the MRCS Sabah IPN state to manage operations in the field differed between the two districts of Tenom and Beaufort. Close monitoring and assistance were required, which was hampered by delays in their states' activities. Sabah IPN was unfamiliar with the DREF operation, which was much more organized, structured and supported by the IFRC. It took some time to provide an orientation and replicate the guidance to the states to monitor the situation and operations better and more effectively.</p>		
Lessons Learned		
<p>The states' ability to implement DREF operations was constrained, which was brought to light during the lesson learned workshop. The following are a few suggestions from the lesson learned workshop:</p>		

The MRCS national headquarters should provide an orientation programme to MRCS branches on the DREF mechanism and methods. The IFRC can consult with the MRCS national headquarters about the DREF mechanism and procedures. MRCS national headquarters must improve their mechanism for offering guidance and technical assistance to MRCS states and districts during implementation, both before and during DREF operations, to ensure that all staff and volunteers are well prepared.

The MRCS should improve communications with MRCS branches on sharing the response plan and strategy for preparing the DREF Plan of Action to ensure branch involvement and ownership of the operations.

International Disaster Response

Indicators:	Target	Actual
<i>Procurement is carried as per IFRC standards and items replenished in the operation timeline</i>	100%	100%

Narrative description of achievements

The IFRC procurement department supported the MRCS to purchase 174 hygiene kits to replenish the initial hygiene kits that were distributed from MRCS's pre-positioned stocks. Those 174 hygiene kits were delivered to MRCS in July 2021.

Challenges

There were no significant challenges.

Lessons Learned

N/A

Influence others as leading strategic partner

Indicators:	Target	Actual
<i># of National Societies launched, and workshop conducted</i>	1	1
<i># of assessments in State</i>	1	1
<i>Lessons learned workshop conducted</i>	1	1

Narrative description of achievements

In the initial stages of the operation, the MRCS held a kick-off meeting and briefly explained the Sabah states.

Rapid assessment has been carried out by MRCS Sabah in Tenom and Beauford Districts, respectively. While the IFRC country support team was supported with monitoring and reporting with the support of MRCS National Headquarters cluster representatives,

The online lesson learned workshop was facilitated by IFRC PMER staff and advised by the IFRC operations coordinator for South East Asia.

Challenges

The kick-off meeting and the lesson learned workshop were both held online due to MCO.

Lessons Learned

The capacity of MRCS staff and Sabah volunteers to conduct a quick assessment and gather information in a timely and accurate manner was limited. The recommendation was for MRCS to re-orient and refresh MRCS staff and volunteers on the Disaster Response SOP, including rapid situational reporting (sitrep) and rapid assessment.

Effective, credible and accountable IFRC

Indicators:	Target	Actual
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<i>The Finance Department continuously aims to assist the national society in working to ensure the quality of financial reporting.</i>	Yes	Yes
Narrative description of achievements		
Finance provided clear guidance to MRCS about working advance claims and the required documentation for submission to IFRC. The IFRC team assisted the MRCS team in developing a budget forecasting model and continuous budget monitoring.		
Challenges		
Limited financial reporting capacity from the MRCS Sabah to MRCS headquarter finance department resulted in delayed reporting. The MRCS headquarters finance team conducted an orientation for the MRCS Sabah finance team on the reporting requirement.		
Lesson Learned		
The MRCS headquarters to provide an orientation and training to MRCS branches to improve financial reporting capacity. Continued IFRC support for financial reporting is required, as is guidance to MRCS. The MRCS submitted financial reporting and documentation needed during this operation with the assistance of IFRC.		

D. Financial Report

The DREF funding approved was CHF 235,405 and final expenditure stands at CHF 235,187, based on claims submitted by MRCS. This leaves a small balance of CHF 218, which will be returned to the DREF.

The detailed of financial report is attached at the end of the report.

*The major donors and partners of the Disaster Relief Emergency Fund (DREF) include the Red Cross Societies and governments of Belgium, Britain, Canada, Denmark, German, Ireland, Italy, Japan, Luxembourg, New Zealand, Norway, Republic of Korea, Spain, Sweden and Switzerland, as well as DG ECHO, Blizzard Entertainment, Mondelez International Foundation, Fortive Corporation and other corporate and private donors. The IFRC, on behalf of the **Malaysian Red Crescent Society**, would like to extend thanks to all for their generous contributions.*

Contact information

Reference documents



Click here for:

- Previous Appeals and updates
- Emergency Plan of Action (EPoA)

For further information, specifically related to this operation please contact:

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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.

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Saving lives, changing minds.



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

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
2. Enable healthy and safe living.
3. Promote social inclusion and a culture of non-violence and peace

DREF Operation

Selected Parameters			
Reporting Timeframe	2021	Operation	MDRMY006
Budget Timeframe	2021	Budget	APPROVED

FINAL FINANCIAL REPORT

Prepared on 22/Nov/2021

All figures are in Swiss Francs (CHF)

MDRMY006 - Malaysia - Floods

Operating Timeframe: 31 May 2021 to 31 Aug 2021

I. Summary

Opening Balance	0
Funds & Other Income	235,405
DREF Allocations	235,405
Expenditure	-235,187
Closing Balance	218

II. Expenditure by area of focus / strategies for implementation

Description	Budget	Expenditure	Variance
AOF1 - Disaster risk reduction			0
AOF2 - Shelter			0
AOF3 - Livelihoods and basic needs	178,372	182,516	-4,144
AOF4 - Health	23,217	2,669	20,548
AOF5 - Water, sanitation and hygiene	5,498	16,845	-11,347
AOF6 - Protection, Gender & Inclusion			0
AOF7 - Migration			0
Area of focus Total	207,086	202,029	5,057
SFI1 - Strengthen National Societies	8,669	14,374	-5,705
SFI2 - Effective international disaster management	1,416	1,452	-36
SFI3 - Influence others as leading strategic partners	18,233	17,332	901
SFI4 - Ensure a strong IFRC			0
Strategy for implementation Total	28,319	33,158	-4,839
Grand Total	235,405	235,187	218

DREF Operation

Selected Parameters			
Reporting Timeframe	2021	Operation	MDRMY006
Budget Timeframe	2021	Budget	APPROVED

FINAL FINANCIAL REPORT

Prepared on 22/Nov/2021

All figures are in Swiss Francs (CHF)

MDRMY006 - Malaysia - Floods

Operating Timeframe: 31 May 2021 to 31 Aug 2021

III. Expenditure by budget category & group

Description	Budget	Expenditure	Variance
Relief items, Construction, Supplies	4,067	172,720	-168,653
Water, Sanitation & Hygiene	3,132	3,305	-173
Medical & First Aid		9,736	-9,736
Cash Disbursement	935	159,679	-158,744
Logistics, Transport & Storage		5,438	-5,438
Distribution & Monitoring		318	-318
Transport & Vehicles Costs		4,064	-4,064
Logistics Services		1,057	-1,057
Personnel		25,425	-25,425
National Society Staff		20,462	-20,462
Volunteers		4,963	-4,963
Workshops & Training		1,003	-1,003
Workshops & Training		1,003	-1,003
General Expenditure	2,000	16,246	-14,246
Travel	2,000		2,000
Information & Public Relations		1,441	-1,441
Office Costs		1,178	-1,178
Financial Charges		87	-87
Other General Expenses		13,540	-13,540
Contributions & Transfers	214,970		214,970
Cash Transfers National Societies	214,970		214,970
Indirect Costs	14,367	14,354	13
Programme & Services Support Recover	14,367	14,354	13
Grand Total	235,405	235,187	218