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Operation Update Report 2

Malawi: Strong Winds, Heavy Rains and Floods in Salima, Chikwawa and Nsanje Districts

 International Federation
of Red Cross and Red Crescent Societies

DREF n°: MDRMW015	GLIDE n°: SS-2021-000196-MWI
Operation update n° 2: 27 January 2022	Timeframe covered by this update: 20 December 2021 to 19 January 2022
Operation start date: 8 December 2021	Operation timeframe: 06 months (8 December 2021 to 30 June 2022)
Funding requirements (CHF): 474,698 – increase of CHF231,512	DREF amount initially allocated: CHF247,707
N° of people being assisted: Upscaling from 4,405 people (881 households) ¹ in Salima District to 13,500 people (2,700 households) covering Salima {881 households}, Chikwawa (1,333 households) and Nsanje (486 households}	
Red Cross Red Crescent Movement partners currently actively involved in the operation: International Federation of Red Cross and Red Crescent Societies (IFRC), International Committee of the Red Cross (ICRC), Danish RC, Netherlands RC, Finnish RC, Islandic RC, Italian RC and Swiss RC	
Other partner organizations actively involved in the operation: Government of Malawi (Department of Disaster Management Affairs- DoDMA), Ministry of Health, WFP, UNICEF, District Councils through the District Civil Protection Committees (DCPC) and UNDP	

Summary of major revisions made to emergency plan of action:

This Operations Update seeks to revise the Operational Strategy as a result of the escalating disasters that have affected the new Districts of Nsanje and Chikwawa in the form of strong winds, heavy rains and floods that occurred on 14 January 2022. This update builds on the initial disaster which affected Salima district whose detailed assessment was carried out on 20 to 22 December 2021.

The change in strategy is to expand the operation to the new Districts of Nsanje and Chikwawa and consequently increase the case load from 4,405 people (881 households) to 13,500 people (2,700 households). The change in strategy is to expand the operation with Shelter, Food Security, WASH and Health to support 2,700 households. Salima district will cover 617 households, the new Districts of Nsanje and Chikwawa will cover 1,333 and 486 restively.

A. SITUATION ANALYSIS

Description of the disaster

On 21 November 2021, the Department of Climate Change and Meteorological Services (DCCMS) released a warning, which cautioned Malawians to brace up for heavy rains coupled with thunderstorms associated with destructive gusty strong winds. The forecast indicated that heavy rains would hit the South and gradually move to centre and Northern parts of the country. Following the alert, the country has been experiencing different types of disasters in form of stormy winds, heavy rainfall and floods. These disasters have been predominant from last week of November 2021 and new floods were reported on 14 January 2022 (http://www.metmalawi.gov.mw/dccms_warnings.php). The most affected districts include Salima and the new Districts of Chikwawa and Nsanje. The disaster is a manifestation of the seasonal forecast which indicated that the country would receive normal to above normal rainfall due to the La Nina conditions.

¹ There is an average of five people per household in the area.

In summary, this is a revision of the [DREF](#) launched on 8 December 2021 to extend the current support from 4,405 people (881 households) to 13,500 people (2,700 households) who have been affected in the three districts of Nsanje, Chikwawa and Salima. The request also includes extending the implementation period from 4 to 6 months. The funding requirements is CHF474,698, increased from the original CHF243,186.

Summary of current response

Overview of Host National Society

In Salima District, since the DREF operation was approved, a number of activities were initiated beginning 8 of December 2021. One of the activities was a detailed assessment which necessitated the first revision of the operation leading to revision of the targets from 1,200 to 881. Some of the key activities included:

- Both Rapid and detailed needs assessment alongside the District Council members were completed. The assessment identified the extent of damage and immediate needs of the affected households. The report of findings was disseminated to the district council and the affected communities.
- Completed procurement of Financial Service Provider (FSP) to support cash transfers to the affected population
- Beneficiary identification, registration and verification was completed. 881 households were sensitized, registered and verified by both MRCS and FSP.
- MRCS volunteers and staff assisted to provide psychological first aid (PFA) to 1890 affected households
- Recruited 100 volunteers to support the interventions.
- Supported sensitization of the 2700 affected households to ensure that hygiene and sanitation issues are adhered to as a way to reduce cases of infectious diseases
- MRCS continued to participate in the district and community level coordination meetings involving different stakeholders

Furthermore, MRCS with the support of Danish Red Cross responded to the needs of the 2700 households hosted in the Camps by providing the following items:

Item description	Quantities
Soap 140 grams (U-fresh)	5,350
Bathing soap	2,140
Masks	107 boxes
Hand Sanitizer	1,070
Liquid soap	100
Sleeping Mats	970
Blankets	760
Buckets	1,070
Camp Tents 42	4
Handwashing Buckets	35

Overview of Red Cross Red Crescent Movement in country

The IFRC Harare Country Cluster Delegation continues to provide technical support during implementation of the response actions. IFRC will also conduct monitoring visits during the course of the operation and support deployment of surge in case the disaster spreads widely. MRCS is working hand in hand with different partners such as a consortium of PNSs led by Danish Red Cross (Icelandic, Italian and Finnish Red Cross), Swiss Red Cross, Netherlands Red Cross (remotely) and ICRC (supporting Restoring Family Links (RFL) in the districts of Chikwawa, Mulanje, Mangochi and Lilongwe. The Partners are providing office space in Salima and Chikwawa Districts. They are also providing camp-based support to the displaced through the provision of NFIs and WASH facilities.

Overview of other actors in country

The most notable humanitarian partners present in the targeted districts are the Government, The Hunger Project, World Vision- Malawi, UNICEF, Care Malawi, Eagles Relief and WFP. The partners are implementing

different types of activities ranging from disaster response, relief support, health, WASH, shelter, education, food security and livelihood promotion just to mention key sectors being supported. The Malawi government supported 500 households with a one-time food assistance through DoDMA on 27 November 2021 to the affected in TAs Maganga and Kalonga. The packages included maize, blankets, plates, cups, pails, plastic sheets for temporary roofing and housing units in some instances. There are clusters at both national and district level where actors meet and share updates and coordinate on response activities to avoid duplication. MRCS seats in all clusters and co-chairs shelter and search and rescue clusters.

Needs analysis and scenario planning

Needs analysis

Salima District Council in collaboration with MRCS and other actors facilitated a detailed needs assessment to determine the extent of damage and needs of the affected households. This was done following awarding of the DREF support which was launched on 8 December 2021. The findings of the detailed assessment revealed there was a reduction in the number of targeted households from 1,200 to 881. Below is the summary of findings and changes for each thematic sector:

- On shelter, total of 617 households required support through provision of NFIs and shelter materials. In addition, 335 households representing 38% required restricted cash transfer assistance as top up towards reconstruction of their houses.
- On livelihoods and basic needs, 881 households required unrestricted cash transfers out of 1,317 to support food and basic needs.
- On health, 881 affected households required support on COVID-19 awareness and provision of PPEs.
- On WASH, total of 881 households required access to clean water, provision of hygiene kits towards to 294 households who have lost their damaged or destroyed homes and are supported with emergency shelter and provision of dignity kits to 24% of 1,057 women and girls of childbearing age counted in the 211 HHs targeted.

Following the flooding situation which hit Chikwawa and Nsanje districts, MRCS joined a rapid needs assessment which was conducted in collaboration with different partners such as the Government, The Hunger Project, World Vision- Malaw and UNICEF, Care Malawi, Eagles Relief and WFP. The assessments were conducted from the 14 January 2022 for both Chikwawa and Nsanje Districts. Below is the summary of the findings of the rapid assessment:

District	Total pple Affected	HH	Total pple in Camps	Displaced people	Injured	Completely damaged houses	Latrine's damage	# of schools damaged
Nsanje	4,585	914	4,585	130	12	104	255	3
Chikwawa	9,820	1,966	8,370	8,370	75	1,200	1,030	13
Total	14,405	2,880	12,955	8,492	87	1304	1,285	16

As of 14 January 2022, the total number of affected people has increased from 11,000 to 42,684 people (20,488M; 22,196F) in all the three Districts of Nsanje, Chikwawa and Salima. A total of 12,955 people were displaced and 87 injured. Many of the displaced are staying with relatives or hosted in the camps while others have returned to their original places. Meanwhile, 8 (eight) camps have been established in the two new Districts of Chikwawa and Nsanje.

In Nsanje, the floods affected total of 914 households representing 4,585 people, 12 people injured, 130 households displaced with one (1) Camp was established in Mambundungu. Furthermore, 92 Pregnant women, 277 lactating mothers, 61 elderly, 15 child headed households and 35 people with disabilities were affected. A total of 104 houses were completely damaged with 122 houses had their roofs blown off. On education, three Primary Schools were damaged. Furthermore, 92 Pregnant women, 277 lactating mothers, 61 elderly, 15 child headed households and 35 people with disabilities were affected. Under livelihoods, 78 goats, 320 chickens and 4,505 Hectares of land under cultivation were destroyed. On WASH, 255 latrines were reported damaged. Under health, Mbenje Health Facility including 3 staff houses were destroyed. It is worth noting that Marka Bridge was damaged, hence affecting logistics.

In Chikwawa district, the floods affected total of 1,966 households representing 9,820 people, 75 people injured, 8,370 households displaced with seven (7) Camps were established in Mchenga, Chidyamanga, Tennis Apostolic Church, Nkhwazi Evacuation Camp, Jombo School and Nthumba School. Furthermore, 169

Pregnant women, 77 lactating mothers, 55 elderly, 21 child headed households and 7 people with disabilities were affected. A total of 1,200 houses were completely damaged with 1,678 houses had their roofs blown off. On education, 13 Schools not accessible due to flooded rivers. Furthermore, 169 Pregnant women, 77 lactating mothers, 55 elderly, 21 child headed households and 7 people with disabilities were affected. Under livelihoods, 205 goats and 801 chickens were washed away. On WASH, 1,030 latrines were reported damaged. Under health, Majete Health Facility with 3 staff houses were destroyed.

At a time of undertaking both rapid and detailed assessments, the markets in the district and affected communities were functional. The assessment also indicated that the areas had good coverage of mobile network which will enable use of mobile money facility.

Heavy rains have continued therefore the situation is likely to become worse, which is in line with the [seasonal forecast](#) for January to April. Meanwhile most districts in the southern part of Malawi continue to experience heavy rains associated with strong winds with some places reported to have been flooded. This preceded a warning from the Department of Climate Change and Metrological Services issued on 25 January 2022 of a tropical storm Ana (http://www.metmalawi.gov.mw/dccms_warnings.php).

MRCS will continue to monitor the situation regarding TS Ana and provide updates on further needs in the targeted areas, well as intensify anticipatory actions and dissemination of early warning messages.

Operation Risk Assessment

The operation has targeted a specific geographical location however there is a possibility of the scenario escalating, as evidenced from Salima district to include Chikwawa and Nsanje districts. MRCS will engage PNSs and IFRC to mobilize more resources to respond to emerging needs. MRCS will flag for an Emergency Appeal if the need continues in order to address and respond to the identified gaps and livelihood loss.

There is a risk of disrupted access to reach the affected people in Nsanje and Chikwawa districts due to floods and impassable roads. The planned response reflects the situation and information available as of now, considering the current forecast and required adjustments to contextual changes.

Another risk which remains relevant is COVID-19 pandemic and looming food shortages due to low harvest. The risk analysis for this threat and mitigation measures remains relevant.

B. OPERATIONAL STRATEGY

Proposed strategy

Overall objective

The EPoA supports the design of the overall operation, focusing on supporting the most vulnerable communities with immediate livelihood actions through provision of cash for shelter and cash for food respectively, health, WASH activities, capacity building of volunteers, deployment of Search and Rescue teams, provision of shelter and NFI supplies and awareness creation on COVID-19 vaccination, PGI and CEA for 13,500 people (2,700 households) for a period of six (6) months in Salima, Chikwawa and Nsanje Districts.

This DREF is an extension of current operation in Salima to include Nsanje and Chikwawa districts extending the implementation period from 4 to 6 months.

Proposed strategy

The operation will involve a total of 250 volunteers (100 for Salima, 100 for Chikwawa and 50 for Nsanje) in different interventions such as provision of capacity building in Cash and Voucher Assistance (CVA), Shelter and settlements, Psychological first aid (PFA), Water and Sanitation (WASH), Community Engagement and Accountability (CEA) and Protection, Gender and Inclusion (PGI). These have been prioritized and integrated in the response to ensure that there is coherence, consistence and accountability in this operation. The following activities have been proposed:

1. Conducted Detailed Needs assessments (Target: Chikwawa and Nsanje districts)

A detailed assessment is available for Salima. However, there is need to conduct detailed needs assessments as well as market assessments to fully understand the extent of the disaster in Nsanje and Chikwawa. As such, MRCS intends to deploy a team of 12 NRT members and 40 volunteers covering the two districts. The assessment will be done within 5 days, to allow prompt adjustment of plans and response actions.

2. Shelter and settlements (13,500 people, 2,700 HH)

The action will target 2,700 households (Salima: 617, Chikwawa: 1,333 and Nsanje: 486) made homeless due to damages caused to their homes and neighbourhoods (their roofs blown off and walls damaged, etc). Families the most affected lost essential household items like beddings, blankets, kitchen utensils, furniture and food stuff. This has resulted in reducing the dignity of people, insecurity and disrupted family cohesion. MRCS will support the most affected households with conditional cash transfers to cover the costs of house reconstruction.

The Shelter Cluster, which MRCS co-chairs, has also been activated to support the coordination of the response. The current weather condition continues to put shelters at very high risk and likelihood of more houses to be damaged is very high.

The table below provides information on number of households to be targeted with conditional and unconditional cash transfers.

Description	Salima	Chikwawa	Nsanje	Targeted # of HHs
General awareness on shelter and settlements	617	1,333	486	2,436
Emergency shelter – tarps and household items	400	-	-	400
Unrestricted shelter cash transfer	881	1,333	486	2,700
Conditional shelter cash transfers	50	50	50	150

With this support, a total of 2,436 households will be targeted with awareness on shelter and settlements using Participatory Approach for Safe Shelter Awareness (PASSA). This will help the affected communities to have a better understanding and good choices of construction materials, where and how to build safer houses. 400 households in Salima are in the process of receiving emergency shelter and essential household items support. A total of 2,700 households will be supported with unrestricted shelter cash transfer in order to address different shelter damages on their houses. This approach will help targeted households to procure construction materials to repair their houses giving them the flexibility to new innovations. The last group of the affected households are those with houses that are categorised as completely damaged houses. For this group a total of 150 households will be targeted with restricted shelter cash transfers, where the target group can only buy pre-selected items based on three stages of house construction foundation, super structure and finishing. In this view, payments shall be made in phases of house construction as will be guided by Malawi Government safer house construction guidelines.

Advice to these families will also be given for securing shelter will consider Housing, Land and Property issues, the environmental impact of materials and consumables like fuel for cooking. In addition, other criteria such as vulnerable families including female headed, child headed, elderly and households headed by disabled persons shall be used. This support can be delivered by local volunteers that understand their communities needs after training sessions. Shelter solutions will consider access to other essential services like health, markets, education, clean water and sanitation. The team will take guidance from the [Malawi Shelter Cluster Technical Working Group](#) findings as well as the newly published [Promoting Safer Building Working Group](#) and the Sphere Standards for Shelter sector.

The intervention will facilitate the following:

- Conduct 6 awareness sessions on shelter and settlements (bi-weekly sessions for 3 months)
- Conduct refresher training of 70 volunteers (30 for Chikwawa and 20 each for Salima and Nsanje) on safe building techniques, so they can provide adequate support to the affected households.

- Develop and disseminate messaging around setting up safe and secure shelter and environmental impact of materials. This includes protection, environment and housing, land and property rights considerations.
- Support distribution of cash transfers involving 70 volunteers for 2 days across the districts
- Support reconstruction of houses and repairs to existing shelter (70 volunteers for 5 days)
- Participate in Shelter Cluster Coordination activities

3. Livelihoods and Basic Needs (Target: 2,700 HH or 13,500 people)

Based on the assessments in Salima, Nsanje and Chikwawa, the action intends to support at least 80% of the affected households with cash transfers for 2 consecutive months based on monthly food basket and the National Cash Working group set transfer value in Malawi. The minimum food basket targets an average of 5 household members.

Table 1: SMEB values by region and their percentage change between Round 41 and Round 40

Area of Coverage	Total SMEB		Food Expenditure		Non-Food Expenditure	
	In MK	% Change	In MK	% Change	In MK	% Change
Urban	67,892	↑+2.0	37,672	↓-2.1	30,220	↑+7.7
Rural North	44,243	↑+5.7	37,901	↑+3.8	6,341	↑+18.6
Rural Centre	45,420	↑+6.3	39,480	↑+6.2	5,940	↑+6.5
Rural South	48,345	↑+2.5	40,192	↑+3.9	8,154	↓-3.9

The aim of this intervention is to address the immediate needs of the 2,700 affected households through the provision of unconditional, unrestricted cash with a transfer value of approximately USD48 (MwK27,000) per month for 2 consecutive months including transfer value. The targeting criteria shall include but not limited to the following: those affected by the disasters whose households' items were completely destroyed and lacks the capacity to cope up. Other households with other vulnerabilities such as child headed, female headed households, elderly and disabled persons. This is based on the Minimum Expenditure Basket (MEB) produced monthly by National Cash Working Group and shared in the [WFP Minimum Expenditure Basket \(MEB\) on 1RST DECEMBER 2021 report.](#)

Activities will include:

- Market assessment for CVA feasibility including market functionality and safe access.
- The response will use cash transfer delivery mechanism where beneficiaries shall redeem money using their phones. The FSP shall engage the Agents who will do on-site distribution where funds shall be redeemed, and beneficiaries append their signatures. Prior to the distributions, MRCS shall undertake training of its staff volunteers on the use of FSP.
- During this period, the distribution plans and awareness sessions shall be developed based on the locations where cash transfers will be done. The response will facilitate registration of the affected households by undertaking door-to-door visits. In of Risk Communication and Community Engagement (RCCE), the local structures and leaders shall be involved to introduce the response before the roll out. A feedback and complaint mechanism shall be established to ensure that there is timely addressing of issues and concerns affecting the operation.
- Activation of the FSP. The MRCS has a contract with Airtel and is currently working on an addendum to extend its timeframe. Meanwhile, MRCS is in progress of conducting an IFRC compliant procurement of multiple FSPs for future responses. MRCS has institutionalized Cash and Voucher Assistance (CVA) by implementing cash transfers since 2009 and finalised cash preparedness activities as the first African National Society. National Society has trained staff and volunteers in the implementation of CVA that will support the activity. Only a refresher on tools and market assessment will be needed for 12 volunteers (3 per TA).
- Registration and verification of beneficiaries.
- Distribution of cash to 2,700 households for 2 months.
- Consistent coordination with other cash actors to ensure harmonization of the response and the transfer value.

- Post distribution monitoring (PDM) to measure impact of the cash grants on families. During cash distribution period, exit surveys and FGDs shall be administered after first instalment to enable possible mitigations/change in the response.
- Monitoring and market monitoring to measure outcomes of the response for target communities and markets and to document success stories.
- Tracking of disbursements and reconciliation in real-time
- The response shall ensure that the FSP provides cash distribution reports upon completion of each cash distribution, reconciliation and end of response operation report.
- Conduct lessons learnt workshop to reflect on the performance of the operation.

4. Health assistance (Target: 2,700 HH or 13,500 people)

There is need to intensify psychological first aid (PFA) to ensure communities affected by the ongoing disasters have necessary attention. Due to flooding and stagnation of water, there is high risk of malaria transmission hence the need to support the affected communities with mosquito nets and engagement of volunteers to undertake community awareness on health promotion.

Based on the current new variant, Omicron, the country has been facing increased number of cases. This is likely to be similar situation in the Camps. As such, the operation will support COVID-19 awareness while PPE will be provided to staff, volunteers and other vulnerable displaced households through an ongoing project with Swiss RC, Danish RC and IFRC. In an event of increased cases in the targeted areas additional resources shall be required.

The actions will support training of 150 volunteers (50 from each district) and 15 MRCS staff (3 staff members from each district) in community-based health and first aid to support dissemination of preventive and control measure against communicable diseases as well as strengthening the referral systems and disease surveillance through volunteer engagement in community-based surveillance. Total of 250 volunteers and 24 members of staff shall be engaged in the operation.

5. Water, Sanitation and Hygiene - WASH (Target: 2,700 HH or 13, 500 people)

Both the detailed and the rapid assessment reports for Salima, Chikwawa and Nsanje indicated the disruption of water and sanitation facilities especially falling of toilets and contamination of water sources. Through this response, MRCS will focus on improving WASH to cover risk of water related diseases. Activities planned will include:

- Enhance awareness creation on access to clean water for the affected population
- Provision of hygiene kits to 2,133 households (80% of 2,700) (Salima: 400 and 1,733 for Chikwawa and Nsanje) households who have damaged or destroyed houses and have been supported with emergency shelter
- Provision of dignity kits to women and girls of childbearing age counted in the 512 HHs targeted with shelter and hygiene kits i.e., in the 512 women and girls for 2 months.
- Conduct training of 70 volunteers (30 for Chikwawa and 20 each for Salima and Nsanje). The volunteers will support sanitation campaigns and conduct demonstration sessions on home-made Oral Rehydration Therapy (ORT) and handwashing.
- Conduct sanitation campaigns in communities to ensure full understanding of need for clean environment, especially in the aftermath of a disaster, to prevent disease outbreaks. These will be conducted bi-weekly for two months.

MRCS, through health department, has a WASH Specialist who will support the operation and facilitate the refresher session for volunteers on WASH thematic.

Protection, Gender and Inclusion (PGI): The operation will ensure the promotion and participation of men and women including with persons living with disabilities and of different age groups through trainings and consultation. A continuous dialogue among the different stakeholders will be fostered to ensure all programmes/sectors mainstream using DAPS (Dignity, Access, Participation and Safety) approach. PGI will be included in cash transfer response by ensuring that where appropriate, women will be the main recipient for the family, as they are often the ones in charge of managing household activities.

Community Engagement and Accountability (CEA): The MRCS will ensure that the already developed CEA tools, tailor-made to Malawi Context, are adopted and used to collect data relevant for planning CEA approaches and activities. The communities will initially be accessed and informed through the community leaders, before planning with them on

how to engage with the wider communities as well as involving vulnerable groups. The approach will ensure that feedback mechanism is put in place to provide platform for information sharing and engagement with the communities. The community members in the target areas will be involved as fully as possible throughout the response phase to increase their ownership of the response, sharing clear information about response activities, selection criteria and distribution processes with communities through community meetings and door to door activities. Feedback and complaints will also be collected through community volunteers, community meetings, focus group discussions and suggestion boxes and responses provided through community meetings, suggestion boxes and toll free line. A beneficiary satisfaction survey will be conducted at the end of the operation. Furthermore, 250 volunteers and 24 members of staff shall be trained in CEA/PGI approach in emergencies as this will ensure inclusiveness in the response.

Operational Support Services

Human Resources: Overall, 250 volunteers will be engaged in this operation to support the various sectors. Some of the volunteers will be selected amongst the National Response Team members and will support in detailed assessments, coordination, awareness raising of health, Wash and livelihoods and general response issues. This will ensure that effective response preparedness and National Society surge capacity mechanism is maintained. Insurance for volunteers will also be covered in this operation as well as per diems for each deployment. The deployed National Society staff cost is also included in the operation. Some six National Society staff will also be on the field to provide support. This includes the 3 Disaster management staff (1 Ops to coordinate overall response, 1 shelter to support activities and 1 cash focal point), 1 health focal point to support the CBHFA, 1 logistics to support procurement and a Planning and Learning focal point to support all PMER aspects of the response as well as reporting. The National Society Cash focal point will provide technical guidance on Cash and Voucher Assistance (CVA) activities. The overall operation will be led by National Society Director of Programs and Operations. The IFRC Senior Coordination Officer will provide technical and coordination support on behalf of IFRC. At district level, the overall coordination will be done by MRCS District Coordinator and technical staff who will be responsible for day-to-day management of the DREF operation.

PMER: MRCS Planning Quality and Learning department will support the DREF operation by providing technical inputs and support to the DM department on planning, continuous monitoring, assessment results and information management. They will also support the development and implementation of the post distribution monitoring and beneficiaries survey. Monitoring reports shall be used to make proper adjustments to the plans and inform on-going actions.

Communications: MRCS communication department will ensure the media coverage and visibility of the operation through a press release to launch the operation, press article during the implementation, photos and video documentary. Information related to the operation will also be disseminated through MRCS social media pages.

Logistics/Supply Chain: MRCS Logistics unit is providing support to this operation. The DREF will support 400 beneficiaries with NFIs. IFRC logistics unit is supporting procurement processes planned within this operation. All procurements of goods and services will be done in accordance with the MRCS financial procedure manual, the IFRC procurement regulation and the Malawi public procurement regulatory Authority act. This means that all procurement will be an open tender and all the bidding process will follow to the letter.



Administration and Finance: MRCS will be responsible for ensuring that the agreed financial procedures and reporting requirements will be adhered. MRCS Director of Finance & Support Services (DOFSS) is providing financial and administrative technical direction to the operation. The DOFSS is being supported by a Senior Accountant who facilitates day to day financial transaction and reporting of the operation. IFRC Harare Cluster Office facilitates cash transfers and ensure transparent and smooth administrative and financial support to be the operations in close coordination with IFRC Nairobi.

Planning, monitoring, evaluation, & reporting (PMER): MRCS is facilitating monitoring of the operation's progress pinned on the following aspects:


- Ascertaining extent of achievement of objectives in the current response operation.
- Assessing stakeholder and community engagement in the operation
- Reviewing and addressing operational challenges
- Conduct debrief session to discuss the observations


IFRC Cluster Delegation for Malawi, Zambia and Harare will conduct three monitoring visits to support the National Society and address possible challenges.

C. DETAILED OPERATIONAL PLAN

	<p>Shelter People targeted: 13,500 (2,700 households) Male: 6,438 Female: 7,062 Requirements (CHF): 188,900</p>	
<p>Outcome 1: Shelter Outcome 1: Communities in disaster and crisis affected areas restore and strengthen their safety, well-being and longer-term recovery through shelter and settlement solutions</p>		
<p>Indicators:</p>	<p>Target</p>	<p>Actual</p>
<p># of households reached with shelter related support</p>	<p>2,700</p>	<p>617</p>
<p>Shelter Output 1.1: Shelter and settlements and basic household items assistance is provided to the affected families.</p>		
<p>Indicators:</p>	<p>Target</p>	<p>Actual</p>
<p>% of affected households reached with general awareness on shelter and settlements messages (Target: 2,700 HH)</p>	<p>100%</p>	<p>30%</p>
<p># of households assisted with unrestricted shelter cash assistance towards reconstruction of their houses (Target: 2,700 HH)</p>	<p>2,700</p>	<p>400</p>
<p># of households assisted with restricted shelter cash transfers with shelter cash assistance towards reconstruction of their houses (Target: 150 HHs)</p>	<p>150</p>	<p>-</p>
<p># of volunteers engaged in shelter activities (Target: 250 volunteers)</p>	<p>250</p>	<p>20</p>
<p>Progress towards outcomes</p>		
<p>As highlighted during the assessment, one of the pressing needs of the affected population is shelter support due to damaged houses. In this operation, there is need to increase in number of households to be supported from 400 to 2,700 following newly affected people in Chikwawa and Nsanje districts where the majority experienced total collapsed houses while few require minor repairs. In addition, there is need for general awareness of PASSA. The procurement of the relief items for the initial 400 households is still ongoing, and distribution is planned for the beginning of February. The operational strategy for the scale up will now include the distribution of cash for shelter support to mitigate possible delays in the support with the procurement of additional items.</p>		
<p>Challenge: More people were affected due to poorly constructed houses, heavy storm and strong winds. This calls for unrestricted cash transfer to cover shelter support to enable households procure construction materials. Both restricted and unrestricted cash transfer modalities will be applied.</p>		
	<p>Livelihoods and basic needs People targeted: 13,500 (2,700 households) Male: 6,438 Female: 7,062 Requirements (CHF): 177,057</p>	
<p>Livelihoods and basic needs Outcome 1: Communities, especially in disaster and crisis affected areas, restore and strengthen their livelihoods</p>		
<p>Indicators:</p>	<p>Target</p>	<p>Actual</p>
<p>% of targeted households reached with unrestricted cash transfers that report the support is appropriate to meet their emergency needs.</p>	<p>80%</p>	<p>40%</p>
<p>Livelihoods and basic needs Output 1.2: Basic needs assistance for livelihoods security including food is provided to the most affected communities</p>		

Indicators:	Target	Actual
# of households receiving unrestricted cash transfer to support their basic needs (Target: 2,700 HH)	2,700	617
# of cash grants provided to families (Target: 2 grants)	2,700	881
# of volunteers engaged in Cash and Voucher Assistance (CVA) activities (Target: 250 volunteers)	250	100
Progress towards outcomes		
<p>The detailed needs assessment in Salima indicated that 881 households are in need of basic needs support while in Chikwawa and Nsanje will support 80% of the affected households as will be prioritised by the detailed needs assessment. The support will be undertaken for 2 months beginning February and March.</p> <p>Challenge: The disaster occurred at a time when the country is just at the beginning of the rainy season hence there is need to continue monitoring the situation as this may escalate. Salima district has been reported as one of the districts of looming food insecurity due to reduced harvest as such this may affect purchasing power of the intended cash transfer support. Again, there is need to continue monitoring COVID-19 Pandemic.</p>		

	<p>Health People targeted: 13,500 (2,700 households) Male: 6,438 Female: 7,062 Requirements (CHF): 1,773</p>	
Health Outcome 4: Transmission of diseases of epidemic potential is reduced		
Indicators:	Target	Actual
Minimum % of affected population reached through awareness sessions to improve their health habits (Target: at least 70 % of 13,500 people – 9,450 people, 1,890 households)	70%	40%
Health Output 4.6: Improved knowledge about public health issues among 13500 people in Salima District.		
Indicators:	Target	Actual
# of health communication plans developed (Target: 3)	3	1
# of households reached with First Aid and Psychological First Aid (Target: 1,890 HH)	1,890	881
# of volunteers trained and engaged in CBHFA and ECV (Target: 250 volunteers and 15 staff)	250	100
# of volunteers supporting community based surveillance (Target: 250 volunteers)	250	100
Progress towards outcomes		
<p>MRCS will support with of health care activities targeting 13,500 people through undertaking awareness raising on communicable diseases, provision of mosquito nets and Psychological First Aid (PFA) to address emerging health issues. The action will support additional 150 volunteers will be engaged to support the operation targeting Nsanje and Chikwawa.</p>		

	<p>Water, sanitation and hygiene People targeted: 13,500 (2,700 households) Male: 6,438 Female: 7,062 Requirements (CHF): 25,700</p>	
WASH Outcome1: Immediate reduction in risk of waterborne and water related diseases in targeted communities		
Indicators:	Target	Actual

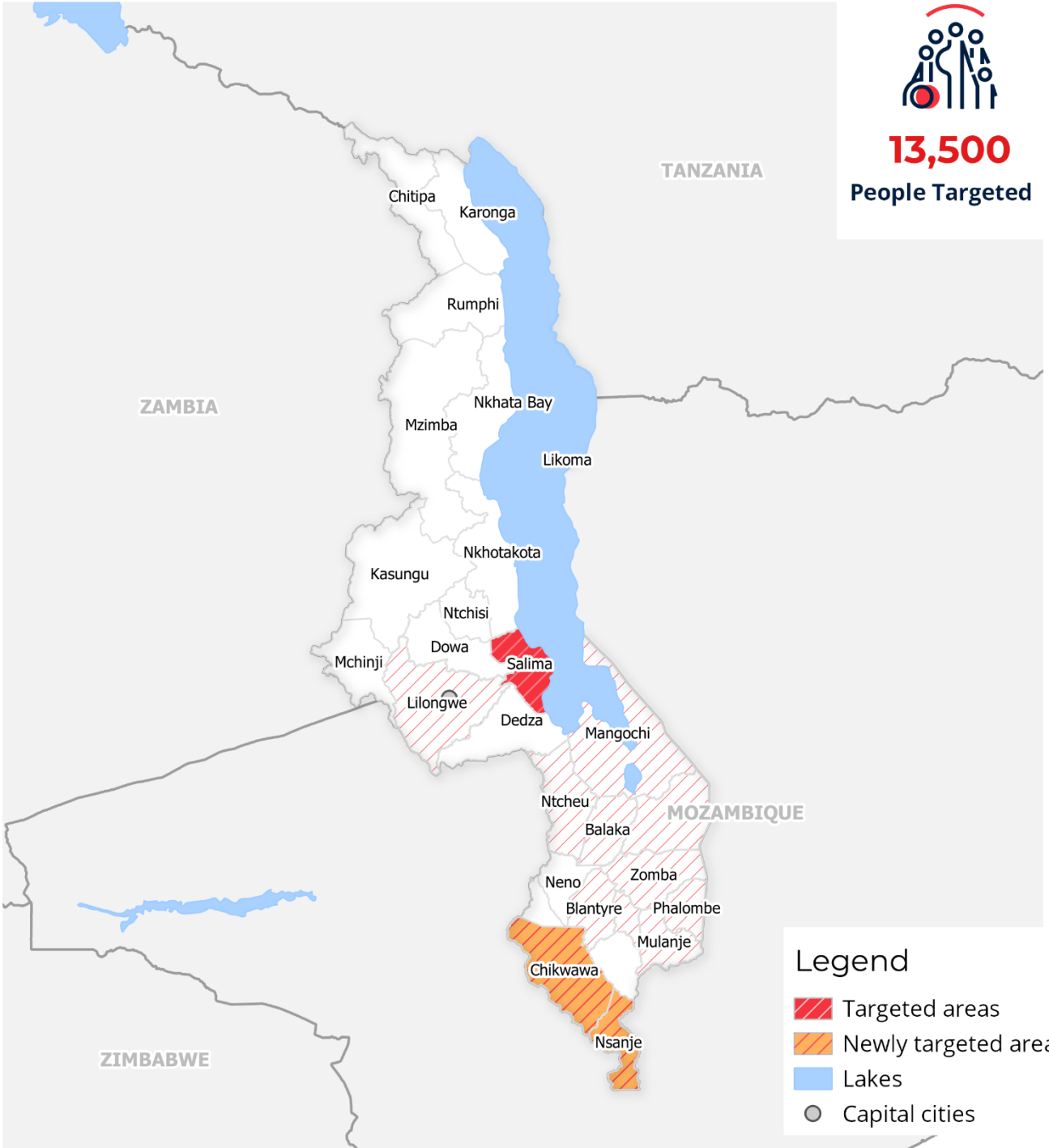
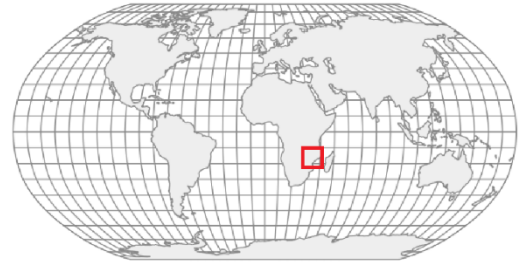
% of targeted people reached with hygiene promotion activities	100%	100%
WASH Output 1.4: Hygiene promotion activities which meet Sphere standards in terms of the identification and use of hygiene items provided to target population		
# of HH reached with hygiene kits (Target 80%: 2,133 HH)	2,133	400
# of women and girls reached with dignity kits (Target: 512 women)	512	256
# of HP and sanitation sessions conducted (Target: 72 sessions)	72	24
# of volunteers engaged in WASH activities (Target: 250 volunteers)	100	100
# of PDM conducted (Target: 3 PDM)	3	-
Progress towards outcomes		
The National Society will conduct hygiene promotion targeting the families affected by the disaster. In addition, there will be provision of hygiene kits and dignity kits for women.		
Challenge: The rapid assessment report showed that many people are hosted in the Camps hence posing risk on adherence to COVID-19 regulations and diarrhoea diseases including cholera. This therefore meant that there is need to provide hygiene and dignity kits which were not adequate to reach all the affected people.		

Strategies for Implementation		
Requirements (CHF): 81,196		
Outcome S2.1: Effective and coordinated international disaster response is ensured.		
Output S2.1.1: Effective response preparedness and NS surge capacity mechanism is maintained		
Indicators:	Target	Actual
# of detailed assessment reports produced for three districts (1 per district)	3	1
# of affected TAs assessed	15	3
# of volunteers participating in the response	250	100
# of volunteers equipped with protective equipment (Target: 100 volunteers)	250	100
# of documentary films profiling NS response (Target: 1)	3	-
# of lessons learned workshops (Target: 03; (1 per district))	3	-
% of feedback revised (Target: 90%)	90%	-
% of feedback responded to	100%	-
# of supervision missions conducted by the IFRC in country office	9	3
# of IFRC monitoring missions (cluster)	3	-
Progress towards outcomes		
The National Society conducted a detailed needs assessment in collaboration with government and other stakeholders to inform the response operation. A total of 250 volunteers were involved in the response operations supporting different activities.		
Challenge: The rainy season has just begun and there are fears that the needs may escalate hence requiring further humanitarian assistance.		

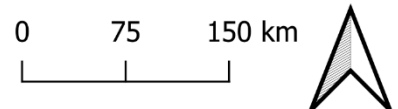


Malawi : Windstorms DREF

22 January 2022 ● SS-2021-000196-MWI ● MDRMW015



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 a territory or of its authorities. Map data sources: GADM, Malawi Red Cross, IFRC.



D. Financial Report

The operation will require total budget of CHF474,698 for period of 6 months with CHF247,707 already committed for Salima District requiring additional funding of CHF226,991 to cover Nsanje and Chikwawa districts. See as attached the detailed budget.

*all amounts in
Swiss Francs
(CHF)*

International Federation of Red Cross and Red Crescent Societies

DREF OPERATION

MDRMW015 - MALAWI - WINDSTORMS

7/12/2021

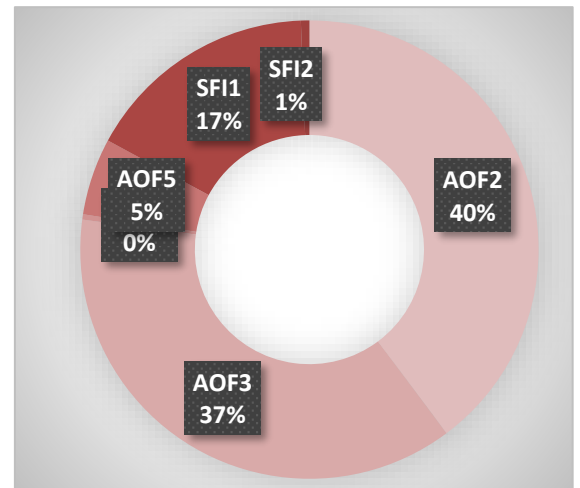
Budget by Resource

Budget Group	Budget
Shelter - Relief	126 346
Shelter - Transitional	0
Construction - Housing	0
Construction - Facilities	0
Construction Materials	0
Clothing & Textiles	12 191
Food	0
Seeds & Plants	0
Water, Sanitation & Hygiene	17 879
Medical & First Aid	0
Teaching Materials	0
Utensils & Tools	15 238
Other Supplies & Services	0
Emergency Response Units	0
Cash Disbursement	150 183
Relief items, Construction, Supplies	321 836
Land & Buildings	0
Vehicles	0
Computers & Telecom	0
Office & Household Equipment	0
Medical Equipment	0
Other Machinery & Equipment	0
Land, vehicles & equipment	0
Storage	14 459
Distribution & Monitoring	5 079
Transport & Vehicles Costs	3 996
Logistics Services	0
Logistics, Transport & Storage	23 535
International Staff	0
National Staff	0
National Society Staff	10 268
Volunteers	16 375
Personnel	26 643
Consultants	0
Professional Fees	0
Consultants & Professional Fees	0
Workshops & Training	32 966
Workshops & Training	32 966
Travel	37 800
Information & Public Relations	666
Office Costs	0
Communications	0
Financial Charges	0
Other General Expenses	2 280
Shared Office and Services Costs	0
General Expenditure	40 746

Assets Depreciation	0
Depreciation	0
Cash Transfers National Societies	0
Cash Transfers to 3rd Parties	0
Contributions and Transfers	0
DIRECT COSTS	445 726
INDIRECT COSTS	28 972
TOTAL BUDGET	474 698

Budget by Area of Intervention

AOF1	Disaster Risk Reduction	
AOF2	Shelter	188 900
AOF3	Livelihoods and Basic Needs	177 057
AOF4	Health	1 773
AOF5	Water, Sanitation and Hygiene	25 772
AOF6	Protection, Gender and Inclusion	
AOF7	Migration	
SFI1	Strengthen National Societies	78 359
SFI2	Effective International Disaster Management Influence others as leading strategic	2 837
SFI3	partners	
SFI4	Ensure a strong IFRC	
TOTAL		474 698



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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For In-Kind donations and Mobilization table support:

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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**.
