**EMERGENCY APPEAL**

**Malawi, Africa | Tropical Storm Freddy Floods**

The impact from Tropical Storm Freddy in Southern Malawi.

| Appeal No: MDRMW018 | Federation-wide Funding requirements: **CHF 6.0 million**
| | (IFRC Secretariat Funding requirements: **CHF 5.0 million**)
| Glide No: EP-2022-000298-MWI | People affected: **345,183 people (79,602 households)** have been displaced (final affected yet to be reported)
| | People to be assisted: **160,000 people (32,000 households)**
| DREF allocation: **CHF 1 million** | Appeal launched: **17 March 2023** | Appeal ends: **31 December 2023**
As of 15 March, least 438 people \(^1\) are confirmed dead in Malawi after Tropical Storm Freddy ripped through southern Africa for the second time in a month and the death toll is expected to rise over the coming days. The storm hit southern Malawi on 12 March 2023 bringing 300-400mm of rainfall in the first 48 hours alone. This brought sudden, violent and destructive flash floods and landslides – particularly in the District of Blantyre. There are reports of extensive damage with fallen trees and power lines, lost crops and livestock, houses washed away or submerged to the rooftops, and damaged and destroyed schools, health centres, and infrastructure, including roads and bridges.

Malawi’s Department of Disaster Management Affairs (DoDMA) has reported flooding, mudslides and strong winds, causing damages in 14 affected councils namely, Balaka, Blantyre City, Blantyre District, Chikwawa, Chiradzulu, Machinga, Mangochi, Mulanje, Neno, Nsanje, Phalombe, Thyolo, Zomba City and Zomba District. On 13 March, the President of Malawi declared a state of disaster in 10 districts of the southern region of Malawi.

Many people have been rendered homeless following the floods and landslides. As of 17 March, 438 people have died, 282 are still missing, with 918 injured, 345,183 people (79,602 households) have been displaced, with 505 camps set up. Malawi’s commercial hub, Blantyre City, has recorded most of the deaths at 98, including many children. Unfortunately, these numbers are expected to continue to rise over the coming days as some areas remain cut off because of relentless rains and fierce winds.

Water levels in most of the big rivers in the affected districts remain high and are not expected to decrease until 20 March. Many areas across the affected districts still remain inaccessible, making it difficult for the local government and agencies to conduct rapid assessments to establish the total number of people affected by the cyclone. Most of the data available is on displaced people currently living in the camps.

Malawi Red Cross Society (MRCS) teams are on the ground conducting lifesaving search and rescue, first aid, and support to the displaced and those requiring immediate support. However, the landslides, damaged infrastructure, and floods are making access difficult for the delivery of relief and carry out assessments, particularly in many of the rural areas.

Through its network of branches and community-based staff and volunteers in the affected districts, the MRCS has reported extensive damage due to the initial flash floods, landslides, and more subsequent widespread flooding. According to preliminary reports, many houses have been completely destroyed or damaged, with roofs blown off, while in some areas entire villages were completely washed away. Thousands of households are displaced, seeking refuge in designated camps, churches, schools and other public structures. As the rains

\(^1\) Department of Disaster management Affairs – update of 17 Mar 2023
continue in all the districts, the data is slowly coming in, but initial reports indicate that both urban and rural shelter destruction remains a significant challenge.

The floods have caused widespread damage to standing crops, seeds, tools, and have killed livestock. Many of these areas were already suffering from significant food insecurity. An estimated 3.8 million people in Malawi are facing severe acute food insecurity, with high food prices, the depletion of food stocks, and the lean season (November–March). In urban areas, the disaster has shocked the normal daily income generating businesses and other services required for daily living. Some markets are currently inaccessible due to poor access while the few shops that are reachable are showing high inflation due to increased demand.

Health services have been disrupted where roads were washed away, as well as due to the lack of electricity. In some cases, ambulances could not even pass to pick-up referral cases. Displaced people in camps are lacking primary health care services, including access to sexual and reproductive health services. There is significant destruction to water and sanitation systems – some community wells have been destroyed while others have been contaminated and some parts of the urban water supply networks have been damaged. Surface water sources have been flooded, destroyed and contaminated, and many household latrines have been flooded and destroyed. The disruption to the supply of electricity is also affecting piped water supply in urban areas. Women and children are at the highest risk of sexual exploitation and abuse, especially in camp settings.

Cholera remains a major concern as Malawi recently suffered the biggest outbreak the country has seen in its history, which was spurred by tropical storm Ana in 2022, with cholera spreading rapidly through contaminated water. The IFRC continues to support MRCS in their cholera response through the Cholera Appeal MDRMW017.

To date, the MRCS, with the support of partners, has been able to contribute to the government's response as follows:

**Pre-impact:**
- Developed and disseminated early warning messages in collaboration with the Department of Disaster Management Affairs.
- MRCS volunteers supported the dissemination of the same messages in communities using the Public Address (PA) system, door-to-door messaging, and by printing Early Warning/Early Action for religious services to read out loud, post on social media, and for radio jingles.
- Supporting communities to evacuate in designated areas before the onset of the floods.
- Pre-positioned assorted essential household items close to the projected areas of impact.

**Post-impact:**
- Rapid needs assessment.
- Carrying out lifesaving search and rescue (including water rescue by boat) and retrieving dead bodies.
- Restoration of Family Links (RFL) where families need to be traced and reunited.
- Providing first aid and psychological first aid, especially to those displaced.
- Supporting referrals to hospitals for further medical care.
- Sensitisation on hygiene and sanitation to reduce the risk of waterborne diseases.
- Cholera prevention, oral rehydration treatment and referral.
- Provision of household items to evacuation centres – and currently mobilising 20 tents, 17,800 blankets, 350 tarpaulins, 1,000 mosquito nets, 2,760 hygiene kits, 260 solar powered flood lamps, and 3,000 boxes of surgical masks.
- The MRCS is also supporting camp management and camp coordination activities.

The MRCS has requested that the IFRC and partners launch this Emergency Appeal for CHF 6 million to enable them to further scale-up their immediate lifesaving response, relief activities, and early recovery.

![Malawi Red Cross staff and volunteers supporting the response.](image)

**TARGETING**

This Emergency Appeal will target the most affected districts and most vulnerable communities which are not being served by others. The Appeal will target approximately 160,000 people impacted in five districts for nine months. The priority will be families displaced and hosted in camps. The final selection and targeting will be confirmed when complete needs assessment data has been received. The response will focus on the immediate needs of the most vulnerable families:

- Families displaced to camps to support camp management and where the situation allows, support to return to their homes.
- Other affected households that are currently being accommodated in other people's houses.
- Return home package, including medium to long-term shelter.
The Malawi Red Cross Society supporting the evacuation of families.
**PLANNED OPERATIONS**

The overall strategic goal is to enable 160,000 people (32,000 households) affected in five affected districts to meet their essential needs in a safe and dignified manner, recover from the crisis and strengthen their resilience to future shocks. The strategy presented is based on a Federation-wide approach and, therefore, incorporates support from the IFRC’s entire membership. The response will focus on the following sectors:

### Integrated services

#### Shelter
- Provide immediate emergency shelter assistance to the most vulnerable, displaced, and those in camps. Additional support for families to return to their place of origin as soon as is feasible with shelter kits and essential household items. Key support will be the provision of tarpaulins, tents, sleeping mats, mosquito nets, jerry cans, and kitchen sets.
- Medium to long-term shelter assistance includes cash for rent in urban areas to bridge the gap between short-term camps and longer-term reconstructions, and the provision of resilient shelters and rehabilitation of damaged houses and infrastructure.
- Design and implementation of inclusive shelter repair/rehabilitation and house construction using cash-based assistance and technical support to build back safer and in a way that is integrated with other components, such as Water, Sanitation and Hygiene (WASH) and livelihoods. Appropriate access to latrines for each household will be considered in the process either by building new or rehabilitating existing ones.

#### Livelihoods
- Basic needs assistance in the form of food security is provided to the most affected/vulnerable communities. Food supply items will be provided to address immediate needs: Maize/maize flour, corn soya blend, cooking oil, pulses, dry fish, soya pieces, sugar, and salt.
- In camps, specific food supply intervention will target women and children to reduce their vulnerability to sexual exploitation and abuse.
- Enhance household livelihoods security through the restoration of food production and income generating activities through distribution of productive assets to farmers (seeds, tools, poultry, livestock, feeding, vaccines) via cash grants or voucher intervention, technical support, and vocational training programmes.

#### Multi-purpose Cash
- Households are provided with unconditional multipurpose cash grants through financial service providers during all phases of the response and conditional restricted cash grants during early recovery and rebuilding to address their basic needs.
- Regular assessments, learning and monitoring of the markets to ensure a stable supply and demand network.
**Health & Care including Water, Sanitation and Hygiene (WASH)**

- Community-based disease prevention and health promotion is provided including the setting up and equipping of Community Health Mobilisation Points, support to Ministry of Health (MoH) vaccination activities, maternal and infant health care, social mobilisation, and risk communication activities in cholera, malaria, HIV, TB, malnutrition and COVID-19, in addition to establishing effective referral mechanisms.
- Health and nutrition education in camps and communities through volunteers and health surveillance assistants.
- Communities are supported to detect and respond to infectious disease outbreaks, including providing health supplies and setting up Cholera Oral Rehydration Points.
- Community-based volunteers are provided with skills and knowledge to conduct active case findings and referrals of suspected cases during house-to-house visits with the aid of the community case definition printout to guide them. This includes all notifiable diseases.
- Communities are supported to effectively respond to health and psychosocial needs including the rollout of training of volunteers and staff in psychological first aid and psychosocial support, and the delivery of psychosocial support.
- Under health, the immediate needs shall include the provision of mosquito nets and mobile clinic services.
- Provision of adequate safe drinking water and sanitation to the affected communities which meets Sphere and WHO standards.
- Distribution of hygiene/dignity kits, and WASH household items (mobile toilets, water treatment chemicals, soap and buckets) to the affected communities.
- Increase coverage and usage of sanitation facilities in camps and communities, repair/rehabilitate households/community latrines.
- Hygiene promotion activities are provided to the entire affected population.

**Protection and Prevention**

**Protection, Gender and Inclusion (PGI)**

- Ensure safe, dignified, and equitable access to the services provided, considering the different needs based on gender and other diversity factors, through a PGI informed multi-sectors needs assessment to identify and address gender and diversity specific needs and protection risks.
- Immediate protection needs will include the provision of clothing, lighting, and dignity kits.
- Ensure that displaced populations in camps have adequate access to safe spaces and receive adequate support to prevent and address sexual exploitation and abuse as well as sexual and gender-based violence (SGBV).
- Support setting up referrals to protection services, and awareness-raising to prevent violence and negative coping strategies.

**Community Engagement and Accountability (CEA)**

- All sectors will include the IFRC’s community engagement and accountability (CEA) standards, and social science tools to convey an appropriate design of the response and promote ownership on the part of the affected population.
- Through this Emergency Appeal, the IFRC will support the continuation and enhancement of CEA activities. The CEA approach will also be incorporated in the interventions that the different sectors will be developing in the field, and analysis of the information received will be included in the operational meetings to adjust the activities based on the feedback collected from the affected population.

**Risk Reduction**

- Post-Disaster Needs Assessments (PDNA) will be conducted to report on the extent of the damages as well as the type of interventions to be implemented in the affected districts.
- Communities take active steps to strengthen their preparedness for timely and effective responses to disasters by developing contingency plans, identifying and equipping evacuation centres, providing early warning services, replenishing and prepositioning stock, and ensuring search and rescue and First Aid service during a response.
Climate change mitigation through the implementation of green solutions under recovery programmes; awareness of eco-system-based and environmentally sustainable nature-based solutions where feasible, conducting tree planting and reforestation activities in consultation with communities to provide multi-targeted sustainable solutions for timber, food, and other resources.

The Appeal will support preparations for seasonal hazards, including updating contingency plans, emergency simulation exercises, and prepositioning of stocks.

Enabling approaches

The sectors outlined above will be supported and enhanced by the following enabling approaches:

**Coordination and Partnerships**

- Coordination will be strengthened with key stakeholders: Department of Disaster Management Affairs (DoDMA), Ministry of Health, Ministry of Water and Sanitation, Ministry of Local Government, UNICEF, WHO, MSF, and other organisations.
- The action will facilitate engagement and coordination with Participating National Societies (PNS) and the ICRC in the design of the response, leveraging the expertise and resources available through a Red Pillar approach, and ensuring alignment with relevant external actors, including the government's policies and programmes, development actors, UN agencies, and non-governmental organisations (NGOs).

**IFRC Secretariat Services**

- The IFRC will facilitate an effective Federation-wide response, with support from the Harare Cluster Delegation and Africa Regional Office. The IFRC will offer its expertise in managing public health epidemics through the deployment of critical functions as agreed with the National Society and will also equip the MRCS with strong risk management and business continuity plans.
- The IFRC will support the MRCS with membership coordination, resource mobilisation, external communications, and technical knowledge in the relevant thematic areas, together with overall operational coordination and coordination with other international organisations. Other areas of support include planning, monitoring, evaluation, and reporting (PMER) and information management. This will be conducted through the IFRC Country Cluster Delegation present in Harare, supported by the IFRC Regional Office in Nairobi. The IFRC Secretariat will support a coordinated and effective Federation-wide approach.
- Currently the IFRC is requesting surge to support the operation in the following positions:
  - Operations Manager, Health Coordinator, PRD Officer, IM Coordinator, Communications Coordinator, Supply Chain Coordinator, PMER Officer, Finance Officer, Shelter Programme Coordinator.
- IFRC is also mobilising in support of its commitments to the global shelter cluster and are requesting surge to support for Shelter Cluster IM and Shelter Cluster Coordinator.
- IFRC is also mobilising in Emergency Response Units for WASH and Mobile Health Units.

**National Society Strengthening**

- The action will facilitate capacity building and organisational development objectives to ensure that the National Society has the necessary legal, ethical, and financial foundations, systems and structures, competencies, and capacities to plan and perform. Volunteer duty of care will be emphasised through the appropriate management services, provision of equipment, training, and an insurance package.

The planned response reflects the current situation and is based on the information available at the time of this Emergency Appeal launch. Details of the operation will be updated through the Operational Strategy to be released in the upcoming days. The Operational Strategy will also provide further details on the Federation-wide
Public approach which includes the response activities of all contributing Red Cross and Red Crescent National Societies, and the Federation-wide funding requirement.

**RED CROSS RED CRESCENT FOOTPRINT IN-COUNTRY**

**Malawi Red Cross Society (MRCS)**

The MRCS was established by Act 51 of the Parliament in 1967 as an auxiliary to the public authorities. The National Society is a volunteer-based organisation, which has **33 divisions** (administrative structures) and a network of more than **76,000 volunteers** and **372 staff** present in all the 28 districts of Malawi.

**IFRC Membership Coordination**

The IFRC Secretariat, which provides technical and financial support to the MRCS through the IFRC Harare Country Cluster Delegation, will play an essential role in ensuring good coordination within and outside the Movement. The PNS in-country have provided bilateral support to the MRCS since the start of the response. These are the Danish Red Cross, Swiss Red Cross, Icelandic Red Cross, Finnish Red Cross, and Italian Red Cross. All PNS participate in the coordination meetings that are held in-country and are called upon to contribute their expertise to this response.

The IFRC and Danish Red Cross supported the MRCS in rolling out the Early Warning and Early Action messages in all reporting districts through radio jingles, van publications, door-to-door messaging, and printing Early Warning/Early Action for religious services to read out loud. They also provided resources to the MRCS to carry out lifesaving search and rescue, first aid, and support for the affected after the Tropical Storm made landfall in Malawi.

**Red Cross Red Crescent Movement coordination**

The IFRC Secretariat plays an essential role in ensuring effective coordination across the Movement, through the IFRC Harare Country Cluster Delegation. In this response, both the IFRC and ICRC are providing advice on the overall safety and security support to Movement partners. The IFRC Harare Cluster Delegation is in regular coordination with the ICRC Country Delegation for Zimbabwe, Malawi, and Zambia. Regular meetings are held to make sure there is strong coordination and effective technical support for the MRCS, as well as complementarity, to ensure a harmonised response plan.

**External coordination**

The government leads and coordinates the humanitarian response in Malawi through the Department of Disaster Management Affairs (DoDMA) and related emergency coordination mechanisms referred to as clusters. In addition, a national Emergency Operation Centre (EOC) was established in Blantyre on 11 March to coordinate preparedness and response interventions.

In view of its auxiliary role, the MRCS is formally part of national disaster management mechanisms and sits on the National Disaster Preparedness and Relief Committee (NDPRC) which is comprised of the Principal Secretaries of all line ministries and departments, and three non-governmental organisations (NGOs). The MRCS is a co-chair to the Search and Rescue and Shelter Clusters and is also a key member of the Incident Management Team, Health, WASH clusters. The MRCS and IFRC participate actively in this coordination mechanism.

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After 31 December 2023, response activities to this disaster will continue under the IFRC Malawi Country Plan for 2024. The IFRC Country Plans show an integrated view of ongoing emergency responses and longer-term programming tailored to the needs in the country, as well as a Federation-wide view of the country's action. This aims to streamline activities under one plan, while still ensuring that the needs of those affected by the disaster are met in an accountable and transparent way. Information will be shared in due time, should there be a need for an extension of the crisis-specific response beyond the above-mentioned timeframe.
Contact information
For further information specifically related to this operation, please contact:

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Reference
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