### DREF Operational Update

**Malaysia - Dengue prevention and control**

![MRCS volunteers preparing ovitraps at Pangsapuri Seroja in Petaling district, Selangor (Photo: MRCS)](image)

**Appeal:** MDRMY010

<table>
<thead>
<tr>
<th>Total DREF Allocation:</th>
<th>CHF 121,673</th>
</tr>
</thead>
</table>

**Crisis Category:** Yellow

<table>
<thead>
<tr>
<th>Hazard:</th>
<th>Epidemic</th>
</tr>
</thead>
</table>

**Glide Number:** EP-2023-000221-MYS

<table>
<thead>
<tr>
<th>People Affected:</th>
<th>240,000 people</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>People Targeted:</th>
<th>48,000 people</th>
</tr>
</thead>
</table>

**Event Onset:** Slow

<table>
<thead>
<tr>
<th>Operation Start Date:</th>
<th>16-11-2023</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>New Operational End Date:</th>
<th>30-04-2024</th>
</tr>
</thead>
</table>

**Total Operating Timeframe:** 5 months

**Reporting Timeframe Start Date:** 16-11-2023

<table>
<thead>
<tr>
<th>Reporting Timeframe End Date:</th>
<th>04-02-2024</th>
</tr>
</thead>
</table>

**Additional Allocation Requested:** 0

**Targeted Areas:** Selangor
Description of the Event

Map of affected areas by the Dengue outbreak in Petaling, Selangor (Source: IFRC IM)

Provide any updates in the situation since the field report and explain what is expected to happen.

The IFRC-DREF application described a surge of dengue cases in Malaysia in 2023 up till October, compared to the same timeframe in 2022. Cumulative statistics for the entire year are now available, showing an overall comparison between figures in 2022 and 2023.

Throughout 2023, a total of 123,133 cases were recorded nationwide, marking an 86.3 per cent increase compared to the 66,102 cases reported in 2022. Additionally, the number of deaths attributed to complications from dengue in 2023 totaled 100 cases, reflecting a 78.6 per cent increase compared to the 56 cases in 2022 [1].

Since the beginning of the new year, cases have continued to rise, surpassing 500 cases daily, as projected by the Malaysian Ministry of Health (MoH) in late 2023. In the second epidemiological week of 7-13 January 2024, a total of 3,525 cases were recorded nationwide, with 2 deaths reported. This marked an increase compared to the 3,181 cases in the first week of the year, during which no deaths were reported.

In January 2024, the Health Director-General released a statement, pointing to the Meteorological Department’s forecast of the monsoon season lasting until March. The Health D-G cautioned that the wet season contributes to increased potential breeding areas for Aedes mosquitoes and reminded the public to continue taking preventive steps against dengue.

As of the second epidemiological week of 2024, the number of dengue hotspots across the country rose from 130 to 136 localities, with Selangor being the worst-hit state, followed by Kuala Lumpur and Putrajaya [2].

Links:
Scope and Scale

The scope and scale of the project remain the same as laid out in the original IFRC-DREF application, but nationwide statistics and specifically in the state of Selangor have shown a sharp increase. Selangor records the highest number of dengue cases nationwide. As of 28 January 2024, Selangor records a daily case count of 265 cases. This constitutes 52 per cent of the nationwide daily case count at 512 cases [3]. In addition, Selangor still records the highest number of dengue hotspots – as of 13 January 2024, this totaled 100 localities in the state [4].


Summary of Changes

| Are you changing the timeframe of the operation | Yes |
| Are you changing the operational strategy | No |
| Are you changing the target population of the operation | No |
| Are you changing the geographical location | No |
| Are you making changes to the budget | No |
| Is this a request for a second allocation | No |
| Has the forecasted event materialize? | Yes |

Please explain the summary of changes and justification:
This Operation Update (OU) report covers the period from 16 November 2023 to 4 February 2024. This OU provides an overview of field implementation under this operation. A no-cost extension of two months - until 30 April 2024 - is crucial to address delays faced within the National Society. The delays are attributable to two significant celebrations in January and February, namely the Hindu Thaipusam festival and the Chinese New Year. While communities have expressed interest and commitment to participating in the dengue program, they have also provided feedback to MRCS that it is challenging to gather residents for the community cleaning campaigns around the period of these festive seasons. Therefore, considering community considerations, MRCS wishes to appeal for an extension to fulfill its commitment to conducting programs across five hotspot locations.

In support of the extension request from the Malaysia Red Crescent Society (MRCS), the challenges of several processes affected the daily operation planning time. MRCS has placed a large order for fogging chemicals (estimated around MYR 90,000/CHF 16,456) as MOH vector has limited stock to supply and fog the hot spots in Selangor states. Completing this task depends upon the procurement process and approval from the MRCS Tender Board, which was just approved on 4 February 2024 (Sunday). Once the payment is made and the fogging dengue chemical is delivered, MRCS, together with the MOH Vector team from the states and district of Selangor, will head to the hot spots to fog in two rotations. The first rotation is at 5:00 a.m., and the second rotation is in the evening around 7:30 p.m. This suggested time was endowed by the vector team. The vector team pledges to have a full 2-week operation with the support of MRCS-trained volunteers.

In the following weeks, the 3rd and 4th weeks of February 2024, MRCS and the local health vector team will visit the two remaining locations, which have been dengue hotspot areas for the past few years. For these areas, the team will also visit the nearest school and construction areas. The visitation to the school is also part of the CEA intervention and helps the Ministry of Health educate the school pupils on the dangers of dengue and motivate them to fight dengue as a community. As for the construction areas, this will also advocate migrants as well as construction management to ensure the plants are safe and free from dengue. By having these community members in the community, the local community will have the heart to fight dengue and understand the environmental aspects of dengue and its cultivation. As a result of activities like hand-washing stations, MHPSS sand art therapy, CPR training sessions, dengue prevention CEA and giving out dengue prevention kits, and basic medical screening (blood pressure and glucose check), MOH Malaysia thinks that the number of cases of dengue in Selangor will go down. MOH Vector Selangor has also formed a high-level committee of residents to fight dengue, which is an example of community-based engagement and prevention.

As for the project implementation, other activities have already begun with the community, including the distribution of dengue prevention kits, community cleaning, and a dengue prevention program. The five targeted locations in Selangor states suggested by the Selangor vector department comprise of three low-cost apartments with around 2,500 families each and two housing areas accommodating 2,500 families per location. This location also includes migrant populations living with the local community, as they work in the nearby factory and an industrial area. Furthermore, the team has implemented dengue mosquito traps in all five areas as per the request of the state vector team to compensate for their insufficient workforce.

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**Current National Society Actions**

**National Society anticipatory actions started**

2023-03-01

- Residents at ‘Pangsapuri Subang Impian’ participating in the community cleaning activity. (Photo: MRCS)
- MRCS volunteers conducting a WASH three-pile sorting activity to raise awareness on dengue prevention methods. (Photo: MRCS)
- Distribution of dengue prevention kits at ‘Pangsapuri Seroja’. (Photo: MRCS)
### Health

MRCS has completed procurement for dengue prevention kits, sufficient to prepare 3,000 kits to be distributed to households in identified hotspot areas. Items procured include mosquito repellent patches, water-based insecticide aerosol, larvicide, and mosquito coils. These items are packed into individual non-woven bags, designed with logos, prior to distribution.

As of 4 February 2024, 121 dengue prevention kits have been distributed to residents at Pangsapuri Seroja and Pangsapuri Subang Impian. Additionally, a total of 400 kits will be distributed by residential associations at both localities to community members who could not attend during the programme day.

**Note:**

"Pangsapuri" refers to an apartment or flat. It is commonly used to describe multi-unit residential buildings where individual housing units are grouped together within a larger complex. "Pangsapuri" can be used to refer to both low-cost and high-end apartments, and it is a common term in the context of housing in Malaysia.

### Water, Sanitation And Hygiene

On 21 January 2024, MRCS set up ovitraps at three selected hotspot areas, including Pangsapuri Seroja (Setia Alam municipality), Pangsapuri Subang Impian (Subang Jaya municipality), and Pangsapuri Flora Damansara (Kota Damansara municipality). The purpose of the ovitraps is to sample the mosquito population to determine the most effective ways for vector control. The MRCS team also sought out areas of water containment and emptied them or inserted larvicide to prevent the breeding of mosquitoes. These ovitraps were collected back on 4 February 2024 for further observation.

As of 3 February 2024, 45 volunteers have been trained in WASH activities for the dengue program. WASH activities under MRCS’s dengue program include awareness workshops on dengue prevention and control through the three-pile sorting method, hand hygiene awareness workshops, as well as community cleaning campaigns (gotong-royong). Activities for adults and children were planned to cater to diverse age groups.

Items prepared for the community cleaning activities include brooms, pails, wheelbarrows, garden hoes, shovels, rubbish pickers, and gloves. Face masks were also prepared for community members.

On 4 February 2024, MRCS conducted dengue prevention community programs at Pangsapuri Seroja and Pangsapuri Subang Impian. In total, 121 households participated in the program at both locations (estimated 200 participants in total).

Additionally, MRCS is planning to support the Petaling health district office in fogging operations, through the procurement of 500 liters of adulticide chemicals. This will be sufficient to conduct fogging at 3,500 localities with a 200-meter radius. While this procurement was not included in the original IFRC-DREF proposal, MRCS decided to include this area of support after the health district office informed MRCS of a need for fogging materials. However, details are still being confirmed with the health district office.

### Protection, Gender And Inclusion

With the support of the IFRC Malaysia Country team and the APRO PGI Senior Officer, MRCS was briefed on a Child Safeguarding Risk Analysis. The analysis is being finalized by the MRCS team.

MRCS conducted an orientation on PGI to volunteers during the training session. As of 3 February 2024, a total of 45 volunteers have been trained in preparation for the IFRC-DREF Dengue operation. The number of trained volunteers exceeded the original target due to the participation of more volunteers from Kuala Lumpur and Johor MRCS chapters.

During the dengue prevention community programmes, the MRCS team adopted approaches for child safeguarding, specifically taking steps to ensure parental supervision by conducting children’s activities in a public space situated within view of
parents and the community.

Data collection forms have been designed to collect Sex, Age, and Disability Disaggregated Data (SADDD) of target population/beneficiaries and volunteers.

Migration And Displacement

MRCS oriented its staff and volunteers on the migration and displacement context during a preparatory training session from 30 to 31 December 2023.

The selected hotspot areas include mixed communities including host and migrant populations. MRCS engaged with community leaders to explain the objectives of the programme, and to encourage participation of the migrant communities.

Data collection methods have been designed to incorporate the collection of minimal migration data, such as nationality, gender, and age group.

Community Engagement And Accountability

MRCS oriented its volunteers on the Community Engagement and Accountability (CEA) approach, during the training sessions on 30-31 December 2023 and 3 February 2024. The training was conducted at the same time as the PGI and Migration training. The total of participants was 45 volunteers. The number of trained volunteers exceeded the original target due to the participation of more volunteers from Kuala Lumpur and Johor MRCS chapters.

Information and communication materials have been designed and printed by MRCS, containing messaging on dengue prevention and control methods. This includes informational flyers available in English and Malay languages focused on messaging on dengue prevention and control. The flyers are distributed during the dengue prevention community programmes, as part of the dengue prevention kit.

A social media awareness campaign has also been launched on MRCS’s Facebook and Instagram pages, sharing information on the dengue illness as well as prevention and control methods. As of 26 January 2024, the posts have reached 14,787 viewers, with 1,498 engagements.

In addition, MRCS has printed t-shirts for community members, and non-woven bags for dengue prevention kits, to bring publicity to the programme.

MRCS engaged with residential associations from hotspot areas, to further understand the context and gaps, and discuss collaborations for the health and WASH programme.

Coordination

MRCS held consultations with the Malaysian Ministry of Health (MoH), Selangor State Health Department (JKNS) and Petaling district health office (PKD Petaling). The goal of the consultations was to ensure that MRCS’s dengue response complemented the MoH’s approach. MRCS was advised on which hotspot areas to target, with a priority on urban residential areas with high population densities. MRCS also discussed with the stakeholders on the type of awareness messaging to include, and the composition of the dengue prevention kits. Overall, MRCS adopted its role as auxiliary to the government, taking the approach of supplementing the MoH’s response where it was stretched thin on resources.

MRCS also coordinated with residential associations from hotspot areas, to further understand any needs and gaps, and collaboratively organise dengue prevention community programmes containing health and WASH activities. The residential associations play an active part in running the programme, organising logistics, promoting the event to residents, and organising additional activities with their own resources as additional attractions for residents, such as archery and lucky draw contests.

PKD Petaling also collaborated with MRCS by setting up dengue informational booths during the programme.

National Society Readiness

MRCS conducted preparatory training sessions on 30 and 31 December 2023, and 3 February 2024. The goal of the training sessions was to ensure that volunteers were...
equipped with the necessary skills to participate in the dengue response. Areas covered included Community Engagement and Accountability (CEA), Protection, Gender and Inclusion (PGI), migration and displacement, data collection, and WASH.

From the volunteer training sessions, a total of 45 volunteers received training. This exceeded the initial plan of training 35 volunteers. This is because MRCS recruited volunteers from the Kuala Lumpur and Johor MRC Chapters, in addition to volunteers from Selangor. Given that Kuala Lumpur and Johor record the highest number of daily dengue cases following Selangor, training volunteers from these states could boost preparedness for MRC Chapters to respond at the state level.

IFRC Network Actions Related To The Current Event

**Secretariat**

The IFRC Malaysia country team provided technical assistance to MRCS in the design, implementation, and monitoring of the activities, since the start-up of this DREF operations.

The IFRC Malaysia country team also supported the MRCS Project Manager on its project management, which encourages MRCS to have regular meetings to review its implementation progress and also to review its financial expenditure progress.

The IFRC Malaysia country team supported MRCS to get the necessary support from IFRC APRO technical team and support team for this DREF operations. So far, MRCS has received support from APRO PGI unit, and MHPSS unit.

**Participating National Societies**

N/A

ICRC Actions Related To The Current Event

N/A

Other Actors Actions Related To The Current Event

**Government has requested international assistance**

No

**National authorities**

The MoH continues to monitor the dengue outbreak, releasing regular updates on the i-Dengue web portal which includes statistics eg. daily number of cases, breakdown of cases by states, cumulative cases, and hotspot areas. MRCS continues to work with the MoH to ensure its operations address the ongoing dengue context.

**UN or other actors**

-

**Are there major coordination mechanism in place?**

MoH remains the lead institution to coordinate the nationwide dengue response, where MRCS provides support as an auxiliary entity. MoH have regularly provided updates on the dengue outbreak via the i-Dengue portal.

As JKNS oversees the dengue response within Selangor, MRC Selangor is also actively continuing coordination with JKNS to ensure that MRCS’s operation addresses ongoing needs.
Operational Strategy

Overall objective of the operation

The overall objective of this operation remains the same as stated in the IFRC-DREF application. This operation aims to provide health and WASH awareness messages on dengue to the most vulnerable people, including the migrant population. This will be done through RCCE, community area cleaning (known as ‘gotong royong’ in Malaysia) campaigns, distribution of dengue kits, and the integration of PGI and CEA into interventions at selected strategic locations within the Petaling district, which holds the highest number of dengue cases in Malaysia, reaching an estimated 48,000 people. The implementation of this operation will be extended to five months.

Operation strategy rationale

The operational strategy/implementation plan remains unchanged. The plan primarily focuses on early/preventive actions aligned with the expectations from MRCS by the MoH. Recent meetings were held at the MoH office, where MRCS was asked to support public awareness and RCCE, mobilize volunteers for vector control activities like cleaning campaigns at the community level.

MRCS will conduct health public awareness campaigns (RCCE) within the targeted community, emphasizing dengue while incorporating messages about potential communicable diseases like cholera and COVID-19. The awareness efforts will include information on how to report cases within the community and a referral mechanism for dengue cases established by MoH. MRCS will provide household dengue prevention kits to vulnerable households, potentially containing mosquito repellent, aerosol water base, mosquito patches, and mosquito coils. The distribution will focus on households in urban poor housing areas and among migrant workers. The procurement of these kits has been a high priority for MRCS in the early stage of operations. Advice and support on procurement are sought from the IFRC APRO Procurement unit.

MRCS will empower the community to conduct community cleaning campaigns (‘gotong royong’) and conduct hygiene promotion activities within targeted communities. Additionally, MRCS will empower community representatives to regularly monitor individual houses for cleanliness and ensure no stagnant water spaces for mosquito breeding.

Health public awareness campaigns (RCCE), community cleaning campaigns (‘gotong royong’), hygiene promotion activities, and the distribution of household dengue prevention kits will occur during the first and second months of the operation. The aim is to prevent a surge in dengue cases within the targeted communities and control the vectors.

With the high number of dengue cases, the Petaling district health office has suggested to MRCS to provide support with fogging materials. MRCS is planning to purchase 500 liters of liquid adulticides for this purpose. However, details are still to be confirmed with the district health office.

Additionally, MRCS will collaborate closely with MOH and healthcare workers in health screening activities and provide emergency health services, including responding to dengue cases reported by the community. MRCS ambulances will be stationed in hotspot areas to transport patients if needed, as requested by government health clinics. Home visits to the elderly and bedridden patients will be a priority for MRCS ambulance mobile health clinic volunteers. MRCS emergency mobile health clinic services will be deployed, if necessary, as requested by government health clinics.

PGI aspects are being integrated into MRCS actions and engagement. MRCS volunteers conducting home-to-home campaigns and disseminating awareness are using communication systems and leaflets to target various vulnerable groups or members of communities—children, adults (male and female), migrants, and the elderly. They’ll also distribute health awareness messages in housing areas, schools, construction sites, and neighborhoods within hotspot areas.

MRCS, in coordination with MOH, state health departments, local authorities, and community committees, will create dengue awareness among different target groups mentioned under the PGI section. Messages are developed in local languages according to the respective races, facilitating better understanding of dengue prevention at the grassroots level.

Regarding migration, MRCS is targeting migrant populations residing in the same hotspot areas. Training and orientation for MRCS staff and volunteers on engaging with migrant communities have been provided.
Targeting Strategy

Who will be targeted through this operation?

The operation targets highly urban poor areas of Petaling district in Selangor State, which record the highest number of dengue cases. These urban poor areas with a high population density consist of B40 families (lower income group in Malaysia) and include a migrant population. This will be based on the hotspots of dengue in addition to the analysis of population risk residing in the particular areas through continued coordination with the district health office and monitoring the data.

Explain the selection criteria for the targeted population

The operation will focus on the urban settings of the selected district, with 20 percent of the urban population taken as people at risk out of 240,000 people in Petaling Township (data source from the Dewan Selangor office). The operations will reach 48,000 people directly through household visits, awareness sessions in the community, sanitation campaigns, etc.

Total Targeted Population

<table>
<thead>
<tr>
<th>Gender</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Women</td>
<td>22,560</td>
</tr>
<tr>
<td>Girls (under 18)</td>
<td>-</td>
</tr>
<tr>
<td>Men</td>
<td>25,440</td>
</tr>
<tr>
<td>Boys (under 18)</td>
<td>-</td>
</tr>
<tr>
<td>Rural</td>
<td>-</td>
</tr>
<tr>
<td>Urban</td>
<td>100%</td>
</tr>
<tr>
<td>People with disabilities (estimated)</td>
<td>5%</td>
</tr>
<tr>
<td>Total targeted population</td>
<td>48,000</td>
</tr>
</tbody>
</table>

Risk and Security Considerations

Please indicate about potential operation risk for this operations and mitigation actions

<table>
<thead>
<tr>
<th>Risk</th>
<th>Mitigation action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cases and geographical locations can vary</td>
<td>MRCS will continue monitoring of the situation and flexible program modality</td>
</tr>
<tr>
<td>Massive outbreak can cause changes in the operation plan and strategy</td>
<td>MRCS will closely coordinate with MoH and to adjust its operation based on the changing situation</td>
</tr>
<tr>
<td>Unexpected major floods in Selangor can cause access challenges to the targeted area, and delivery of activities.</td>
<td>MRCS will closely monitor the flood events that currently have started with small flash floods. MRCS will adjust its operation strategy which may have to combine with the flood response of MRCS.</td>
</tr>
</tbody>
</table>

Please indicate any security and safety concerns for this operation

There are no major threats in Malaysia that may directly impact the implementation of operational activities. Some challenges may still arise such as increased health risks in the COVID-19 crisis, mosquito and waterborne diseases, and vehicle accidents.

However, adequate measures will be put in place to mitigate the security risks. There is already a field implementation guide for MRCS branches and volunteers considering the current COVID-19 context, followed for this IFRC-DREF implementation to minimize risk. MRCS will follow the existing government and Red Cross Red Crescent (RCRC) Movement guidance related to the COVID-19 crisis during this operation. The IFRC oriented MRCS on the COVID-19 safe programming pilot guide Asia Pacific 2020, referencing the mitigation risk.

The National Society’s security framework will apply throughout the duration of the operation to their staff and volunteers. In case of need for deployment for personnel under IFRC security’s responsibility, including surge support and integrated Participating National
Societies (PNS), the existing IFRC country security framework will apply. All IFRC must, and RC/RC staff and volunteers are encouraged, to complete the IFRC Stay Safe 2.0 e-learning courses.

| Has the child safeguarding risk analysis assessment been completed? | No |

**Planned Intervention**

**Health**

**Budget:** CHF 61,238  
**Targeted Persons:** 48,000

| Indicators |  
| --- | --- | --- |
| **Title** | **Target** | **Actual** |
| # of people provided with health services | 48,000 | 15,308 |
| # of household dengue prevention kits distributed | 3,000 | 521 |

**Progress Towards Outcome**

As of 3 February 2024, training and orientation have been conducted for 45 volunteers on ECV and RCCE about dengue, where volunteers were briefed on the dengue virus, Aedes mosquitoes as vectors, clinical phases and symptoms, severe dengue, methods of treatment, and vector control.

The procurement of dengue prevention kits has been completed – with 3,000 sets of each item including mosquito repellent patches (boxes of 10’s), water-based aerosol insecticide spray bottles, larvicide, and mosquito coils.

MRCS packs the items into individual kits in non-woven bags, to be distributed to households. This is conducted during dengue prevention community programmes planned by MRCS in coordination with residential associations at identified hotspot areas. During these programmes, MRCS volunteers facilitated community cleaning campaigns, awareness workshops, children's activities, and distribution of dengue prevention kits.

On 4 February 2024, 121 kits were distributed to residents at Pangsapuri Seroja and Pangsapuri Subang Impian. An additional 400 kits are being distributed through residential associations to community members who could not attend on the program date at both locations.

Currently, the number of people reached includes the following:

- 14,787 engagements on the social media campaign.
- 521 households that received dengue prevention kits (calculated through KOBO registrations required during the distribution of the dengue prevention kit).

One identified challenge was the hesitation among migrant communities to participate in the activities, specifically at Pangsapuri Seroja. Upon engagement with the communities, the MRCS team discovered that the community members thought an identification card was required during registration. In response, the MRCS team, with the help of community leaders, gave reassurance that they could take part.

Additionally, there was less participation from community members at 'Pangsapuri Subang Impian' (39 households). Based on conversations with the community, the MRCS team learned that it had been years since a community event was held at the location. A lesson learned was for MRCS to include additional pull factors, such as lucky draws, to attract more participation.

In addition, a total of 23 volunteers have been trained by the IFRC Asia Pacific MHPSS Training & Learning Collaborative on MHPSS...
assessment. The objective of the workshop was to develop an assessment plan to be used to gain more understanding of MHPSS needs of communities in dengue hotspot locations. Through the MHPSS workshop, potential interventions identified included the following:

- Supporting children who are infected by dengue or who live with family members infected with dengue;
- Supporting migrant communities who face challenges accessing healthcare and mental health services through partnerships with community leaders to raise awareness on available services;
- Engaging women in the dengue response, given their traditional roles as caretakers of the family;
- Working with community leaders to raise awareness on dengue illness and ways of prevention and control.

Water, Sanitation And Hygiene

**Budget**: CHF 33,601  
**Targeted Persons**: 48,000

**Indicators**

<table>
<thead>
<tr>
<th>Title</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td># of people reached by WASH assistance</td>
<td>48,000</td>
<td>15,308</td>
</tr>
<tr>
<td># of people reached by hygiene promotion activities in the response period</td>
<td>48,000</td>
<td>15,308</td>
</tr>
</tbody>
</table>

**Progress Towards Outcome**

On 20 January 2024, Ovitraps were set up at three selected hotspots, including the following localities, to sample the mosquito population for vector control:

- Pangsapuri Seroja, Setia Alam (725 households, with 2,000-3,000 people)
- Pangsapuri Subang Impian, Shah Alam (400 households, with 1,200-2,000 people)
- Pangsapuri Flora Damansara, Kota Damansara

As of 3 February 2024, a total of 45 volunteers have been trained on hygiene promotion for the dengue programme. WASH activities under MRCS’s dengue programme include awareness workshops on dengue prevention and control through a three-pile sorting activity, hand hygiene awareness workshops, as well as community cleaning campaigns (gotong-royong). Activities for adults and children were planned, to cater to diverse age groups.

MRCS has held coordination and planning meetings with the MoH and JKNS, to identify hotspot locations to be targeted, review contents of the dengue prevention kits, discuss other areas MRCS can support, and ensure that MRCS’s operations are in alignment and complementary to the MoH’s dengue response.

On 4 February 2024, MRCS conducted dengue prevention community programmes at two selected hotspots, including Pangsapuri Seroja and Pangsapuri Subang Impiang, both in the Petaling district. The programme included hygiene promotion activities, namely community cleaning campaigns, dengue prevention awareness workshops, and hand hygiene awareness workshops for adults and children.

Currently, the number of people reached includes the following:

- 14,787 engagements on social media campaign;
- 521 households who participated in the dengue prevention community campaign.

Additionally, MRCS will support the Petaling Health district office in fogging operations, through the procurement of 500 litres of adulticide chemicals. The procurement of these chemicals had been completed. This will be sufficient to conduct fogging at 3,500 localities within a 200-metre radius. While this procurement was not included in the original IFRC-DREF proposal, MRCS decided to include this area of support after the health district office informed MRCS of a need for fogging materials to increase fogging activities in the hotspot areas. In the third week of January, there was an increase in daily cases (over 500 cases per day in overall Malaysia) that caused the increased number of hotspot areas in Selangor State.
Protection, Gender And Inclusion

Budget: CHF 1,065
Targeted Persons: 35

Indicators

<table>
<thead>
<tr>
<th>Title</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td># of volunteers trained in PGI minimum standards, PSEA, and child protection</td>
<td>35</td>
<td>45</td>
</tr>
<tr>
<td># of child safeguarding risk analysis assessment conducted</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

Progress Towards Outcome

A child safeguarding analysis for this operation is being conducted, and the summary report will be finalized by mid-February 2024.

An orientation on PGI was done during the volunteer training sessions to sensitize MRCS volunteers.

During the dengue prevention community programmes, the MRCS team adopted approaches for child safeguarding, specifically taking steps to ensure parental supervision by conducting children’s activities in a public space situated within view of parents and the community.

Additionally, the KOBO forms for data collection in this operation have been designed to include Sex, Age, and Disability Disaggregated Data (SADDD).

Migration And Displacement

Budget: CHF 1,065
Targeted Persons: 35

Indicators

<table>
<thead>
<tr>
<th>Title</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td># of volunteers and staff oriented on migration approach</td>
<td>35</td>
<td>45</td>
</tr>
</tbody>
</table>

Progress Towards Outcome

As of 3 February 2024, 45 volunteers were oriented on the migration approach of MRCS and the Movement.

MRCS engaged migrant populations residing in the selected hotspot localities to encourage their participation during the dengue prevention community programmes.

One challenge identified was the hesitancy of some community members to participate. When the MRCS team approached the community members, it was learnt that they thought an identification card was required for registration. In response, the MRCS team engaged community leaders to reassure their community members that they could take part in the activities.

Another challenge was the lack of existing communication and engagement between host communities and migrants. This could have limited the mobilisation of migrant populations. To address this, community leaders contacted employers of the migrant communities to request permission for their employees to attend the event.

Additionally, language barriers presented a possible hurdle during the programme. MRCS recruited the help of community members able
to converse in English to assist with interpretation during the programme.

Data on migrant populations has been integrated into the data collection forms, with consideration of data protection and security. The forms are designed to collect data on the number of migrant participants, their nationalities, gender, and age groups.

**Community Engagement And Accountability**

**Budget:** CHF 4,260  
**Targeted Persons:** 48,000

**Indicators**

<table>
<thead>
<tr>
<th>Title</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td># volunteers trained or oriented on CEA</td>
<td>35</td>
<td>45</td>
</tr>
<tr>
<td># people reached by community engagement/media campaign</td>
<td>48,000</td>
<td>15,308</td>
</tr>
</tbody>
</table>

**Progress Towards Outcome**

As of 3 February 2024, a total of 45 MRCS volunteers have been provided with CEA orientation/training. This included briefing on the MRCS community feedback mechanism, and how community feedback is used for informed decision-making.

On 4 February 2024, the MRCS team engaged directly with community members at Pangsapuri Seroja and Pangsapuri Subang Impian for the dengue prevention community programmes. Combined, an estimated 200 participants from 121 households attended the events at both locations.

Dengue RCCE/awareness campaigns to the public have been conducted through prevention messages on social media. As of late January, the social media campaigns have had an audience reach of 14,787. The messaging includes information on steps to prevent mosquito breeding, symptoms of dengue, and ways to maintain a healthy environment. MRCS has also printed flyers in English and Malay languages which are distributed to residents in hotspot areas.

A social media awareness campaign has also been launched on MRCS’s Facebook and Instagram pages, sharing information on the dengue illness as well as prevention and control methods. As of 26 January 2024, the posts have reached 14,787 viewers, with 1,498 engagements.

In addition, MRCS has printed t-shirts for community members, and non-woven bags for dengue prevention kits, to raise publicity for the programme.

In alignment with the CEA approach, MRCS has worked closely with residential associations, involving them along the programme cycle. Feedback from the residential associations is used to inform MRCS’s planning for the dengue community programmes.

**Secretariat Services**

**Budget:** CHF 540  
**Targeted Persons:** 2

**Indicators**

<table>
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<tr>
<th>Title</th>
<th>Target</th>
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</tr>
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<tbody>
<tr>
<td># of IFRC Malaysia team supported MRCS on this operation</td>
<td>2</td>
<td>2</td>
</tr>
</tbody>
</table>
Progress Towards Outcome

IFRC Malaysia team has supported MRCS in monitoring the implementation and budget forecasting and spending of the dengue operation and continues to support providing technical advice on the implementation and the reporting.

IFRC PGI technical unit supported MRCS in conducting Child Protection training, and in briefing MRCS on the Child Safeguarding Risk Analysis process.

IFRC APRO MHPSS Coordinator together with the MHPSS Center Manager supported MRCS to provide two days of training on MHPSS assessment in January 2024.

In addition, the IFRC team supported MRCS in its engagement with the Ministry of Health on this operation.

National Society Strengthening

Budget: CHF 19,904
Targeted Persons: 35

Indicators

<table>
<thead>
<tr>
<th>Title</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td># of volunteers and staff trained and oriented</td>
<td>35</td>
<td>45</td>
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<tr>
<td># of lessons learned workshop conducted</td>
<td>1</td>
<td>0</td>
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Progress Towards Outcome

As of 3 February 2024, a total of 45 volunteers have been trained in CEA, PGI, migration and displacement, data collection, and WASH. These volunteers are mobilized by the MRC Selangor Chapter for the dengue operation.

An indicators tracking plan, and monitoring and evaluation plan, have been developed by the MRCS team with IFRC Malaysia's support.

MRCS has also subscribed to the IFRC's Accident Insurance for Red Cross Red Crescent Volunteers, which will be valid until the end of 2024.

A lessons learned workshop will be conducted in early April 2024 if the no-cost extension is approved.

About Support Services

How many staff and volunteers will be involved in this operation. Briefly describe their role.

The overall response will be coordinated from headquarters with the support of four to five staff members responsible for operations and support functions. This team will encompass a Health Manager, WASH Officer, Senior Migration & Displacement Officer overseeing the implementation of this IFRC-DREF and providing technical guidance and assurance to the MRCS Selangor branch. Additionally, a PMER staff member will support in monitoring and ensuring the implementation's quality, while a Finance staff member will manage financial aspects. Lastly, a procurement/logistics staff member will handle procurement and logistical requirements for this IFRC-DREF operation.

The allocation for the Health, WASH, Senior Migration & Displacement Officer, and PMER staff will be an estimated 50 per cent each, while the allocation for Finance and Procurement/Logistics staff will be approximately 25 per cent each. MRCS HR employs an internal payroll
mapping mechanism to track and assign salaries for their staff.

For this operation, an estimated total of 35 volunteers will be deployed for one operational rotation. Additional volunteer rotations may be necessary, potentially increasing the number of volunteers engaged in this operation.

**If there is procurement, will it be done by National Society or IFRC?**

All procurements, planned under this operation, will happen locally. As of the development of this DREF application, IFRC and MRCS teams do not see the need for any international procurements under this operation.

**How will this operation be monitored?**

Proper PMER activities will be implemented to ensure the quality of implementation throughout the operational management cycle. MRCS will oversee day-to-day monitoring at the branch/unit level. Teams from MRCS and IFRC, including volunteers, will regularly visit operation sites to assess progress and offer support for the successful execution of planned interventions. Post-activity, a Post Distribution Monitoring (PDM) survey will be conducted to gather information on the assistance’s impact and receive feedback from relief recipients. An internal workshop focused on lessons learned is scheduled under this IFRC-DREF to assess the operation’s achievements, challenges, and key learnings.

Adherence to PGI measures, the collection of SADD, and the application of Minimum Standards on PGI in Emergencies will be maintained across the project cycle, including during monitoring and reporting. Efforts will be made to ensure a balanced gender representation among staff and volunteers. Consideration will also be given to promoting the engagement of women, men, girls, and boys of diverse ages and backgrounds within the affected population, including people with disabilities.

Drawing from lessons learned in previous IFRC-DREF operations, MRCS aims to enhance communication between national headquarters and branches, initiate joint planning from the outset of IFRC-DREF operations, and sustain regular coordination meetings throughout the entire operations period. MRCS will provide orientation on current IFRC-DREF operations to all staff and volunteers and offer any necessary refresher training to the volunteers involved in this operation.

**Please briefly explain the National Societies communication strategy for this operation**

MRCS will use its social media platform and website to disseminate the MRCS activities on this operation. MRCS will capture pictures and short success stories of the beneficiaries benefited from the operation. IFRC Communication team will support MRCS to train the communication team of MRCS on the IFRC Communication standard procedures. IFRC will also use its social media platform to promote MRCS works on this operation.
## Budget Overview

**DREF OPERATION**

MDRMY010 - Malaysian Red Crescent Society (MRCS)
Malaysia Dengue: Prevention and control

### Operating Budget

<table>
<thead>
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<th>Planned Operations</th>
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<td>Shelter and Basic Household Items</td>
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<td>Livelihoods</td>
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<td>Multi-purpose Cash</td>
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<td>Health</td>
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<td>Water, Sanitation &amp; Hygiene</td>
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<td>Protection, Gender and Inclusion</td>
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<td>Education</td>
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<td>Migration</td>
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<td>Risk Reduction, Climate Adaptation and Recovery</td>
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<td>Community Engagement and Accountability</td>
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<td>Environmental Sustainability</td>
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<table>
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<tr>
<th>Enabling Approaches</th>
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<tr>
<td>Coordination and Partnerships</td>
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<td>Secretariat Services</td>
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<tr>
<td>National Society Strengthening</td>
<td>19,904</td>
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</table>

### TOTAL BUDGET

121,673

*all amounts in Swiss Francs (CHF)*

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Click here to download the budget file
Contact Information

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

**National Society contact:**  Hakim Bin Hamzah, Secretary General, secgen@redcrescent.org.my, +60125389835

**IFRC Appeal Manager:**  Dian Yuliana Chairul, Acting - Head of Malaysia, diaryuliana.chairul@ifrc.org, +60192276290

**IFRC Project Manager:**  Dian Yuliana Chairul, Operation Manager - Malaysia, diaryuliana.chairul@ifrc.org, +60192276290

**IFRC focal point for the emergency:**  Farah Nur Wahyuni Zainuddin, Operations Coordinator, OpsCoord.SouthEastAs@ifrc.org

[Click here for the reference]