



REPUBLIC OF MALAWI

2019/2020 LEAN SEASON FOOD INSECURITY RESPONSE PLAN



The Republic of Malawi
Office of the Vice President
Department of Disaster Management Affairs
(Developed in collaboration with UN Humanitarian Country Team and Partners)
Photo Credit DoDMA

PERIOD

November 2019 –
March 2020

1.06 million

People in need of food
assistance

27 districts

affected and in need of
assistance from October
2019 to March 2020

1.06 million

People targeted for lean
season support in this
plan, provided through
cash or in – kind
transfers

REQUIREMENTS

(US\$) 62.8 million.

33,810 MT of maize

6,762 MT of pulses; and

1,244 MT of vegetable oil

2,754 Super cereal

Executive Summary

The third round of crop estimates assessment for the 2018/2019 season conducted by Ministry of Agriculture, Irrigation and Water Development indicated an increase in maize production from **2,697,959** metric tonnes in the 2017/18 growing season to **3,391,924** metric tonnes in the 2018/19 growing season, representing a **26 percent** increase.

The 2019 Malawi Vulnerability Assessment Committee (MVAC) Annual Assessment, using the Integrated Food Security Phase Classification (IPC), has projected that **1,062,674** people in **27 districts** are falling in IPC Phase 3 or worse and would require humanitarian assistance ranging from 2 to 5 months period during the 2019/2020 consumption year.

This Lean Season Food Insecurity Response Plan (LS-FIRP), developed by the Government of Malawi in collaboration with its humanitarian partners leveraging the architecture of the humanitarian cluster system, identifies Food Security, Nutrition, Protection, Education and Transport and Logistics clusters as the key priority clusters to address immediate needs. About 62,658 children under 2 years, 6,780 children under 5 years and 90,327 pregnant and lactating women are at risk of food insecurity and malnutrition.

The plan will address the needs of the affected communities and meet gaps in food security and nutrition. The plan outlines a mechanism for coordination and regular monitoring to ensure the needs of the affected people are adequately addressed and possible critical gaps or hotspots are acted upon in a timely manner. While providing relief from food insecurity, the lean season support is anchored in the National Resilience Strategy (NRS) to ensure that the cycle of food and nutrition insecurity is broken in the long run.

The Government of Malawi, using the existing coordination structures with support from its humanitarian partners, will champion the whole response programme.

The whole response programme will be anchored on the humanitarian principle of **Do No Harm** while protecting the rights of the vulnerable groups in children, women, the elderly and the chronically ill.

Contents

Executive Summary	ii
Acronyms and Abbreviations	iv
1. Background	1
2. Needs Assessment	2
3. Coordination architecture	5
4. Strategic Objectives of the Plan	5
5. Overall requirements by Clusters*	6
6. Cluster Response Plans	7
6.1. Food Security	7
6.2. Nutrition	11
6.3. Protection	15
6.4. Education	16
6.5. Transport, Logistics and Communication	18
7. Implementation strategy and monitoring	19
Annexes	20
Annex 1: Overview of the JEFAP Targeting Process	20
Annex 2: Affected population and requirements (tonnage); response period	21
Annex 3: Food Security Cluster Monitoring and Evaluation Plan	22
Annex 4: Nutrition Cluster Performance Indicators	23
Annex 5: Protection Cluster Detailed Budget and Monitoring Matrix	25

Acronyms and Abbreviations

ADMARC	Agricultural Development and Marketing Cooperation
APES	Agricultural Production Estimates Survey
ARI	Acute Respiratory Infection
ASWAP	Agriculture Sector Wide Approach
CBCC	Child Based Care Centres
CBT	Cash Based Transfers
CHD	Child Health Days
CMAM	Community Management of Acute Malnutrition
CTC	Cholera Treatment Centres
DADO	District Agriculture Development Office
DAPP	Development Aid from People to People
DC	District Commissioner
DCCMS	Department of Climate Change and Meteorological Services
DNHA	Department of Nutrition, HIV and AIDS
DoDMA	Department of Disaster Management Affairs
EMIS	Education Management Information System
FAO	Food and Agriculture Organization
FEWSNET	Famine Early Warning Systems Network
LS-FIRP	Lean Season Food Insecurity Response Plan
GAM	Global Acute Malnutrition
GBV	Gender Based Violence
HSA	Health Surveillance Assistant
IDP	Internally Displaced Persons
IHS	Integrated Household Survey
IPC	Integrated Food Security Phase Classification
IYCF	Infant and Young Child Feeding
JEFAP	Joint Emergency Food Aid Programme
MAM	Moderate Acute Malnutrition

MDG	Millennium Development Goals
MGDS	Malawi Growth and Development Strategy
MoAIWD	Ministry of Agriculture, Irrigation and Water Development
MoH	Ministry of Health
MUAC	Mid-Upper Arm Circumference
MVAC	Malawi Vulnerability Assessment Committee
NRU	Nutrition Rehabilitation Units
OTP	Outpatient Therapeutic Programme
PDNA	Post Disaster Needs Assessment
PLHIVA	People Living with HIV AIDS
PLW	Pregnant and Lactating Women
RUTF	Ready to Use Therapeutic Food
SADC	Southern Africa Development Community
SAM	Severe Acute Malnutrition
SBCC	Social Behavioural Change Communication
SCT	Social Cash Transfers
SFP	Supplementary Feeding Programme
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
WFP	World Food Programme

1. Background

Malawi is a disaster prone country. The most common hazards include floods, dry-spells, strong winds, landslides, earthquakes and disease and pest outbreaks. Recently, the country has witnessed an increase in the frequency and magnitude of these hazards, which often culminate into disasters leading to damage to infrastructure, loss of lives, property and livelihoods, among others. Disasters have also impacted on the socio-economic development of the country, while eroding efforts and gains in infrastructural development and other spheres of life.

In recent years, disasters have heavily impacted on food security at household and national levels. Malawi has been annually supporting a significant number of people annually with emergency food assistance. This is in part driven by consecutive climatic shocks. With a low capacity to cope, and little time to recover, households are slipping further into chronic poverty every year. Malawi has been registering escalating humanitarian food and nutrition needs.

Government approved the National Disaster Risk Management Policy in 2015 to offer policy and strategic direction in the implementation of disaster risk management programmes, activities and initiatives. The policy has six priority areas aimed at addressing the root causes of disasters, building the preparedness capacity for effective response and recovery as well as building resilience to disasters.

The chronic food insecurity has led to the creation of the ‘breaking the cycle of food and nutrition insecurity’ agenda, which has led to the development of a National Resilience Strategy, which, in alignment with the Malawi Growth and Development Strategy (MGDS III), serves as a “common programming framework to guide key programmes and investments to better work together to tackle the chronic food insecurity and poverty by actively reducing chronic vulnerability and risks, while also strengthening opportunities for households to embark on pathways out of poverty.”¹

This Lean-Season Food Insecurity Response Plan (LS-FIRP) acknowledges this context, and is anchored in and aligned to the National Resilience Strategy (NRS). Driven by the results from the IPC, this plan aims to address lifesaving needs as one pillar of the wide resilience strategy and approaches to shock-sensitive social protection in Malawi. The LS-FIRP is implemented using the government structures with support from the humanitarian system as a well-established coordination structure to ensure the most vulnerable are supported over the lean season.

¹ GoM (2017) National Resilience Strategy: Breaking the cycle of food insecurity in Malawi

2. Needs Assessment

Food Insecurity: Household food security over the 2019/20 lean season has been undermined by a combination of factors including:

- 1) Heavy rains, floods and prolonged dry spells impacted on crop production in some areas during the growing season;
- 2) Farm-gate prices of most crops slightly improved but remained generally low for farmers to realize good gross margins hence forced households to sell more of their produce to realize the income they need to buy other essential commodities, and
- 3) Fall army worm attack on maize (both the rain feed and winter crop) with varying intensity

The 2019 MVAC Assessment Report has identified 1,062,674 people as being in Phase 3 or worse of the IPC food security assessment in 27 districts. All the districts and in the southern and central region have been affected— see Table 1, and Figure 1. The affected people will require food assistance for a period ranging from 2 to 5 months from November 2019. Women and children are at higher risk of food and nutrition insecurity.

Table 1: Food insecurity in Malawi, according to the MVAC IPC assessment.

#	District	Total Affected Population	Percent Population Affected
1	Balaka	77,804	20
2	Blantyre	27,073	6
3	Chikwawa	55,154	10
4	Chiradzulu	24,774	7
5	Chitipa	13,031	6
6	Dedza	79,958	10
7	Dowa	22,227	3
8	Karonga	57,650	19
9	Kasungu	21,787	7
10	Lilongwe	65,503	4
11	Machinga	49,716	7
12	Mangochi	54,008	5
13	Mchinji	28,715	5
14	Mulanje	40,160	6
15	Mwanza	14,678	13
16	Mzimba	36,564	4
17	Neno	27,202	20
18	Nkhata Bay	18,928	5
	Nkhotakota	18,236	5
20	Nsanje	62,635	23
21	Ntcheu	51,069	8
22	Ntchisi	27,694	9
23	Phalombe	55,017	13
24	Rumphi	16,544	8
25	Salima	21,758	5
26	Thyolo	35,051	5
27	Zomba	59,738	8
	Total	1,062,674	7

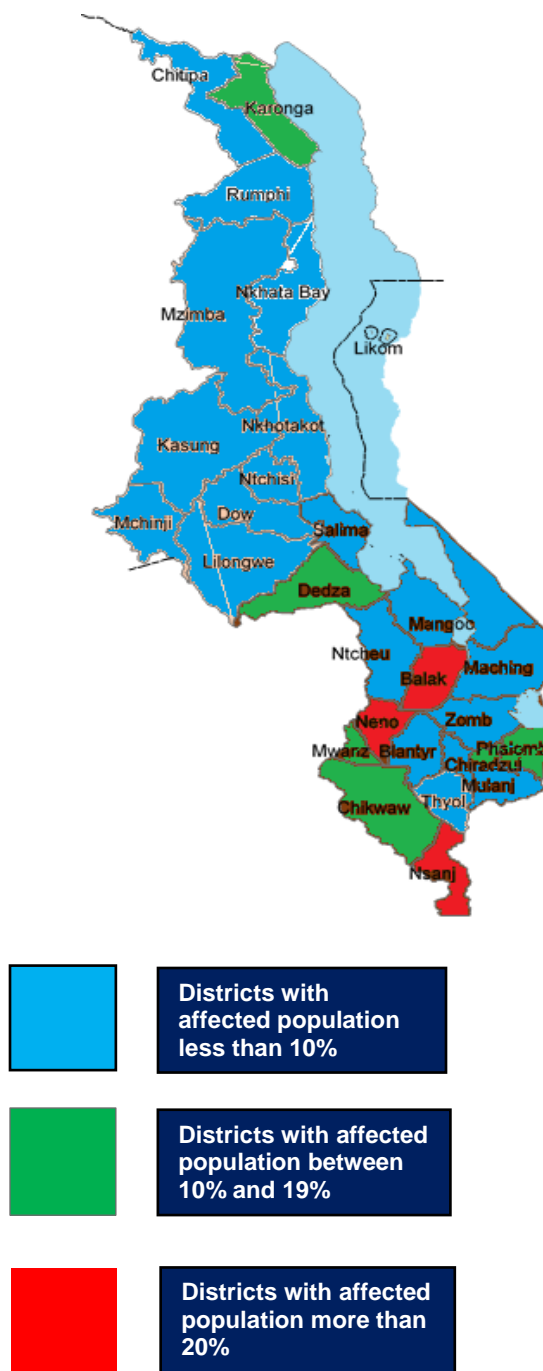


Fig. 1. Distribution of affected population across the country

Nutrition: No Nutrition Survey had been conducted at the time of conducting the 2019 MVAC assessment and analysis and as such, MVAC used GAM by MUAC which was part of the Household Food Security Questionnaire. Acute malnutrition by GAM was within normal ranges (below 5%) with an average GAM of 3.1 percent. The results of the July 2019 SMART survey (post-harvest) indicates an overall improvement in the nutrition situation, with a GAM rate as low as 0.5%. Despite all the improvements in food and nutrition security, MVAC reports and early warning sources suggest an urgent need to meet the food needs of 1.06 million people. Therefore, despite an improvement in nutrition, the anticipated food insecurity will compromise the nutrition status of vulnerable children, women and those living with TB, HIV and AIDS.

Protection: Several protection issues were reported and visible during the immediate aftermath of the floods induced by Cyclone Idai in March, 2019 negatively impacting the wellbeing and welfare of children and their families, women, and vulnerable groups. Most women had lost their crops and livelihood (e.g. farming, ganyu, etc.) and some of them are single-headed families; and are at high risk of sexual exploitation and violence. It is clear from the MVAC Assessment report figures that the impact of food insecurity would likely expose women and children to serious protection as well as health risks. With limited food stocks the risks of violence, abuse and exploitation, trauma and stress will become even more pronounced. With expected distribution of food rations or cash assistance to those affected, the risks of sexual and gender-based violence including sexual exploitation and abuse will become real.

Education: The Malawi Vulnerability Assessment Committee (MVAC) July 2019 report estimated that 1.06 million people which includes 40 per cent children in all districts out of the total population of 18 million would not be able to meet their minimum food requirements from October 2019 to March 2020. As maize is the staple food crop in Malawi this can have a negative impact on children's ability to learn as starved children may not find themselves in a mental and physical state which is compatible with attending school.

Transport and Logistics: The heavy rains and floods experienced during the 2018/ 2019 season had significant damage on structures and road infrastructure in all districts affected especially in the southern region. This is likely to hinder access to affected populations including getting the much-needed food assistance to the affected areas as identified in 2019 MVAC Annual Assessment Report. Therefore, apart from ensuring that affected population is provided with the food assistance, there is also an urgent need to consider the means by which this support will be provided, for those cut-off and cannot access essential services.

3. Coordination architecture

The Government of Malawi has established institutional arrangements that coordinate the implementation of disaster risk management programmes. The National Disaster Preparedness and Relief Committee, guides the Department of Disaster Management Affairs and supporting technical committees and sub-committees to coordinate the implementation of disaster risk management at national level. At sub-national level, coordination is through the District / Urban Executive Committees and Civil Protection Committees at district (also city, municipal and town), area (and ward) and village levels (). The Government will lead the humanitarian response, through the Department of Disaster Management Affairs (DoDMA), with support from humanitarian partners, including NGOs, the UN System and donors. Five clusters namely Food Security, Nutrition, Protection, Education and Transport and Logistics have been activated to ensure proper operational cross-sector coordination. The District Commissioner, with support from the Director of Planning and Development and the District Civil Protection Committee will lead the response efforts supported by NGO partners at district level.

National Disaster Preparedness and Relief Committee

The National Disaster Preparedness and Relief Committee (NDPRC) comprises of Principal Secretaries of all line ministries and departments, the Malawi Red Cross Society, and three Non-Governmental Organizations (NGOs). United Nations (UN) agencies are co-opted when need arises. The committee provides policy directions in the implementation of disaster risk management programmes in the country. It is chaired by the Chief Secretary to the Government.

Humanitarian Country Team

The Humanitarian Country Team comprises of Heads of UN Agencies, international and local NGOs, Government, and the Malawi Red Cross Society. This team is co-chaired by the Secretary and Commissioner for Disaster Management Affairs and the United Nations Resident Coordinator (UNRC). For coordination of the current response, donors and heads of Government Ministries and Departments have been invited to actively participate in the HCT. The UN Resident Coordinator in collaboration with DoDMA would be convening regular Humanitarian Country Team meetings to ensure coordinated response operation.

Cluster Coordination

Five clusters have been activated; these are Food Security, Nutrition, Education, Protection, Transport and Logistics. Besides developing the response plans, these clusters will oversee the implementation of the response under the leadership of the cluster leads and co-leads in-country. Coordination, implementation and monitoring of the response activities will be jointly undertaken through these clusters. Each cluster is led by a relevant government department. At the district level the clusters work with the line ministry represented at the district level.

4. Strategic Objectives of the Plan

Government and humanitarian partners worked together to develop a response plan based on the MVAC Assessment Report. The overall objective of the Lean Season Food Insecurity Response Plan is to provide lifesaving food assistance to the food insecure households in order to prevent deterioration of the food insecurity and the nutrition status among the affected communities As a basis for specific sector response plans, overarching strategic priorities have been identified to support effective and timely humanitarian assistance to the affected populations. These priorities

will remain valid and continue to guide the activities and projects outlined within specific sector response plans. This response will focus on the affected population requiring food assistance and identified by MVAC. The plan is also focusing on the following priority sectors: Food Security, Nutrition, Protection; Education; and Transport and Logistics. Table 3 below summarizes the strategic objectives.

Strategic Objectives

SO1. Meeting immediate life-saving food needs of the affected population during the lean season period from November 2019 to March 2020.

SO2 To protect livelihoods assets of the food insecurity affected populations

SO3. Ensuring humanitarian access to affected population especially those not accessible by road

SO4. To reduce protection threats for affected populations, and to protect all vulnerable groups from violence, sexual violence, exploitation, abuse and neglect and ensure that human rights are respected

SO5. Prevention of a degradation of the nutrition status by addressing the nutrition requirements of the most vulnerable.

Prioritization

The prioritization criteria was based on life-saving criteria:

- Activities that within the MVAC food deficit duration remedy, mitigate or avert direct loss of life, physical and psychological harm or threats to the population affected or major portion thereof and/or protect their dignity.
- Activities that are common humanitarian services and that are necessary to enable the delivery of humanitarian assistance.

5. Overall requirements by Clusters*

This Response Plan is targeting 1.06 million food insecure people . Specific cluster targets are outlined in respective cluster response plans.

Table 2: Overall Financial Requirements

Cluster	Requirements (USD)	Received	Pledged	Received+Pledged	Gap
Food Security	45,070,094.17	0.00	5,000,000.00	5,000,000.00	40,070,094.17
Nutrition	6,090,179.37	0.00	0.00	0.00	6,090,179.37
Protection	1,630,000.00	0.00	0.00	0.00	1,630,000.00
Education	10,038,000.00	0.00	0.00	0.00	10,038,000.00
Transport & Logistics	0.00	0.00	0.00	0.00	0.00
Total	62,828,273.54	0.00	5,000,000.00	5,000,000.00	57,828,273.54

***Note:** Details of contribution indicated in the Funding table to be updated upon confirmation

6. Cluster Response Plans

Considering the nature and scale of the humanitarian needs, the main sectors in this Response Plan are: Food Security, Nutrition, Protection, Education; and Transport and Logistics.

6.1. Food Security

	<p>Lead agency: Department of Disaster Management Affairs (DoDMA)</p> <p>Co-Lead Agency: World Food Programme (WFP)</p> <p>Contact information: Harris Kachale; harriskachale01@gmail.com</p> <p>Osborne Sibande; osborne.sibande@wfp.org</p>
 <p>Population in need: 1.06 million</p> <p>Target population: 1.06 million</p>	 <p>Funding Required:</p> <p>US\$ 45 million</p>

Sector Overview

According to the Malawi Vulnerability Assessment Committee (MVAC) IPC Malawi Acute Food Insecurity analysis report of October 2019, it is projected that 1.06 million people in Malawi (7% of population) are expected to be in IPC phase 3 (or worse) between October 2019 and March 2020. These people will need food assistance during this period to meet their missing food entitlements. The worst affected districts are in the south and within the area that was affected by floods during the 2018/19 production.

Strategic Objectives

- To provide lifesaving food assistance to populations affected by food insecurity during the lean season period from November 2019 to March 2020. This should target those in IPC Phase 3 or worse.
- To protect livelihoods assets of the food insecurity affected populations

Cluster Expected Results

- Stabilized or improved food consumption over assistance period for targeted households
- Timely food assistance provided equitably to affected women, men, girls and boys in right quantities and quality in shock affected districts.
- Reduction in negative coping strategies by targeted beneficiaries

- iv. Prevention of acute malnutrition through provision of complementary transfers for pregnant and lactating women and children aged 6-23 months;

Response Design and Priorities

The response will be led and coordinated by the government with support from development partners and other humanitarian actors. Response period is 2 to 5 months from November 2019 to March 2020 with different response periods for different districts depending on severity of food insecurity. Apart from the 27 districts covered under the MVAC report, it is recommended that the food situation in Likoma District be assessed and subsequently assistance programmed depending on the assessment findings.

Response Modality

The MVAC Report, recommended a market-based response which means cash and voucher assistance would be modality of delivering the food assistance. However, depending on resources mobilized, maize availability and in view of the increasing prices a mix of in-kind and cash transfers would be used. A rapid market assessment and regular price monitoring would be critical to inform smooth programming and implementation. Using 4.5 as average household size, the transfers are designed based on household food basket composed of cereal 50kg, Pulses 10kg and 2 kg vegetable oil. Prioritization of nutrition top-up for prevention of acute malnutrition will only be implemented in the most vulnerable districts to be recommended by the nutrition cluster. For this top up, an individual ration of 6kg of Corn Soy Blend or its cash equivalent per month will be provided to pregnant and lactating women and children below age of 2 years.

Market Monitoring

Being a market-based response, regular market monitoring will be conducted by the cash working group throughout the response period. A rapid market assessment will be undertaken in mid-November as part of regular market monitoring.

Strengthening Social Support Systems and their use to deliver emergency food assistance

In line with MNNSP II and its implementation plan which articulates a vision for Shock-Responsive Social Protection, where appropriate, social protection systems will be leveraged to deliver the emergency food assistance in a coordinated way to ensure coherence

Providing assistance to affected social protection beneficiaries

Noting that poverty and food insecurity overlap, and to maximise operational benefits of using an existing Government system, where funds exist, resources will be provided to the Government to provide a full food basket to beneficiaries on the Social Cash Transfer Programme (SCTP) who are in affected TAs (e.g. on top of their routine entitlements). In some areas, where the SCTP population covers the entire affected caseload, no assistance will be provided to an additional population. However, there will be an increase in complaints and feedback mechanisms to monitor for inclusion and exclusion errors in these areas to ensure that no one is left behind.

Providing assistance to affected non-social protection beneficiaries

The social protection system is being strengthened so that it can be leveraged to also provide emergency food assistance to affected non-social protection beneficiaries, currently focusing on Balaka. As such, in Balaka, the social protection system would be used to the extent possible to provide assistance to the full affected caseload, with learning to strengthen this approach for use in future years. In other districts where the Government is providing resources to SCTP, JEFAP would be used to provide assistance to the remaining affected population. In these districts the National IDs of SCTP beneficiaries would be collected to ensure there is no provision of duplicative assistance.

Linkages to resilience building

In line with Government priorities to build resilience, and the scaling up of resilience interventions, households receiving similar support to the lean season response from other interventions will not be targeted. Households in districts that suffered destruction and crop loss due to floods may require support for recovery and reconstruction. Cash plus complementary activities are encouraged, e.g. providing conservation tillage training for beneficiaries; facilitating VSL formation/ joining by beneficiaries, and other such kind of soft interventions, which may have benefits beyond smoothing food consumption amongst the beneficiaries.

Nutrition sensitive programming

Through Social Behavior Communication and Change (SBCC) the response will incorporate nutrition sensitive interventions for prevention of malnutrition among the affected populations. In addition to the additional ration targeting PLWs and CU2, response partners will provide key messages to targeted population/communities on dietary diversity, healthy eating, food budgeting, processing and preservation, and the promotion of Integrated Homestead Farming (IFH) alongside key WASH interventions. Nutrition sensitive interventions are a priority in the areas that experienced floods to boost households' access to nutritious foods. The distributions cycles present a perfect contact points where these messages will be passed to affected populations through SBCC.

Cross-cutting issues

Accountability to Affected Populations principles and gender and protection will be mainstreamed in the implementation of the response. The Government, with the support of partners, will also facilitate the use of Complaints and Feedback Mechanisms and monitoring exercises. **Do no harm'** principle will remain an integral principle of the response. The cluster will strive to strike an acceptable balance between ensuring that dignified life-saving food assistance is provided to all the affected people while ensuring that these distributions do not create any pull/push factor towards aid dependency.

Targeting and beneficiary registration

The Joint Emergency Food Assistance Programme (JEFAP) guidelines for the provision of food assistance in Malawi will be used to target households requiring the food assistance. In districts where SCTP are being provided with assistance, these populations would be mapped against the need, and then JEFAP would be followed to provide to the remaining caseload. In districts where the social protection systems are being leveraged to provide to the full caseload, (e.g. Balaka), a new targeting process would be trialed in order to use the Government social protection systems. The JEFAP

taskforce, led by DoDMA, and pool of trainers in several districts will provide support to district councils where necessary. All the districts already have a pool of trained officers that were trained during the 2018/2019 response cycle. Where possible partners will support the government in by use advanced beneficiary management tools for registration like SCOPE, LMMS etc to facilitate robust management of beneficiary information during and after the response.

Monitoring

Baseline and post-distribution monitoring assessments will be conducted to assess the impact of the response on food security indicators among affected populations for both targeted beneficiaries and non-beneficiaries. Joint outcome monitoring surveys with government and cooperating partners will be conducted. Additionally, monitoring activities will involve identification of a tool to effectively track time and cost efficiencies in operationalizing shock-responsive social protection with a focus on tracking data to inform who should be targeted (pre-registered) under a horizontal expansion. Where social protection systems are being leveraged, there will be joint monitoring between the DPR teams from DoDMA, MoGCDSW, and the implementing partner provided to non-affected social protection beneficiaries. See annex for the cluster Monitoring and evaluation Plan.

Response Budget




The lean season food support in the 27 districts will require a total of **US\$ 45 million** which covers the food/cash transfers and implementation associated costs, including monitoring assessments

Summary Resource Requirements (by activity)

Activity Description	Cost	
	USD	MK
Food/Cash transfers value	41,229,979.23	30,922,484,419.62
Beneficiary targeting, verifications and distribution logistics and coordination, Monitoring and Evaluation	2,749,556.66	2,062,167,495.53
2% Contingency	1,090,558.28	817,918,712.43
Total	45,070,094.17	33,802,570,627.58

Total Response Plan Resource Requirements

Sector	Total Requirement (USD)	Received	Pledged	Gap
Food Security	45,070,094.17	0	5,000,000.00	40,070,094.17

	Lead agency: DNHA Co-Lead Agency: NUTRITION Contact information: Wilfred Bengnwi/ Stanley Mwase
	People Targeted: <u>341,938</u>
	 Funding Required: <u>6,090,179.37</u>

Background/ Analysis

The food security situation in Malawi in the last two years 2017/18 and 2018/19 has remained largely stable, with the population of individuals that are food insecure dropping from 6.7 million in 2016/17, to 1.043 million in 2017/18. In 2018/19 it dropped from 3.3 million to the current figure; 1.13 million, in the 2019/20. According to MVAC 2019, 1,062,674 individuals across 27 districts are in phase 3 and remain food insecure (crisis state). This constitute 7% of the total population assessed. Based on the report, a corresponding 10,795,827 (68%) and 3,823,511 (24%) re projected to be in phase 1 and 2 respectively.

The projection means 1.062 million people (7%) will need humanitarian assistance, from October 2019 to March 2020 (during the lean season and beyond). Food prices are expected to increase as households gradually deplete their food stocks. The lean season may further be exacerbated by other hazards such as floods, disease outbreaks, dry spells etc. If that happens (which is likely) the intensity and impact on households and individuals in huge. This is terms of food insecurity and resulting malnutrition.

The post disaster needs assessment (PDNA 2019, Malawi) further outlined the needs per sector. There is a critical for immediate food, to ensure food security; 33,810 MT of maize (costing about MK 5.7 Billion); 6,762 MT of pulses (costing about MK4.0 Billion) and 1,244 MT of vegetable oil (costing about (MK 1.9 Billion) are the immediate requirements.

The results of the July 2019 SMART survey (post-harvest) indicates an overall improvement in the nutrition situation, with a GAM rate as low as 0.5%. Despite all the improvements in food and nutrition security, MVAC reports and early warning sources suggest an urgent need to meet the food needs of 1.062 million people. This calls for concerted efforts and resources from all humanitarian actors.

It is within this context that the Nutrition Cluster, together with other humanitarian actors has developed a response plan (covering November 2019 to March 2020), to better prepared and respond to eventuality, should the nutrition situation worsen.

Cluster Response Plan Objective

Overall Objective

The main objective of this response plan is to contribute to **the prevention and treatment of acute malnutrition** among 27 districts classified as IPC 3 (according to MVAC 2019 report). There in total 1.062 million who are food insecure and their nutrition situation is likely to deteriorate.

Furthermore, the 2019/2020 contingency plan indicates several hazards, among these; floods, dry spells, disease outbreaks, etc. are likely to occur in the course of 2019/2020 (during the lean season). Should this happen it is likely to exacerbate the nutrition situation across the affected districts.

The response plan therefore aims to address the nutritional needs of these vulnerable women and children, thereby reducing mortality and morbidity amongst these target groups.

Specific Objectives

- To provide lifesaving nutrition support to at least **6780 malnourished under 5 children (2,157 SAM and 4,623 MAM cases)** and **1,627** malnourished pregnant and lactating women across 27 affected districts. The response plan is for 5 months; **covering November 2019 to March 2020.**
- To provide vitamin A supplementation to **6780** CU5 and de-worming tablets (Albendazole 400mg chewable tabs/PAC-100) to **6780** within the 5 months.
- To capacitate service delivery systems in all food insecure areas to prevent deaths in NRUs.
- To improve early identification, referral and treatment of malnourished children and PLWs.
- To prevent malnutrition among **62,658** children under 2 years of age, and **90,327** PLWs through promotion of appropriate infant and young child feeding practices.
- To strengthen nutrition coordination both at national and district levels for effective response.

Implementation Strategies

The nutrition response plan aims to achieve the above-mentioned objectives through the following strategic actions:

- I. Provision of quality of care for treatment and management of acute malnutrition among vulnerable groups (infants, children, pregnant and lactating, PLHIV).
- II. Strengthening community capacity and linkages to enhance early identification of malnutrition and referral to facilities...
- III. Prevention and protection for vulnerable groups, against the deterioration of nutrition status by continued provision of preventative nutrition support through provision of adequate targeted food assistance, fortified food blends, Micronutrient powders (MNPs) Vitamin A supplementation, and deworming targeting high risk groups (infants, pregnant, lactating, and PLHIV).
- IV. Strengthening nutrition cluster coordination at national and district level

Activities

1. Community mobilization and orientation of health workers
2. Scale up C4D interventions
3. Integration of nutrition screening with MNCH services, including outreach clinics.
4. Procurement and distribution of CMAM supplies.
5. Procurement and distribution of 1128 MT (under 5s and 1626 MT (PLWs) of super cereal plus and super cereals respectively, for prevention of malnutrition among under 2s and PLWs.
6. Cluster Coordination
 - a. Support DNCC on nutrition coordination activities.

Summary Activities, Resource Requirements, available resource and gaps.

B	EMERGENCY RESPONSE ACTIVITIES				
B.1	Management of Acute malnutrition in all affected districts				
B.1.1	Community mobilization and active case finding, for early identification and referrals of malnourished children to the health facilities for treatment	27	27,000.00	729,000.00	HSAs, districts nutrition teams, and partners to all be involved

B.2.2	Procurement, distribution of RUTF and Management of SAM cases across 27 affected districts.	2804	2804	168,246.00	308 SAM cases
B.2.3	Procurement, distribution and management of malnourished children, using ReSoMal (42g Sachet/11/CAR-100)	42	42	2,649.87	308 SAM under 5 children
B.2.4	Procurement of F75 Therapeutic diet 400g CAN/CAR24	23	23	1,401.62	number of 308 are SAM with complications will F75
B.2.5	Procurement of F100 Therapeutic diet, CAN 400g /CAR24	7	7	182.15	number of 308 are SAM with complications will F100
B.2.6	Procurement of Amoxicillin powder/oral sus 125g/5ml/BOT-100	280	280	131.79	number of 308 are SAM with complications will need amoxicillin
B.2.7	Procurement of Albendazole 400mg chewable tabs/PAC-100	2524	2524	4,037.90	number of SAM 308 will need albendazole
B.28	Procurement of Iron 60mg+ Folic Acid 400mcg /PAC-10x10 blisters		Units costs	1,520.04	number of PLWs will need iron folate
	Subtotal			907,169.37	
B.1.2	MAM supplies -children under 5 MAM treatment	139	1500	208,050.00	138.7 MT CSB ++ for children under 5, for 5 months
B.1.3	MAM supplies -PLW and PLHIV (Super cereal)	494	800	395,360.00	CSB+
B.1.4	MAM supplies - PLW and PLHIV (veg oil)	55	900	49,590.00	
B.1.5	SAM supplies for adolescents and adults (PLWHA)	78	65	5,070.00	RUTF for adults and Adolescents
B.1.6	Anthropometric equipment's (Weighing scales, length's boards)	2800	289.8	811,440.00	Weighing scales, Height and Lengths board.
B.1.7	MUAC tapes (Adults and Children)	200	4	700.00	Each packet is 3.5 \$ times 200
	Sub totals			1,470,210	

B.2.	Reinforce nutrition surveillance systems and coordination to monitor the nutrition situation of affected communities.	

B.2.1	support CMAM and NCST data management including data quality assurance (DHIS2)	12	10,000.00	120,000.00	Particularly targeting the 12 prioritized districts
B.2.2	Conduct periodic supervisory and monitoring visits for nutrition activities at all levels	12	30,000.00	360,000.00	At least 2 visits per district
B.2.3	Strengthening district nutrition interventions coordination	12	20,000.00	240,000.00	Costs mainly covers district level coordination meetings, travels etc.
	Sub total			720,000.00	

B.3. Prevention of acute malnutrition in Children under 2 and PLWs (Blanket Supplementary Feeding).

B.3.1	Blanket supplementary foods (super cereal plus) provided to all children under 2 years of age.	1128	1,500.00	1,692,000.00	
B.3.2	Provision of Super cereal for PLW (90,328 in total targeted across all affected districts)	1626	800.00	1,300,800.00	
B.3.3	Veg Oil				Assuming will be provided under HH ration food security
	Sub total			2,992,800.00	
	Grand Total			6,090,179.37	

Total Response Plan Resource Requirements

Sector	Total Requirement (USD)	Received	Pledged	Gap
Nutrition	6,090,179.37	0.00	0.00	100%

6.3. Protection



Lead agency: Ministry of Gender, Children, Disability and Social Welfare
Co-Lead Agency: UNICEF
Contact information: Essau Mwambira: etambira@yahoo.co.uk, 0888315223
Martin Nkuna: mnkuna@unicef.org, 0995981173



People Affected: 1,062,674
Number Targetted: 500,000



Funding Required:
US\$1,630,000

Background/ Analysis

On 8th March 2019, the Government of Malawi declared a State of Disaster following a Tropical Cyclone which formed in the Mozambique Channel and drifted to Malawi on 5th March causing heavy rains accompanied by intense winds. The heavy and persistent rain led to severe flooding across some districts in southern Malawi. A total of 868,900 people in 15 districts were affected by the floods.

Widespread damage was impacted the wellbeing and welfare of children and their families, women, and vulnerable groups. Many women lost their crops and livelihoods and faced heightening vulnerability to sexual exploitation, especially in the evacuation sites. The Malawi Vulnerability Assessment Committee has projected that in the period of October 2019 to March 2020, 7 percent of Malawi rural population (1,062,674) will require humanitarian assistance to manage their food needs and to some extent recover lost assets because of the cyclone effects. This will further exacerbate the risks to sexual exploitation and abuse.

In the aftermath of the cyclone Idai, stress and trauma, including resulting from a lack of food resulted into increased risk of violence within and beyond families, including. With limited food stocks the risks of violence, abuse and exploitation, trauma and stress will become even more pronounced. With expected distribution of food rations or cash assistance to those affected, the risks of sexual and gender-based violence including sexual exploitation and abuse will become real.

Cluster Response Plan Objective

To reduce protection threats for affected populations, and to protect all vulnerable groups from violence, sexual violence, exploitation, abuse and neglect and ensure that human rights are respected.

Activities:

1. Strengthen cluster coordination at national and district level;
2. Enhance capacity of actors to respond to the ongoing emergency;
3. Provide protection and referral services to children, women and vulnerable groups.

Activity Description	Cost	
	USD	MK
Develop effective Protection Cluster Coordination at National Level	125,000	91,875,000.00
Ensure Protection needs are properly assessed and identified	40,000	29,400,000.00
Ensure the response is monitored	70,000	51,450,000.00
Ensuring protection issues are considered in other clusters	15,000	11,025,000.00
Effective Protection Cluster Coordination at District Level	20,000	14,700,000.00
Protection Response at District Level is provided	1,140,000	837,900,000.00
Protection and GBV messages were disseminated	120,000	88,200,000.00
SEA is prevented during the response	100,000	73,500,000.00
Total	1,630,000	1,198,050,000.00

Total Response Plan Resource Requirements

Sector	Total Requirement (USD)	Received	Pledged	Gap
Protection	1,630,000	0	0	1,630,000

6.4. Education



Lead agency: Ministry of Education Science and Technology
Co-Lead Agency: UNICEF, Save The Children
Contact information: Virginia



People Targeted:
440,000 Children (40% of affected population)



Funding Required:
10,038,000

Background/ Analysis

The Malawi Vulnerability Assessment Committee (MVAC) July 2019 report estimated that 1.1 million people which includes 40 per cent children in all districts out of the total population of 18 million would not be able to meet their minimum food requirements from October 2019 to March 2020.

Maize purchase prices are projected to increase as households deplete their stocks during the lean season. Higher prices are likely to be in the southern part of the country typically experiencing production deficits and in the areas affected by floods in 2019. As maize is the staple food crop in Malawi this can have a negative impact on children's ability to learn as starved children may not find themselves in a mental and physical state which is compatible with attending school. Thus, urgent action is needed to meet children education requirement.

Cluster Response Plan Objective

1. Primary school aged children access quality education opportunities
2. Psychosocial and health services for children and teachers integrated in educational response
3. School going children including adolescents access appropriate life skills programmes; information about the emergency and educational options for those who have missed out on schooling, especially adolescents
4. School meals are provided to learners to continue learning, regularise attendance and reduce dropouts
5. Capacity for resilience in communities and local governments improved

Activities

1. Provide school meals for 440,000 affected learners in primary schools for 6 months
2. Provide refresher training for 160 teachers to provide psychosocial support, child protection measures and Real Time Monitoring
3. Train and monitor adolescents on gender-based violence and agribusiness skills in smart agriculture to build resilience
4. Train district education cluster members in emergency preparedness, planning and response
5. Link with WASH partners and provide hygiene and health awareness to primary schools with affected learners
6. Provide recreation kits and provide agribusiness skills to adolescents

Summary Resource Requirements (by activity)

Activity Description		Cost	
		USD	MK
Provide school meals for 440,000 affected learners in primary schools for 6 months			
		6,200,000	
Provide refresher training for 160 teachers to provide psychosocial support, child protection measures and Real Time Monitoring		18,000	
Train and monitor adolescents on gender-based violence and agribusiness skills in smart agriculture to build resilience		900,000	
Train district education cluster members in emergency preparedness, planning and response		20,000	
Link with WASH partners and provide hygiene and health awareness to primary schools with affected learners		2,500,000	
Provide recreation kits and provide agribusiness skills to adolescents		400,000	
Total		10,038,000	

Total Response Plan Resource Requirements

Sector	Total Requirement (USD)	Received	Pledged	Gap
Education	10,038,000	0	0	10,038,000

6.5. Transport, Logistics and Communication

7. Implementation strategy and monitoring

The response plan will be implemented by the Government of Malawi through the humanitarian clusters. Government, in collaboration with the activated clusters and its humanitarian partners, will closely monitor the situation and interventions to ensure progress and accountability of the assistance delivered. At the central level, relevant government sectors and cluster co-leads in the relevant areas of interventions, will provide technical, coordination and leadership support to guide and prioritize interventions. At the implementation level, the implementation of the response plan will be coordinated by the humanitarian clusters with the district council's leadership. The district councils where the response interventions will be implemented will be technically and financially supported to enable them lead the monitoring and supervision of all the response interventions.

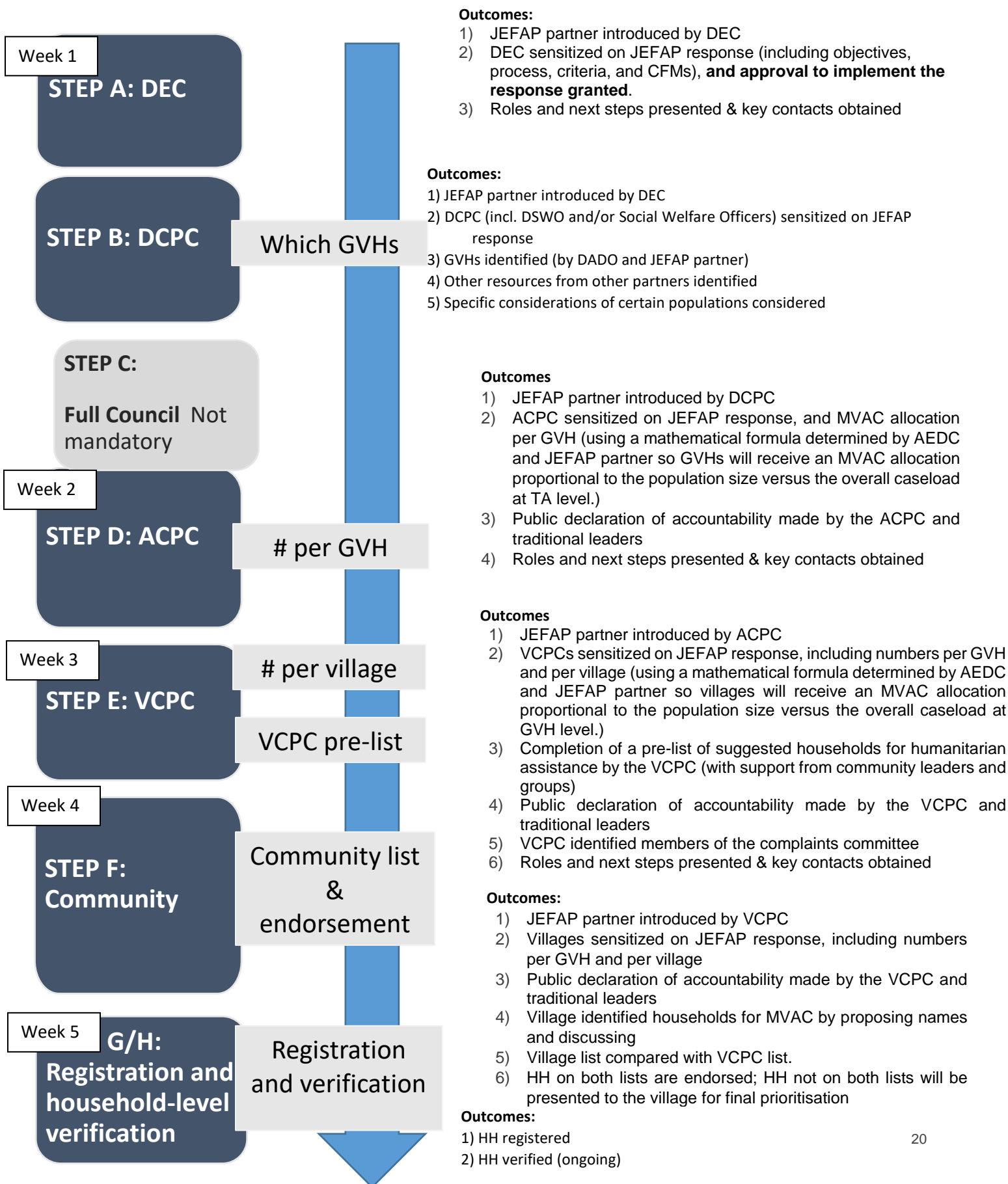
Strategic and cluster objectives have been developed around the priorities for humanitarian assistance of the affected population. In order to be able to measure each cluster objective, the cluster leads in coordination with the cluster members and Government counterparts identified a set of priority activities. The cluster will regularly monitor outputs and achievements by each participating partner. Cluster monitoring matrices have been provided in annexes of this plan.

Monitoring and evaluation will involve the following key aspects:

- **Strengthened process and outcome monitoring:** Progress against the objectives and outcomes of the response plan will be monitored.
- **Strengthened community-level monitoring systems and engagement:** This will be undertaken through capacity building (training) and complaints and feedback mechanisms to ensure that the voice of the affected is heard.
- **Strengthened lessons learned exercises, including on targeting:** At the end of the response, the clusters will take stock of how the response will have been implemented through lessons learnt exercise that will bring on board all key actors, including beneficiary representatives.
- **Strengthened protection** of all vulnerable groups from violence, sexual violence, exploitation, abuse and neglect during the response and ensure that their rights are respected

Annexes

Annex 1: Overview of the JEFAP Targeting Process



Annex 2: Affected population and requirements (tonnage); response period

Assessment Recommendations						Tonnage Requirements				
No	District	Affected Population	No. of HHs Affected	% IPC Phase 3	Period (Months)	Cereal (MT)	Pulses (MT)	Oil (MT)	CSB (MT)	TOTAL MT
1	Balaka	77,804	17,290	20	5	4,322.44	864.49	172.90	350.12	5,709.95
2	Blantyre	27,073	6,017	6	2	601.70	120.34	24.07	48.73	794.84
3	Chikwawa	55,154	12,257	10	3	1,838.55	367.71	73.54	148.92	2,428.72
4	Chiradzulu	24,774	5,506	7	2	550.60	110.12	22.02	44.59	727.34
5	Chitipa	13,031	2,896	6	2	289.60	57.92	11.58	23.46	382.56
6	Dedza	79,958	17,769	10	2	1,776.90	355.38	71.08	143.92	2,347.28
7	Dowa	22,227	4,940	3	2	494.00	98.80	19.76	40.01	652.57
8	Karonga	57,650	12,812	19	2	1,281.20	256.24	51.25	103.77	1,692.46
9	Kasungu	21,787	4,842	3	2	484.20	96.84	19.37	39.22	639.62
10	Lilongwe	65,503	14,557	4	2	1,455.70	291.14	58.23	117.91	1,922.97
11	Machinga	49,716	11,048	7	4	2,209.60	441.92	88.38	178.98	2,918.88
12	Mangochi	54,008	12,002	5	4	2,400.40	480.08	96.02	194.43	3,170.92
13	Mchinji	28,715	6,382	5	2	638.20	127.64	25.53	51.69	843.06
14	Mulanje	40,160	8,925	6	2	892.50	178.50	35.70	72.29	1,178.99
15	Mwanza	14,678	3,262	13	2	326.20	65.24	13.05	26.42	430.91
16	Mzimba	36,564	8,126	4	2	812.60	162.52	32.50	65.82	1,073.44
17	Neno	27,202	6,045	20	4	1,209.00	241.80	48.36	97.93	1,597.09
18	Nkhata Bay	18,928	4,207	7	2	420.70	84.14	16.83	34.07	555.74
19	Nkhotakota	18,236	4,053	5	2	405.30	81.06	16.21	32.82	535.40
20	Nsanje	62,635	13,919	23	5	3,479.75	695.95	139.19	281.86	4,596.75
21	Ntcheu	51,069	11,349	8	2	1,134.90	226.98	45.40	91.92	1,499.20
22	Ntchisi	27,694	6,155	9	2	615.50	123.10	24.62	49.85	813.07
23	Phalombe	55,017	12,226	13	2	1,222.60	244.52	48.90	99.03	1,615.05
24	Rumphi	16,544	3,677	8	2	367.70	73.54	14.71	29.78	485.73
25	Salima	21,758	4,836	5	2	483.60	96.72	19.34	39.16	638.83
26	Thyolo	35,051	7,790	5	2	779.00	155.80	31.16	63.09	1,029.05
27	Zomba	59,738	13,276	8	5	3,319.00	663.80	132.76	268.82	4,384.38
TOTAL		1,062,674	236,164			33,811.44	6,762.29	1,352.46	2,738.60	38,126.80

Annex 3: Food Security Cluster Monitoring and Evaluation Plan

Indicators	Target %	Means of verification
Outcome: Stabilized or improved food consumption over assistance period for targeted households		
Percentage of targeted households with boarder line to acceptable food consumption score	100	PDM, Baseline Midline and End line surveys
Percentage of households not engaged in coping mechanisms	70	PDM, Baseline Midline and End line surveys
Percentage of households consuming 4 or more food groups (Household dietary diversity)	100	PDM, Baseline Midline and End line surveys
Percentage of households with less than 50 percent household expenditure allocated to food	90	PDM, Baseline Midline and End line surveys
Output 1: Food Assistance provided equitably to affected women, men, girls and boys in right quantities and quality in shock affected districts.		
Number of beneficiaries reached with in kind food transfers disaggregated by age and sex as percentage of planned	100	Distribution reports and monitoring reports
Number of beneficiaries reached with cash transfers disaggregated by age and sex as percentage of planned	100	Distribution Reports and Monitoring reports
Quantity food assistance in MT distributed as percentage of plan	100	-Distribution reports and monitoring reports -Commodity tracking reports
Amount of cash In USD transferred to beneficiaries as percentage of planned	100	Distribution reports, Monitoring reports

Cross-cutting indicators:

Indicator	Target	Means of verification
Output 2: Affected populations are able to benefit from the response in a manner that ensures and promotes their safety, dignity and integrity		
Proportion of assisted people informed about the programme (who is included, what people will receive, length of assistance)	100	Outcome Post Distribution Monitoring
Proportion of project activities for which beneficiary feedback is documented, analyzed and integrated into programme improvements	90	Complaints and Feedback Database (SUGAR CRM)

Proportion of targeted people accessing assistance without protection challenges	90	Outcome Post Distribution Monitoring
Proportion of targeted people accessing assistance without safety challenges	90	Outcome Post Distribution Monitoring
Proportion of targeted people having unhindered access to lean season response programme	90	Outcome Post Distribution Monitoring
Output 3: Improved gender equality and women's empowerment among the assisted population		
Proportion of households where women, men, or both women and men make decisions on the use of food /cash/vouchers, disaggregated by transfer modality	40 (both); 30 (male) 30 (female)	Outcome Post Distribution Monitoring
Proportion of households where women, men, or both women and men make decisions on the use of food/ cash /vouchers, disaggregated by transfer modality	40 (both); 30 (male) 30 (female)	Outcome Post Distribution Monitoring
Proportion of food assistance decision-making entity – committees, boards, teams, etc. – members who are women	100	Partner records

Annex 4: Nutrition Cluster Performance Indicators

Indicators	Target %	Means of verification
1) To provide lifesaving nutrition support to at least 6780 wasted children 2,157 SAM and 4,623 MAM cases and 1,627 pregnant and lactating women in 27 districts for 5 months.		
Number of OTP and NRU storage capacity assessments conducted		
Tones of fortified blended foods procured		
Tones of RUTF procured		
Proportion of SAM who receive appropriate treatment as per National Guidelines		
Proportion of MAM children and pregnant and lactating women who receive appropriate treatment as per National Guidelines		

2) Prevention and protection, against the deterioration of nutrition situation by continued provision of preventative nutrition support through Vitamin A supplementation, deworming and blanket supplementary feeding for high risk groups (infants, pregnant, lactating, HIV, etc.).		
Proportion of children 6-59 months supplemented with vitamin A		
Proportion of children 6-59 months administered deworming tablet.		
Proportion of children (under 5s) and PLWs reached with blanket supplementary feeding.		
Total number of children reached through complementary feeding, using MNPs.		
3) To improve early identification, referral and treatment of malnourished children and PLWs.		
Number of children screened.		
Proportion of camps conducting daily mass MUAC screening activities.		
Proportion of affected TA conducting monthly screenings, in the districts.		
Proportion of children screened and referred for treatment.		
4) Strengthening nutrition coordination systems that foster nutrition resilience through linkages to nutrition sensitive sectors.		
Number of cluster meetings organized		
Number of districts actively holding cluster coordination meetings, for the flood response.		
Number of clusters 4W partner mapping finalized		
Number of active DNCCs actively reporting on the flood response.		

Annex 5: Protection Cluster Detailed Budget and Monitoring Matrix

Lean Period Emergency Response Activities							
Objective	Area of Response	Activities	Responsible Agency	Indicators & Targets	Budget		
					US\$	MK	
Develop effective Protection Cluster Coordination at National Level	Coordination	1	Call for cluster and sub cluster meetings	MoGCDSW/ Cluster members	Monthly, biweekly or weekly protection cluster and sub cluster meetings are called.	5,000	3,675,000.00
		2	Hire/identify Protection Cluster Coordinator, IM Coordinator and GBV Coordinator	MoGCDSW/ Cluster members	Protection Cluster Coordinator, IM Coordinator and GBV Coordinator are deployed	100,000	73,500,000.00
	Orientation of operational frameworks	3	Orientation on operational frameworks (4W, cluster ToR)	MoGCDSW/ Cluster members	Orientation on operational frameworks and protection standards is conducted	20,000	14,700,000.00
Ensure Protection needs are properly assessed and identified	Assessment	4	Participate in inter cluster assessments	MoGCDSW/ Cluster members	Protection cluster members are mobilised for the inter-cluster assessment.	10,000	7,350,000.00
		5	Produce protection situation reports	MoGCDSW/ Cluster members	Situation report is produced	10,000	7,350,000.00
		6	Conduct technical protection assessment to identify and mitigate additional protection risks across sectors, including the needs of vulnerable groups (elderlies, people with disability, people with HIV/AIDS)	MoGCDSW/ Cluster members	Technical protection assessment is conducted	20,000	14,700,000.00
Ensure the response is monitored	Monitoring	7	Conduct situation and response monitoring	MoGCDSW/ Cluster members	Situation and response monitoring is conducted	20,000	14,700,000.00
		8	Roll out mobile data collection systems in key service points (RapidPro)	MoGCDSW, Police, Judiciary	# of service points using RapidPro Target: 3	50,000	36,750,000.00

Ensuring protection issues are considered in other clusters	Mainstream protection	9	Ensure protection, and GBV is mainstreamed in other clusters response planning	MoGCDSW/ Cluster members	# of meetings where mainstreaming of protection issues was discussed Target: 6	15,000	11,025,000.00
Effective Protection Cluster Coordination at District Level	Support district coordination	10	Support coordination at district level including District protection cluster and GBV sub cluster meetings	MoGCDSW/ Cluster members	# of protection cluster meeting held at district level # of GBV sub cluster meetings held at district level Target: Monthly meetings in 15 districts	20,000	14,700,000.00
Protection Response at District Level is provided	GBV Victim support and response	11	Provision of services (CVSU/PVSU/OSC/CC, Community Policing) to victims/survivors of violence including SGBV	MoGCDSW/ Cluster members	# of People reached by gender-based violence (GBV) response services Target: 3,000	50,000	36,750,000.00
	PSS support through Child Friendly Spaces	12	Strengthen child friendly spaces for access to psychosocial support (PSS), socialization, play and learning activities in children's corners through supportive monitoring and provision of recreational and dignity kits.	MoGCDSW/ Cluster members	# Number of children with access to psycho-social support (PSS), socialization, play and learning Target: 58,000 school-age children	100,000	73,500,000.00
		13	Printing and distribution of PSS in emergency manual	MoGCDSW/ Cluster members	1,000 copies printed and distributed	20,000	14,700,000.00

Capacity building of caregivers and service providers	14	Capacity building of caregivers for child friendly space (including Children's Corners and ECD centres), women friendly spaces and social welfare service providers on psychosocial support	MoGCDSW/ Cluster members	# of caregivers of Child Friendly Space trained Target: 1,800 caregivers	200,000	147,000,000.00
	15	Capacity building of service providers on the integrated ESP for GBV survivors	MoGCDSW/ Cluster members	# of service providers trained	20,000	14,700,000.00
	16	Strengthening networks with NGOs/CSOs/youth groups	MoGCDSW/ Cluster members	# of CSOs, NGOs and Youth groups participating in GBV activities # of GBV cases reported by NGOs, CSOs and Youth groups	20,000	14,700,000.00
Case management	17	Case management are expanded to other vulnerable groups, including elderlies, people with disability, and people with HIV/AIDS	MoGCDSW/ Cluster members	# of vulnerable persons supported	100,000	73,500,000.00
Community Based Complaint and Feedback Mechanism (CBCFM)	18	Printing of community-based complaints and feedback mechanisms and child/gbv protection referral pathways	MoGCDSW/ Cluster members	# of districts updated the referral pathways Target: 15 districts(all districts)	30,000	22,050,000.00
	19	Establishment of inter-agency CBCFM in affected areas including orientation of focal persons to ensure that all cases are recorded, managed and feedback provided	MoGCDSW and cluster members	# of sites with CBCMs established Target: 15 districts	400,000	294,000,000.00
	20	Disseminate information about community-based complaints and feedback mechanisms and	MoGCDSW/ Cluster members	# of sites with CBCMs establishes target: 200 sites (all sites)	200,000	147,000,000.00

		prevention of sexual exploitation and abuse				
Protection and GBV messages were disseminated	Community engagement and communications for development activities on protection and GBV prevention, reporting and response	21 Behaviours change interventions – community radios, campaigns and production of IEC materials	MoGCDSW/ Cluster members	# of places (schools, sites etc) where information on where to seek service were disseminated target: 200	120,000	88,200,000.00
SEA is prevented during the response	Orientation on PSEA	22 Orientation of key stakeholders involved in emergency response including community leaders on PSEA.	MoGCDSW/ Cluster members	# of orientation conducted for key stakeholders Target:10 at national level, 50 at community level (all sites) # of stakeholders that have completed PSEA online training	100,000	73,500,000.00
Total Requirement					1,630,000	1,198,050,000

