

**MALAWI
RAPID RESPONSE
STORM
2023**

23-RR-MWI-58010

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PART I – ALLOCATION OVERVIEW

Reporting Process and Consultation Summary:

Please indicate when the After-Action Review (AAR) was conducted and who participated.

N/A

There was no specific after action for CERF. However, for the full response to the Cyclone Freddy, the Government conducted an after-action review with 165 participants from the Government, 8 UN agencies and NGO partners, including CERF recipient agencies and OCHA who facilitates session/working group on information management and resources mobilization. The Government acknowledged the significant support provided by the United Nations in Malawi, through the Resident Coordinator's Office (RCO) and UN Office of the Coordination of Humanitarian Affairs (OCHA) for their leadership and technical assistance throughout the response.

For this report, the contributions received from recipient agencies, including their position/reflection on the impact of CERF on the timely delivery of assistance and on funding, have been consolidated by OCHA and reshared with them for review and comment prior to submission to CERF.

Please confirm that the report on the use of CERF funds was discussed with the Humanitarian and/or UN Country Team (HCT/UNCT).

Yes No

The draft report has been shared with the UNCT before submission to the CERF.

Please confirm that the final version of this report was shared for review with in-country stakeholders (i.e. the CERF recipient agencies and their implementing partners, cluster/sector coordinators and members and relevant government counterparts)?

Yes No

The consolidated report was circulated to recipient agencies who confirmed that the reports were reviewed internally by management before submission. The involvement of IPs and government counterparts during monitoring missions and directly during implementation ensured their awareness of results.

1. STRATEGIC PRIORITIZATION

Statement by the Resident/Humanitarian Coordinator:

This CERF allocation was vital in effectively addressing critical needs of people affected by devastating impacts of record-breaking Tropical Cyclone Freddy the TC Freddy. It capitalized on previous achievements in combating the impact of the cyclone, particularly in locations with cholera cases. By bolstering life-saving interventions, this grant ensured close collaboration with affected communities and local authorities, thereby optimizing the effects of the response. It also plays a catalytic role to attract additional funding from donors and reinforce capacity to respond to futures chocs and coordination between partners.

CERF's Added Value:

In the reporting from partners on the interventions carried out, recipient agencies indicated that this CERF grant was essential to provide an effective, timely and coordinated response. It accelerated assistance to affected communities through emergency assistance (food, non-food items, etc.) and emergency services, including protection against the risk of GBV. By supporting logistics groups, it has also ensured the transport of humanitarian personnel and essential goods to communities in the most difficult-to-reach areas.

Did CERF funds lead to a **fast delivery of assistance to people in need?**

Yes

Partially

No

The CERF grant enabled agencies to deliver timely humanitarian responses to the affected communities. For example, WFP used CERF funds to hire air and water transportation to conduct search and rescue missions, and to fast-track food distribution enabling the organizations and its partners to reach up to 145 000 people by June 2023. For IOM, the CERF funds were crucial to timely increase its resource capacity within the emergency phase. Upon receipt of the funds, IOM was able to fast track CCCM and shelter activities in the targeted area within expected timeframe. For UNICEF, CERF enabled them to quickly activate partnership to ensure presence on the ground for delivery of the life-saving interventions.

Did CERF funds help respond to time-critical needs?

Yes

Partially

No

The CERF enable WFP to provide 658.7 MT of food to the affected people, which was timely as people had lost their homes and harvests and needed immediate assistance. It enabled IOM to deliver timely shelter support to IDPs who were in critical need as their houses were destroyed by the cyclone. Through the initial communal shelter assistance IOM, with the support of community volunteers, was able to support large numbers of IDPs who lacked shelter and were sleeping in open spaces during the first few weeks of the emergency. Later, the IDPs were provided with household shelter construction materials, which enhanced both dignity and privacy of the affected population. Further, IOM's shelter assistance was crucial as it supported the decongestion of schools initiated by the Government in preparation for the rehabilitation of the damaged school structures and their reopening.

A key element in the implementation of the life-saving interventions was availability of supplies for infection prevention and control and treatment of cholera cases. With the CERF funding, UNICEF was able to rapidly procure the required supplies.

Did CERF improve coordination amongst the humanitarian community?

Yes

Partially

No

The multi sectoral nature of this CERF project worked as a catalyst for intersectoral coordination. The CERF's strategy was discussed and coordinated with agencies through the Resident Coordinator's Office and the sectors, ensuring that activities planned under the various projects were well coordinated and aligned with the most important humanitarian needs and priorities in the aftermath of the cyclone in various sectors including emergency shelter and non-food items, food assistance etc. This strategy also helped to avoid duplication of aid to affected communities.

At the sectoral level, organisations involved in CERF were compelled to coordinate their interventions through inter-sector coordination group meetings, and in the process, other areas of intersectoral collaboration were identified.

CERF funds enabled IOM to improve and support CCCM sector coordination, while also increasing partners understanding and capacity of CCCM activities enabling them to better understand operational procedures, content and standards that can be applied in future climate shocks. In addition, the CCCM sector through timely information sharing within the inter sector coordination group (which involved UN Agencies, INGOs and NNGOs), including on the status of camps and on the needs of IDPs, helped UN Agencies to deliver a coordinated humanitarian response. IOM, being the CCCM sector co-lead, through the CERF funds, was able to regularly set up meetings for the Shelter and CCCM sector (with the Ministry of Lands and Housing), to participate in and support joint assessments through the Inter-agency Assessment, to do joint planning of some response activities, and for the joint resourcing of vehicles and other response logistics.

With the assistance of CERF funds, UNFPA successfully aided national GBV and Protection Cluster members in monitoring activities. The support extended to coordinating district protection cluster activities, notably enhancing referral pathways, particularly in GBV prevention and response. This resulted in increased visibility, allowing numerous GBV service providers to effectively reach out to survivors. Simultaneously, the RH Technical Working Group was revitalized and actively participated in Health Cluster meetings. Weekly coordination meetings were held to provide updates and facilitate partner collaboration for responsive actions.

Did CERF funds help improve resource mobilization from other sources?

Yes

Partially

No

The CERF funding was key in leveraging resource mobilization. UNFPA has used the CERF funding and realisations as supporting document to show that the agency is responding to the needs of the adolescent girls and women. Additional funding from other donors, including the Republic of Korea and UNFPA core humanitarian funds enabled the agency to procure more dignity kits and to support the response. IOM received funds from GFFO and kicked start the emergency response activities while developing and waiting for activation of the CERF Project. The CERF funds, helped as catalyser in the mobilization and amplification of the resources already mobilized by IOM, and it was fundamental to increase the reach of the affected population. The GFFO project helped IOM to continue supporting remaining IDPs after the CERF project closed on 27th September 2023. This helped IOM meet the needs of remained IDPs. IOM did not receive any additional funding within the CERF Project period. However, the Agency is in the processing of mobilizing some resources from the SDG Fund Humanitarian Window to continue its interventions whose processes started with CERF and GFFO funds. The current focus is on supporting safe relocation, integration and peaceful co-existence between relocated IDPs and host communities.

Considerations of the ERC's Underfunded Priority Areas¹:

¹ In January 2019, the Emergency Relief Coordinator identified four priority areas as often underfunded and lacking appropriate consideration and visibility when funding is allocated to humanitarian action. The ERC therefore recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and HCTs/UNCTs when prioritizing life-saving needs for inclusion in CERF requests. These areas are: (1) support for women and girls, including tackling gender-based violence, reproductive health and empowerment; (2) programmes targeting disabled people; (3) education in protracted crises; and (4) other aspects of protection. While CERF remains needs based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the questions and answers on the ERC four priority areas [here](#).

CERF projects responded to the different needs of children, women, girls, and people with disabilities. For example, shelters constructed by IOM were easily accessible by People with Disabilities (PwD). All distribution sites were physically accessible for PwD and IOM and implementing partners Staff assisted PwD during distribution. UNICEF implemented project activities with the principles of diversity, equity, and inclusion to ensure better targeting of affected people including PwD. For instance, with the CERF funding, child protection workers were trained to provide case management to children and people in need of care and protection including persons with disabilities. Special attention was therefore provided to PwD in the provision of child protection services. The project supported the counselling of caregivers of children with disabilities on the condition and the implication on feeding and treatment. These children and caregivers were also referred for appropriate support including physiotherapy and livelihood interventions.

A UNFPA project, contributed the prevention of GBV cases as well as the strengthening of access to life-saving quality, confidential, safe, and timely GBV specialized services to women and girls including through capacity building of frontline staff and the GBV risk analysis and safety audits in the camps and surrounding communities. Further UNICEF's GBV program was able to provide support to women and girls, including tackling gender-based violence through mobile victim support services. Teams comprising of social welfare, judiciary, police, and health were visiting hard to reach areas to listen to community members who in turn were able to register cases of gender-based violence they were experiencing during the humanitarian response. Appropriate guidance and support including referrals to appropriate services were provided.

UNICEF also facilitated the provision of mental health and psychosocial support services through community child protection workers, health workers and other trained social welfare workforce. The twin emergencies of Tropical Cyclone Freddy and Cholera exposed a huge need for MHPSS services which were partly addressed by the project.

The provision of dignity kit was instrumental in reaching women and girls who constituted most people in sites. However, access constraints in some areas were linked to the poor road network impacted humanitarian access and the ability to support women and girls in these places. For instance, even if UNFPA had prepositioned dignity kits and reproductive health kits, issues of transportation after the cyclone made it difficult to access some areas making it crucial to ensure quick linkage and support from logistic partners. It is recommended for future crises that from the beginning of a response, partner efforts should be supported in preventing GBV, by prioritising separate shelters/tents for women and girls.

Table 1: Allocation Overview (US\$)

Total amount required for the humanitarian response	40,000,000
CERF	5,500,000
Country-Based Pooled Fund (if applicable)	0
Other (bilateral/multilateral)	4,658,400
Total funding received for the humanitarian response (by source above)	10,158,400

Table 2: CERF Emergency Funding by Project and Sector/Cluster (US\$)

Agency	Project Code	Sector/Cluster	Amount
IOM	23-RR-IOM-006	Shelter and Non-Food Items	648,000
IOM	23-RR-IOM-006	Camp Coordination and Camp Management	152,000
UN Women	23-RR-WOM-001	Protection - Gender-Based Violence	300,000

UNFPA	23-RR-FPA-007	Health - Sexual and Reproductive Health	300,000
UNFPA	23-RR-FPA-007	Protection - Gender-Based Violence	300,000
UNHCR	23-RR-HCR-007	Shelter and Non-Food Items	500,000
UNICEF	23-RR-CEF-009	Water, Sanitation and Hygiene	1,691,000
UNICEF	23-RR-CEF-009	Protection - Child Protection	209,000
WFP	23-RR-WFP-006	Food Security - Food Assistance	896,000
WFP	23-RR-WFP-006	Common Services - Logistics	504,000
Total			5,500,000

Table 3: Breakdown of CERF Funds by Type of Implementation Modality (US\$)

Total funds implemented directly by UN agencies including procurement of relief goods	4,585,000
Funds sub-granted to government partners*	89,268
Funds sub-granted to international NGO partners*	199,125
Funds sub-granted to national NGO partners*	569,420
Funds sub-granted to Red Cross/Red Crescent partners*	57,687
Total funds transferred to implementing partners (IP)*	915,500
Total	5,500,000

* Figures reported in table 3 are based on the project reports (part II, sections 1) and should be consistent with the sub-grants overview in the annex.

2. OPERATIONAL PRIORITIZATION:

Overview of the Humanitarian Situation:

The Tropical Cyclone Freddy weather system brought torrential rains with equivalent of six months of rain falling in just six days, causing devastating floods and mudslides in southern Malawi. Over 2.2 million people were affected, among which more than 659,000 people displaced, 2,186 injured and 679 killed. Tropical Cyclone Freddy destroyed thousands of hectares of harvest and reduced casual labour opportunities compromising resilience of affected population. The Malawi President declared a State of Disaster in impacted areas that were already suffering high levels of prolonged food insecurity and not fully recovered from previous crises including Tropical Storm Ana, and Tropical Cyclones Gombe and Dumako.

Operational Use of the CERF Allocation and Results:

8 March 2023, the ERC allocated \$5.5 million from the Central Emergency Response Fund (CERF) for the urgent support of the Tropical Cyclone for Malawi. Funding from CERF enables UN agencies and partners to provide health, nutrition, water, sanitation and hygiene (WASH), emergency shelter and non-food items, food assistance, logistics, and protection. Activities were implemented by recipient's agencies. The prioritized life-saving assistance enable recipient agencies to respond to the basic needs of 606,565 persons (including 149,405 women, 130,294 men, 326,866 children, and 16,877 people with disabilities), including through cash assistance, by ensuring food assistance and protection, protection interventions targeting women and girls with integrated emergency sexual and reproductive health, as well as emergency shelter assistance.

People Directly Reached:

A total of 606,565 men, women, girls and boys including nearly 17,000 people with disabilities benefited directly from the CERF funded projects.

People Indirectly Reached:

Approximately 140,522 people have indirectly benefited from this CERF grant against 38,821 people initially targeted. IOM provided orientation on camp coordination and camp management structures to the sites managers of 26 camps enabling more than 34,000 IDP living in these sites to benefit from more effective representation by their camp managers and good coordination of camp operations. UNHCR estimated that up to 200,000 people were reached as indirect beneficiaries through the utilization of cash by IDP to purchase articles in the local markets. Indeed, per the post distribution report, 99% of the beneficiaries reported being able to find essential items within their localities. For WFP, in kind food distribution reached direct beneficiaries only. However, logistical support, targeted humanitarian organisations and other key partners to enable the coordination and delivery of critical relief items to support affected populations.

Table 4: Number of People Directly Assisted with CERF Funding by Sector/Cluster*

Sector/Cluster	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Camp Coordination and Camp Management	2,880	1,920	6,720	4,480	16,000	6,189	4,126	14,442	9,628	34,385
Food Security - Food Assistance	30,992	43,796	34,920	35,793	145,501	30,991	43,796	34,920	35,793	145,500
Health - Sexual and Reproductive Health	21,735	18,068	14,639	12,402	66,844	11,650	4,432	4,948	2,774	23,804
Protection - Child Protection	71,304	68,508	38,981	37,855	216,648	87,259	86,243	94,505	90,799	358,806
Protection - Gender-Based Violence	77,356	77,116	70,563	60,849	285,884	77,411	40,251	53,325	18,966	189,953
Shelter and Non-Food Items	7,892	6,832	8,785	8,891	32,400	14,265	6,172	15,338	10,510	46,285
Water, Sanitation and Hygiene	147,546	127,881	163,799	160,864	600,090	149,405	130,294	165,498	161,368	606,565

* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

Table 5: Total Number of People Directly Assisted with CERF Funding by Category*

Category	Planned	Reached
Refugees	0	0
Returnees	0	0
Internally displaced people	466,122	466,032
Host communities	0	0
Other affected people	156,603	140,533
Total	622,725	606,565

Table 6: Total Number of People Directly Assisted with CERF Funding*

Sex & Age	Planned		Reached		Number of people with disabilities (PwD) out of the total	
	Planned	Reached	Planned	Reached	Planned	Reached
Women	153,704	149,405	9,153	3,595	8,626	5,080
Men	132,544	130,294	16,878	4,050	4,164	4,152
Girls	168,500	165,498				
Boys	167,977	161,368				
Total	622,725	606,565	38,821	16,877		

PART II – PROJECT OVERVIEW

3. PROJECT REPORTS

3.1 Project Report 23-RR-IOM-006

1. Project Information			
Agency:	IOM	Country:	Malawi
Sector/cluster:	Shelter and Non-Food Items Camp Coordination and Camp Management	CERF project code:	23-RR-IOM-006
Project title:	Provision of immediate lifesaving emergency Shelter, non-food items (NFI) and Camp Coordination and Camp Management assistance in response to Tropical Cyclone Freddy's impact		
Start date:	27/03/2023	End date:	26/09/2023
Project revisions:	No-cost extension <input type="checkbox"/>	Redeployment of funds <input type="checkbox"/>	Reprogramming <input type="checkbox"/>
Funding	Total requirement for agency's sector response to current emergency:	US\$ 3,500,000	
	Total funding received for agency's sector response to current emergency:	US\$ 875,000	
	Amount received from CERF:	US\$ 800,000	
	Total CERF funds sub-granted to implementing partners:	US\$ 177,321.00	
	Government Partners	US\$ 0	
	International NGOs (Habitat for Humanity Malawi)	US\$ 119,634	
	National NGOs	US\$ 0	
Red Cross/Crescent Organisation	US\$ 57,687		

2. Project Results Summary/Overall Performance

Through this grant IOM reached 67,526 IDPs in Nsanje, Chikwawa, Phalombe, Zomba, Blantyre, and Mulanje districts between 27th March to 26 September 2023.

Output 1: *Most vulnerable cyclone Freddy-affected populations and host communities in need have access to effective and dignified shelter and settlement support.*

A total of 6,628 households (HHs) representing approximately **33,141** (19,885 Females and 13,256 males) were directly reached under this Output. From the total beneficiaries a total of 9,942 adults (>18 years) and 23,199 children (<18 years) were reached. The project reached **12,500** individuals with HH shelters, NFI kits and shelter construction tool kits while **1,141** were reached with communal shelters. The 12,500 individuals were also provided with unconditional cash transfers (USD40.00 per HH) to support construction of HH shelters with a total disbursement value of USD100,000. In addition, **2,000** individuals were reached with NFI kits only, while **17,500** individuals benefited through access to a total of 1,300 shared shelter construction tool kits.

Output 2: *Tropical Cyclone Freddy-affected populations in camps and camp-like settings have equitable access to assistance, protection, and services in displacement sites.*

A total of 34,385 (20,631 Females and 13,754 Males) were reached with camp management and camp coordination services. The total reached comprise 10,315 adults (>18 years) and 24,070 children (<18 years). The project provided orientation on camp coordination and camp management structures to 122 CCCM agency and authority personnel and 300 Camp Management Committees (CMCs). IOM also supported 26 camps with CCCM services which included all 26 sites reached with site management services and 20 sites supported with formulation of inclusive and representative government structures (Camp Management Committees). IOM also provided site management services to the 26 camps which accommodated 34,263 IDPs. These services included service mapping, service monitoring and Complaint Feedback Mechanism (CFM).

Outcome

Through IOM's interventions, the supported IDPs living in camp sites were able to have access to life saving services including shelter and NFIs and access to improved living conditions through provision of technical assistance on CCCM (trainings, information management, site monitoring, distribution, coordination, and leadership) and ensuring that IDPs have access to effective mechanisms for resolving their complaints.

IOM's shelter support enabled IDPs to live in less congested spaces with dignity, privacy, and security. The NFI support helped IDPs to have access to HH items that contributed to life saving as most IDPs had lost all their HH items during the disaster. IOM also contributed to a holistic approach to humanitarian response through the provision of multisectoral information on needs and gaps of IDPs. This information helped Government and other humanitarian actors across various sectors to plan and prioritize their interventions in order to better assist the IDPs. The CCCM services enabled IDPs to live in improved conditions through coordinated site management activities and contributing to protection of IDPs with focus on women, girls, elderly, and people with disabilities.

IOM support also helped to strengthen the coordination of the Shelter and NFI Sector response activities through provision of camp status information, regular coordination meetings and joint camp assessments and monitoring. This helped to ensure that IDPs are better served by meeting their needs in a collaborative approach (collective resources allocation, collective complaint redress, collective planning on amalgamation of camps and relocation of IDP collective sites).

3. Changes and Amendments

The figures provided for the overall population are counted ensuring no double counting of beneficiaries for the combined activities. That is the reason why the overall population reached is lower than the sum of beneficiaries reached by the single sector. Under CCCM, IOM targeted 16,000 IDPs. However, during implementation it was discovered that the total number of IDPs in the targeted camps was more than the initial target. Since the nature of activities did not require additional funds to reach the overall people living in the targeted camps (34,385 IDPs) the Agency just incorporated the additional IDPs in the CCCM services.

In terms of shelter, IOM reached more people than initially targeted because some additional IDPs were able to use the communal shelters when they were relocated from schools and others were able to benefit from shelter construction toolkits that were meant for the IDPs initially targeted. For NFI, the Agency realised some savings from procurements and decided to procure additional 400 NFI kits which benefited an additional 2,000 IDPs.

In terms of people living with disability, IOM estimated an initial target of 1 percent of the total beneficiaries. However, according to the 2018 Population and Housing Census, the population living with disability in Malawi represent about 11.6 percent of the total population (aged above 5 years). Therefore, the initial target results in underestimation for PWD target. The figures indicated by IOM in the actual PWD reached, in the table below (section 4), is estimated based on the actual distribution list (done by IOM) of ESNFI, which resulted of 7% of PWD over the total beneficiaries.

The increase in the IDPs reached did not require modifications or reprogramming of the project.

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Camp Coordination and Camp Management									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	2,880	1,920	6,720	4,480	16,000	6,189	4,126	14,442	9,628	34,385
Host communities	0	0	0	0	0	0	0	0	0	0
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	2,880	1,920	6,720	4,480	16,000	6,189	4,126	14,442	9,628	34,385
People with disabilities (PwD) out of the total										
	29	19	67	45	160	432	288	1,007	672	2,399
Sector/cluster	Shelter and Non-Food Items									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	2,322	1,548	5,418	3,612	12,900	5,965	3,977	13,919	9,279	33,140
Host communities	0	0	0	0	0	0	0	0	0	0
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	2,322	1,548	5,418	3,612	12,900	5,965	3,977	13,919	9,279	33,140
People with disabilities (PwD) out of the total										
	23	15	55	36	129	641	427	1,496	997	3,561

* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

The figures provided for the overall population are counted ensuring no double counting of beneficiaries for the combined activities. That is the reason why the overall population reached is lower than the sum of beneficiaries reached by the single sector. For People with disability, the estimation is done using the percentage of people living with disability calculated during the PDM, whereby from the sampled population it was estimated 7% of the affected individuals lived with a certain type of disability. This percentage is also in line with the population classification criteria issued by the National Statistics Office in Malawi.

* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥ 18 , girls and boys < 18 .

5. People Indirectly Targeted by the Project

With the camp management training, IOM and its partners reached 26 camps with camp management committee trainings, whereby the primarily beneficiaries were the committee members, and the indirect beneficiaries were the 34, 385 camp residents, who benefitted through effective representation by their leaders and good coordination in camp operations. Similarly, the 122 CCCM workers from partners and Government that were directly reached with orientations on camp coordination and camp management structures facilitated similar trainings in other camps where IOM did not target.

For the Shelter Sector, host communities around displacement locations and sites also indirectly benefited from the shelter assistance provided. With the communal shelter support, displaced populations were given a place where to stay, and therefore the IDPs didn't have major impact on overcrowding the hosting villages. In addition, IOM's shelter support minimized pressure on alternative collective centres (schools, churches, and other community facilities) which were initially used to accommodate IDPs during the first 4 to 6 weeks of the emergency. The communal shelters allowed the facilities to be utilized for their purpose or prevented them from further damage as in some cases IDPs were reported to be vandalising school infrastructure.

With the support of cash, the displaced households procured material and items in the local market, injecting cash into the system and therefore supporting the re-establishment of the local economy.

6. CERF Results Framework

Project objective	Tropical Cyclone Freddy-affected populations have their basic needs met and have minimum living conditions with reduced barriers to access for marginalized and vulnerable individuals.			
Output 1	Most vulnerable cyclone Freddy-affected populations and host communities in need have access to effective and dignified shelter and settlement support, at scale, using the methods that are most appropriate to the given context.			
Was the planned output changed through a reprogramming after the application stage?		Yes <input type="checkbox"/>		No <input checked="" type="checkbox"/>
Sector/cluster	Shelter and Non-Food Items			
Indicators	Description	Target	Achieved	Source of verification
Indicator 1.1	Cash.2a Number of people benefitting from sector-specific unconditional cash transfers	12,500	12,500	Beneficiary list – bank transaction available upon request
Indicator 1.2	Cash.2b Total value of sector-specific unconditional cash transfers distributed in USD	100,000	100,000	Beneficiary list – bank transaction available upon request
Indicator 1.3	SN.2a Number of people benefitting from in-kind NFI assistance	12,500	14,500	Beneficiary list available upon request
Indicator 1.4	SN.2b Number of in-kind NFI kits distributed	2,500	2,900	Beneficiary list – delivery note available upon request
Indicator 1.5	SN.3 Number of shelters and common shelter structures constructed or rehabilitated	2,508	1,726	Reports, pictures available upon request
Indicator 1.6	SN.6 Number of people accessing shelter services	12,900	31,141	Reports, pictures, CCCM data on camps available upon request
Explanation of output and indicators variance:		Under Indicator 1.3 the project targeted 12,500 (2,500 HHs with an average family size of 5 members). However, some savings were realised from		

procurement of NFI kits due to relatively lower cost of kits and transport than initially budgeted hence additional kits were procured locally to reach 2,000 additional beneficiaries. Under Indicator 1.4, the project planned to procure and distribute 2,500 NFI kits. However, due to the savings explained above, 400 additional kits were procured locally. This increased the number of NFI kits distributed to 2,900.

On Indicator 1.5 the shelter construction verified by IOM and its partners were counted as 1,726 (1,709 HH shelters and 17 communal shelters). The remaining 791 HH shelters were not completed as the beneficiaries had been relocated to other camps during camp amalgamation by Government. As a result, there was no adequate space in the new sites hence IOM provided 9 additional communal shelters to accommodate 603 affected IDPs. In addition, some of the IDPs that were being moved opted to return to communities of origin or move into the host communities. As a result of these movements the beneficiaries could not be tracked within the implementation period and PDM.

On Indicator 1.6, the project targeted 12,900 IDPs to access shelter services including HH shelter, communal shelter, shelter construction training and shelter construction tool kits. In the course of implementation, it was observed that the 1,300 shelter construction tool kits were benefiting approximately 25 individuals (5 HHs) instead of the planned 10 individuals (2 HHs). This increased the total number of people reached by shelter support to 31,141.

Activities	Description	Implemented by
Activity 1.1	Local cluster coordination support and meetings with other actors to prepare the assessments and response effectively	<p>Under this activity, IOM supported the Shelter/CCCM Sector coordination meetings. International Federation of Red Cross and IOM coordinated the meetings which were chaired by the Government Sector Lead, Ministry of Lands and Housing. In order to ensure effective coordination and adequate participation of stakeholders, IOM established a CCCM Technical Working Group TWG to discuss in detail CCCM issues including development of CCCM operation tools. Initially in the first phase of emergency, weekly meetings were established, meetings took place both online and with physical presence. In the second phase of the response Shelter and CCCM meetings were held every two weeks online, while the Intersectoral Coordination meetings were held at WFP in Blantyre with physical presence, whereby Shelter and CCCM co lead were present.</p> <p>As part of seeking durable solutions in the Recovery Phase, the Government of Malawi, initiated the processes for relocation of Internally Displaced Persons IDPs in some districts. In this regard IOM led a multi-sectoral feasibility assessment for relocation land with support from the CCCM TWG. A TOR and assessment tool for the above purpose was prepared and endorsed by Ministry of Lands and Housing and sector leads. The exercise involved technical experts from the Department of Disaster Management Affairs, Ministry of Lands and Housing, District Councils, and members of the Shelter/CCCM Sector. The assessment was the first one of this type and was fully endorsed as a platform for technical discussions and steps to ensure and define steps towards a proper and dignified relocation process. Please refer to for additional details.</p> <p>Annex 1 Site Feasibility TOR</p>

		Annex 2 Site assessment questionnaire Annex 3 Chiradzulu assessment report
Activity 1.2	Participatory identification, assessment and selection of beneficiaries based on pre-defined criteria of vulnerable affected households in close coordination with community members, local stakeholders, other agencies and related Clusters and integrated within IOM overall response plan	IOM gave direction and guidance to its partners (Malawi Red Cross Society and Habitat for Humanity Malawi) about vulnerability criteria and selection of beneficiaries. The process also included the verification exercise which IOM considered of paramount importance to ensure correct targeting and avoid as much as possible incorrect targeting. The same was also coordinated at sectorial level, where guidance and process was shared during the coordination meetings. Beneficiaries were selected based on the location assigned in coordination with the respective district authorities and the support of community leaders and Camp Management Committee (CMC). Preliminary lists were created considering mail vulnerability criteria, as female head of household, presence of person with disability within the household, pregnant and lactating women, and number of children and elderly within the household. the list was further verified based on a sample size to ensure correct targeting and avoid bias as much as possible. For more information on beneficiary identification selection and verification please refer to Annex 4 NFI beneficiary selection methodology
Activity 1.3	Participatory identification, assessment, and selection of sites in need for emergency communal shelter support	The activity was carried out directly by IOM in coordination with the District Councils and with the Camp Management Committees and community leaders. The selection of locations was done in the initial week of the response. The sites were selected due to the greater number of people accommodated in schools as informal sites, whereby the number of people in need could not fit into the pre-existing school structures. Nine sites were selected in Chikwawa and seven sites in Nsanje, please refer to Annex 5 for a detailed report on communal shelter construction.
Activity 1.4	Procurement of locally available emergency shelter construction materials (tarpaulins and ropes).	The material for the construction of communal shelter was locally procured, to ensure fast delivery of the response and quick construction. Tarpaulins were also procured locally while ensuring high quality to achieve durability of the shelters. Poles and timbers were purchased from a government-approved entity following IOM procurement rules, while nails and tools were procured from pre-identified vendors following IOM procurement rules.
Activity 1.5	Transportation of emergency shelter materials and NFIs	Material was transported in several ways and steps. When possible, IOM used pre identified vendors from Long Term Agreement (LTA), which transported material up to Blantyre, additional local vendors and transporters were engaged from Blantyre to the camps. In some occasions, particularly for the NFI, The Logistics Sector led by WFP also supported with transportation of materials from the WFP Warehouse to displacement sites.

Activity 1.6	Provision of sheltering materials for emergency reconstruction through cash transfer	The activity was carried out through IOM Implementing Partners IPs (MRCS and HFHM). Shelter materials were procured by IOM and handed over to the IPs. The distribution, along with cash disbursement was carried out by partners reaching 12,500 IDPs (2,500 HHs). The emergency shelter kits included two Tarpaulins and 30 Metre rope plus the equivalent of USD40.00 as unconditional cash. The NFI kit included two Blankets, two Mats, and one USB Solar Lamp per household. IOM also provided shelter construction kits containing handsaw, shovel, hoe, tie wire and rope.
Activity 1.7	Distribution of emergency shelter materials (12,500 receiving family shelter through combined in-kind and cash transfer modalities, 400 benefit from communal shelter thus total, 12,900 receiving shelter assistance versus 12,500 receiving NFI)	<p>The cash was meant to support construction of emergency shelters through the purchase of Poles, Nails and fittings at household level. The total cash disbursement value by Malawi Red Cross Society was USD32,000, while for Habitat for humanity was USD68,000.00</p> <p>Towards August 2023, considering the big gap and need of NFI within the IDPs, IOM procured additional 400 NFI kits which were directly distributed by IOM in early September with the same methodology used by IPs.</p> <p>Annex 6 MRCS distribution report Annex 7 HFH distribution report Annex 8 IOM distribution report Annex 9 Distribution SOP</p>
Activity 1.8	Train and provide technical assistance to the construction working teams for the construction of emergency shelters	IPs, MRCS and HFH, with the support of IOM, conducted awareness campaigns for the construction of the transitional shelters, including build back better awareness through the dissemination of information of flyers, and community meetings. Through this activity, 2,500 HHs were reached within the project timeframe.
Activity 1.9	Carry out distributions to families in a dignified and secure environment, accompanied by information/awareness raising on how to use materials distributed to increase the benefit they provide to the beneficiaries the length of time the materials remain in a condition fit for use, and PSEA messages	<p>Prior to distributions all communities were informed ahead of time on the type of support, location, and timing of distribution. This was done with communication to the district authorities as well as with physical visits to the camps and discussion with community leaders. As per Post Distribution Monitoring PDM findings, majority of the people received the information ahead of time and they could organize for the distribution.</p> <p>During distributions, the waiting time was organized to promote Protection from Sexual Exploitation and Abuse PSEA messages, as well as explaining the kit content and promote safe method for housing construction. Separate line for elderly, People with Disabilities PWD and pregnant and lactating mother were organized during distribution.</p>
Activity 1.10	Post Distribution Monitoring	IOM coordinated the development of a PDM tool which was used by the IPs. The PDM process was done through field visits by IPs and IOM Staff. During the PDM, beneficiaries, camp leaders, community leaders and representatives of district authorities provided feedback on how the distribution process was conducted and how the beneficiaries utilized the distributed items. Findings can be read in

	Annex 10 MRCS PDM report Annex 11 HFH PDM report Annex 12 IOM PDM report
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Output 2 Tropical Cyclone Freddy-affected populations in camps and camp-like settings have equitable access to assistance, protection, and services in displacement sites, [to improve their quality of life and dignity during displacement while seeking and advocating for durable solutions.]

Was the planned output changed through a reprogramming after the application stage? Yes No

Sector/cluster Camp Coordination and Camp Management

Indicators	Description	Target	Achieved	Source of verification
Indicator 2.1	CM.4 Number of people (humanitarian staff and/or camp authorities) receiving rapid training on CCCM	200	422	Report and attendance list
Indicator 2.2	CM.1 Number of displacement sites supported with appropriate site management services	20	26	Reports, data on gaps and needs
Indicator 2.3	CM.2 Number of displacement sites with inclusive and representative (incl. gender-responsive) governance structures	20	20	Attendance List, monitoring matrix
Indicator 2.4	Number of people supported with appropriate site management services	16,000	34,263	Data on camps matrix and monitoring matrix

Explanation of output and indicators variance:

Indicator 2.1: IOM and its partners reached double of the planned target as the number of camps reached for camp management committee training increased, this was based on the fact that only IOM and its two partners were providing CCCM support and therefore the gap was initially very high. IOM therefore increased the number of CCCM Training beneficiaries to ensure that there is adequate capacity for managing camps.

Indicator 2.4: It was discovered through Displacement Tracking Matrix (DTM) assessments and CCCM Service mapping that the number of IDPs in the targeted camps was more than 16,000 hence IOM's site management services (site monitoring, service mapping, site management and CFM) supported an additional 18,263 IDPs which were in the targeted camps.

Activities	Description	Implemented by
Activity 2.1	Rapid refresher training with Trainer of Trainers (MoL; DoDMA) in Collective Shelter/CCCM in the affected districts with sub national staff and volunteers (Red Cross and others)	The trainings focused on CCCM, roles and responsibilities, and community participation for IDPs, in addition to fully understand criteria used when selecting the CMCs to ensure smooth management of the camps. The trainings covered all aspects of camp management and camp coordination, Data and information management, and PSEA. The district participants were CCCM service providers from the district councils, which included directors of planning and development, implementing partners, and district cluster leads from Shelter, Health, Protection, WASH, and Food security.

		Parallel to this a protection mainstreaming training was also done as complementary of CERF project. Annex 13 CCCM training activity report.
Activity 2.2	Roll out mentoring and rapid trainings in 20 collective shelter sites to ensure establishment of management structures, committees, focal points and feedback mechanisms	Within the CCCM activities IOM team trained camp management committees where already established, and supported the creation of CMC where the structure was not yet present. The trainings were done by IOM as well as MRCS and HFHM supported in the organization of the events in the camps of responsibilities. When possible and feasible the partners involved the previously trained districts authorities to support in the delivery of the training, ensuring strengthening of the sustainability aspects as well as ownership and commitments from districts authorities towards IDPs
Activity 2.3	DTM location assessments in IDP sites and remote monitoring (Key Informants) to track immediate needs, demographic , displacement and returns , opening and/ closure of sites	<p>IOM conducted service mapping and service monitoring covering a total of 91 camps (Annex 17 and 18). From the assessments two rounds of dashboards were published and shared with relevant Government authorities and stakeholders. These services mainly included identifying service needs to inform mobilization of humanitarian support to address those needs.</p> <p>Thereafter, DTM enumerators, continuously supported CCCM teams with gathering updated information on active camps throughout the implementation period. The information were continuously gathered during the project period and shared with partners every two weeks, in a form of two products: Gaps and needs dashboard and data on camps in excel form (for the second product, in collaboration with shelter sector and MRCS, it was also produced a dashboard which was regularly updated). The two products were regularly shared with the sector leads, also through google doc link, to ensure that all active partners working in the sites are well informed on the gaps and needs of the IDPs. Example of the 2 products can be found in Annex 14 Data on Camps Annex 15 Snapshot gaps and needs</p>
Activity 2.4	Conduct site level observational and participatory safety and basic needs audits to identify solutions required to increase dignity and limit risk for health and safety of the IDPs in at least 20 sites.	<p>Camp monitoring visits were conducted regularly to 26 camps (Bitilinyu Nsanje, Chilumba Nsanje, Nyachikadza Nsanje, Nyachirenda Nsanje, Jombo Chikwawa, Bangula Mwambo Headquarters -Zomba, Katuma, Gawani Camp Mulanje, Saima Evac. Centre Zomba, Kachulu Zomba, Motor Engil – Nsanje, Namiyala - Nsanje, Chikuse, Mazongoza, Champanda, Namisunju- Zomba, Savala-Chikwawa, St Micheals-Zomba, Pakamwa – Chikwawa, Mambundungu – Nsanje, Nanchidwa-Mulanje, Namalanda-Mulanje, Katuma-Mulanje, Kachulu- Zomba, Chanza -Chiradzuru Aug).</p> <p>Regular site meetings were conducted, and complaints and feedback mechanism were established, in 12 active camps to ensure that IDPs are able to privately express their thoughts, comments and ideas. The CFM report in Annex 16 give an overview of the results and issues</p>

		raised by IDPs. IOM shared information collected with the responsible sectors leads and followed up with partners to help address challenges raised through the complaints and feedback mechanism.
Activity 2.5	Deliver improvements/rehabilitation works in collective centers or displacement sites	From DTM assessments results, IOM selected 20 camps where camp improvement activities were implemented, including the distribution of CCCM tools (as above) and site improvement kits (shovels, hoes, etc). The activity took place between June and July 2023 and reached 20 sites in Chikwawa, Nsanje Mulanje, Phalombe, and Zomba with the distribution of material needed to carry out CCCM activities, tables chairs and megaphones that could be also used for further events.
Activity 2.6	Conduct DTM assessments	To respond to the changing dynamics and request of humanitarian sector leads, IOM was also able to conduct Multi-sectoral Location Assessment (MSLA) in 168 displacement sites which were accommodating 196, 975 IDPs (42,604 HHs) (ANNEX 19 and 19B MSLA report). The MSLA reports provided all sectors with data on camp needs and status of support. IOM continued supporting humanitarian partners to understand better the dynamics and better understand the needs in the most affected areas. Upon request from Department of Disaster Management Affairs (DoDMA), IOM also conducted a rapid house damage assessment to collect realistic information on houses damaged by floods in the places of origin. The assessment helped DODMA to improve data accuracy on house damages and hence assisting the Shelter/CCCM Sector to understand the shelter needs of IDPs.
Activity 2.7	Distribute DTM monitoring Report	Distributions of the findings from the DTM assessments as well as from CCCM monitoring were shared to partners (through Shelter and CCCM mailing list including 51 individuals from 19 partners and MoHL) and sectorial leaders (through ICG mailing lists including 43 individuals from 12 UN agencies and the MoLH). When possible and products were endorsed, DTM published the reports and upload them in the DODMA website as well as in the DTM website to the Malawi dedicated page. DTM products can be accessed here and here .

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas² often lacking appropriate

² These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

a. Accountability to Affected People (AAP)³:

The affected populations together with the local leaders, the civil protection committees and Camp Management Committees participated in the targeting, verification, and final selection of the most vulnerable IDPs to be supported by IOM. Beneficiary representatives and district authorities verified the lists during distributions to ensure it was exactly those they selected during registration. Some beneficiaries and community volunteers assisted with the offloading and distribution processes. In all the distribution points, items were distributed on an open space, whereas the entire community observed, and community members were encouraged to point out any observable discrepancies on the distribution lists that was used. Before the distribution activity, the process of beneficiary selection and the contents of the assistance package was clearly explained to the beneficiaries. During the distribution process beneficiaries and community members were free to ask and enquire on anything. In the end, the distribution team conducted a debrief discussion, responding to some queries on the same spot.

b. AAP Feedback and Complaint Mechanisms:

During project implementation two CFMs, suggestion boxes and a toll-free hotline number were used to collect complaints and feedback from beneficiaries. Throughout the implementation period IOM provided suggestion boxes in which beneficiaries deposited complaints. The boxes were opened every two weeks, in a transparent manner, and the complaints were assessed and channelled to the appropriate authorities for redress. IOM made follow ups with authorities to ensure that all complaints are addressed to the satisfaction of the complainant. In addition, during distribution IOM and its partners established CFM desk which were manned by CFM volunteers who had knowledge on Gender-Based-Violence (GBV)-referral pathways, GBV essentials and how to safely and ethically refer a disclosure. The beneficiaries' submissions did not raise major issues related to distributions, indicating that all the distributions were successful and conducted in smooth and orderly manners. Some submissions indicated that NFI packages were not adequate. A toll-free hotline #847 was permanently accessible to community members, offering a secure line of communication to healthcare providers, in case IOM and MSRC implementors were not consulted to support on site.

c. Prevention of Sexual Exploitation and Abuse (PSEA):

IOM DTM Enumerators, partners, Camp Management Committees (CMCs), and Civil Protection Committees (CPCs) were trained on PSEA and how to handle PSEA related issues, which expanded and enhanced the effectiveness of already existing CFMs on the ground. IOM also promoted the awareness of its "We Are All In" platform (<https://weareallin.iom.int/>) to beneficiaries, local authorities and implemented partners. It is a tool that allows confidential reporting of PSEA-related misconduct. Beneficiaries were introduced to a toll-free hotline number and suggestion boxes was deployed targeted camps, away from peoples' view, enabling people to access it confidentially.

d. Focus on women, girls and sexual and gender minorities, including gender-based violence:

IOM ensured that the principles of Do No Harm, safety and non-discrimination guided implementation of any activity conducted by IOM Staff and Implementing Partners. IOM conducted a special training on protection of vulnerable groups and prevention of GBV. IOM's beneficiary targeting criteria ensured that women, girls, and other gender minorities were prioritized. This helped in ensuring that there was equity in accessing shelter and NFI assistance. The criteria also helped to ensure that women and girls were empowered through the provision of dignified living conditions. Through camps assessments and monitoring, IOM was also able to promote protection of women and girls by continuously collecting data on their protection needs and sharing the data with Government, the Protection Sector and other relevant stakeholders.

³ AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the [IASC AAP commitments](#).

e. People with disabilities (PwD):

IOM's beneficiary targeting criteria ensured that People with Disabilities were prioritized i.e. PwD were part of the beneficiaries of shelter and NFI assistance. In addition, the communal shelters constructed by IOM were easily accessible by People with Disabilities. All distribution sites were physically accessible for PwD and IOM and IP Staff assisted PwDs during distribution. Both cash and shelter/NFIs distributions were conducted on time.

f. Protection:

The trainings conducted by IOM highlighted the importance of protection mainstreaming throughout all interventions: trainings, site monitoring activities, beneficiary registration and items distribution to the beneficiaries. The principles of protection, namely: Do No Harm, Secure meaningful access, Accountability, and Participation and Empowerment were promoted in all IOM activities. IOM ensured that 10% of shelter and NFI beneficiaries were members of host communities and that distribution of shelter and NFI materials was done in a manner that ensured that IDPs were safe. IOM also ensured accountability to affected populations in all its humanitarian response activities. In terms of Participation and Empowerment, IOM ensured that affected persons and other persons at risk were involved in beneficiary selection and distribution of shelter and NFIs.

These measures helped to ensure that IDPs and host communities were not exposed to further risks as a result of IOM's interventions. The measures also helped to ensure that IDPs in targeted camps were empowered to voice out their concerns and meaningfully participate in some interventions including communal shelter construction.

g. Education:

The project did not have specific considerations for education as the Education Sector was responsible for dealing with these issues. Due to the severity of disaster Government suspended classes in all the affected districts. Since some IDPs were accommodated in schools, there was potential to affect the delivery of education services when schools reopen. In order to avoid interrupting schools at the time of opening, IOM deliberately ensured that communal shelters were constructed away from schools. This helped to decongest the schools and prevent IDPs from disrupting classes.

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
Yes, CVA is a component of the CERF project	Yes, CVA is a component of the CERF project	12,500

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multi-purpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

The cash component was disbursed alongside the HH shelter package. As the HH shelter package included tarpaulins and rope, the cash was meant to support the procurement of poles and timbers to set up or rehabilitate the damaged shelter. The cash was disbursed through a service provider using the cash handout methodology. PDM findings revealed that cash was a better modality of support than in-kind support as beneficiaries can use the cash to procure desirable building materials.

Parameters of the used CVA modality:

Specified CVA activity (incl. activity # from results framework above)	Number of people receiving CVA	Value of cash (US\$)	Sector/cluster	Restriction
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Provision of sheltering materials for emergency reconstruction through cash transfer	12,500	US\$ 100,000	Shelter and Non-Food Items	Unrestricted
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9. Visibility of CERF-funded Activities

Title	Weblink
Updates	https://twitter.com/IOMMalawi/status/1635677341748801546?s=20 https://twitter.com/IOMMalawi/status/1635980115799597056?s=20 https://twitter.com/IOMMalawi/status/1636396690478600192?s=20 https://twitter.com/IOMMalawi/status/1636690944668860418?s=20 https://twitter.com/IOMMalawi/status/1656985717363408897?s=20 https://twitter.com/IOMMalawi/status/1664215157499731971?s=20 International Organization for Migration Malawi - Posts Facebook International Organization for Migration Malawi - Posts Facebook International Organization for Migration Malawi - Posts Facebook International Organization for Migration Malawi - Posts Facebook International Organization for Migration Malawi - Posts Facebook
Response IOM General	https://twitter.com/IOMMalawi/status/1638155303517650946?s=20 https://twitter.com/IOMMalawi/status/1638924339646169088?s=20 https://twitter.com/IOMMalawi/status/1639242085168553985?s=20 https://twitter.com/IOMMalawi/status/1640298970466471937?s=20 https://twitter.com/IOMMalawi/status/1640617779022778369?s=20 https://twitter.com/IOMMalawi/status/1641028821175484417?s=20 https://twitter.com/IOMROpretoria/status/1646078703976292354?s=20 https://twitter.com/IOMROpretoria/status/1646097863087202305?s=20 https://twitter.com/IOMMalawi/status/1648574211378622464?s=20 https://twitter.com/IOMMalawi/status/1638155303517650946?s=20 https://twitter.com/IOMMalawi/status/1638924339646169088?s=20 https://twitter.com/IOMMalawi/status/1639242085168553985?s=20 https://twitter.com/IOMMalawi/status/1640298970466471937?s=20 https://twitter.com/IOMMalawi/status/1640617779022778369?s=20 https://twitter.com/IOMMalawi/status/1641028821175484417?s=20 https://twitter.com/IOMROpretoria/status/1646078703976292354?s=20 https://twitter.com/IOMROpretoria/status/1646097863087202305?s=20 https://twitter.com/IOMMalawi/status/1648574211378622464?s=20
Specific CERF	https://twitter.com/IOMMalawi/status/1650417775771353088?s=20 https://twitter.com/IOMMalawi/status/1663807392578928640?s=20 https://twitter.com/IOMMalawi/status/1668634567828447232?s=20 International Organization for Migration Malawi - Posts Facebook International Organization for Migration Malawi - Posts Facebook International Organization for Migration Malawi - Posts Facebook

3.2 Project Report 23-RR-WOM-001

1. Project Information			
Agency:	UN Women	Country:	Malawi
Sector/cluster:	Protection - Gender-Based Violence	CERF project code:	23-RR-WOM-001
Project title:	Preventing and Responding to Gender Based Violence Including Protection Against Sexual Exploitation and Abuse (PSEA) during Tropical Storm Freddy response		
Start date:	01/04/2023	End date:	30/09/2023
Project revisions:	No-cost extension <input checked="" type="checkbox"/>	Redeployment of funds <input type="checkbox"/>	Reprogramming <input type="checkbox"/>
Funding	Total requirement for agency's sector response to current emergency:		US\$ 800,000
	Total funding received for agency's sector response to current emergency:		US\$ 300,000
	Amount received from CERF:		US\$ 300,000
	Total CERF funds sub-granted to implementing partners:		US\$ 75,396.98
	Government Partners		US\$ 0
	International NGOs		US\$ 0
	National NGOs		US\$ 75,396.98
Red Cross/Crescent Organisation		US\$ 0	

2. Project Results Summary/Overall Performance

UN Women implemented a six-month project titled "Preventing and Responding to Gender Based Violence Including Protection Against Sexual Exploitation and Abuse (PSEA) during Tropical Storm Freddy response CERF" for the period April to October 2023. The goal of the project was to reduce risk of GBV including SEA for all persons of concern especially women, girls and people living with disabilities. The project was implemented in Zomba, Phalombe and Blantyre districts. The CERF project has expanded and strengthened emergency protection including GBV referral pathways to protect women, girls, people with disabilities and other vulnerable groups from violence while in the camps and after they returned to their communities. A total of 44 cases were reported, managed, and referred to appropriate authorities during the implementation period. The project has further strengthened and facilitated access to protection and preventive services for girls and women. A total of 116,773 persons directly benefitted from the project out of which 53,311 were women, 24,974 were men, 20,508 were girls and 17,980 were boys. A total of 3,031 persons with disabilities were reached. The project further elevated access to essential resources for an empowered life through the distribution of items like briquettes, solar lamps, phones, installation of solar security lights in camps and stoves foster self-reliance among survivors. Improved case management in handling referrals for GBV survivors. 20 humanitarian structures (VCPCs, camp management committees, ACPCs, DCPCs, Clusters, Search and Rescue team, Military team, Transporters, Cabinet crew, the Media, etc.) were oriented on gender, GBV, and PSEAH during emergencies. Increased access and awareness on PSEA and GBV services in the districts which led to addressed harmful cultural practices including early marriages, aiding girls school attendance, increased number of reported GBV cases and empowered communities with strategies for prevention. Approximately 2,500,000 people were indirectly reached through Chanco Community radio program which covers Zomba, Phalombe, Chiradzulu, Machinga, and Mulanje districts.

3. Changes and Amendments

No cost extension. The project was extended with one month from 30th September to 31st October. The extension was to support reaching out to the targeted beneficiaries due to the decommissioning of camps from both schools and others has affected targeting of the beneficiaries as they have been pushed to move and live with relatives or find other means to be accommodated in the communities other than the schools in most cases. Hence this has adversely affected the identification of IDPs including those needing mental health and GBV services takes longer, and this led to the delay in timely implementation of the CERF project activities. Overall, the delivery approach was hampered by the decommissioning of camps which made it difficult for UN Women to reach out to the large numbers as planned.

The number of GBV cases reported (indicator 1.1) are less than planned which is attributed to the successful orientation of service providers including humanitarian workers and awareness raising sessions. The actions contributed to creating a safer environment for the affected population particularly girls and women. We reached more people with Referral Pathway information (indicator 1.2) because it was packed together with PSEA and Mental health information through various sessions hence a good number is now aware of the SGBV and SEA pathway that help them when seeking justice. The number of service providers (Indicator 1.3) was lower than planned as other targeted service providers were oriented by Save the Children hence the variance. CERF funding addressed the prevailing gap.

We reached more women and girls with GBV kits and supplies due to the increase in the quantity of materials supplied by UN Women. Less suggestion boxes (indicator 2.2) were established than planned due to the rising production cost which included carpentry work and branding and although it was not enough, the support still provided the targeted beneficiaries with multiple avenues for complaints and feedback. The number of women- and girl-friendly safe spaces and/or centres constructed, rehabilitated and/or supported (indicator 2.3) was much less than planned because Phalombe channelled the resources to the establishment of a One-stop center based on need as camps were decommissioned. The one stop center, as a referral pathway was established at the Phalombe district hospital with support from the district's social welfare and the police victim support unit.

Number of people reached through GBV community awareness activities to promote access to services (indicator 3.1) was much higher than planned because The modality of message delivery contributed to reaching more people than targeted. Radios have more coverage. Chanco Community radio program covers Zomba, Phalombe, Chiradzulu, Machinga, and Mulanje districts.

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Protection - Gender-Based Violence									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	60,039	37,448	46,755	34,389	178,631	53,311	24,974	20,508	17,980	116,773
Host communities	5,720	5,391	5,281	4,977	21,369	0	0	0	0	0
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	65,759	42,839	52,036	39,366	200,000	53,311	24,974	20,508	17,980	116,773
People with disabilities (PwD) out of the total										
	9,153	8,626	1,006	1,726	20,511	1,480	779	416	356	3,031

* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

5. People Indirectly Targeted by the Project

Approximately 2,500,000 people were indirectly reached through Chanco Community radio program which covers Zomba, Phalombe, Chiradzulu, Machinga, and Mulanje districts. The masses were reached with awareness messages on PSEA and GBV services and reporting mechanisms.

6. CERF Results Framework

Project objective	The objective of this project is to ensure that GBV and PSEA in humanitarian systems and services are available, safe, effective, and responsive to the needs and rights of women and girls, people with disabilities and the vulnerable communities. Making sure that humanitarian service delivery does not increase the likelihood of GBV occurring by identifying and mitigating GBV risks and conduct ongoing monitoring of access and barriers to services, particularly those faced by women and girls			
Output 1	Expanded and strengthened emergency protection including GBV referral pathways to protect women, girls, people with disabilities and other vulnerable groups from violence in the camps and with host communities in Phalombe, Blantyre and Zomba districts			
Was the planned output changed through a reprogramming after the application stage? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
Sector/cluster	Protection - Gender-Based Violence			
Indicators	Description	Target	Achieved	Source of verification
Indicator 1.1	Number of GBV cases reported, managed and referred to appropriate authorities. (Reported cases in all the camps in the 3 districts of Zomba, Blantyre and Phalombe)	15000	1,241	Partner Reports (WORLEC and PASD) Case management files
Indicator 1.2	Number of men, women, boys and girls including those with disabilities knowledgeable with GBV referral pathway including PSEAH messages(in Zomba, Blantyre and Phalombe) breakdown as follows: - 6,864 Women 6,569 men 2,667 persons with disabilities 6,337 girls (6-18yrs) 5,338 boys (6-18yrs)	30000	60,258	Partner Reports Monitoring visit Reports Spot checks
Indicator 1.3	Number of service providers including humanitarian workers oriented on gender, GBV and PSEAH during emergencies. Humanitarian structures 20 (VCPCs, camp management committees, ACPCs, DCPCs, Clusters, Search and Rescue team, Military team, Transporters, Cabinet crew, the Media etc)	2500	763	Partner Reports Monitoring visit Reports
Indicator 1.4	SP.5 Number of people receiving GBV and/or SRH medical assistance	30	53	Training reports

Indicator 1.5	Number of women, girls and people living with disabilities supported with lifesaving services for clinical management of rape services, psychosocial support, case management, safety and legal aid and referrals for support services	3000	3,147	Partner reports Case management reports
Indicator 1.6	PS.2 Number of people receiving GBV psycho-social support and/or GBV case management	3000	203	Partner reports

Explanation of output and indicators variance:	<p>The reported cases are less than planned which is attributed to orientation provided to service providers including humanitarian workers and awareness raising sessions . The actions contributed to creating a safer environment for the affected population particularly girls and women.</p> <p>Referral Pathway information was packed together with PSEA and Mental health information through various sessions hence a good number is now aware of the SGBV and SEA pathway that help them when seeking justice.</p> <p>The number of service providers was lower than planned as other targeted service providers were oriented by Save the Children hence the variance. CERF funding addressed the prevailing gap.</p> <p>Psychosocial counselling reached out to more survivors because the action trained 24 community volunteers in Psychosocial counselling hence reaching out to more survivors. In total, 40 women and 13 men were reached.</p>
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Activities	Description	Implemented by
Activity 1.1	Provide phones, airtime, and bicycles to 150 women support groups, paralegals, volunteer psychosocial counsellors and police to offer quality and timely services and referrals for GBV including, Mental Health and Psychosocial Support, legal aid, Prevention of Sexual Exploitation and Abuse (PSEA) and SRH services to survivors.	UN Women Women Legal Resource Centre Partners in Action for Sustainable Development
Activity 1.2	Operationalise and popularise PSEA toll free line	UN Women Women Legal Resource Centre Partners in Action for Sustainable Development
Activity 1.3	Disseminate information to disaster affected camps and host communities about available services and known risks of GBV and SEA. Raise gender and responsive awareness targeting disaster prone areas and camps on gender and during emergencies	UN Women Women Legal Resource Centre Partners in Action for Sustainable Development
Activity 1.4	Orient service provider on GBV including PSEA in emergencies	UN Women Women Legal Resource Centre
Activity 1.5	Provide direct, or in partnership with local organizations, lifesaving services for clinical management of rape services, psychosocial support, case management, safety and legal aid and referrals for support services	UN Women Women Legal Resource Centre Partners in Action for Sustainable Development

Output 2 Output 2.0: Strengthened and easily accessible protection and preventive services for girls and women affected by Tropical Cyclone Freddy that build their safety and resilience to GBV

Was the planned output changed through a reprogramming after the application stage? Yes No

Sector/cluster Protection - Gender-Based Violence

Indicators	Description	Target	Achieved	Source of verification
Indicator 2.1	Number of adolescent girls and women who receive GBV risk-reduction kits and supplies like pepper spray, fuel efficient cook stoves, briquettes, and solar lamps (disaggregated by age)- 5000 Women 1000 Adolescent girls	6000	19,999	Distribution Report
Indicator 2.2	Number of static (suggestion boxes and helpdesks) and/or mobile complaint and feedback mechanisms established in camps	200	30	Partner reports Procurement reports
Indicator 2.3	PS.1b Number of women- and girl-friendly safe spaces and/or centres constructed, rehabilitated and/or supported	20,000	934	Partner reports Monitoring visit report

Explanation of output and indicators variance:
 2.1 The number of beneficiaries were increased due to the increase in the quantity of materials supplied by UN Women.
 2.2 Quantity was trimmed due to the rising production cost which included carpentry work and branding.
 2.3 Phalombe channelled the resources to the establishment of a One-stop center based on need (amount reprogrammed \$1,000).

Activities	Description	Implemented by
Activity 2.1	Procure and distribute GBV risk reduction kits and supplies including pepper spray, briquettes and fuel-efficient stoves and solar lamps and setting up fixed lighting in camps shelter and sanitary facilities	UN Women Women Legal Resource Centre Partners in Action for Sustainable Development
Activity 2.2	Establish and facilitate both static desks (suggestion boxes, help desks) and mobile complaints and feedback mechanism that are age, gender and disability friendly in camps	UN Women Women Legal Resource Centre Partners in Action for Sustainable Development
Activity 2.3	Establish Referral Centers for Women and Girls and survivors of GBV	UN Women Women Legal Resource Centre Partners in Action for Sustainable Development

Output 3 Increased access to information and awareness on PSEA and GBV services and reporting mechanisms in IDP camps and host communities

Was the planned output changed through a reprogramming after the application stage? Yes No

Sector/cluster Protection - Gender-Based Violence

Indicators	Description	Target	Achieved	Source of verification
Indicator 3.1	No of people reached through GBV community awareness activities to promote access to services to respond to incidents of GBV (disaggregated by age and sex) in the three districts of Zomba, Phalombe and Blantyre 45,759 Women 43,124 Men 39,186 Boys 42,250 Girls 17,779 Persons with Disabilities. To be reached through radio programs, IEC materials, distribution of relief items. (Figure to the right excludes people reached indirectly via mass media).	200,000	30,922	Activity report
)Indicator 3.2	No of local and national service providers oriented on GBV and PSEA outreach and engagement with communities	500	40	Training report
Explanation of output and indicators variance:		3.1 Underperformance due to the decommissioning of the camps. 3.2 Quantities reduced due to the reduced number of targeted TA's and the increased cost of production.		
Activities	Description	Implemented by		
Activity 3.1	Disseminating information on GBV and services (through information boards, radio, community reporters, referral centres etc.) in a safe and appropriate way	UN Women National and Community Radios		
Activity 3.2	Developing and disseminating clear messages about GBV that are age, sex and disability friendly	UN Women, WORELC and PASD		

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas⁴ often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

a. Accountability to Affected People (AAP)⁵:

⁴ These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

⁵ AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the [IASC AAP commitments](#).

During project design, the affected people were consulted through age-appropriate Focus Group Discussions and individual interactions. The interactions made sure that the design of the project is relevant and appropriate to the needs of the affected population particularly women and girl who were disproportionately affected. This made sure that the affected population are at the center of the humanitarian response.

During implementation, the affected population were involved in prioritization of the support to those most in need, real time monitoring, provision of security (particularly men) and provision of feedback on how the response is being managed and could be improved.

b. AAP Feedback and Complaint Mechanisms:

UN Women and its partners used Multiple Community Feedback Mechanisms which allowed the elderly, pregnant women, marginalized women, men, girls, boys, youths, and more disadvantaged groups such as persons with disabilities, to have an opportunity to provide complaints and feedback. The mechanisms included, social group-based focus group discussions, door to door visits and community dialogue sessions, individual interactions, help desk and suggestion boxes. All community members/affected population were assured of confidentiality in treating of the cases to preserve their dignity. This provided a safe and secure environment for all. Community and camp leaders were oriented on their roles and responsibilities and various malpractices before which threaten the protection and livelihoods of affected population.

c. Prevention of Sexual Exploitation and Abuse (PSEA):

The project succeeded through collaborations, both at district and area levels. The project created a Case registration template which was used both in Excel copy for storage of the data in computers and as a printed questionnaire for data collection in the field. The template has columns that recorded the necessary details for each SEA case reported; Date received, Gender of the victim, Age, District, T/A, Complaint Description, Type of Action taken, Resolution made, Resolved dates, and Status of the case which would show if the case was completed or referred to another stakeholder for further assistance such as Police and Court. This mechanism took care of matters of confidentiality as it paid less attention to more personal details of the reporter and the survivor but such important details were kept in separate diaries for continued support. Case follow ups were easy using the Case status column which indicated status for each case.

d. Focus on women, girls and sexual and gender minorities, including gender-based violence:

The project activities which were deliberately designed to promote gender equality and the empowerment and protection of women and girls. In its planning, the project gave a higher target percentage to women and girls which made it possible to have women and girls dominating in the trainings, and while accessing various relief items from the project. About 64% of the total beneficiaries of the project were women and girls with various characteristics, for instance in Zomba 24,822 were reached against 14,325 men and boys put together. Various trainings that targeted community committees checked that the participants were 60% women and 40% men. Some items like solar lamps, cooking stoves and briquettes were given to ease women's reproductive roles in their households thereby protecting them from fetching for firewood from far places. The use of suggestion boxes as one reporting mechanism helped to create room for anonymous reporting where matters of sexual minority, leadership abuse of power and other serious cases would be easy to report and enhance women empowerment.

e. People with disabilities (PwD):

The project worked with Malawi Council for the Handicap (MACOHA) officers at district level which provided guidance on the proper inclusion and identification of PWDs. At area level, disability forums were targeted where data for PWDs was readily available in already existing structures. During various project activities, including trainings and distribution of relief items a quarter was left for people with disabilities to ensure that they are included and not forgotten.

f. Protection:

The project centred on protection of women and girls from all sorts of sexual exploitation and abuse especially in their context as they survived the wrath of cyclone Freddy and were displaced. Most camps did not have enough facilities to provide the needed protection for women, girls and children as they were housed in school blocks with open windows and lacked good toilets and bathrooms were not

available. The project established safe spaces in a few camps to enable women and girls to present their issues to duty bearers such as camp committees and government officials. Suggestion boxes were placed in the camps to allow reporting of various abuses and such reports were checked frequently by Protection cluster members. The project installed solar powered flood lights around all buildings and shelters in the camps to reduce darkness and thereby reducing risk areas around the camps where children and girls would be violated. About 6 defilement cases were reported in Zomba and Phalombe districts. Awareness campaigns helped to educate camp leaders, community leaders, and other duty bearers on consequences they can face when found guilty of sexual exploitation and abuse of the Cyclone Freddy survivors.

g. Education:

The project was dominated by information dissemination which helped to enlighten the women, girls, boys and men on their freedoms and rights during such contexts that need humanitarian support and also their responsibilities on guarding each other. Cyclone Freddy survivors became aware that getting humanitarian support is their right and ought to get it without being denied of their dignity. Project beneficiaries also learnt on Sexual exploitation and abuse reporting channels, the referral pathways and how they are supposed to be handles at every office along the pathway. The use of placards and information boards helped to have powerful messages permanently erected in the area's strategic points which continued to remind them of their rights. The use of weekly radio programs on CHANCO radio to disseminate PSEA messages made it possible to educate over 2 million people even outside the catchment area.

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
No	No	N/A

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multi-purpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

The items which were provided to the targeted beneficiaries were not readily available at the markets within the beneficiaries reach. Most local markets were also not functional.

Parameters of the used CVA modality:

Specified CVA activity (incl. activity # from results framework above)	Number of people receiving CVA	Value of cash (US\$)	Sector/cluster	Restriction
[Fill in]	[Fill in]	US\$ [insert amount]	Choose an item.	Choose an item.
[Fill in]	[Fill in]	US\$ [insert amount]	Choose an item.	Choose an item.
[Fill in]	[Fill in]	US\$ [insert amount]	Choose an item.	Choose an item.

9. Visibility of CERF-funded Activities

Title	Weblink
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Emergency relief items donation	<u>From where I stand: "I feel safer here and my five grandchildren are safe with me" UN Women – Africa</u>
Timely relief to Cyclone Freddy	<u>Cyclone Freddy: Timely relief brings smiles to hospital patients in Malawi UN Women – Africa</u>
Life-saving donations	<u>Cyclone Freddy in Malawi: When every little thing counts to save women and girls' lives UN Women – Africa</u>
Cushioning effects of Cyclone Freddy	<u>https://x.com/unwomenmalawi/status/1674051330371977218?s=20</u>
Emergency relief items distribution (twitter)	<u>https://x.com/unwomenafrica/status/1663501758747009024?s=20</u>

3.3 Project Report 23-RR-FPA-007

1. Project Information			
Agency:	UNFPA	Country:	Malawi
Sector/cluster:	Health - Sexual and Reproductive Health Protection - Gender-Based Violence	CERF project code:	23-RR-FPA-007
Project title:	Provision of integrated life-saving sexual and reproductive health (SRH) and gender-based violence (GBV) mitigation and response during the Cyclone Freddy response in Malawi		
Start date:	04/04/2023	End date:	03/10/2023
Project revisions:	No-cost extension <input checked="" type="checkbox"/>	Redeployment of funds <input type="checkbox"/>	Reprogramming <input type="checkbox"/>
Funding	Total requirement for agency's sector response to current emergency:		US\$ 2,500,000
	Total funding received for agency's sector response to current emergency:		US\$ 1,934,394
	Amount received from CERF:		US\$ 600,000
	Total CERF funds sub-granted to implementing partners:		US\$ 95,000
	Government Partners		US\$ 0
	International NGOs		US\$ 0
National NGOs		US\$ 95,000	
Red Cross/Crescent Organisation		US\$ 0	

2. Project Results Summary/Overall Performance

This UNFPA project directly reached 166,103 affected people. Through this CERF UFE Grant, UNFPA and its partners established 238 Safe spaces for women and girls assisting 9,350 to participate in the safe spaces. 764 women and girls received individual counselling in the safe spaces, while 2,651 women and girls received group therapy counselling. A total of 10,950 dignity kits and 6,000 solar lamps were distributed to women and girls and in the health facilities near the camps. Through mobile clinics for SGBV services 1,707 women and 398 men received different services and 2,880 men and 10,808 women managed to access family planning commodities. 46 social workers were provided with support to conduct outreach and monitoring activities in the camps and 1,109 follow ups were conducted together with GBV awareness reaching to 161,593 people. Coordination meetings at district level were supported and 105 meetings were done throughout the response on GBV. Through these meetings, service providers were mapped and connected to each other for easy referral. The referral pathway and available helplines were disseminated through local radio and 3,000 people were reached in Chikwawa through Chivomerezi community radio and 5,000 people in Nsanje through Nnyathepa community radio. The funds also supported capacity building of GBV service providers reaching to 263 service providers in the 6 districts of Blantyre, Phalombe, Mulanje, Chiwawa, Nsanje and Zomba.

The funds also supported the Malawi Human Rights Commission to conduct an assessment and monitoring the impacts of Cyclone Freddy on pregnant and lactating mothers, adolescent girls and youth, and adolescent boys and youth in the southern region of Malawi with a human rights perspective, especially focusing on SRHR and GBV, reaching out to 26 Traditional Authorities across the most affected 6 districts.

UNFPA Malawi responded to the Tropical Cyclone Freddy disaster in Malawi through the provision of integrated life-saving sexual and reproductive health (SRH) and services during the disaster in several of the impact districts. The sexual and reproductive health component was executed by the Family Planning Association of Malawi (FPAM) to work in the earmarked districts that were heavily affected by the Tropical Cyclone Freddy.

FPAM provided outreach services that were aimed at ensuring continuity of care for family planning, maternal health services, treatment of sexually transmitted diseases, and youth friendly health services. The interventions were aimed at the provision of integrated life-saving sexual and reproductive health (SRH) in response to the Tropical Cyclone Freddy disaster in Malawi.

A total of 22,205 people were reached with a total of 4,353 in Blantyre, 8,564 people in Nsanje, 3,079 people in Phalombe, 3,522 in Mangochi, 2,878 people in Chikwawa and 7,486 in Machinga and Zomba.

3. Changes and Amendments

The Tropical Cyclone (TC) Freddy was coupled with the Cholera disaster, and it affected more districts than the intended districts. The response for the TC Freddy was multisectoral and it led to fragmentation of data as some groups of people were required to attend different sessions in the internally displaced areas and camps. There was a request for a no cost extension for 1 month to complete the outreach clinics that were planned by FPAM since clients returned to the communities earlier than planned. The no cost extension was from September 30 to October 31, 2023.

The number of other affected people reached with GBV activities was less than planned because the storm disrupted the areas including road networks and only few outreaches were able to reach the reported clients. No people with disabilities were reached for sexual and reproductive health activities because disabled people were confined, and the teams were only able to identify the reported numbers.

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Protection - Gender-Based Violence									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	36,000	14,400	34,242	12,060	96,702	38,477	13,038	38,325	12,159	101,999
Host communities	0	0	0	0	0	0	0	0	0	0
Other affected people	21,060	10,000	9,367	5,000	45,427	10,000	11,200	15,000	4,100	40,300
Total	57,060	24,400	43,609	17,060	142,129	48,477	24,238	53,325	16,259	142,299

People with disabilities (PwD) out of the total

40	30	40	20	130	48	7	70	5	130
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Sector/cluster	Health - Sexual and Reproductive Health									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	21,235	17,060	14,037	12,202	64,534	10,992	3,973	4,706	2,534	22,205
Host communities	0	0	0	0	0	0	0	0	0	0
Other affected people	500	1,008	602	200	2,310	658	459	242	240	1,599
Total	21,735	18,068	14,639	12,402	66,844	11,650	4,432	4,948	2,774	23,804

People with disabilities (PwD) out of the total

8	6	9	9	32	12	9	6	24	51
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* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

5. People Indirectly Targeted by the Project

UNFPA reached 165,843 beneficiaries through campaigns on GBV prevention and SRHR related services in the affected districts. This was coupled with outreach services on family planning, Sexually Transmitted infection treatment, and maternity services. The partners also used the local radios to disseminate messages including referral pathways and GBV help lines.

6. CERF Results Framework

Project objective	This project aims to prevent, mitigate and respond to violence (GBV), Sexual Exploitation and Abuse (SEA) and scale up access to life-saving GBV and SRH information and services in Malawi during the Cyclone Freddy disaster			
Output 1	Women and adolescents have access to life-saving quality GBV and PSEA services that prevent, respond to and mitigate violence			
Was the planned output changed through a reprogramming after the application stage? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
Sector/cluster	Protection - Gender-Based Violence			
Indicators	Description	Target	Achieved	Source of verification
Indicator 1.1	PS.2 Number of people receiving GBV psycho-social support and/or GBV case management (Camps, online help line)	142,129	142,199	Reports from partners, both awareness reports, group counselling and individual counselling, and community radio messages.
Indicator 1.2	Number of people accessing GBV referral mechanisms in the camps as well as through online GBV help line	1,000	1,109	Reports from the implementing partners. These were reached by the social workers and female service providers which were recruited to support GBV response. GBV helpline was also popularised through the community radios.
Indicator 1.3	SP.1a Number of menstrual hygiene management kits and/or dignity kits distributed	6,000	6,000	Procurement records. These were added with some funds from core resources and Republic of Korea as the demand was so enormous
Indicator 1.4	PS.1a Number of people accessing women- and girl-friendly safe spaces and/or centres	30,000	17,483	Reports from partners. The camps were decommissioned early so the number reported here is for those who were still in the camps.
Indicator 1.5	Number of GBV referral pathways strengthened to effectively identify, prevent, mitigate and respond to	300	300	Training reports from UNFPA and partners. The referrals were strengthened through

	GBV cases and disseminated in the camps			coordination meetings which partners supported 105 meetings, and capacity building to service providers which reached to 195 service providers. Chikwawa finalised all the updated phones and locations after the trainings
Indicator 1.6	Number of dignity kits procured	6,000	6,000	Procurement and distribution records.
Explanation of output and indicators variance:		Indicator 1.4, the number of people accessing women and girl friendly safe spaces and/ or centres was underreached as camps were decommissioned earlier than anticipated. For the people with disability, an estimated number of 130 PWD received information during the awareness campaigns. In addition 15 out of the estimated 130, received actual GBV services.		
Activities	Description	Implemented by		
Activity 1.1	Conduct continuous GBV risk analysis and safety audits in the camps and surrounding communities to inform strengthening coordination of GBV service provision	UNFPA and IP: All target districts – MHRC and MOGCDSW		
Activity 1.2	Strengthen and revamp existing monitoring and GBV referral mechanisms, including the online GBV crisis helpline and disseminate to the communities and in the camps,	UNFPA and IP: MOGCDSW, FOCESSE through community radios GENET, YONECO through support to Helpline volunteers		
Activity 1.3	Distribution of dignity kits to women and girls.	UNFPA and IP: GENET and MOGCDSW - Blantyre, Mulanje, Phalombe FOCESSE and MOGCDSW – Chikwawa, Zomba, and Nsanje		
Activity 1.4	Strengthen safe spaces for women and girls to ensure their safety for Systematic and confidential recording of GBV cases, provision of psychological counselling, and clinical management of rape .	UNFPA and IP: FOCESSE, GENET and Ministry of Gender Community Development and Social Welfare (MOGCDSW)		
Activity 1.5	Conducting outreach activities and dissemination of risk information on GBV through various channels, and use of cost-effective emergency communications with the affected communities to ensure wide outreach and awareness raising on GBV and SEA prevention, both in the communities and in the camps in the affected districts.	FOCESSE, GENET and MOGCDSW:		
Activity 1.6	Procure dignity kits for women and adolescent girls	UNFPA		
Activity 1.7	Monitor GBV and SRHR violations and providing redress of violations in the camps	MHRC and UNFPA, and MOGCDSW		

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Output 2 Pregnant women and adolescents have access to life saving quality maternal and neonatal basic emergency care that prevents pregnancy complications and leads to safe delivery by skilled birth attendants to mitigate trauma and other birth complications during the flood response period.

Was the planned output changed through a reprogramming after the application stage? Yes No

Sector/cluster Health - Sexual and Reproductive Health

Indicators	Description	Target	Achieved	Source of verification
Indicator 2.1	Number of adolescent girls, boys, women and men reached with SRHR services including family planning	66,844	23,644	FPAM and district reports
Indicator 2.2	Number of pregnant women and girls referred and receiving basic and comprehensive Maternal Emergency Obstetric care from the affected districts.	2,608	2,978	FPAM and district reports
Indicator 2.3	Number of nurses midwives and clinician recruited for service provision in Emergency obstetric and Neonatal Care (EMOC)	25	30	Ministry of Health human resources
Indicator 2.4	SP.2a Number of inter-agency emergency reproductive health kits delivered	8	8	UNFPA Malawi
Indicator 2.5	Number of Special Maternity winterized kits	2,000	1,900	UNFPA report. The fund were fully utilised due to difference between estimated and actual cost of procurement.

Explanation of output and indicators variance:

The response for Tropical Cyclone Freddy was executed during the same period when cholera response was being undertaken, thereby rendering separated support difficult. However, the internally displaced persons received their required SRHR services during the disaster period.

The specialised winterised maternity kits were bought by government of Korea funds, Emergency fund which were mobilised to meet the enormous demands from the survivors.

Number reached with SRHR services is below the target because of several reasons that included (a) decommissioning of camp (camps were decommissioned abruptly and hence it was a bit challenge to reach to those that had gone to other places, or other districts to live with relatives), (b) number of SRHR served people were represented partially due to delayed distribution of UNFPA International Reproductive Health Kits (it is estimated these kits will serve 35% of the target under SRHR services).

Most of the affected people in the districts of Phalombe, Machinga, Mangochi, Blantyre had moved to safer districts to live with relatives. This

		rendered the base for the SRHR support less than anticipated. As per attached excel report, Nsanje district had more camps still available there by contributing to 5839. The SRHR services are voluntary and provided without coercion, thus clients were motivated to get the services according to their willingness. The target data was set using total population of the affected personnel in the cyclone hit districts which was high at onset thus the 20% target was the 66,844. For numbers living with disability, the districts have confirmed providing SRHR services to at least 1 person living with disability during the outreaches. Thus, out of the 151 outreaches, the estimated number of PWD is 51. .
Activities	Description	Implemented by
Activity 2.1	Conduct monthly outreaches supervision and mentorship sessions on SRHR for adolescent girls and women of reproductive age including provision of family planning and maternal health services	FPAM and district health offices
Activity 2.2	Provide basic and comprehensive Emergency care for pregnant women with cholera.	FPAM and district health officer
Activity 2.3	Support recruitment of nurses and midwives for district for the provision and monitoring of pregnant women with cholera.	FPAM and district health officer
Activity 2.4	Procure International Reproductive Health Kits to save Pregnant women, adolescent girls and youth with SRHR morbidities in the affected districts	UNFPA
Activity 2.5	Print IEC materials on pregnancy care during Cholera	Ministry of Health
Activity 2.6	Distribute IEC materials on pregnancy care during cholera including antenatal care at operational facilities, hospitals, community clinics and CTU.	Ministry of Health
Activity 2.7	Distribute International Reproductive Health Kits (IARHKITS) to save Pregnant women, adolescent girls and youth with SRHR morbidities in the affected districts	UNFPA

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas⁶ often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

⁶ These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

a. Accountability to Affected People (AAP)⁷:

Affected people were involved in the design of the activities through the engagement of the District Health and Gender Officers as well as the CSO partners who have presence in the districts during the project set up, implementation and monitoring at the community level and Cyclone Freddy camp sites. UNFPA and its partners ensured flexibility during implementation and adjust implementation where acceptable, for instance, the dignity kits were adjusted to include winterised blankets because of the harsh weather conditions, furthermore, UNFPA looked for other resources to top up the procurement of dignity kits to help meet the enormous demand from the affected population.

Additional social workers and mentors were recruited and supported to conduct more follow ups to the affected women and girls. Young people especially adolescent girls and young women through the safe spaces were engaged and trained as foot soldiers to identify and report any incidences of violence in their camps. This initiative targeted APs especially the women and girls of reproductive age, health providers and other GBV service providers to effectively ensure women and girls have access to life-saving SRH and GBV interventions and through the District Level Protection Committees, marginalized and vulnerable groups participated fully in the programme to ensure accountability to those most affected. Furthermore, community structures especially the safe space mentors and psychosocial counsellors were targeted effectively to help monitor and protect the rights of women and girls from SEA and restore their dignity. Primary beneficiaries will be women, girls and men and other vulnerable groups. Partners such as the Ministry of Health, MoGCDSW, MHRC and the Police officers were trained for the referral mechanisms and day-to-day monitoring of the GBV response.

b. AAP Feedback and Complaint Mechanisms:

Through the community outreach activities, communities' knowledge on their rights, services and complaint mechanisms available was enhanced, they were empowered to exercise their rights to ensure their social-economic development. UNFPA through the MHRC gathered information about the perceptions of the affected community in regard to women and girls' access to GBV and SRH services. The report will inform better targeting to ensure that the rights of women and girls are always protected in humanitarian settings.

c. Prevention of Sexual Exploitation and Abuse (PSEA):

UNFPA conducted training of service providers on PSEA and collaborated with UNICEF to patriate PSEA officers/ trained protection volunteers from other districts to support the affected districts to strengthen the GBV prevention and response interventions. PSEA SOPs were developed as part of the GBV SOPs and trained to ensure that communities and service providers are aware and forewarned on SEA, so as to quickly access functional complaint and feedback structures in anticipation of possible SEA cases. UNFPA and its partners have strict policies and procedures in place that protect victims' privacy as well as to ensure quick and accessible access to GBV related services.

d. Focus on women, girls and sexual and gender minorities, including gender-based violence:

The project made deliberate efforts to reach adolescent girls who are the most vulnerable during disasters as families are disrupted. The inclusion of safe space- mentorship activities in the project ensured that adolescent girls are reached with correct information, available services and can report for any GBV issues taking place in their areas. The dignity kits supported their physical needs and the girls would participate in activities with empowered spirit as biological needs and dignity were restored. A total of 17,483, accessed the safe spaces whilst a total of 142,199 people received psychosocial counselling, GBV case management and other GBV related services including family planning. The project also provided Male and Female Condoms for self-protection, HIV prevention and prevention of unintended pregnancy as a protection measure.

e. People with disabilities (PwD):

⁷ AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the [IASC AAP commitments](#).

The project identified potential barriers faced by persons with disabilities when accessing services and made all efforts to reach them.

However, from the numbers that were reached, only a few were those with disabilities. This is due to the high magnitude of the cyclone disaster which made it impossible for those with disabilities to come out from their homes, and consequently, mobility of service providers was also a big challenge.

f. Protection:

All interventions were Protection focused and ensured that AP and at-risk groups are at the centre of program design, implementation and monitoring.

g. Education:

N/A

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
No	No	0

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multi-purpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

UNFPA had not rolled out the guidelines for CVA, but now the guidelines have been shared and we have been well oriented, hence may be considered in the next response.

Parameters of the used CVA modality:

Specified CVA activity (incl. activity # from results framework above)	Number of people receiving CVA	Value of cash (US\$)	Sector/cluster	Restriction
N/A	N/A	US\$ N/A	Choose an item.	Choose an item.

9. Visibility of CERF-funded Activities

Title	Weblink
<i>Lifesaving ambulance services</i>	https://malawi.unfpa.org/en/news/ride-life-ambulance-services-offer-life-saving-rides-pregnant-women-middle-tropical-freddy
<i>Devastating path of TC Freddy</i>	https://malawi.unfpa.org/en/news/i-prayed-my-family-would-make-it-out-mud%C2%A0hit-house-cyclone-freddys-devastating-path-malawi
<i>Hope and resilience during TC Freddy</i>	https://malawi.unfpa.org/en/news/journey-hope-and-resilience-my-experience-cyclone-freddys-response-and-aftermath

3.4 Project Report 23-RR-HCR-007

1. Project Information			
Agency:	UNHCR	Country:	Malawi
Sector/cluster:	Shelter and Non-Food Items	CERF project code:	23-RR-HCR-007
Project title:	Life Saving Emergency Response to Tropical Cyclone Freddy affected Internally Displaced Persons (IDPs) in Mulanje, Phalombe and Blantyre Districts of Southern Malawi.		
Start date:	15/03/2023	End date:	14/09/2023
Project revisions:	No-cost extension <input type="checkbox"/>	Redeployment of funds <input type="checkbox"/>	Reprogramming <input type="checkbox"/>
Funding	Total requirement for agency's sector response to current emergency:		US\$ 1,900,000
	Total funding received for agency's sector response to current emergency:		US\$ 78,800
	Amount received from CERF:		US\$ 500,000
	Total CERF funds sub-granted to implementing partners:		US\$ 15,919.09
	Government Partners		US\$ [Fill in]
	International NGOs		US\$ [Fill in]
National NGOs		US\$ 15,919.09	
Red Cross/Crescent Organisation		US\$ [Fill in]	

2. Project Results Summary/Overall Performance

UNHCR, with funding from CERF, conducted an identification and profiling exercise for internally displaced people in Malawi. The exercise identified and profiled 9,726 households, consisting of 12,480 beneficiaries, in the districts of Mulanje, Phalombe, and Blantyre. The collected data included biometric data, household composition, specific needs, and location to ensure accurate identification of beneficiaries during the distribution of assistance. The profiling helped UNHCR allocate resources effectively and ensure that assistance was provided to those who needed it the most. The biometric data ensured that the assistance was distributed to the correct individuals and that there was no duplication or diversion of resources.

During the project implementation, 80 profiled households were not available to collect their multipurpose cash on three separate occasions. Consequently, the remaining cash was utilized to procure Non-Food Items (NFIs) consisting of 1,500 blankets and 3,000 20L buckets. The NFIs were distributed to two IDP camps namely Nanchidwa and Namalanda. A total of 745 households, consisting of 542 females and 203 males, representing 3,948 individuals benefited from the NFI distribution exercise. UNHCR also released 20 bales of mixed second-hand clothing valued at USD 9,120 from its warehouse to add to the package distributed to the beneficiaries. UNHCR also conducted post-distribution monitoring physically and remotely through phone calls in all distribution sites.

The provision of cash for shelter materials assisted in reducing overcrowding in IDP camps in Mulanje, Phalombe, and Blantyre. This allowed beneficiaries to purchase the materials they needed to improve their living conditions, which was particularly beneficial for vulnerable groups such as people with disabilities, pregnant and breastfeeding women, the elderly, survivors of gender-based violence, unaccompanied and separated children, the chronically ill, female-headed households, women, and girls. The provision of cash assistance also helped to reduce insecurity and gender-based violence in the camps. Additionally, the provision of multipurpose cash assistance supported beneficiaries with basic needs, allowing them to live with dignity.

3. Changes and Amendments

The project had initially aimed to assist 4,000 households of 20,000 individuals including 9,000 individuals in Phalombe, 9,000 individuals in Mulanje, and 2,000 individuals in Blantyre. Based on the national average family size, it was estimated that there would be a minimum of 5 individuals per household. However, the project benefitted 9,646 households comprising 12,377 individuals who received the multipurpose cash, and 745 households of 3,948 individuals with in-kind assistance. This variation can be attributed to the challenges encountered during the beneficiary profiling process. Most households only sent one or two representatives despite being requested to attend the registration with all their members. The reason behind this was that many family members had already returned to their places of origin following the government's decision to decommission the IDP camps. As a result, there was an increase in the number of households and a decrease in the total number of registered individuals.

Despite some minor variations, the total aid package remained consistent with the original plan amounting to USD 363,650. This included USD 342,628.84 in multi-purpose cash for shelter and NFIs as well as USD 21,021 (undistributed cash for 80 households who did not show up during distribution) worth of in-kind support in the form of non-food item distribution. The transfer value per household varied depending on the number of individuals in each household and recommendations from the Cash Working Group. In Blantyre and Mulanje districts, the transfer value ranged from MWK 55,957 (\$54) up to MWK 108,806 (\$105), while in Phalombe district, it ranged from MWK 31,000 (\$30) up to MWK 84,350 (\$81). These values were based on the endorsed harmonized package of relief items for multi-purpose cash transfer values per sector by DoDMA. 80 profiled households were not available to collect their multipurpose cash on three separate occasions so their cash was used to procure CRIs which were distributed to the 745 HHs.

During the profiling exercise conducted in most of the camps, it was observed that a significant number of vulnerable people with disabilities (PwD) were among those who had lost their homes and belongings due to the cyclone. As a result, the project reached a larger number of people with disabilities than initially planned.

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Shelter and Non-Food Items									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	6,000	3,000	7,000	4,000	20,000	8,300	2,195	1,419	1,231	13,145
Host communities	0	0	0	0	0	0	0	0	0	0
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	6,000	3,000	7,000	4,000	20,000	8,300	2,195	1,419	1,231	13,145
People with disabilities (PwD) out of the total										
	40	30	60	50	180	207	69	56	54	386

* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

5. People Indirectly Targeted by the Project

The provision of cash for shelter had a positive impact on local businesses in the intervention areas. As per the post distribution report, 99% of the beneficiaries reported being able to find essential items within their localities. This means that the internally displaced persons (IDPs) were able to use the cash to purchase construction materials and/or other basic items from the local community. It can therefore be estimated that over 200,000 people indirectly benefited from this project through various exchanges on the market. Additionally, the cash assistance helped the IDPs to move out of the schools. About ten camps that were reached were hosted in schools and as a result over 7,000 learners were able to resume classes after their schools had been reopened.

6. CERF Results Framework

Project objective	To provide 20,000 Vulnerable Internally Displaced Persons in Camps in Mulanje, Phalombe and Blantyre with cash assistance for Shelters and Core Relief Items to support their basic needs.			
Output 1	Vulnerable people in IDP camps are provided with cash for shelter			
Was the planned output changed through a reprogramming after the application stage? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
Sector/cluster	Shelter and Non-Food Items			
Indicators	Description	Target	Achieved	Source of verification
Indicator 1.1	Cash.2a Number of people receiving sector-specific unconditional cash transfers	20,000	12,377	UNHCR Cash assistance tool Financial service provider reconciliation reports
Indicator 1.2	Cash.2b Total value of sector-specific unconditional cash transfers distributed in USD	145,750	145,750	UNHCR Cash assistance tool Financial service provider reconciliation reports
Indicator 1.3	PP.1b Number of people accessing protection referral mechanisms and/or pathways	20,000	12,480	UNHCR registration tool, ProGres, Internal mission reports, Daily mission briefs.
Indicator 1.4	Cash.6 Percentage of women reporting shared decision making on cash transfer use	80	80	PDM Report
Indicator 1.5	Cash.7 Percentage of people (e.g. agro-dealers/retailers/suppliers/traders) who report an increase in goods sales compared to before the cash intervention	100	99	PDM Report
Indicator 1.6	PG.1 Number of human rights and/or protection monitoring missions, analyses and/or reports that inform the humanitarian response	6	8	Mission reports

Explanation of output and indicators variance:		Indicator 1.1 UNHCR had planned to support 20,000 individuals based on Malawi's average family size 5. However, the number of households increased from 4,000 to 10,391 (9,646 for cash and 745 for NFIs) as most households that were hosted in the IDP sites were Family Size 1.
Activities	Description	Implemented by
Activity 1.1	Profiling the targeted beneficiaries	A team of 10 data clerks was hired to collect and profile the data of IDPs. The team was supervised by three UNHCR staff members, who had distinct roles in the data collection process. One staff managed data and provided technical leadership, while the other provided IT support to ensure the necessary technical infrastructure and equipment were in place for data capturing. The third team member was a protection officer, who ensured the protection and rights of the IDPs throughout the data collection process and handled any issues that arose during the exercise.
Activity 1.2	Cash disbursement to the targeted beneficiaries	Cash disbursement was conducted by UNHCR staff with the support of officials from the District Disaster Management Office and members of the village civil protection committees (VCPC). The biometric data collected during the profiling exercise ensured that the assistance was distributed to the right individuals and that there was no duplication or diversion of resources.
Activity 1.3	Post- Distribution Monitoring and reporting	A team of two data clerks were recruited to assist with data collection of the post distribution monitoring. The PDM was conducted both physically in the distribution sites and remotely, through phone calls.

Output 2 Vulnerable people in IDPs are provided with multi-purpose cash to enable access to household Non-Food Items

Was the planned output changed through a reprogramming after the application stage? Yes No

Sector/cluster	Shelter and Non-Food Items			
Indicators	Description	Target	Achieved	Source of verification
Indicator 2.1	Cash. 1a Number of people receiving multi-purpose cash	20,000	12,377	UNHCR Cash assistance tool Financial service provider's reconciliation reports
Indicator 2.2	Cash. 1b Total value of multi-purpose cash distributed in USD	217,900	217,900	UNHCR Cash assistance tool Financial service provider reconciliation reports
Indicator 2.3	PP.1b Number of people accessing protection referral mechanisms and/or pathways	20,000	12,480	UNHCR registration tool, ProGres, Internal mission reports, Daily mission briefs.

Indicator 2.4	Cash.6 Percentage of women reporting shared decision making on cash transfer use	80%	80%	PDM Report
Explanation of output and indicators variance:		UNHCR had planned to support 20,000 individuals based on Malawi's average family size of 5. However, the number of households increased from 4000 to 10,391 (9646 for cash and 745 for NFIs) as most households that were hosted in the IDP sites were Family Size 1.		
Activities	Description	Implemented by		
Activity 2.1	Profiling the targeted beneficiaries	A team of 10 data clerks was hired to collect and profile the data of IDPs. The team was supervised by three UNHCR staff members, who had distinct roles in the data collection process. One staff managed data and provided technical leadership, while the other provided IT support to ensure the necessary technical infrastructure and equipment were in place for data capturing. The third team member was a protection officer, who ensured the protection and rights of the IDPs throughout the data collection process and handled any issues that arose during the exercise.		
Activity 2.2	Cash disbursement to the targeted beneficiaries	Cash disbursement was conducted by UNHCR staff with the support of officials from the District Disaster Management Office and members of the village civil protection committees (VCPC). The biometric data collected during the profiling exercise ensured that the assistance was distributed to the right individuals and that there was no duplication or diversion of resources.		
Activity 2.3	Post- Distribution Monitoring and reporting	A team of two data clerks were recruited to assist with data collection of the post distribution monitoring. The PDM was conducted both physically in the distribution sites and remotely, through phone calls.		

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas⁸ often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

a. Accountability to Affected People (AAP)⁹:

⁸ These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

⁹ AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the [IASC AAP commitments](#).

UNHCR involved the affected people through the village civil protection committees (VCPC), village development committee (VDC) and the District Civil Protection Committee (DCPC) in the identification of beneficiaries and mobilizing the communities for registration and cash distribution. Persons with specific needs such as elderly persons, pregnant women, people with disabilities, and child-headed households were considered and prioritized at registration and distribution with the help of the VCPC. These specific needs were recorded on their profile.

Prior to start of the registration of beneficiaries, and cash distributions, the affected people were informed on the process flow, entitlement ranges during distribution, available feedback and response mechanisms in place and key messages that all our services are free and on SEA. Post distribution monitoring was undertaken to evaluate the whole response and learn from what went well, and the gaps identified.

b. AAP Feedback and Complaint Mechanisms:

A protection/litigation desk was set up at each registration/cash distribution point (CDP) and managed by the protection staff in the team. Community members from the VCPC and VDC were engaged and located at strategic points at the distribution sites i.e., verification point, cash collection, cash confirmation and the help desk to support with complaints related to eligible families and verifying issues of absentees/ no shows. Majority of issues handled were of identity not being found using biometrics, especially for the elderly which was resolved by verifying with the picture and information in the database and for the rest of the beneficiaries verifying with their National ID or committee/community leader if they did not have the ID. Two follow-up missions were held to serve the people that did not show up on first round of distribution.

c. Prevention of Sexual Exploitation and Abuse (PSEA):

UNHCR conducted a prevention of sexual exploitation and abuse (PSEA) and fraud awareness orientation for the staff recruited to support the registration and cash distribution exercise before the commencement of project as a measure to protect the affected people and reduce the risks of SEA occurring during implementation. A protection staff was part of the team during registration and distribution to manage the protection help desk and was aware of the reporting procedures in case a case of SEA was reported. Fortunately, no incidents were reported throughout the implementation of the project.

d. Focus on women, girls and sexual and gender minorities, including gender-based violence:

The project aimed to support vulnerable groups, focusing on women, girls, and sexual and gender minorities among other groups. By providing cash directly to these groups, they were able to gain control over their financial resources, which is crucial for decision-making power within their households and communities. Additionally, the cash received from UNHCR helped to address economic disparities, contributing to social inclusion, and promoting the rights and dignity of these marginalized groups. Direct cash support has the potential to empower women and girls to leave abusive situations, promoting protection and safety. This is especially relevant for sexual and gender minorities who often face violence in Malawian communities due to their identity. Therefore, cash distribution has catalyzed positive change by addressing economic disparities, fostering independence, and empowering women, girls, and sexual and gender minorities to actively participate in shaping their lives and communities.

e. People with disabilities (PwD):

During the beneficiary identification process, UNHCR took into consideration the specific needs of individuals and their families. UNHCR prioritized those who required urgent assistance, including people with disabilities, elderly individuals, and single-headed households.

To ensure that the distribution process was accessible to all, the disbursements were conducted in accessible sites and rooms. This allowed beneficiaries to receive their cash in a safe and secure environment. Additionally, people with disabilities were given priority and received their cash before others.

In cases where individuals were unable to receive their cash on their own, trusted family members were identified with the assistance of the village civil protection committees (VCPC). This was done to ensure the cash was delivered to the intended beneficiaries and mitigate

potential risks that could harm them. The VCPCs played a crucial role in identifying trusted family members and ensuring that the distribution process was fair and transparent.

f. Protection:

During Cyclone Freddy, protection measures were integrated into the profiling and cash distribution process to ensure the safety and well-being of all affected individuals. Community engagement strategies were employed to identify and prioritize the needs of diverse individuals. Anti-fraud measures were put in place to protect beneficiaries, and awareness was raised to inform communities of their rights and available support services. The integration of protection measures had significant positive outcomes, including increased access to resources and reduced exposure to exploitation for vulnerable populations. During the profiling and distribution of cash, no instances of gender-based violence were reported. The multipurpose cash disbursed not only addressed immediate financial needs but also fostered a protective environment that contributed to the overall well-being of the affected population.

g. Education:

NA

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
Yes, CVA is a component of the CERF project	Yes, CVA is a component of the CERF project	12,377

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multipurpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

UNHCR disbursed USD 342,628.84 multipurpose cash to the beneficiaries to support them with basic shelter and NFIs to recover from the impact of Tropical Cyclone Freddy. There were linkages to social protection systems at the district level. The project used district social protection registers in the identification of beneficiaries. Further, the district social protection structures were used in the supervision of the process from profiling to distribution of cash. 80 profiled households were not available to collect their multipurpose cash on three separate occasions so their cash was used to procure CRIs which were distributed to the 745 HHs.

Parameters of the used CVA modality:

Specified CVA activity (incl. activity # from results framework above)	Number of people receiving CVA	Value of cash (US\$)	Sector/cluster	Restriction
Multipurpose Cash for NFI and shelter	12,377	US\$ 342,628.84	Shelter and Non-Food Items	Unrestricted

9. Visibility of CERF-funded Activities

Guidance (to be deleted): Please list weblinks to publicly available social media posts (Twitter, Facebook, Instagram, etc.), videos and/or success stories, evaluations or other kind of reports on the agency's websites covering CERF-funded activities under this project.

Title	Weblink
Facebook Post	UNHCR Malawi
Twitter Post	https://x.com/unhcrmalawi/status/1734182963795955794?s=20
[Insert]	[Insert]

3.5 Project Report 23-RR-CEF-009

1. Project Information			
Agency:	UNICEF	Country:	Malawi
Sector/cluster:	Water, Sanitation and Hygiene Protection - Child Protection	CERF project code:	23-RR-CEF-009
Project title:	Tropical Cyclone Flood Response in Malawi		
Start date:	01/04/2023	End date:	30/09/2023
Project revisions:	No-cost extension <input type="checkbox"/>	Redeployment of funds <input type="checkbox"/>	Reprogramming <input type="checkbox"/>

Funding	Total requirement for agency's sector response to current emergency:	US\$ 2,500,000
	Total funding received for agency's sector response to current emergency:	US\$ 2,351,000
	Amount received from CERF:	US\$ 1,900,000
	Total CERF funds sub-granted to implementing partners:	US\$ 449,889
	Government Partners	US\$ 89,268
	International NGOs	US\$ 141,515
National NGOs	US\$ 219,106	
Red Cross/Crescent Organisation	US\$0	

2. Project Results Summary/Overall Performance

WASH

With the CERF funding, UNICEF implemented lifesaving interventions among flood affected populations in the six most affected target districts. Through its implementing partners UNICEF reached 606,565 people (314,903 F & 291,662 M) with safe water through household water treatment using chlorine in sites that hosted internally displaced people (IDP) and host communities. A total of 606,565 people benefited from other critical WASH supplies that included buckets for water collection and storage, soap for hand washing and tarpaulins for construction of temporary latrines and bath shelters. These supplies were distributed in IDP's camps, schools, and health care facilities.

UNICEF conducted water quality testing of water sources using bacteriological tests and residual chlorine tests to monitor household use of chlorine. Altogether, 1,222 tests were done (162 at water sources and 1,060 at households), informing ed to inform interventions including targeted behaviour change messaging and disinfection of contaminated water sources. A total of 432 communal latrines and bathing facilities were constructed aiding 5,600 people to access and use appropriate sanitation facilities in the IDPs sites. In addition, a total of 606,565 people received hygiene messages through door-to-door hygiene promotion, campaigns and radio messaging, coupled with the distribution of soap and chlorine.

As a co-lead for the WASH cluster led by the government, UNICEF played a crucial role in facilitating much-needed coordination among humanitarian actors. UNICEF as a co-lead, supported government in managing the cluster plans, facilitating information sharing by managing 5W matrix, setting weekly cluster meeting agendas, and providing overall support to the WASH cluster and weekly meetings. The WASH Cluster Coordinator was stationed in Blantyre close to most of the flood affected district to provide timely coordination support.

Protection

The focus of UNICEF Child Protection in response to Tropical Cyclone Freddy was (i) provision of non-specialized mental health and psychosocial support services, (ii) case management of those impacted by the Tropical Cyclone Freddy and (iii) prevention and response to violence and abuse of the affected populations through raising awareness and activation of community-based complaints and feedback mechanisms. Overall, the CERF project made it possible for 358,806 people that were affected by the Cyclone Freddie related floods to be reached with protection services. This includes 113,475 children, parents, and primary caregivers that were provided with community-based mental health and psychosocial support, child protection services, and referrals in 170 children's corners as well as in camps and host communities. Among these, 30,009 children that were observed to be at risk of violence and abuse, were provided with case management services such as home visits, provision of direct support such as clothing and counselling and guidance to caregivers.

Another 110,000 people were reached with GBV risk mitigation and response interventions which included community policing services in camps and communities, mobile victim support units and mobile court services. UNICEF supported CERF funded awareness activities and community mobilisation interventions on prevention of sexual exploitation and abuse (PSEA) reached 523,907 people directly and indirectly.

Catharsis sessions were conducted at camps, children's corners, and in communities to engage with affected communities, allowing them to share the challenges they had been facing. For instance, a girl from T/A Chapananga was withdrawn from marriage, referred for psychosocial support, and successfully re-enrolled back in school after being married off by her father. Similarly, two boys from T/A Chimombo, who lost their sibling when their house collapsed during Cyclone Freddy, were referred for psychosocial support.

A key outcome achieved through child protection interventions is the change in attitude amongst community members on child protection violations. It is being observed that community members in the target areas are actively taking part in reporting cases of child abuse. For example, communities around Ngabu in Chikwawa were able to call UNICEF to intervene in a case where a teacher had sexually abused a schoolgirl. Communities also demanded that the girl be attended at the local health centre after official working hours despite resistance by the facility personnel.

3. Changes and Amendments

The WASH component of the project reached more than planned because there were some savings which were encountered during implementation due to exchange rate.

Under child protection, most of the targets were exceeded because of the strategies that were employed. Empowerment of the police working together with the Judiciary and Social Welfare at district level enabled wider outreach with awareness and GBV risk mitigation interventions such as mobile victim support services and courts. The strategy also enabled wider reach with awareness interventions. Working through Ministry of gender, Community Development and Social Welfare child protection workers were also deployed to affected areas ensuring wider reach with case management and mental health and psychosocial support services.

In addition, the planned target did not include the surrounding communities, hence the additional population reached from the surrounding communities which resulted in over achievement.

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Water, Sanitation and Hygiene									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	114,993	99,494	127,288	124,257	466,032	114,993	99,494	127,288	124,257	466,032
Host communities	0	0	0	0	0	0	0	0	0	0
Other affected people	32,553	28,387	36,510	36,607	134,057	34,412	30,800	38,210	37,111	140,533
Total	147,546	127,881	163,798	160,864	600,089	149,405	130,294	165,498	161,368	606,565
People with disabilities (PwD) out of the total										
	1,400	1,200	3,600	3,600	9,800	1,400	1,200	3,600	3,600	9,800
Sector/cluster	Protection - Child Protection									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	71,304	68,508	38,981	37,855	216,648	87,259	86,243	94,505	90,799	358,806
Host communities	0	0	0	0	0	0	0	0	0	0
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	71,304	68,508	38,981	37,855	216,648	87,259	86,243	94,505	90,799	358,806
People with disabilities (PwD) out of the total										
	7,843	7,535	4,287	4,164	23,829	9,598	9,487	10,396	9,988	39,469

* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

5. People Indirectly Targeted by the Project

None

6. CERF Results Framework

Project objective Provision of multi-sector assistance for the most flood affected population

Output 1 WASH response is provided to the Flood affected population in 6 targeted districts

Was the planned output changed through a reprogramming after the application stage? Yes No

Sector/cluster	Water, Sanitation and Hygiene			
Indicators	Description	Target	Achieved	Source of verification
Indicator 1.1	WS.6 Number of people accessing sufficient and safe water for drinking, cooking and/or personal hygiene use as per agreed sector standard	400,000	606,565	5 Ws, Field Reports
Indicator 1.2	WS.19 Percentage of households that can demonstrate effective treatment of their water to meet the recognized standards for water quality	80	87	5 Ws, Field Reports
Indicator 1.3	No of water sources sampled to assess water quality	1,200	1,222	5 Ws, Field Reports
Indicator 1.4	WS.13 Number of communal sanitation facilities (e.g., latrines) and/or communal bathing facilities constructed or rehabilitated (No of temporary latrines installed for camps, hosting communities)	400	432	5 Ws, Field Reports
Indicator 1.5	WS.16a Number of people receiving critical WASH supplies (e.g., WASH/hygiene kits)	600,089	606,565	5 Ws, Field Reports
Indicator 1.6	WS.17 Number of people receiving WASH/hygiene messaging	600,089	606,565	5 Ws, Field Reports
Indicator 1.7	AP.3b Percentage of affected people who state that they were consulted on the humanitarian response	70	23	Focus group discussions, individual dialogue and other tools
Indicator 1.8	Number of people directly reached with risk communication activities on cholera prevention and treatment, involving a 2-way dialogue (focusing on hard to reach and vulnerable with multiple reach for behaviour adoption)	600,089	606,565	Partners report

Explanation of output and indicators variance: WASH reached more than planned because there were some savings which were encountered during implementation due to exchange rate.

Activities	Description	Implemented by
Activity 1.1	Construction of new reticulated water schemes, boreholes and Rehabilitation, disinfection of water sources, water treatment at household level (Rehabilitation, disinfection of water sources (construction of at least two new reticulated water schemes; construction of at least 15 new boreholes and rehabilitation of at least 20 others)	LTA holder contractors (China Ghansu, SAWA and PBM contractors)
Activity 1.2	Awareness, training on Treatment (flushing and shock-chlorination) of affected water sources	UP, MRCS and Hygiene Village
Activity 1.3	Monitoring of water quality in affected water sources (sampling, bacteriological analysis, residual chlorine testing)	UP, MRCS and Hygiene Village
Activity 1.4	Installation of Emergency latrines in communities and camps	UP, MRCS and Hygiene Village
Activity 1.5	Procurement and distribution of WASH kits (buckets, soap, water treatment chemical, sanitary pads ..ect)	UP, MRCS and Hygiene Village
Activity 1.6	Promote hygiene practices and handwashing through door-to-door mobilization of community volunteers	UP, MRCS and Hygiene Village
Activity 1.7	Strengthen community feedback collection, analysis, information sharing and closing the feedback loop	UP, MRCS and Hygiene Village
Activity 1.8	Support adaptation/revision of RCCE plans based on community feedback and on various sector intervention areas such prevention and control, WASH, case management, building trust in cholera treatment centers, early health seeking services and ORPs, OCVs (if available), incorporating or adjusting as per the community feedback	UP, MRCS and Hygiene Village

Output 2 Vulnerable children and women receive lifesaving assistance in respond to flood and displacement protection risks (mental wellbeing, violence, abuse, exploitation, and neglect)

Was the planned output changed through a reprogramming after the application stage? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
Sector/cluster	Protection - Child Protection			
Indicators	Description	Target	Achieved	Source of verification
Indicator 2.1	H.9 Number of people provided with mental health and/or psycho-social support services	80,000	83,456	Partner 5Ws
Indicator 2.2	# People reached through GBV/CP/behavioural change community awareness to promote access to services to respond to incidents of GBV/CP in camps	180,000	110,000	Partner 5Ws
Indicator 2.3	CP.5 of safe spaces of children and women (Childrens Corners)	80	170	UNICEF

Explanation of output and indicators variance:	<p>Under child protection, most of the targets were exceeded because of the strategies that were employed. Empowerment of the police working together with the Judiciary and Social Welfare at district level enabled wider outreach with awareness and GBV risk mitigation interventions such as mobile victim support services and courts. The strategy also enabled wider reach with awareness interventions. Working through Ministry of gender, Community Development and Social Welfare child protection workers were also deployed to affected areas ensuring wider reach with case management and mental health and psychosocial support services.</p> <p>In addition, the planned target did not include the surrounding communities, hence the additional population reached</p>
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Activities	Description	Implemented by
Activity 2.1	Provision of non-specialized mental health and psychosocial support services (MHPSS) to children, caregivers and communities affected by floods	Ministry of Gender, Community Development and Social Welfare and District Social Welfare Offices
Activity 2.2	Awareness session on life saving messages on child protection by all actors responding to child protection, including SEA regarding minors and child trafficking (community radios and meetings)	Malawi Police Service, Ministry of Gender, Community Development and Social Welfare through Child Protection Workers, Youthnet and Counselling (YONECO), Malawi Human Rights Commission.
Activity 2.3	Orientation of camp managers on child protection to prevent child violence, abuse, exploitation, and neglect specifically on registration and referral of children to alternative care	Malawi Police Service, Ministry of Gender, Community Development and Social Welfare through Child Protection Workers, Youthnet and Counselling (YONECO), Malawi Human Rights Commission.
Activity 2.4	Supporting Community Child Protection Workers (CPWs) and Case Managers in provision of identification and assessment of vulnerable children and case management services to children impacted by floods (disrupted families) (communication, mobility, stationery, and upkeep)	Ministry of Gender, Community Development and Social Welfare through Child Protection Workers and District Social Welfare Offices
Activity 2.5	Enhanced security and protection and procure / distribute protection supplies (children's corners tents and kits and community policing kits) and set up of children's corners	Malawi Police Service and Ministry of Gender, Community Development and Social Welfare

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas¹⁰ often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

¹⁰ These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

a. Accountability to Affected People (AAP) ¹¹:

Through community meetings, awareness sessions, door to door visits, communities were made aware of their rights and entitlements and where to report. As a result of these sessions, several complaints were raised through the complaints boxes, online and offline feedback mechanism and channelled to appropriate duty bearers. During implementation stage the marginalised were included in the committees i.e the water point committees, which is a decision-making forum where WASH issues including feedback affecting affected populations are usually discussed and tackled. These committee members were trained on the WASH issues including AAP and how to collect feedback and share with the programme for improvement. The feedback collected was sent to the appropriate institutions for appropriate action.

Focus group discussions were conducted to engage and involve the affected population in the humanitarian response including understanding the barriers related to access. Community meetings with chiefs and faith leaders were conducted for the behaviour monitoring and sustainability of the responses.

b. AAP Feedback and Complaint Mechanisms:

Working through the Malawi Police Service, Youth Net and Counselling (YONECO) Malawi Human Rights Commission and District Social Welfare Offices, complaints and feedback boxes were placed in camps and other affected areas including schools to provide opportunity for affected populations to give feedback on the response to tropical Cyclone Freddy. Utilising prescribed guidelines on complaints and feedback mechanisms, complaints were regularly collected and acted upon by the relevant stakeholders. Through YONECO, complaint and feedback on the response were channelled to relevant offices for action. Feedback boxes were also mounted in all the camps, schools and health facilities where the affected population were given a chance to provide feedback anonymously.

Challenges faced by the affected populations after the decommissioning of the camps and their transition to host communities were collected and shared with the district councils. Vulnerable groups such as women, people with disabilities, and adolescent boys and girls expressed critical challenges during the transition period from the camp to their host communities. Confidentiality emerged as a major challenge for the affected population, limiting their engagement in community-based complaint mechanisms. This issue adversely affected the community's ability to address concerns and seek assistance.

c. Prevention of Sexual Exploitation and Abuse (PSEA):

Complaints boxes were also used for reporting of cases of sexual exploitation and abuse. In addition, humanitarian actors at national and local levels were sensitised on prevention of sexual exploitation and abuse. Community members were also sensitized on where to report cases of sexual exploitation and abuse. Over 700 social workers and 82 Environmental Health assistants as well as 22 staff from WASH NGO partners were oriented on prevention of sexual exploitation and abuse.

d. Focus on women, girls and sexual and gender minorities, including gender-based violence:

The protection response identified women and children as part of vulnerable populations. Great attention was therefore made to ensure active involvement of women and girls in the implementation of the project, i.e selection of where to site latrines and water points. Working with Malawi Human Rights Commission, a GBV risk assessment was conducted to identify GBV risks and measures that needed to be put in place to prevent GBV. Malawi Police Service through community policing was also engaged to provide protection to women and girls especially in camps. The WASH committees also ensured that women were prioritised and include in the decision-making positions.

¹¹ AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the [IASC AAP commitments](#).

e. People with disabilities (PwD):

As part of their work, child protection workers are mandated to identify and support children and people in need and link them to services. Persons with disabilities were being registered by Child Protection Workers and provided with the services they needed. These included MHPSS services and support in accessing services. Children with disabilities were being reached through children's corner activities. WASH focussed on disability friendly designs for the constructed water facilities to ensure that the people with disability can also have access to safe water.

f. Protection:

UNICEF is co-lead agency in the protection cluster. Response to Tropical Cyclone Freddy was implemented through the protection cluster. Malawi Human Rights Commission was engaged to carry out GBV Risk assessment and guide implementation of mitigation measures. Malawi Police service was also engaged to provide protection to people left vulnerable because of Tropical Cyclone Freddy. Awareness on protection and where to get services was also intensified. As a result of these interventions, community members were very vigilant on protection issues and were able to raise concerns on various issues through the complaints and feedback mechanisms that were put in place.

g. Education:

Not relevant for this project

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
No	No	N/A

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multi-purpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

Cash was planned but was not prioritised for funding under CERF. CASH interventions were thus supported by other organizations

Parameters of the used CVA modality:

Specified CVA activity (incl. activity # from results framework above)	Number of people receiving CVA	Value of cash (US\$)	Sector/cluster	Restriction
[Fill in]	[Fill in]	US\$ [insert amount]	Choose an item.	Choose an item.
[Fill in]	[Fill in]	US\$ [insert amount]	Choose an item.	Choose an item.
[Fill in]	[Fill in]	US\$ [insert amount]	Choose an item.	Choose an item.

9. Visibility of CERF-funded Activities

Title	Weblink
'I Fear No More' - Community Policing in Emergency Camps	https://www.unicef.org/malawi/stories/i-fear-no-more-community-policing-emergency-camps
United Against Abuse: Camp Leaders and Police Tackle Gender-Based Violence in Cyclone-Affected areas	https://www.unicef.org/malawi/stories/united-against-abuse-camp-leaders-and-police-tackle-gender-based-violence-cyclone-affected
Shielding cyclone survivors from waterborne diseases	https://www.unicef.org/malawi/stories/shielding-cyclone-survivors-waterborne-diseases
UNICEF supports 112,804 people in districts still battling #Cholera by providing safe water.	https://shorturl.at/sCPR7
UNICEF supporting health facilities with essential supplies and medicines including tents.	https://shorturl.at/eiTW8
#CycloneFreddy-affected some of Malawi's most vulnerable children and families isolating them from crucial services like health and nutrition.	https://shorturl.at/ajnHJ
UNICEF, in collaboration with Mother to Mothers, has reached 7,993 adolescents with reproductive health information using face-to-face mechanisms and through Virtual Mentor Mother Programme.	https://shorturl.at/jqsOR
#UNICEF provides #WASH, child protection and education support at the camp. United Nations CERF	https://shorturl.at/oxVY6
Here are some of the things you can do to stop the further spread of #Cholera. #EndCholera	https://www.facebook.com/UNICEFMw/videos/617645513620779/
UNICEF has distributed 76 ECD kits that will promote early learning for 4,000 children in the #CycloneFreddy affected districts.	https://t.ly/HeoAj
UNICEF is supporting Malawi Government to assess damages and respond to children's needs in areas of nutrition, education, protection, health, and water, sanitation and hygiene. United Nations CERF	https://t.ly/kW1vw
Through United Nations CERF and the EU Civil Protection & Humanitarian Aid support, UNICEF is working with Police Victim-Support Units to tackle gender-based violence in Chikwawa district.	https://t.ly/SeuYZ
Machinjiri Township in Blantyre has suffered heavily from the ongoing #cholera outbreak in #Malawi.	https://t.ly/ol_8r
Mobile clinics have reached more than 2,000 people in Chikwawa and Nsanje districts.	https://t.ly/5xtSo
Cholera kills very quickly, but it is easy to avoid and treat. Stop the spread of cholera, drink clean and safe water. #EndCholera #TithetseKolera	https://rb.gy/fqsavz
Prevention is better than cure and this goes for all diseases including #Cholera.	https://rb.gy/zvj1qv

UNICEF has distributed 76 ECD kits that will promote early learning for 4,000 children in the #CycloneFreddy affected districts.	https://twitter.com/MalawiUNICEF/status/1672175798260776960
UNICEF supported 112,804 people in districts still battling #Cholera by providing safe water.	https://twitter.com/MalawiUNICEF/status/1697256739375358408
With support from @UNCERF and @eu_echo, #UNICEF is working with the Malawi Police to protect #children and women in disaster zones.	https://twitter.com/MalawiUNICEF/status/1719272774487744604
Every #child has the right to live free from violence and abuse.	https://twitter.com/MalawiUNICEF/status/1673297884911902722
K4.5bn for cyclone response	https://mwnation.com/k4-5bn-for-cyclone-response/

3.6 Project Report 23-RR-WFP-006

1. Project Information			
Agency:	WFP	Country:	Malawi
Sector/cluster:	Food Security - Food Assistance Common Services - Logistics	CERF project code:	23-RR-WFP-006
Project title:	Food assistance and logistics response to Tropical Cyclone Freddy		
Start date:	19/03/2023	End date:	18/09/2023
Project revisions:	No-cost extension <input type="checkbox"/>	Redeployment of funds <input type="checkbox"/>	Reprogramming <input type="checkbox"/>
Funding	Total requirement for agency's sector response to current emergency:	US\$ 27,000,000	
	Total funding received for agency's sector response to current emergency:	US\$ 1,000,000	
	Amount received from CERF:	US\$ 1,400,000	
	Total CERF funds sub-granted to implementing partners:	US\$ 101,974	
	Government Partners	US\$ 0	
	International NGOs	US\$ 57,610.28	
	National NGOs	US\$ 44,364.00	
Red Cross/Crescent Organisation	US\$ 0		

2. Project Results Summary/Overall Performance

WFP's project objective was to save lives and reduce the impact of the floods on the food security of affected population in the affected districts, and ensure that vulnerable populations, including women, children, the elderly and people with disabilities have access to adequate resources and prevent households from sliding further into severe vulnerabilities and reverting to negative coping mechanisms.

WFP achieved all planned targets within the stipulated project period. The targeted 145,500 people from Nsanje, Chikwawa, Phalombe and Mulanje districts were reached with 658.7 mt of food assistance by the end of June 2023. Due to delayed arrival of commodities in the country, challenges with targeting and verification of beneficiaries in some areas and quality checks and assurance for the commodities bought locally, the distributions took longer than planned to complete. Based on food pricing at the time, this procurement represents 39.7 mt of food less than WFP anticipated being able to buy in our initial indicator. All budget was used. In total, through CERF and other funds WFP has reached a total of 709,000 people. This goes beyond the originally planned caseload given Government was able to provide the maize ration and WFP provided complementary in-kind support to complete the food basket. WFP and partners maintained functional feedback mechanisms including helpdesks and posters with information about the helpline at all food distribution points. WFP post-distribution monitoring revealed that of the 457 interviewed households, three reported security challenges related to attempts by other people to take their food assistance despite measures taken by WFP and its implementing partners. In terms of safety levels, nearly all households rated their participation in WFP's response as very safe, with only one household expressing concerns.

On logistics support, CERF funds were used to jump start the response, supporting helicopter operations and other transport (road/boat) needs. Specifically, over 90% of all formal support requests were met and 700mt of food and NFI was transported cumulatively by boat, road, and air. From March until June 2023, this figure stood at 550mt. The remainder occurred from July to September. This represents a 17% increase on WFPs original target. Of this, 152.4 mt of life saving humanitarian relief items were also transported by helicopter to inaccessible sites in Southern Malawi, after the cyclone severely damaged road infrastructure hindering delivery of relief items.

3. Changes and Amendments

In the initial proposal, WFP suggested it might undertake cash-based transfers instead of or in addition to in kind food and aid distributions. This did not happen. Based on the market functionality assessment index done after the cyclone had hit, it showed that some areas the markets were less functional, and provision of CBT could pose a challenge for the affected households to access food commodities hence in-kind modality was adopted. All beneficiaries were reached with in kind support.

The logistics support budget allocated for deployment of mobile storage units and related staff costs. These were not required so therefore more funds could be utilised for cargo transport.

Based on food pricing at the time, 658.7 mt of food assistance was distributed by the end of June 2023. This procurement represents 39.7 mt of food less than WFP anticipated being able to buy at proposal stage, due to fluctuations in market prices.

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Common Services - Logistics									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	0	0	0	0	0	0	0	0	0	0
Host communities	0	0	0	0	0	0	0	0	0	0
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	0	0	0	0	0	0	0	0	0	0
People with disabilities (PwD) out of the total										
	0	0	0	0	0	0	0	0	0	0
Sector/cluster	Food Security - Food Assistance									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	18,211	25,736	20,520	21,033	85,500	18,211	25,736	20,520	21,033	85,500
Host communities	0	0	0	0	0	0	0	0	0	0
Other affected people	12,780	18,060	14,400	14,760	60,000	12,780	18,060	14,400	14,760	60,000
Total	30,991	43,796	34,920	35,793	145,500	30,991	43,796	34,920	35,793	145,500
People with disabilities (PwD) out of the total										
	3,595	5,080	4,050	4,152	16,877	3,595	5,080	4,050	4,152	16,877

* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

5. People Indirectly Targeted by the Project

In kind distributions are attributable directly. For the provided logistical support, the project targeted humanitarian organisations and other key partners to enable the coordination and delivery of critical relief items to support affected populations.

6. CERF Results Framework

Project objective	The overall objective of the project is to save lives and reduce the impact of the floods on the food security of affected population in the affected districts, and ensure that vulnerable populations, including women, children, the elderly and people with disabilities have access to adequate resources and prevent households from sliding further into severe vulnerabilities and reverting to negative coping mechanisms.			
Output 1	Food assistance is distributed in sufficient quantity and quality and in a timely manner to targeted beneficiary households			
Was the planned output changed through a reprogramming after the application stage? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
Sector/cluster	Food Security - Food Assistance			
Indicators	Description	Target	Achieved	Source of verification
Indicator 1.1	FN.1a Number of people receiving in-kind food assistance	145500	145500	Partner reports
Indicator 1.2	FN.1b Quantity of food assistance distributed in MT	698.4	658.7	Partner reports
Indicator 1.3	Total number of food distribution points where there are functional CRFMs in place	100%	100%	WFP reports
Indicator 1.4	Proportion of targeted people receiving assistance without safety challenges	100%	99.35%	WFP reports
Explanation of output and indicators variance:		Based on food pricing at the time, 658.7mt of food assistance was distributed by the end of June 2023. This procurement represents 39.7 MT of food less than WFP anticipated being able to buy at proposal stage. WFP post-distribution monitoring revealed that of the 457 interviewed households, three reported security challenges related to attempts by other people to take their food assistance despite measures taken by WFP and its implementing partners.		
Activities	Description	Implemented by		
Activity 1.1	Cash-distributions (Targeting and beneficiary registration, managing cash distributions, monitoring of response and coordination with district councils)	Cash distributions did not go ahead. All direct beneficiaries received in kind food assistance.		
Activity 1.2	In-kind distributions (Targeting and beneficiary registration, managing in-kind distributions, monitoring of response and coordination with district councils)	WFP and Cooperating partners -World Vision International (Chikwawa), Malawi Red Cross Society-(Nsanje and Mulanje) and Circle for Integrated Community Development-(Phalombe)		
Activity 1.3	Field monitoring	WFP and Cooperating partners -World Vision International (Chikwawa), Malawi Red Cross Society-(Nsanje and Mulanje) and Circle for Integrated Community Development-(Phalombe)		

Activity 1.4	Community Feedback and Response Mechanisms (CFRM) put in place	WFP and Cooperating partners -World Vision International (Chikwawa), Malawi Red Cross Society-(Nsanje and Mulanje) and Circle for Integrated Community Development-(Phalombe)
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Output 2 Fill the identified logistics gaps in response to the flood emergency by providing common logistics services in order to ensure the humanitarian community may reach affected populations.

Was the planned output changed through a reprogramming after the application stage? Yes No

Sector/cluster	Common Services - Logistics			
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Indicators	Description	Target	Achieved	Source of verification
Indicator 2.1	Amount of cargo transported in support of the floods' response - mt	600 MT	700mt	Service request tracking
Indicator 2.2	Percentage of service requests that have been completed	90%	90%	Service request tracking

Explanation of output and indicators variance:	Not applicable
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Activities	Description	Implemented by
Activity 2.1	Manage a fleet of vehicles for delivery of relief items	WFP
Activity 2.2	Provide dedicated humanitarian common storage space	WFP

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas¹² often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

a. Accountability to Affected People (AAP)¹³:

For all distribution points, WFP—in collaboration with the Government and cooperating partners—establish community feedback and response mechanisms (CFRMs) including suggestion boxes, help desks, and a toll-free line. CFRMs are in line with the Government's commitment to deliver food assistance under safe and dignified conditions without exposing the affected people to further harm.

¹² These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

¹³ AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the [IASC AAP commitments](#).

As the national logistics cluster's end users are humanitarian partners, it is not possible to directly quantify accountability to affected populations for this component. The accountability of the delivery of logistic support is ensured through logistics cluster coordination meetings and general WFP monitoring from staff based in the sub-office and field offices.

b. AAP Feedback and Complaint Mechanisms:

CFRMs have a system for not only receiving, recording, and referring complaints but also for responding back to communities. WFP has mechanisms through cooperating partners to manage complaints which facilitates data compilation and real-time response monitoring. Mechanisms include helpline numbers, help desks and suggestion boxes at all distribution points. WFP strengthen implementation of CFRMs to create safe and confidential platforms for affected men, women, boys and girls to channel their grievances. For service provision-focused projects, beneficiaries can utilise CFRMs to report inappropriate conduct by drivers or other logistics officers. WFP also has a full-time Risk Management and Compliance Officer who examines any related issues of non-compliance to AAP.

Additionally, WFP has an online commodity tracking tool which is used to monitor and track relief items being stored and transported by WFP on behalf of partners. This allows partners to monitor service delivery in real-time and provide immediate feedback on WFP's performance.

c. Prevention of Sexual Exploitation and Abuse (PSEA):

WFP supported protection awareness raising and orientation of protection committees/volunteers on sexual exploitation and abuse and other protection issues, in distribution meetings and camp protection committees in the targeted flood-affected areas. WFP provided support to community feedback and response mechanisms.

WFP also continued to support cooperating partners on PSEA measures to ensure that WFP's assistance was delivered under safe and dignified conditions without causing more harm to women, girls, men and boys who are facing food insecurity.

For the service provision-focused element, beneficiaries could utilise CFRMs to report inappropriate conduct by drivers or other logistics officers. WFP has clear standard operating procedures under the CFRMs on how issues of high priority including SEA are to be handled; this includes high levels of confidentiality and also escalation of such cases to the PSEA focal points for follow up. Furthermore, prevention of sexual exploitation and abuse (PSEA) commitments is part of the contractor's agreement with external transporters contracted for the response, to ensure demonstrated internal capacity to address and respond to allegations of SEA through their policy and commitments in the agreement.

d. Focus on women, girls and sexual and gender minorities, including gender-based violence:

As part of WFP targeting, special focus went to vulnerable female-headed households, ensuring their inclusion in the project, with consideration for the principle of do no harm. In addition, sensitization took place at both the targeting and intervention stages to raise awareness on gender equality, gender-based violence, and overall protection. There were strong links to the CFRM, allowing beneficiaries to voice any concerns. No cases were referred to other stakeholders (Department of Social Welfare or UN Women) for support.

On logistics, WFP advocated with Government and humanitarian partners receiving logistics and transport services, for this focus to be considered in their response activities.

e. People with disabilities (PwD):

During distributions, WFP examined the specific needs and potential protection risks for PwD. It ensured distribution sites were accessible and gave priority to PwD -- in particular women and girls with disabilities -- without exposing the affected people to further harm. Planned accountability activities were strictly implemented in compliance with the Core Humanitarian Standards on Quality and Accountability. For logistics service provision, to the extent possible WFP advocated with Government and humanitarian partners receiving logistics support to ensure access to persons with disabilities at distribution sites. WFP field staff also monitored intervention sites to ensure that essential needs of PwD including accessibility and inclusion were considered.

f. Protection:

Through this intervention, WFP conducted protection awareness raising and orientation of protection committees/volunteers on sexual exploitation and abuse and other protection issues efforts for both distribution and camp protection committees in the targeted flood-affected areas. WFP provided CFRMs to solicit and respond to beneficiary and community members' feedback. WFP also ensured that key actors involved in the logistics service provision including the transporters, were briefed on humanitarian principles including on protection and dignified assistance.

g. Education:

N/A. Nor the Government of Malawi or other partners, requested WFP support in this manner. WFP did not provide logistics and transport services to deliver education or rebuilding materials for affected schools.

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
No	No	[Fill in]

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multi-purpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

CVA wasn't considered because the market functionality assessment index done after the cyclone hit, showed that in some areas the markets were less functional, and provision of CBT or CVA could pose a challenge for the affected households to access food commodities hence in kind modality was adopted.

Parameters of the used CVA modality:

Specified CVA activity (incl. activity # from results framework above)	Number of people receiving CVA	Value of cash (US\$)	Sector/cluster	Restriction
[Fill in]	[Fill in]	US\$ [insert amount]	Choose an item.	Choose an item.
[Fill in]	[Fill in]	US\$ [insert amount]	Choose an item.	Choose an item.
[Fill in]	[Fill in]	US\$ [insert amount]	Choose an item.	Choose an item.

9. Visibility of CERF-funded Activities

Title	Weblink
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Twitter	https://twitter.com/wfp_malawi
Twitter	https://twitter.com/WFP_Malawi/status/1652979978097635330
Twitter	https://twitter.com/WFP_Malawi/status/1642599192324440064
Twitter	https://twitter.com/WFP_Malawi/status/1638181830884200449
Facebook	https://fb.watch/oFfa6H9cv6/
Facebook	https://fb.watch/oCDqUxszBW/

 **WFP Malawi** @WFP_M... · 01/05/2023 ...
 With swathes of the country still flooded from #CycloneFreddy and inaccessible by road, @WFP has deployed 2 helicopters 🚁 to deliver much needed food and medical supplies.

@UNCERF
 @IcelandDevCoop



2 20 50 3.9K

 **WFP Malawi** @WFP_M... · 28/10/2023 ...
 Did you know?

That WFP transported over 18,000 tons of food and relief items for the response to Cyclone Freddy in #Malawi.

Thanks to support from @UNCERF @USAIDsaveSlives @IcelandDevCoop support to @WFPLogistics.



5 12 457

ANNEX: CERF FUNDS DISBURSED TO IMPLEMENTING PARTNERS

CERF Project Code	Cluster/Sector	Agency	Partner Type	Total CERF Funds Transferred to Partner US\$
23-RR-IOM-006	Shelter and Non-Food Items	IOM	RedC	\$57,687
23-RR-IOM-006	Shelter and Non-Food Items	IOM	NNGO	\$119,634
23-RR-HCR-007	Shelter and Non-Food Items	UNHCR	NNGO	\$15,919
23-RR-CEF-009	Protection	UNICEF	GOV	\$1,075
23-RR-CEF-009	Protection	UNICEF	GOV	\$18,868
23-RR-CEF-009	Protection	UNICEF	GOV	\$51,298
23-RR-CEF-009	Protection	UNICEF	GOV	\$18,027
23-RR-CEF-009	Protection	UNICEF	NNGO	\$57,638
23-RR-CEF-009	Water, Sanitation and Hygiene	UNICEF	NNGO	\$47,404
23-RR-CEF-009	Water, Sanitation and Hygiene	UNICEF	NNGO	\$114,064
23-RR-CEF-009	Water, Sanitation and Hygiene	UNICEF	INGO	\$141,515
23-RR-WFP-006	Food Assistance	WFP	INGO	\$57,610
23-RR-WFP-006	Food Assistance	WFP	NNGO	\$44,364
23-RR-WOM-001	Gender-Based Violence	UN Women	NNGO	\$41,486
23-RR-WOM-001	Gender-Based Violence	UN Women	NNGO	\$33,911
23-RR-CEF-009	Gender-Based Violence	UNFPA	NNGO	\$30,000
23-RR-FPA-007	Sexual and Reproductive Health	UNFPA	NNGO	\$65,000