**Update from GOAL Malawi (Irish NGO), 11th March, 2019**

**Source:** Country Director for GOAL Malawi

**Nsanje:** Flooding in all 9 TAs. Assessments ongoing and worst affected areas are not accessible. Official figures for total number of affected households have now risen to 16,118 HH (of which the majority are in TA Mlolo on the east bank), with huge numbers of houses having collapsed. Camps have been set up in numerous locations, including most significantly in Bangula. We understand that the DCPC and Malawi Defence force has a helicopter and is trying to evacuate people across the Shire river from Makanga in TA Mlolo to Bangula, though some people are refusing to leave. DODMA had indicated that some consignments of maize and other NFI were heading to Nsanje – not clear yet if they have arrived (the M1 has been impassable to heavy vehicles).

**Chikwawa:** Current figure is 10,487 HH (47,951 people) with 1 missing, 2 injured, 8 dead. Expect these figures to increase considerably (potentially almost double) as some areas are still not accessible and information is still coming in. Some people are already in camps. From a recent assessment that GOAL conducted before the March flooding, we know that some people (especially the elderly and other vulnerable households) were still residing in camps following the localized January flooding. The M1 from Blantyre to Chikwawa was in accessible on Fri-Sat, but a diversion was opened this morning for light vehicles, with construction/renovation work was underway. Roads in to the east bank have been blocked by flooded rivers since Wednesday, but now people are getting in/out by motorbike (though not yet accessible to vehicles).

**Blantyre urban:** Data from the City Council states that 7,916 HH are affected, with many having houses that have collapsed. Identified needs specifically include temporary shelter and construction materials. GOAL is concerned that urban Blantyre may not be prioritized in the national response, and feels the need is significant.

**Machinga:** Machinga DoDMA assessment indicates 29,301 houses have been damaged in the district (some completely collapsed, others partially damaged), with 770 people displaced*.*

District level assessments are on-going (though it is of note that there is no consistency in the way data is being collected and compiled across districts, which makes comparisons difficult) and an inter-cluster (UN/GoM with other partners) assessment team deployed from Lilongwe to Nsanje & Phalombe today.

**GOAL’s response and perceived needs:**

-GOAL teams are already contributing to district level assessments and coordination efforts, and closely liaising with DoDMA officials.

-GOAL has some limited NFI in stock (including buckets, tarpaulin, chlorine, sanplats) which we have mobilizing to support the immediate district level response in Nsanje and Chikwawa. However, quantities are limited in the face of considerable need.

-GOAL is working with others to try to mobilise additional funding for a larger response to support identified urgent needs in key affected districts. Key perceived needs include the following:

Immediate needs:

* + Food items – In the short term, food is seen as more appropriate than cash. Food items to include maize, soy pieces, salt, cooking oil, CSB, sugar.
	+ NFIs/survival kits  - Buckets, plastic plates/cup, plastic sheets, water guard, chlorine, soap, mosquito nets, etc.
	+ Hygiene/Sanitation in camps – Awareness campaigns, facilitate construction of latrines in camps, tapped buckets with soap for handwashing, chlorine
	+ Protection – Awareness raising on protection issues in camps; work with camp authorities to ensure appropriate measures are in place
* Short/medium term
	+ Nutrition support to camps – Train HSAs and caregivers in the camp to monitor nutrition status of children under 5 using ‘family MUAC’ approach, thereby ensuring early case detection.
	+ Health – Facilitate HSAs/clinicians to come to the camps to address medical issues. This includes specifically ensuring that people on ARVs have continued access to medication. Also distribution of condoms.
	+ In the medium term, multi-purpose cash support would help affected households get back on their feet.

Medium/longer term

* + Support for reconstruction of homes – ideally with improved construction, especially in high-risk areas such as urban Blantyre (characterized by high density with low quality/poorly planned structures)
	+ Support for seeds/ crops to ensure food security over the coming lean season