

## Humanitarian Situation Report

### Humanitarian Situation Report 1st

*Issues: Epidemic of COVID 19 Virus – Organization for Sustainable Socio-Economic Development Initiative- OSSEDI Malawi*

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#### ■Point of Contacts

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#### ■Part 1: Overall Situation

##### □Situation in the country (Target area)

- By 21<sup>st</sup> March 2020, 600 cases confirmed in 34 African countries of which 12 were experiencing local transmissions.
- World Health Organization (WHO) reported that the elderly and people with underlying conditions like malnutrition at a higher risk of contracting COVID 19.
- As of 21<sup>st</sup> March 2020, no confirmed case of COVID 19 in Malawi but with over 1524 travelers on follow-up after screening at Malawi at Kamuzu International Airport, Chileka International Airport and all border posts, according to Public Health Institute of Malawi.
- **On 20<sup>th</sup> March 2020, a Malawian confirmed to have COVID 19 ON ARROVAL AT Beit Bridge in South Africa. This rose the conclusion that lack of confirmed cases is due to lack of testing equipment in Malawi.** *The government of Malawi has declared 14 days quarantine period for immigrants coming from high risk countries and who seem to be suspected. Accordingly, Ministry of Health 2 quarantine centers have established through the support of health workers. Over 1360 persons are currently at quarantine centers*
- As from 17<sup>th</sup> March 2020, through the Ministry of Health, all travelers from high risk countries are to be placed under self-isolation and followed-up by a health worker for 14 consecutive days. This applies to travelers from; all countries in the European Union, China, Islamic Republic of Iran, Republic of Korea, Japan, Norway, United Kingdom, United States of America, Republic of South Africa, Seychelles, Democratic Republic of Congo, Namibia and United Republic of Tanzania. The list updated with new cases.
- On 20th March 2020, the president of the Republic of Malawi declared the state of emergency with some conditions, although some of them require clarification and full knowledge of the corona virus by Malawians. However, no time limit was places on the state of emergency.
- Restriction of public gatherings to less than 100 people which applies to weddings, funerals, church, congregations, political rallies and government meetings.
- The state of address also suspended hosting of international and banned public servants from attending both regional and international meetings hosted by affected countries.
- The Malawian government has also banned travel of foreign nationals from countries highly affected by the Corona virus. However, Southern Africa Development Community (SADC) countries are exempted. While returning residents and nationals will be subjected to self or institutional quarantine.
- All schools, universities, religious education and private classes and preschools are to be closed off from 23<sup>rd</sup> March till further notice.

- Universal Health Coverage Coalition (UHCC) in Malawi appealed to government to increase awareness on COVID 19 varied media platforms.
- Lack of good hygiene practices in schools , churches, mosques, health centers,markets,and community it will lead into the spread of the COVID 19
- Lack of access to testing, diagnostics materials and equipment for the corona virus especially in rural health centers, Kabudula Community Hospital and other health centers in T/A Kabudula included.
- Lack of training and orientation of Health Surveillance Assistants in health centers on COVID19. This has affected of trickle down of information to communities as they are the main source of health information especially in rural areas like T/A Kabudula.
- According to the Baseline survey report conducted in 2018, WASH component, carried out by OSSEDI Malawi with support from ChildFund Korea in T/A Kabudula 2018, revealed challenges in sanitation and hygiene facilities and practices, this includes lack of hand washing facilities, not washing after using toilets and many more. This puts community at high risk of Corona virus as health officials recommend regular washing of hands with soap. It should be noted that although OSSEDI promoted WASH in 2018, it was limited to 10 villages as opposed to the 1210 villages in the T/A. OSSEDI will emphasis hygiene promotion in sectors within the area of the project implementation unit.

## ■Part 2: Organization’s Response or Plan for response

*\* Based on the analysis, summarize the plan for response*

According the current situation in T/A Kabudula impact area, OSSEDI recommends the following COVID 19 response plan:

1. Hygiene promotion in schools, health centers, markets, mosque, churches and community
2. Sensitization meetings of all local leaders on COVID 19
3. Assessing the situation and reporting
4. Train and orient staff with CCPCs, WPCs, Teachers, schools management, in COVID 19
5. Procure and distribute sanitation and hygiene kits (hand washing facilities, face masks.)
6. Raise awareness on COVID 19, and sanitation and hygiene(Health Promotion) using mobile van method (P/A system)
7. Provide psychosocial support to affected populations
8. Monitoring/ follow-up on affected populations
9. Produce monthly report and review meetings

### □Security and Logistics

The security situation on the ground is normal. Residents in the whole of Malawi including the target area of T/A Kabudula are freely going about with their daily routine and business, except for education institutions which have been shut down due to state of emergency.

### □Partnership and Coordination

The response is being coordinated by the Ministry of Health and the District Commissioner, specifically the District Health Officer at a district level for Lilongwe. Under this exercise, OSSEDI will work hand in hand with the following Malawian government departments and organizations some of which are currently supporting the response:

1. Ministry of Health
2. Lilongwe City Council (District Health Office)

At a community level, to ensure prevention measures of response, OSSEDI intends to engage the Traditional Authority, chiefs, Area/ Village Development Committees, religious leaders, school structures, school staff, health workers at health posts and many more. The purpose of engage these gatekeepers are to ensure that the response is able to reach the whole population of T/A Kabudula.