COVID-19 Update

Situation Update | No. 3

1. MALAWI HIGHLIGHTS

- The first three COVID-19 cases confirmed on 2nd April in Lilongwe
- Malawi is in a declared State of Disaster
- Preparation, prevention and response measures are being implemented
- Government, UN and Partner coordination structures in place

2. GLOBAL UPDATE

- 972,640 COVID-19 cases confirmed
- 50,325 confirmed deaths, 226,036 recovered
- 207 countries, areas and territories have cases

3. REGIONAL UPDATE (Africa)

- 4,870 COVID-19 cases confirmed in 43 countries
- 163 confirmed deaths
- 312 recovered

4. MALAWI GOVERNMENT RESPONSE

4.1 Malawi Preparedness and Response Plan, and Coordination

- The National Disaster Preparedness and Relief Committee met on 31 March to review the draft multi-sectoral National COVID-19 Preparedness and Response Plan, currently budgeted at US$130.2 million;
- The Crisis Cabinet Committee on COVID-19 meets weekly to coordinate measures to respond to the pandemic;
- UN through is providing technical support to the Ministry of Disaster Management Affairs and Public Events, the Ministry of Health and other government partners in refining the plan;
- The Humanitarian Country Team (HCT) met on 2 April to discuss the draft multi-sectoral National COVID-19 Preparedness and Response Plan and government was requested to incorporate education, logistics, and food security clusters in the revised plan; also, there was agreement to ensure full coordination and support to the Plan at the local level by the NGOs and the UN to maximize the response and reach the most affected communities;
- Other clusters such as health, nutrition, WASH, protection and logistics are regularly meeting to discuss preparedness and monitor the situation (See calendar of meetings);
- African Development Bank, DIFID, European Union, Flanders, Germany/GiZ, Iceland, Ireland, Norway, USAID, World Bank, (Canada and Switzerland as non-resident DPs) have set up a working mechanism facilitated by the UN Resident Coordinator to support the national Plan through re-programming and (when possible) fresh allocation of resources. Key concerns are: i) scarcity of health/medical supplies in the global market would result in delays in the procurement and delivery process; ii) need to boost local coordination and response capacities at the District level; and iii) the situation of peri-urban communities in Lilongwe and Blantyre that concentrate most of the households depending on informal and vulnerable jobs.

4.2 Laboratory Capacity

- The number of in-country laboratories testing for COVID-19 has increased from 2 to 3: National Health Reference Laboratory (NHRL) in Lilongwe, the College of Medicine (COM) Laboratory in Blantyre and the Malawi Liverpool Wellcome Trust (MLW) in Blantyre;
- Cumulatively, 90 samples had reached Malawi laboratories and 86 samples tested negative, 3 tested positive while around 24 samples were yet to be tested as of 1st April;
- Reports indicate that testing can take 2-3 days due to a backlog;
- Government is working to equip other laboratories with COVID-19 testing capacity in the North of the country;
- With some support, laboratories at Queen Elizabeth Central Hospital in Blantyre and Lilongwe University of Science and Technology (LUANAR) will also be able to conduct COVID-19 tests.

4.3 Socio Economic Outlook

- Due to COVID-19, the Reserve Bank of Malawi’s Monetary Policy Committee (MPC) met on 1st April and decided to cut the Liquidity Reserve Requirement on domestic deposits by 125 basis points to 3.75 percent from 5.0 percent, which immediately releases primary liquidity of about K12 billion (about $16.3 million) uniformly across the banking system in proportion to liabilities of the banks.
- The MPC has also reduced the Lombard Rate by 50 percent to 0.2 percentage points above the Policy Rate. This will reduce the cost of accessing funds from the Central Bank and therefore will enable commercial banks to pass on the benefits to borrowers. The central bank says these decisions were deemed necessary to ease banking system liquidity constraints and incentivize commercial banks to adequately support the sectors that are hit by the COVID-19 pandemic.
- The central bank has however maintained its Policy Rate at 13.5 percent to mitigate against potential upward risks from the pandemic while monitoring developments as they evolve and act as and when necessary.
4.4 Communication
- Comprehensive Integrated Communication Plan being rolled out by Crisis Management Communication Committee;
- Toll-free number 54747 available for more information on COVID-19;
- Messaging on COVID-19 in English and Chichewa;
- Radio jingles on COVID-19;
- Media updates, press releases and dissemination of information through social media (MoH Facebook page: https://www.facebook.com/malawimoh);
- Responding to rumours and misinformation to counteract false information.

4.5 Preventative measures instituted by Malawian Government (all measures as at 1 April)

4.5.1 Public Institutions and Banks
On 1 April civil servants were instructed to continue to deliver services, subject to preventative measures link:
- Hand washing and hand sanitizers at Capital Hill entrance and for all staff, disinfection of offices;
- Ministries, Departments and Agencies to divide into teams to work in shifts to reduce people in offices;
- Non-essential services to scale down but not discontinue;
- Only essential meetings held in conference rooms but with social distancing.

On 27 March, the Office of the Chief Justice initiated the following prevention measures: (Link)
- All Judiciary conferences, workshops, colloquia and training programmes are suspended until further notice;
- Judges, Registrars, Chairpersons, Magistrates and Researchers to adjourn non-urgent matters;
- All cases, including Chamber matters (matters that are ordinarily dealt with in the office of the Judge/ Registrar/ Chairperson/ Magistrate), shall be held in open courtrooms;
- In exceptional cases, a limited number of spectator members of the public will be allowed and subject to social distancing in the open court gallery.

Measures to limit crowds in banks have been introduced, including:
- Increasing number of tellers to serve customers with speed and encourage electronic banking;
- Limiting number of people in the waiting area, let others wait outside, use numbering system/ call system;

4.5.2 Screening and Quarantining
- The requirement for self or institutional quarantine for 14 days for all residents and nationals returning from affected countries remains in place;
- About 4,603 travelers from COVID-19 affected countries have been screened and put under follow-up procedures by the Ministry of Health. Of these, 297 people finished the 14-day follow up;
- Self-quarantine of 14 days for all those asymptomatic. Those with symptoms have samples be taken in their homes;
- Health personnel redeployed to conduct screening and surveillance of people at all entry points into the country;
- All travelers crossing Malawi borders subjected to hand washing, thermo scans and filling forms for tracking;
- Nine (9) isolation sites Karonga, Mzuzu, Mchinji, Dowa (Dzaleka), Lilongwe, Mchinji, Dedza, Mwanza and Blantyre;
- All district hospitals have set aside separate space to treat cases.

4.5.3 Travel and Transport Sector
The Ministry of Transport and Public Works initiated widespread restrictions on public transport including:
- All cross-border passenger travel suspended from 1st April 2020 including suspension of all international flights except those carrying health personnel, equipment, emergency relief items; returning residents and general cargo;
- The Central East Africa Railways will reduce the carrying capacity of each passenger coach from 90 to 40 for Economy Class and from 54 to 28 for Business Class;
- All vessels carrying passengers are required to reduce their carrying capacity by 50 percent and no animals allowed;
- All vessels are required to disinfect before commencement of every trip;
- Large vessels to provide a cabin for isolation of people showing general symptoms of COVID-19;
- Social visits to ports and vessels suspended;
- All public service vehicles should reduce their seating capacity to 60%;
- Private vehicles are restricted to carrying only 2 passengers on the back seats;
- Tricycles to reduce number of passengers from 2 to 1;
- All passengers in public service vehicles must wash hands before boarding or use hand sanitizers;
- People are encouraged to walk where possible instead of using public transport and only take essential travel;
- Traffic officers are not allowed to touch vehicle documents, unless where very necessary;
- Visas to citizens of highly affected countries are suspended until further notice;
- Roadblocks will be used to check on people’s movements.

4.5.4 Prisons
- The Ministry of Homeland Security is screening prisoners to identify those suitable for pardon. The focus is on those who are sick, elderly, breastfeeding, young or who have served a large part of their sentence;
- Government identifying additional institutional spaces where some prisoners can be transferred;
- Group visits to prisons were suspended. One person will be allowed at a time and only on weekends;
- Prison workers are being provided with supplies to help prevent infections.
4.5.5 Gatherings, Meetings and Schools
- All public gatherings are restricted to less than 100 people, including weddings, funerals, church, congregations, rallies, and government meetings.
- All schools, colleges and universities were directed to close by 23 March;
- Hosting of international meetings is suspended;
- Public servants are banned from attending meetings and activities hosted by affected countries;

5. UNITED NATIONS RESPONSE

5.2 Malawi

The United Nations Country Team (UNCT) in Malawi comprises 21 United Nations agencies, funds, and programmes with a presence in the 28 districts of Malawi. In the initial stages of preparedness and response, WHO and UNICEF have played a central role in the preparation and implementation of the COVID-19 plan in Malawi. Following global guidance, the UNCT is actively contributing to the response and continued preparedness for more cases. WHO is the technical lead, providing guidance and technical support. To ensure coordination and coherence, a COVID-19 coordinator has been identified at the Resident Coordinator’s Office to support the UN Task Force on COVID-19.

5.2.1 Preparedness and Resource Mobilisation (WHO, UNICEF, UNDP, WFP, UNCT)
- The UNCT met on 26 March and decided to reprogramme activities as much as possible to respond to COVID-19
- On 30th March, the Centre for Multiparty Democracy provided a platform for political parties to discuss with Ministry of Health and United Nations team a joint approach on COVID-19. Unity and solidarity across political parties, regions and all people to help prevent COVID-19 infections and overcome the outbreak was emphasised;
- UN Women in partnership with Standard Bank is raising awareness in 3 local areas (Lilongwe Rural, Mzimba North and Mchinji) in collaboration with the relevant government structures;
- The UN, through WFP, is recruiting a National UN Doctor. The UN Doctor will be appointed as surge staff to address staff health and safety including through hygiene and safety training, personal first aid training, review of medical and casualty response, assessment of health, safety and environmental issues of UN staff and offices during the COVID-19 pandemic. The deadline for receiving applications is 6th April 2020;
- The UN Resident Coordinator activated the Humanitarian Window of the Malawi SDG Acceleration Fund (national MPTF), as one mechanism available to support coherent and coordinated resource mobilization efforts;
- The UN is supporting Government with guidance, operational implementation, and resource mobilization efforts by linking with existing development partner and NGO coordination structures;
- The UN has updated and activated a COVID-19 Contingency Plan and Business Continuity Plan;
- UN is supporting recruitment of a Public Health Officer and Health Cluster Coordinator to support the Ministry of Health;

5.2.2 Supply Chain and Logistics (WFP and UNICEF)
- UN facilitated the transportation and delivery of personal protective equipment and testing kits sent to African countries for the COVID-19 response by the Jack Ma and Alibaba Foundations;
- Procuring and prepositioning to ensure an adequate supply of food, personal protective equipment and other essential relief items is in process. Supplies worth US$600,000 are being procured from international and local suppliers;
- Given the disruption in supply chains globally, UN is conducting a local market analysis exercise for essential equipment to have a database of potential vetted suppliers with available stock and capacity to deliver. Similarly, a national tool for tracking in country supplies was shared with the Ministry of Health for adaptation and use;
- Establishing Mobile Logistics Bases (MLBs) and maintaining a stockpile of Mobile Storage Units (MSUs). These will be used as satellite warehouses for storage of food and other essential supplies. For COVID-19 preparedness and response, they may also serve as isolation spaces for patients;
- Conducting rapid logistics capacity assessments following the Government’s state of disaster declaration, reassessment of the supply chain infrastructure and identifying business continuity plans of suppliers, transporters, warehouses etc;
- Interagency collaboration to tailor humanitarian logistics service provision needs. Advocacy and consultations with relevant local authorities including customs, civil aviation, immigration etc. for unhindered access and flow of humanitarian goods.

5.2.3 Special Groups and Protection Issues (UN Women, UNICEF, UNHCR, UNFPA)
- A total of 211 new arrivals who were registered in March 2020 at Dzaleka Refugee Camp did not show any signs and symptoms of COVID-19 after being screened;
- Joint preparation and prevention initiatives by UNHCR, Ministries of Health and Homeland Security and other partners are underway at the refugee camp. Refugees are being encouraged to observe the following in the camp:
  - Social distancing especially at My Bucks Bank and food distribution centre which are hot spots for overcrowding;
  - Restricting movements by encouraging refugees to stay inside the camp;
  - Good hygiene practices disseminated through leaflets, brochures, posters and radio jingles played on Yetu Community Radio;
- Dzaleka COVID-19 Taskforce team has identified a site where family tents will be set up for newly arriving asylum seekers to be monitored for 14 days prior to joining others in the camp;
- The congested nature of the settlement which is a high risk for COVID-19 remains a challenge. Discussions with Government will continue on the allocation of additional land to host refugees;
• Installation of two halls next to Dzaleka Health Centre to be used as a quarantine site for suspected COVID-19 cases is almost complete. Construction of new toilets and kitchen fencing is ongoing.
• Behavioural change messages on COVID-19 and prevention of domestic violence are targeting female and male producers in farmer organizations inside the camp.

5.2.4 Communications and Communication for Development (UNICEF, WHO, UNFPA, UNDP, UNESCO, UN Women)

• Coordination with the Government, media, NGOs and other partners to ensure evidence-based communications on COVID-19 in Malawi is continuing;
• On 2nd April, a workshop with media editors and reporters on how best to report on COVID-19 was held in collaboration with Malawi Institute of Journalism, Malawi Liverpool Wellcome Trust and Blantyre District Health Office;
• Core COVID-19 messages on different thematic areas such as children rights, gender and food security are being consolidated across UN agencies to ensure coordinated messaging;
• Information about all COVID-19 external communication and communication for development (C4D) interventions as well as existing communication platforms, structures and influencers is being consolidated for better coordination. This is being jointly done by the UN Communications Group and Communications for Development (C4D) group;
• Implementation of the risk communication plan is ongoing, targeting 2,000,000 people in the UNICEF target districts with funding from UK Aid;
• Partnerships with key media outlets and Malawi Institute of Journalism for consistent and holistic coverage and positioning of children-related issues in media coverage and discussions on the COVID-19 virus are being organised;
• Orientation sessions for opinion leaders have been conducted from 26 March to 28, 2020 with key stakeholders, faith-based organizations, community leaders, media, district officials in health, education and information departments, including districts commissioners;
  • IEC materials including 3,000 posters and 20,000 flyers on COVID-19 prevention, hand washing and respiratory hygiene, have been disseminated to participants of the orientation sessions to reach local communities;
  • Production of multimedia content to promote COVID-19 messaging and stories for social media dissemination is ongoing;
  • Continued the use of U-Report platform to send messages on COVID-19 through SMS, polling, open-end questions, quiz, information bots, social media, etc;
  • Messages on gender impact of COVID-19 in English and Chichewa have been developed and are being shared, including the HeForShe initiative;
  • Malawian celebrities are being enlisted as part of a media campaign to support awareness raising on COVID-19. For instance, Piksy and Taqua were engaged to compose a song on #COVID19, which has since been shared using several channels, especially social media. The song provides information and advice on how to deal with COVID-19 in Malawi, encouraging everybody to play their part. The song is available on this link: https://bit.ly/33kKKSQ;
  • Other opinion leaders such as religious and traditional leaders continue to be engaged to demystify rumours and misconceptions on COVID-19 through community dialogues and mass communication

5.2.5 Education (UNICEF, UNFPA, WFP, UNESCO)

• Some 600,000 learners supported through school meals in seven districts in the Central and Southern regions have stopped receiving their daily meal due to school closures. WFP is exploring on how to maintain the programme and is considering, in consultation with the Government, to provide a three-month take home ration to learners who will not be able to get a meal at school;
• UN continues to work with the Ministry of Education, Science and Technology to boost distance learning options as well as translate COVID Prevention Guidelines for schools into Chichewa, and facilitate their dissemination;

5.2.6 WASH and Health (WHO, UNICEF, UNAIDS, UN Women)

• Epidemiological models to inform the COVID response are being generated in collaboration with the Health Donors Group, Imperial College, John Hopkins University and Cooperstsmith. Once completed, these models will enhance planning and decision making for COVID-19 response in Malawi;
• Guidance on HIV services in the context of COVID-19 is being developed in collaboration with stakeholders;
• Communication materials on COVID-19 for people living with HIV are being developed and disseminate in collaboration the civil society (National Association for People Living with HIV and AIDS in Malawi - NAPHAM). These include radio broadcasts, hardcopy IEC materials, a WhatsApp forum and a hotline and basic hygiene.
• Providing sanitation and hygiene support in the form of user-friendly hand washing water buckets and hand washing soap/detergent, face masks and gloves in strategic places;
• Installing four sets of latrines at the treatment units in Blantyre, Mwanza, Mchinji and Mzuzu;
• Installing additional sets of hand washing facilities in the same four treatment units;
• Training frontline workers from the District Health Offices to service the four treatment centres;
• Message dissemination to communities around the treatment centres has started in Mwanza and will soon be rolled out to communities around the remaining three treatment units. The messages being disseminated include proper hand washing, disinfection techniques appropriate dilution of chlorine and maintenance of social distance.
5.2.7 Socio Economic Impact and Social Protection (WFP, UNICEF, UNDP)
- The UN Socio-Economic coordination working group, with participation across the UN and World Bank, held its first meeting on 2 April to ensure that social, economic and human rights issues are adequately addressed in prevention, response and recovery strategies. Actions include UN agencies gathering data to come up with a comprehensive social economic impact analysis of the COVID-19;
- The RCO (Senior Human Rights Adviser) met with the Malawi Human Rights Commission (MHRC) to identify and strategize on responses to key human rights challenges posed by COVID-19 in Malawi. The MHRC intends to focus on monitoring and advocacy around human rights standards, including in collaboration with UN agencies.
- UN agencies are in discussion with the Malawi Government to explore ways of leveraging the Social Cash Transfer Programme as part of Shock Responsive Social Protection, targeting most vulnerable populations across Malawi;
- A double distribution for refugees covering both March and April 2020 has been initiated to limit opportunities for exposure and fast-tracking lean season distributions for finalization in the coming days in Balaka;
- Expansion of the Social Cash Transfers Programme to Malawi’s four cities is also being explored as COVID-19 is expected to have its worst health and economic effects in urban areas;
- A COVID-19 Prevention and Response window is still open to catalyze private sector action on COVID-19 under the Growth Accelerator programme: https://forms.gle/JWUYxKGsNXHkmkXY7;

5.2.8 Nutrition (UNICEF)
- Key messages for Infant and Young Child Feeding (IYCF) in emergencies including maternal and child feeding in the context of COVID-19 are being prepared.
- Sensitization of seven nutrition field monitors and health workers on COVID-19 preparedness and response will take place in April.
- A group of the Ministry of Health and Population management team is visiting nutrition rehabilitation units in 25 districts. The group of senior officials will support and guide the districts nutrition teams on better nutrition as part of the COVID-19 preparedness and response.

5.2.9 UN Protocols and Working Arrangements (UNCT)
- External missions and non-essential travel are not allowed;
- UN conducted a Town Hall for UN staff in Malawi on the COVID-19 situation in the country using a virtual platform;
- The UN continues meet Government instructions on self-quarantine for 14 days after return from foreign missions;
- The UN in Malawi continues to work, but there is an increased use of virtual meetings, teleworking as well as reducing implementation to essential/critical programmes while scaling up COVID-19 responses.

Additional information and updates

- UN: https://www.un.org/coronavirus
- WHO: https://www.who.int/emergencies/diseases/novel-coronavirus-2019

NB: The global and Africa COVID-19 figures are from WHO as of 3 April 2020, 15:20 GMT+2

Contacts:
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<thead>
<tr>
<th>UN Communications</th>
<th><a href="mailto:phillip.pemba@one.un.org">phillip.pemba@one.un.org</a></th>
</tr>
</thead>
<tbody>
<tr>
<td>WHO</td>
<td><a href="mailto:msvambozak@who.int">msvambozak@who.int</a></td>
</tr>
<tr>
<td>Head of RCO</td>
<td><a href="mailto:bonnel@un.org">bonnel@un.org</a></td>
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