

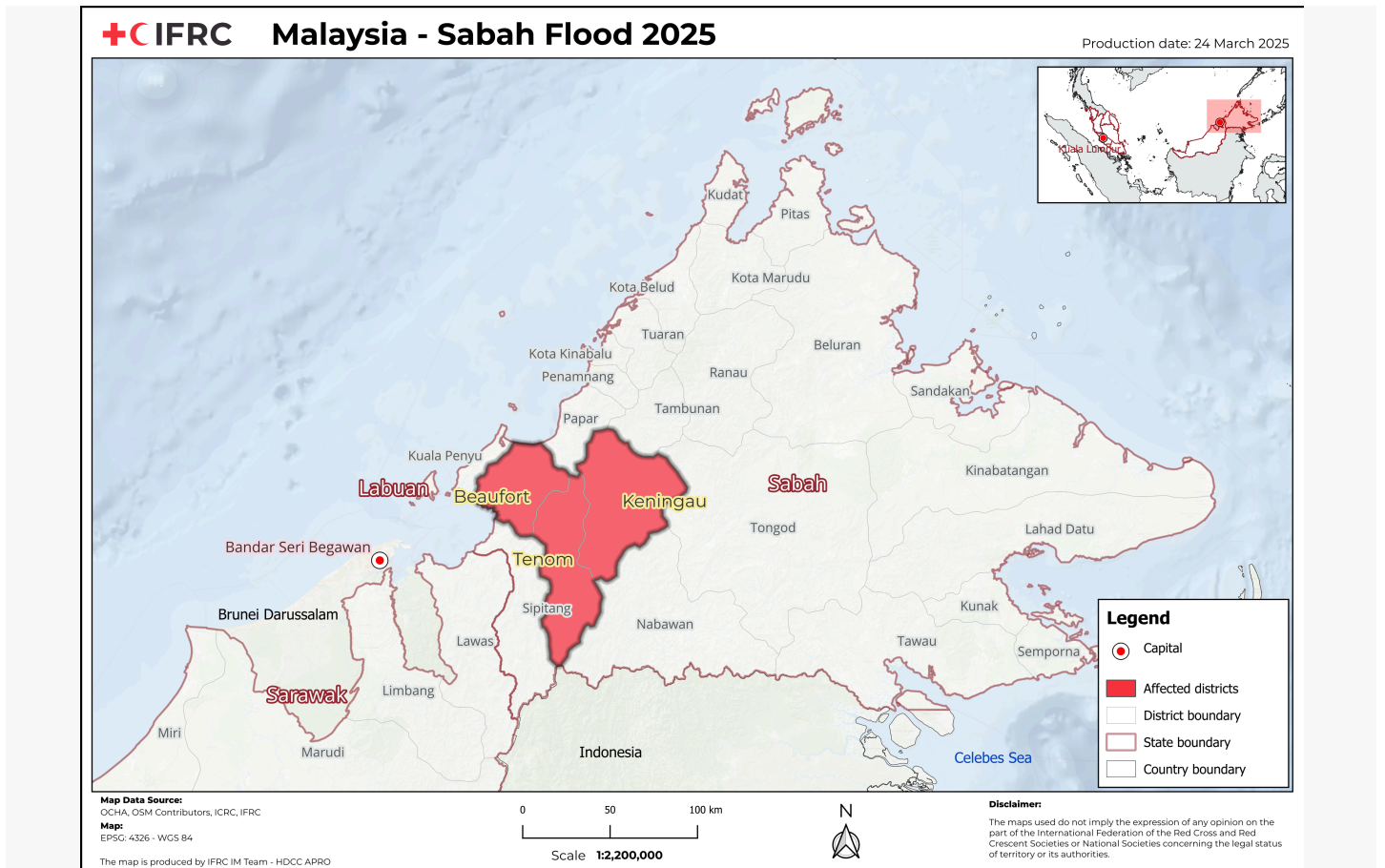


MRCS demonstrating water Roam to the affected communities (Photo: MRCS)

Appeal: <b>MDRMY012</b>	Total DREF Allocation: <b>CHF 176,654</b>	Crisis Category: <b>Yellow</b>	Hazard: <b>Flood</b>
Glide Number: <b>FL-2025-000039-MYS</b>	People Affected: <b>333,383 people</b>	People Targeted: <b>7,500 people</b>	People Assisted: <b>19,580 people</b>
Event Onset: <b>Sudden</b>	Operation Start Date: <b>28-03-2025</b>	Operational End Date: <b>31-07-2025</b>	Total Operating Timeframe: <b>4 months</b>
Targeted Regions: <b>Sabah</b>			

The major donors and partners of the IFRC-DREF include the Red Cross Societies and governments of Australia, Austria, Belgium, Britain, China, Czech, Canada, Denmark, German, Ireland, Italy, Japan, Luxembourg, Liechtenstein, Malta, Norway, Spain, Sweden, Switzerland, Thailand and the Netherlands, as well as DG ECHO, Mondelez Foundation, and other corporate and private donors. The IFRC, on behalf of the National Society, would like to extend thanks to all for their generous contributions

# Description of the Event



Map highlighting the East Malaysia affected by the flood (Map: IFRC IM)

## Date of event

18-03-2025

## What happened, where and when?

Severe flooding struck Sabah State on 8 March 2025 after continuous heavy rainfall caused major rivers including Sungai Padas, Sungai Pagalan, and Sungai Liawan to overflow. Six districts were badly affected: Beaufort, Membakut, Keningau, Sook, Tenom, and Kemabong. Low-lying villages were submerged, infrastructure was damaged, and road access was cut by floods and landslides.

By 9 March, more than 4,500 people were displaced across 31 temporary evacuation centres (PPS). Water levels exceeded official danger marks in several rivers, triggering evacuations and disrupting access to safe water. Communities in Tenom and Beaufort were further impacted when controlled dam releases worsened downstream flooding.

From 13–18 March, the Malaysian Red Crescent (MRCS) conducted needs assessments in Keningau, Tenom, and Beaufort, where over 70,000 people were reported affected. Key challenges included disruptions to water treatment, damage to housing and infrastructure, and difficulties accessing livelihoods, healthcare, and education.

By mid-March, waters in Keningau began to recede, allowing some families to return home. All evacuation centres in Sabah were officially closed on 16 March 2025, although several villages remained inundated and infrastructure damage was significant.

While flooding continued elsewhere in Malaysia through March, the humanitarian situation in Sabah gradually stabilised. Emergency relief met immediate needs, and local authorities together with MRCS focused on restoring essential services.

By June 2025, the overall situation in Sabah had improved: most displaced families had returned home; schools and health services had resumed; road access between Keningau and Tenom was restored; and water supply systems were brought back into operation,



improving access to safe water. Although some households still faced recovery needs due to housing and livelihood losses, communities had largely returned to normalcy, with essential services and key infrastructure restored.



MRCS assisting in setting up temporary evacuation shelter. (Photo: MRCS)



Briefing on Hygiene Kit item received by the people affected. (Photo: MRCS)



Child Friendly Space provided by MRCS. (Photo: MRCS)

## Scope and Scale

Heavy and continuous rainfall beginning on 8 March 2025 precipitated severe flooding across six districts of Sabah; Beaufort, Membakut, Keningau, Sook, Tenom, and Kemabong, after major rivers, including Sungai Padas, Sungai Pagalan, and Sungai Liawan, overflowed their banks. According to official figures from the Sabah State Government, an estimated 333,383 people across the state were affected. As of 10 March 2025, the National Disaster Management Agency (NADMA) reported 4,644 displaced persons from 1,493 households across the six districts. District-level tallies compiled locally (Kemabong 12; Keningau 778; Beaufort 1,719; Tenom 1,162; Membakut 896; Sook 778) summed to 5,345.

Further assessments conducted by the MRCS together with the State Disaster Operations Centre (PKOB) indicated that approximately 70,570 people from 14,114 households were directly affected in Tenom, Keningau, and Beaufort:

1. Tenom: 24,000 people / 4,800 households
2. Keningau: 45,000 people / 9,000 households
3. Beaufort: 1,570 people / 314 households.

These figures reflected the concentration of impact along key river systems and low-lying settlements within the interior districts. The floods significantly disrupted essential services and critical infrastructure. Numerous roads were rendered impassable by inundation and landslides, delaying the delivery of relief items and constraining population movement; alternative routes, where available, were longer and posed additional safety risks. Access to several communities was feasible only by four-wheel drive vehicles, lorries, trucks, or boats, which in turn affected market functionality and household access to food and basic supplies.

The education and health sectors also experienced notable disruption. Twenty-four schools were affected; some were repurposed as temporary evacuation centers (PPS), while others were closed, reducing attendance even where schools remained nominally operational due to transport constraints. Several health facilities, including hospitals, clinics, and health posts, were temporarily closed, narrowing access to routine and acute medical care for affected populations. Agricultural livelihoods suffered losses to crops and irrigation systems, with implications for household income and local food availability in the weeks that followed. The operational planning therefore targeted a focused geographic footprint of the three most impacted districts while acknowledging broader state-level needs.

At the time of the initial response, the Malaysian Meteorological Department (MET Malaysia) forecast the continuation of monsoon flow and heavy rain over Sarawak, Sabah, the Federal Territory of Labuan, and the eastern seaboard of Peninsular Malaysia through 23 March 2025. Weather developments matched the forecast at those states as flooding and evacuations mostly reported in parts of Johor, Sabah, and Sarawak. Several temporary evacuation shelters remained open until 25 March before conditions eased as the monsoon transition began on 25 March 2025. This outlook raised concerns regarding the potential for prolonged flooding, secondary hazards (e.g., landslides, infrastructure weakening), and extended challenges for relief operations and early recovery. Where discrepancies existed between field-compiled district subtotals and national aggregates, figures in this section were harmonized to national sources while preserving disaggregated data to illustrate the distribution and intensity of impact.

## Source Information

Source Name	Source Link
1. The Star	<a href="https://www.thestar.com.my/news/nation/2025/03/23/floods-number-of-evacuees-in-three-states-drops-to-8274-this-morning">https://www.thestar.com.my/news/nation/2025/03/23/floods-number-of-evacuees-in-three-states-drops-to-8274-this-morning</a>



# National Society Actions

Have the National Society conducted any intervention additionally to those part of this DREF Operation?

No

# IFRC Network Actions Related To The Current Event

**Secretariat**

The IFRC played a central role in supporting the MRCS during this operation. An operations Manager was deployed to provide overall guidance to the response and to mentor the focal persons leading different sectors of the operation. This proved instrumental in strengthening the capacity of MRCS staff and volunteers, particularly within the Sabah Chapter, which managed the bulk of the response. IFRC also facilitated the Emergency Needs Assessment and Planning exercise conducted from 13 to 18 March 2025 in Keningau, Beaufort and Tenom, and supported MRCS in compiling the assessment findings into an evidence-based operational plan.

Specialized technical expertise was further mobilized to enhance the quality of the intervention. A Cash and Voucher Assistance (CVA) Preparedness Consultant was engaged to provide technical advice on cash programming, while also facilitating remote support from an Information Management officer of the Indonesian Red Cross to strengthen the use of digital CVA tools such as the CVA Ranger system. IFRC additionally ensured close coordination with regional focal points in the Asia Pacific Regional Office, including the Community Engagement and Accountability coordinator, and worked hand in hand with PMER colleagues in both APRO and the Hong Kong Red Cross (HKRC) to pilot new tools and approaches. The Regional Developing Operations Coordinator was also deployed to Malaysia to gain field experience, further reinforcing the peer-learning and knowledge exchange dimension of the operation.

**Participating National Societies**

The Participating National Societies (PNS) provided complementary financial and material contributions. The Singapore Red Cross donated (4) four units of WaterROAM Ultra water purification systems to strengthen WASH services in Sabah, alongside financial support to the operation. The Swiss Red Cross pledged financial support for health and WASH components, with approval processes ongoing at the time of reporting. The Hong Kong Red Cross engaged directly in the monitoring phase by facilitating the implementation of post-distribution monitoring (PDM) through pilot test of the PDM tools, thereby contributing to the accountability and learning aspects of the response.

# ICRC Actions Related To The Current Event

ICRC continues to maintain a presence in Malaysia, although it was not directly engaged in this particular flood operation.

# Other Actors Actions Related To The Current Event

Government has requested international assistance

No

**National authorities**

The Government of Malaysia extended financial assistance to 1,463 affected households, consistent with measures applied during the 2024/2025 East Coast floods. An estimated CHF 290,729 was allocated to support early recovery, enabling displaced families to meet basic needs and begin repairing homes and livelihoods.

National authorities, led by the National Disaster Management Agency (NADMA) and state and district disaster committees (PKON and PKOB), coordinated response and relief



across ministries and departments. The Royal Malaysia Police, the Civil Defence Force, the Malaysian Volunteer Department (RELA) and the Department of Social Welfare provided search and rescue, camp management and direct assistance in evacuation centers. Health authorities monitored disease risks and managed medical responses.

#### UN or other actors

There are no UN or other international actors currently actively responding to the flood in the country. However, there are other national organisations active, all coordinated by NADMA. Yayasan Kebajikan Sabah gave additional allocation of CHF 59,623 for the displaced.

#### Are there major coordination mechanism in place?

Coordination mechanisms in place included the national NADMA-led coordination and district-level PKOB committees, as well as MRCS internal EOC structures and direct coordination between MRCS, district offices and the Sabah State Water Department for water-related interventions.

## Needs (Gaps) Identified



### Shelter Housing And Settlements

Flooding in the three targeted districts resulted in minor partial damage to many dwellings. By the end of the displacement phase, all 1,493 affected households had returned home and commenced cleaning and basic repairs; however, numerous families faced losses of household goods and furniture including cooking equipment that constrained safe and dignified living conditions.

Beaufort experienced recurring flooding in April and early May 2025, with new inundations reported on 12–13 April, further flooding and road impacts reported on 3 May, 22 schools closed on 6 May, and evacuees still sheltering on 7 May necessitating postponement of beneficiary registration activities.

While in temporary evacuation centres (PPS), the Department of Social Welfare (JKM) provided essential non-food items such as mattresses, blankets, pillows, and sleeping mats, to maintain minimum shelter standards. In addition, NADMA allocated Wang Ihsan cash assistance of CHF 259 per eligible household, part of which could be used to address urgent needs, including minor home repairs. Despite these measures, additional assistance for repair materials and replacement of essential household items remained a priority to accelerate safe returns and restore basic functionality of homes.



### Livelihoods And Basic Needs

According to the District Officer of Tenom, an evaluation was undertaken to assess flood impacts on agriculture and other livelihood activities; however, a detailed loss-and-damage analysis had not yet been released, and MRCS have not received official figures within operation timeframe.

MRCS assessments in Mukim 6, Beaufort indicated that this rural area relied predominantly on agriculture and fisheries. Approximately 40 per cent of the affected community were farmers including palm-oil workers, rubber tappers, and paddy farmers, earning relatively low monthly incomes of CHF 99–159 (RM 500–800). Flooding curtailed work opportunities across the sector; rubber tappers were particularly affected due to water-damaged trees requiring recovery time, resulting in prolonged income losses. Fishers, estimated at 60 per cent of the affected population, earned on average less than CHF 199/month, and faced extensive damage to boats, nets, and gear that constrained a timely return to work. Given the high dependence on natural resources and the limited availability of alternative income sources, recovery in Mukim 6 required restoration of productive assets and short-term income support.

In the more urbanized Kampung Bakalau (Beaufort), the economic profile differed: an estimated 70–80 per cent of residents engaged in small businesses and petty trade, with the remainder working as daily labourers. Traders reported direct losses from damaged stock and equipment, compounded by reduced local purchasing power, which impeded the resumption of business operations. Daily wage labourers faced job uncertainty as commercial activity slowed, and many households prioritized cleaning and repairing homes over income-earning, further delaying economic recovery.





## Multi purpose cash grants

Emergency needs assessment findings indicated that flood-affected households in Beaufort faced acute financial stress due to income loss, asset and property damage, and elevated recovery costs. While the Government's one-off Wang Ihsan cash grant of CHF 258 (RM 1,300) per household (comprising NADMA: CHF 199; Sabah State: CHF 60) provided immediate relief, it was insufficient for livelihood recovery, particularly for farmers, fishers, and small traders who lost primary income sources and essential household items. Against the Minimum Wage Order 2024 baseline of CHF 338 (RM 1,700) per month in Sabah, many affected families struggled to meet daily expenditures, replace damaged goods (e.g., kitchen appliances, furniture, bedding), and shoulder education-related costs after more than 1,000 students lost school supplies. In this context, Multi-Purpose Cash Assistance (MPCA) remained a critical modality to restore basic functionality and protect livelihoods.



## Health

During the March 2025 floods in Sabah, several health concerns emerged in Beaufort, Keningau, and Tenom. In Beaufort and Keningau, cases of Hand, Foot and Mouth Disease (HFMD) were reported, primarily among residents in temporary evacuation centers. Stagnant floodwaters across all three districts also increased the risk of vector-borne diseases, particularly dengue and malaria. These conditions highlighted the importance of timely health screenings and preventive interventions to reduce post-flood health risks and protect community well-being.



## Water, Sanitation And Hygiene

Disruption to water treatment plants and pipelines produced significant safe water shortages in Keningau, Tenom and parts of Beaufort. In Keningau two water treatment plants were clogged and operating at reduced capacity; in Tenom pipeline damage and repairs meant that many households lacked piped water; in Beaufort several areas experienced shortages during the initial emergency phase. Hygiene facilities in some villages and evacuation centres were available but not properly maintained due to water scarcity, increasing the risk of disease transmission. There was a clear need for emergency water supply, mobile treatment capacity, hygiene kits, and sustained hygiene promotion at community level.



## Protection, Gender And Inclusion

The emergency needs assessment findings in Beaufort found that equitable access to assistance had not been fully achieved for at-risk groups especially female-headed households and informal workers in Kampung Bakalau and Mukim 6, low-income farmers and small traders (notably those with school-age children), older persons, persons with disabilities (PWDs), and migrant households. Limited access to safe water heightened WASH and sanitation risks, underscoring the need for targeted water supply, hygiene promotion, and accessible, safe facilities. During WASH operations, teams also noted that the shortage of trained female WASH volunteers hindered service delivery to female-headed households and women beneficiaries, who reported discomfort engaging with male-only teams.

Income losses among farmers, traders, and daily wage earners indicated cash and voucher assistance (CVA) as an appropriate modality for meeting basic needs and supporting early recovery. Education continuity was compromised by the loss of school supplies for over 1,000 students and transport barriers, necessitating back-to-school support. Systemically, PGI mainstreaming required strengthening through routine SADD use, accessible feedback and complaints mechanisms, clear referral pathways for protection concerns (including GBV and child protection), and training for staff and volunteers on inclusive, safe programming.



## Education

Flooding damaged school supplies and disrupted access to education. Assessments found substantial losses of uniforms, books, shoes, and stationery among students in Mukim 6 and Kampung Bakalau (Beaufort) and in Tenom. Several schools were temporarily closed and reopened after repairs and cleaning. Priority needs were replacement of essential learning materials and targeted support to restore attendance ahead of reopening."





## Migration And Displacement

The emergency needs assessment in Mukim 6 and Kampung Bakalau (Beaufort) identified significant barriers faced by undocumented migrants in accessing humanitarian aid, financial assistance, and livelihood recovery support. In Kampung Bakalau, the population largely comprised undocumented migrants—some engaged in petty trade at local markets and others working as labourers, yet many were unable to access temporary evacuation centres (PPS) due to administrative requirements, despite efforts by JKKK leaders to extend humanitarian support.

In Mukim 6, most undocumented migrants worked as farm labourers, fishers, and daily wage earners sectors heavily affected by the floods. Post-disaster job scarcity further eroded incomes, complicating recovery. These constraints were most acute for older persons, female-headed households, and children, who faced heightened economic insecurity while having limited access to formal financial assistance owing to documentation status. Strengthened, non-discriminatory access to assistance and tailored livelihood support remained critical to mitigate protection risks and enable dignified recovery.

## Operational Strategy

### Overall objective of the operation

MRCS implemented a four-month, IFRC-DREF operation, targeting 1,500 flood-affected households in Beaufort, Keningau and Tenom, delivering flood response across WASH, health (including MHPSS), education and livelihoods, complemented by multi-purpose cash and voucher assistance (CVA) to protect dignity and help restore household purchasing power. The operation emphasized protection, inclusion of vulnerable groups including undocumented migrants, and community engagement to support dignified, timely and accountable recovery.

The operation aimed to reduce immediate public-health risks through safe water access, hygiene promotion, and risk communication; improve the livelihood affected via CVA for urgent needs and early recovery; safeguard continuity of learning through voucher-based replacement of essential school supplies; and strengthen community health and psychosocial well-being through targeted outreach and MHPSS. At the end of the operation, through all those interventions MRCS had reached 19,581 people.

MRCS coordinated closely with local authorities, humanitarian partners, financial service providers, and local merchants to ensure efficient, market-aware delivery. Protection, Gender and Inclusion (PGI) principles are integrated across targeting, design, and service delivery so that vulnerable groups such as female-headed households, older persons, persons with disabilities, migrant households, and other at-risk groups are effectively reached. Community Engagement and Accountability (CEA) is prioritized through proactive information-sharing, accessible feedback and complaints mechanisms, and participatory approaches that enable real-time adaptation and strengthen transparency.

The intervention focused on:

1. Provided access to clean water and deliver hygiene promotion to mitigate waterborne-disease risks.
2. Provided CVA to help families meet urgent needs, support economic recovery, and strengthen local markets.
3. Ensured education continuity through voucher-based school-supply assistance to minimize learning disruption.
4. Enhanced community health and psychosocial well-being through targeted health promotion and MHPSS.

### Operation strategy rationale

The operation was designed to meet the most urgent, documented needs in Beaufort, Keningau, and Tenom via safe water, immediate purchasing power for basic needs and early recovery, continuity of education, and essential health/MHPSS, while embedding Protection, Gender and Inclusion (PGI) and Community Engagement and Accountability (CEA) throughout. The strategic choices were grounded in ENAP findings, MRCS and PKOB joint assessments, and market survey indicating that local markets and banking/financial services were functioning but that flood-affected households faced acute liquidity constraints, losses of productive assets, and gaps in access to government aid (notably for undocumented groups and those not registered in PPS). In this context, a combined modality; cash-based assistance to restore purchasing power, voucher support to ring-fence education needs, and sectoral services (WASH, health/MHPSS), offered the fastest, most dignified, and context-appropriate pathway to stabilize households and reduce public-health risks.

Prioritization and geographic focus followed the distribution of impacts and service disruptions. Beaufort recorded concentrated livelihood and education losses (including widespread destruction of school supplies), Keningau and Tenom experienced significant interruptions to safe water due to treatment plant and pipeline issues, and vulnerable sub-populations (female-headed households, older persons, PWDs, migrants) were at elevated risk of exclusion. The operation's four-month (April- July 2025) horizon balanced the need for rapid start-up with the procedural steps required for compliant, accountable CVA and vendor engagement.



#### Multi-Purpose Cash (MPC):

MRCS selected unconditional, one-off MPCA in Beaufort to restore short-term purchasing power where livelihoods (farmers, fishers, small traders) were most disrupted and where the Government's Wang Ihsan grant, CHF 259 (RM 1,300) per household was insufficient and not universally accessible. The planned transfer value of CHF 100 (RM 500) per household, disbursed in a single tranche, was calibrated against the Sabah minimum wage of CHF 338 (RM 1,700) per month and the expected gap after government transfers, aiming to cover a meaningful share of essential expenditures, minor repairs, and replacement of critical household items. Initially, MRCS planned to assist 500 households under the DREF; with Swiss Red Cross funding, MRCS complemented support for an additional 300 households, bringing the total to 800 MPCA recipients. Of these, 307 households also received a back-to-school additional of CHF 29 (RM 150).

Feasibility was confirmed through market mapping functional financial services, stocked essential goods, restored market access, and community familiarity with bank transfers. Because MRCS only held a Letter of Offer with a bank from a previous DREF, the plan included exceptional IFRC approval to finalize an FSP agreement and activate bulk transfers. Targeting used transparent criteria prioritizing severe income loss and vulnerability (including undocumented migrants), with Village Development and Security Committee (JKKK) nominations verified by State Welfare Department (JKM) or district offices. Alternate disbursement arrangements were established for recipients without bank accounts: a verified representative's bank account (family member, community leader, or neighbour) was used under controlled procedures, and beneficiaries confirmed receipt to MRCS (phone/SMS/WhatsApp) to ensure accountability. PDM at two weeks post-transfer was scheduled to capture usage, outcomes, and any safeguarding concerns. This approach maximized speed, dignity, inclusion, and cost-efficiency, while aligning the transfer size and coverage with documented gaps and local wage/price benchmarks.

#### Education (voucher assistance):

To prevent negative coping and ensure that children returned to school with essential materials, MRCS opted for vouchers (CHF 29) redeemable with pre-qualified local vendors for uniforms, shoes, bags, and stationery. The voucher modality was chosen over additional cash specifically to ring-fence education spending, reduce diversion risk, enable price/quality controls through competitive vendor selection, and inject liquidity into small/medium retailers in affected areas, aiding local recovery. Implementation steps (vendor sourcing, contracts, system setup, distribution planning) were sequenced in month 1, aligned with school reopening timelines, and supported by CEA information campaigns so households clearly understood entitlements and redemption procedures.

#### WASH:

Since flooding disrupted water treatment in Keningau, Tenom, and parts of Beaufort, MRCS prioritized mobile water treatment and water trucking for an initial 14-day operational window to bridge restoration works. Singapore Red Cross financed mobilization and operations of treatment units, while DREF covered spares and trucking, an explicitly complementary funding model that avoided overlap. Hygiene promotion (including MHM) was integrated with water distributions and CVA registration to maximize reach, and hygiene kits (via IFRC pipeline) targeted vulnerable households in Tenom and Keningau. Coordination with the Sabah State Water Department and district PKOBs ensured equitable coverage and reduced duplication. Noting field feedback on the shortage of trained female WASH volunteers, the plan included proactive deployment/recruitment of female volunteers to improve comfort, access, and safeguarding for women and girls.

#### Health and MHPSS.

In partnership with District Health Offices, MRCS deployed mobile health screening, disease-prevention messaging, and Psychological First Aid (PFA) for affected and priority groups (older persons, children, etc.). These actions were prioritized due to heightened outbreak risks, mobility barriers, and the stress burden observed during displacement and return. Vector control and risk communication were timed with the early WASH phase to mitigate post-flood morbidity while MET Malaysia's forecast of continued rain still posed secondary risks.

#### Cross-cutting enablers, risk management, and MEL:

PGI was mainstreamed via SADD, accessible feedback/complaints channels (hotline, WhatsApp/SMS confirmation), and referral pathways for protection concerns (including gender-based violence/child protection). CEA emphasized clear communication on transfer amounts, eligibility, and timelines, responding to prior grievances about slow government disbursements (often 3–6 months) by providing faster, transparent MRCS support. With respect to information, education and communication (IEC) materials, Beaufort received adapted materials drawn from the previous DREF (MDRMY011) due to compressed timelines for approvals and vendor selection. In Keningau and Tenom, IEC distribution only given on 100 units per district (adapted from previous DREF) because of coordination gaps in planning and handover; causing the gaps of IEC cannot be filled. These gaps were documented in after-action reviews, with process improvements identified (e.g., pre-approved templates, vendor pre-qualification, and a named communications focal point for IEC rollouts).

The first month focused on enabling conditions, IFRC exceptional approval for the FSP, activation of bulk transfers, beneficiary data cleaning, and vendor contracting followed by rolling delivery. Monitoring combined sector minimum standards, routine output tracking, focus group discussion (FGD) and post-distribution monitoring (PDM) to validate outcomes and inform mid-course adjustments. During the PDM, 768 households were chosen as respondents across the three districts and 50 households were interviewed for FGD. At the close of operations, a lessons-learned exercise at state and headquarters levels consolidated findings on PGI, CEA, cash delivery, WASH/health integration, and IEC workflows, with recommendations captured for incorporation into subsequent response SOPs and preparedness plans.



#### Funding and Resource Gap:

With Singapore Red Cross supporting WASH and Swiss Red Cross considering contributions for cash and education, MRCS used DREF resources to close critical gaps (notably livelihood restoration and education) and ensure coherence across funding streams. This blended approach matched needs to instruments cash for flexibility and speed; vouchers to safeguard education; and direct services where public utilities were impaired together forming a coherent, risk-aware strategy tailored to Sabah's evolving context and the specific vulnerabilities identified by ENAP and field assessments.

#### Operational challenges and Lesson Learned

During implementation, several operational constraints affected delivery timelines. The planned procurement of hygiene kits via IFRC had to be shifted to local sourcing when regional stocks were reprioritized for other disasters; to maintain schedule integrity, MRCS NHQ staff were temporarily deployed to Sabah Chapters to support expedited vendor engagement and compliance. In parallel, printing of operation-specific IEC materials could not proceed within the period due to internal coordination on design and financial approvals, requiring the use of existing IEC stocks from previous operations, which were serviceable but not fully localized.

Moving forward, MRCS should establish contingency measures for both supply and approvals, namely, such as having pre-qualified local suppliers and/or framework agreements to enable rapid switchover when international stocks are constrained. A clear fast-track approval pathways with defined service-level timelines for IEC design/finance and a set of pre-approved, locally adaptable templates, and early deployment of NHQ surge support to Chapters for time-bound procurement and communications tasks would reduce delays, preserve localization, and improve continuity of service in future operations.

## Targeting Strategy

### Who was targeted by this operation?

In response to the floods in Sabah and following coordination with local authorities, the MRCS identified Beaufort, Keningau, and Tenom as the most critically affected districts. The floods severely impacted livelihoods, community health, access to clean water, school supplies, and other essential services. MRCS aimed to assist 1,500 households (approximately 7,500 people, assuming five members per household). The selection of these target districts was based on the severity of impact (households experiencing medium to heavy flooding), displacement numbers (areas with significant evacuations indicating urgent need), and assistance gaps (needs remained unmet despite ongoing government and humanitarian support, necessitating targeted interventions).

The affected population included several marginalized and vulnerable groups. This included individuals whose homes, crops, and livestock were affected, severely impacting their livelihoods. Migrants, as non-citizens, were excluded from government relief schemes and therefore required targeted assistance. Data analysis drawing on secondary sources from the Department of Statistics Malaysia (DOSM) and primary household assessments indicated the following demographics: female 47.8%, male 52.2%, girls 11.2%, and boys 12.2%. Special consideration was given to vulnerable groups such as households with migrants (especially the undocumented), older persons, persons with disabilities or chronic illnesses, female-headed households, pregnant women, households with children under five, and adults aged 65 and above.

For beneficiary selection, MRCS coordinated with Village Development and Security Committee (JKKK) for name-list nomination and verification of beneficiaries, including undocumented migrants within the villages. Migrants' eligibility to participate as MRCS beneficiaries was subject to approval from the District Office. Based on MRCS's previous engagements during the flood response, there were typically no objections from the local authorities.

### Explain the selection criteria for the targeted population

The selection of the target population by MRCS was based on criteria established through the initial and ENAP assessments, and was augmented by data from the State Disaster Operations Centre and the District Disaster Operations Control Centres (PKOB), as well as inputs from the Community Development Leaders Unit (UPPM) and Village Development and Security Committees (JKKK) across Sabah. Priority was given to areas most severely affected by flooding, particularly locations under-served by other organizations or government assistance.

In coordination with these stakeholders, MRCS identified three districts in Sabah: Beaufort, Keningau, and Tenom, as having the greatest needs. Assessment teams then evaluated the most impacted sub-districts (mukim) and villages within these districts, and targeted the following areas:

1. Beaufort: Mukim 6 (nine rural villages—Kg Kangsa, Kg Bangkalalak, Kg Barumbai, Kg Mantulul, Kg Mantulul Laut, Kg Lalayan Baru, Kg Jabang, Kg Indulubai, Kg Kukub) and Kampung Bakalau (urban area).



2. Keningau: Mukim Bunga Raya, Mukim Marampong, Mukim Apin-Apin.

3. Tenom: From Kampung Binai to Kampung Pantongan Sapong.

## Total Assisted Population

Assisted Women	-	Rural	-
Assisted Girls (under 18)	-	Urban	-
Assisted Men	-	People with disabilities (estimated)	-
Assisted Boys (under 18)	-		
Total Assisted Population	<b>19,580</b>		
Total Targeted Population	<b>7,500</b>		

## Risk and Security Considerations (including "management")

Does your National Society have anti-fraud and corruption policy?	<b>No</b>
Does your National Society have prevention of sexual exploitation and abuse policy?	<b>No</b>
Does your National Society have child protection/child safeguarding policy?	<b>No</b>
Does your National Society have whistleblower protection policy?	<b>No</b>
Does your National Society have anti-sexual harassment policy?	<b>No</b>

Please analyse and indicate potential risks for this operation, its root causes and mitigation actions.

<b>Risk</b>	<b>Mitigation action</b>
Procurement, Logistics, and Shipping Delays to Sabah: Transporting goods from the Peninsula to Sabah incurs high costs and potential delays, affecting timely response efforts.	MRCS deployed relevant NHQ staff to support local procurement and logistical management, prioritising the purchase of locally available items to reduce costs and expedite distribution.
Road Accidents and Health-Related Risks (Water & Vector-Borne Diseases, Non-Communicable Diseases)	MRCS minimized road-accident risks by ensuring all response vehicles were equipped with first-aid kits, monitoring road conditions to avoid hazardous routes, and maintaining clear communication on activities and movements with relevant staff. In flood-affected areas, risks of waterborne and faecal-oral diseases were addressed through community health promotion led by MRCS and branch volunteers; volunteers received guidance on disease prevention and were equipped with protective gear, including alcohol hand rub, to safeguard their health during operations.
Frequent landslides along the routes to Tenom and Keningau, coupled with heavy rainfall, increase the risk of flooding in remote areas of Beaufort. Additionally, poorly maintained road conditions further hamper access, potentially delaying the implementation of response activities.	MRCS closely monitored weather forecasts and maintained strong coordination with PKOB to anticipate potential hazards. Command Posts at MRCS branches were activated for real-time monitoring and rapid response. To ensure efficient aid delivery, suitable vehicles were utilized to navigate difficult terrain. Where



	feasible, relief items were pre-positioned at strategic locations, enabling faster distribution and minimizing delays in reaching affected communities.
Operational Management and Implementation Challenges at MRCS Chapters and Branches: Limited capacity or challenges in managing and implementing planned activities at the chapter and branch levels may impact the effective delivery of operations and intended outcomes, potentially affecting MRC's accountability and transparency.	To strengthen operational management and implementation, MRCS deployed NHQ staff as Field Coordinators, providing direct support and guidance to chapters and branches. MRCS also leveraged external surge support to augment operational capacity and ensure effective, timely execution of planned activities.
Institutional Reputation Risk : Although the political event is expected to take place on November 2025, campaign activities may begin much earlier. MRCS must uphold its Fundamental Principles to ensure accountability to affected community and maintain its neutrality and impartiality throughout the response.	MRCS strengthened the CEA approach during response implementation to ensure clear and consistent communication with affected communities and public authorities. Two-way feedback channels including help desks, hotline services, and social-media information, were put in place to address concerns and issues. These measures ensured that affected communities understood the beneficiary-selection criteria, the services to be provided, and the delivery mechanisms.

**Please indicate any security and safety concerns for this operation:**

The operation took place in a non-conflict setting but flood-related hazards, damaged roads/bridges, localized landslides, standing water/strong currents, and seasonal mosquito-borne disease posed risks, with occasional crowding raising petty-crime exposure. MRCS mitigated these through continuous context monitoring, movement tracking, site security assessments, pre-deployment briefings, contingency plans, and required IFRC e-learning. Teams coordinated closely with PKOB, local authorities, and humanitarian actors, and applied protocols on road safety (route checks, 4WD/daylight travel), infection prevention (PPE/vector messaging), controlled site layouts, buddy systems, and discreet cash handling. One incident occurred where a volunteer vehicle was stolen during WASH operations but was recovered with police support. To prevent repetitive incidents occurring, perimeter control and liaison with police/RELA were reinforced thereafter. Overall, these measures reduced exposure and supported safe, disciplined delivery.

Some community members reported perceptions that the MRCS MPCA was being politicized by local political actors. Proactive CEA measures pre-distribution briefings on neutral, needs-based criteria; clear messaging on eligibility; and consistent information through help desks and hotlines helped minimize miscommunication and protect the operation's impartiality.

Has the child safeguarding risk analysis assessment been completed?

Yes

# Implementation



## Multi Purpose Cash

**Budget:** CHF 55,114  
**Targeted Persons:** 2,500  
**Assisted Persons:** 4,000  
**Targeted Male:** -  
**Targeted Female:** -

### Indicators

Title	Target	Actual
Number of households provided with unconditional cash assistance	500	800



## Narrative description of achievements

MRCS designed the CVA component to complement government aid and include undocumented migrants, delivering timely and flexible assistance while supporting local markets. All pre-implementation steps—including beneficiary identification, market and vendor mapping, and obtaining exceptional approval for an interim Financial Service Provider (FSP)—were completed, establishing a solid operational and accountability foundation.

The CVA intervention met or exceeded its targets while strengthening inclusion and accountability. MRCS reached 800 households with Multipurpose Cash Assistance (MPCA) against a target of 500, including eight migrant households, and provided Back-to-School support to 307 households (target 300), including five migrant households.

Readiness and compliance were reinforced through seven exceptional approvals that enabled the temporary use of the Maybank FSP, which supported 8,300 transactions over two years. Market and vendor mapping were completed within one week, followed by another week for beneficiary validation and district endorsement, reflecting a streamlined and efficient implementation process.

Operational tools and guidance for CVA were standardized through the development of a new briefing note, CVA-CEA kit, bulk SMS template, Integrity Pact, FAQ, District Office Endorsement template, and a Malay-language CVA Ranger Manual. These were complemented by a refined CVA flowchart and proportional formula that further streamlined implementation. Collectively, these tools ensured a clear understanding of the CVA process among all stakeholders and strengthened accountability measures.

Data quality was enhanced through triangulated verification involving KOBO records, JPKK-endorsed hard lists, and household checks. A total of 267 out of 800 households were sampled, and alternative data-entry methods were introduced to reduce errors and accelerate processing. Inclusion was further supported through a representative banking mechanism that allowed undocumented migrants without bank accounts to safely receive entitlements. In addition, joint CVA-procurement leadership on market and vendor mapping improved documentation, timeliness, and cross-district coordination.

A post-distribution monitoring (PDM) was conducted to assess the effectiveness, appropriateness and accountability of the cash assistance provided. Below are the key findings:

- 68 per cent of respondents understood very well and 24 per cent understood somewhat on the beneficiaries selection criteria, indicating high level clarity in communication.
- 91 per cent of the respondents felt the selection process completely fair and somewhat fair, projecting the effective communication between MRCS and people affected whom eligible for the MPCA.
- 84 per cent of respondent did not face any issues redeeming the voucher and 96 per cent were informed priorly the amount of MPCA they received.
- When asked further, the MPCA mainly used basic needs, education and hygiene items, indicating the assistance of MRCS have met the needs of the affected.

## Lessons Learnt

- Pre-agreed FSP arrangements and streamlined approvals are essential for timely cash delivery.
- Standardized CVA tools (flowcharts, manuals, templates) strengthened institutional memory, eased staff transitions, and safeguarded continuity during unforeseen absences.
- Cross-functional involvement especially procurement in market/vendor mapping improved data accuracy, shortened turnaround, and deepened shared ownership.
- The representative banking mechanism underpinned by consent and accountability documentation effectively included undocumented migrants and offers a replicable model under regulatory constraints.
- Clear communication lines, defined decision rights, and regular feedback between NHQ and chapters are critical; any temporary delegation should be formally documented and communicated to avoid gaps or duplication.
- Managing workloads, scheduling rest, and providing psychosocial support are vital to sustain team performance. Furthermore, adaptive scheduling in response to flooding demonstrated operational flexibility that should be institutionalized for future emergencies.
- Combining KOBO-based verification with physical validation and alternative data entry reduced errors and improved data reliability
- Perceived politicization can be mitigated but not eliminated through proactive, neutral, and consistent CEA such as early briefings on needs-based criteria, clear eligibility messages, visible help desks/hotlines, and repeated reminders of MRCS's impartiality reduced misinformation and protected trust.
- Migrant inclusion targets require early, formalized buy-in from local authorities to avoid last-minute resistance. Future operations should secure written endorsements on inclusion criteria, pair them with Do No Harm and PGI briefings, and maintain alternative referral/verification pathways.



## Challenges

- Administrative approvals especially finalizing the FSP and securing multi-level authorizations were essential for compliance but delayed disbursements and extended the overall timeline.
- Concurrent flooding disrupted implementation: authorities and communities were occupied with response, some areas were temporarily inaccessible, and activities had to be rescheduled to reflect safety constraints.
- State-level data-cleaning capacity constraints slowed preparation of draft beneficiary lists. Combined with environmental pressures, this created high workload, fatigue, and stress among chapter staff and volunteers during verification.
- For undocumented migrants, the representative banking solution ensured inclusion but added extra verification and documentation, extending processing times.
- An interim focal-point arrangement in Sabah introduced due to overlapping commitments, led to communication gaps and tension between NHQ and chapter teams; Operations Manager mediation restored alignment and collaboration.
- During a brief period of staff unavailability within the CVA function, duties were reassigned to the WASH Officer as an interim measure. This planned reallocation, coupled with strengthened cross-team coordination and HQ–chapter support, preserved operational continuity, service quality, and accountability standards.
- Some community members reported perceptions that the MRCS MPCA was being politicized by local political actors. Proactive CEA measures pre-distribution briefings on neutral, needs-based criteria; clear messaging on eligibility; and consistent information through help desks and hotlines helped minimize miscommunication and protect the operation’s impartiality.
- Despite MRCS briefings on impartial, needs-based targeting, Village Development and Security Committees were reluctant to adopt the proposed 10% migrant inclusion due to contextual sensitivities. In line with the Do No Harm principle and local approvals, MRCS proceeded with partial inclusion; eight migrant households ultimately received MPCA.



**Budget:** CHF 4,260

**Targeted Persons:** 7,500

**Assisted Persons:** 4,826

**Targeted Male:** -

**Targeted Female:** -

## Indicators

Title	Target	Actual
Number of people reached through primary health care / outreach services / mobile units / clinics operated by the National Society.	7,500	4,826
Number of people reached with mental health and psychosocial services (MHPSS) from IFRC Network	7,500	4,826

## Narrative description of achievements

### Health Promotion or Basic Health Screening Services

The MRCS Sabah Chapter, with support from the respective District Health Offices, conducted a series of health screening activities in Beaufort, Keningau, and Tenom in June 2025 as part of the flood response efforts. Across the three districts, a total of 1,226 individuals benefited from the health screenings.

Services provided included blood pressure, glucose, body mass index (BMI), and cholesterol checks. Additional Pap smear tests were conducted for women in Keningau, while malaria screening was carried out for 100 randomly selected participants in Tenom using Rapid Diagnostic Tests (RDT), given the historical risk of malaria following floods. Participants identified as being “at risk” were referred to nearby health facilities for further assessment and follow-up care.

In addition, 1,000 Information, Education and Communication (IEC) materials were distributed in Beaufort, and 100 units each in Keningau and Tenom, to raise awareness on preventive health and hygiene practices.

### Mental Health and Psychosocial Support (MHPSS)



With a budget of CHF 4,260, the MHPSS intervention aimed to reach 7,500 people through a range of activities, including refresher training, Psychological First Aid (PFA), mental health screening, dissemination of Information, Education and Communication (IEC) materials, and the establishment of Child-Friendly Spaces (CFS).

A refresher training on MHPSS was conducted in Sabah, benefiting 18 participants. The MHPSS team further provided direct services through the implementation of PFA, mental health screenings using the PHQ-9 tool, and the establishment of CFS in the three districts of Beaufort, Keningau, and Tenom. In total, 1,226 individuals were reached through these direct services (Beaufort: 686; Keningau: 264; Tenom: 276). These activities were primarily conducted during beneficiary registration days in each district.

The Child-Friendly Space (CFS) initiative provided children with a safe, structured, and supportive environment during the flood response. Activities in the CFS included a “snake and ladder” game designed to promote social interaction, teamwork, and positive coping skills. Coloring sessions encouraged creative expression, relaxation, and emotional well-being, while Lego play proved both popular and impactful, fostering emotional regulation, cognitive development, and social interaction through creative and collaborative play.

#### Dissemination of IEC Materials

To complement these activities, MHPSS-related IEC materials—sourced from the remaining balance of the Northeast Monsoon flood operation—were disseminated to raise awareness and provide practical guidance on psychosocial well-being in disaster contexts, particularly during floods. A total of 1,200 IEC materials were distributed across Beaufort, Keningau, and Tenom.

In total, 4,826 individuals benefited from the MHPSS services delivered across the three districts in Sabah. The successful implementation of these activities was made possible through strong collaboration with local authorities, active participation of community members, and the dedicated efforts of MRCS volunteers, ensuring effective and inclusive service delivery.

Below are the key PDM findings:

- 98 per cent of the respondents interviewed agreed that the health screening activities meet the health needs and they were given consultation after the screening.
- Based on the PDM survey, MHPSS activities received equal number of participants from both gender.
- 92 per cent agreed the MHPSS improve their wellbeing after the flood happened.

## Lessons Learnt

- The health screening activities highlighted the importance of early coordination and clear communication with District Health Offices (DHOs) to ensure smooth implementation. The initial coordination gaps observed in Beaufort, which led to overcrowding and long waiting times, underscored the need for structured pre-event logistics planning and clear role delineation among partners. These issues were successfully addressed in subsequent activities through final coordination meetings and on-site logistics discussions with DHOs, resulting in improved organization and service flow in Keningau and Tenom.
- In Tenom, the limited number of consultation counters due to the shortage of Medical Assistants (MAs) and Medical Officers (MOs) required real-time adaptation. Following discussions with the DHO, the team allowed participants with normal screening results to forgo consultations, which effectively reduced waiting times and eased congestion. This demonstrated the importance of flexibility and adaptive decision-making in field operations.
  - Moving forward, MRCS will plan these activities earlier and consider conducting them within the respective villages, rather than gathering all participants at a single central location. This approach will enhance accessibility, ensure inclusivity, and enable more equitable delivery of healthcare services to vulnerable groups.
- For MHPSS services, proper site mapping and layout planning, particularly at the CFS points should be prioritized to ensure the safety and comfort of young children participating in psychosocial activities. MHPSS interventions must be guided by the Do No Harm principle, emphasizing the protection of community safety, dignity, and rights throughout implementation.
- Volunteer recruitment should focus on capacity building by engaging individuals with basic literacy or training in MHPSS interventions during disaster response, further reinforcing ethical and responsible service delivery.

## Challenges

- During the health screening activity in Beaufort, limited coordination with the District Health Office resulted in only one health screening station being opened, leading to long waiting times, overcrowding and restlessness among participants. This experience highlighted the importance of early coordination and clear communication with health authorities to ensure smooth planning and implementation. These gaps were successfully addressed in subsequent activities through final preparatory meetings and on-site logistics discussions, which improved organization and service flow in Keningau and Tenom.
- In Tenom, the limited number of consultation counters was due to a shortage of Medical Assistants (MAs) and Medical Officers (MOs) from the District Health Office. After consulting with the District Health Office, the team promptly adapted by allowing participants with



normal screening results to forgo consultations, which effectively reduced waiting times and eased congestion.

- Additionally, feedback from communities revealed that some bedridden and persons with disabilities were unable to travel to the programme site for health screening.
- The most common issues encountered by MHPSS included an insufficient number of volunteers, particularly for managing children's activities which affected effective supervision and coordination. Limited space at certain venues and a shortage of verification stamps caused delays, congestion, and long waiting times for participants.
- Overcrowding was also observed as many participants arrived outside their scheduled times, disrupting the movement between stations. In Tenom, unclear directions led to some participants missing the MHPSS station, resulting in additional confusion and congestion.



## Water, Sanitation And Hygiene

**Budget:** CHF 43,452

**Targeted Persons:** 7,500

**Assisted Persons:** 19,580

**Targeted Male:** -

**Targeted Female:** -

### Indicators

Title	Target	Actual
Number of households reached with WASH actions in emergency response	1,500	3,916
Number of people covered with hygiene promotion activities	7,500	7,865
Number of litres of safe water distributed through RCRC emergency water supply (cumulative)	525,000	111,220

### Narrative description of achievements

WASH activities targeted 7,500 people through the provision of safe water, hygiene kits, and hygiene promotion activities. Despite initial administrative delays and operational constraints, the operation achieved significant results across the three target districts.

#### Distribution of Clean Water

A total of 111,220 litres of treated water was supplied through water trucking and two temporary treatment units. Although this was below the original target of 525,000 litres, coverage was revised in coordination with district and state water departments to prevent overlap with government services. This ensured continuous access to safe water for 150 households identified by local authorities.

#### Hygiene Promotion and Hygiene Kit Distribution

Hygiene promotion activities reached 7,865 people (1,573 households), exceeding the target of 7,500 people. Participatory methodologies such as Glo-Germ handwashing demonstrations, three-pile sorting, and the F-diagram were used to reinforce safe water handling, personal hygiene, and sanitation behaviours. A total of 1,573 WASH IEC materials were also distributed during the promotion sessions to strengthen community awareness and practice.

Distribution of hygiene kits was carried out in Tenom and Keningau districts, reaching 1,000 households (5,000 people). The distribution was complemented with hygiene promotion messages to reinforce safe water handling, personal hygiene, and sanitation practices. This integrated approach ensured that the intervention was not only material-based but also supported sustained behavioural change at the community level.

The Singapore Red Cross played an important role in supporting the operation by providing both financial contributions and technical resources. Their support included four Roamfilter Ultra and five Roamfilter Plus portable water filtration units, which were deployed in Keningau and Tenom, benefiting approximately 1,256 people.



Throughout the implementation, the MRCS WASH Core Team coordinated closely with district authorities and the Sabah State Water Department to ensure complementarity and avoid duplication of services. Strong field coordination and active community engagement were key to maintaining alignment with local government efforts and ensuring the smooth continuation of activities despite multiple external challenges.

Below are the key PDM findings:

- 98 per cent of respondents agreed that the information provided via WASH intervention helped to enhance their knowledge on hygiene and health, including their family members.
- 67 per cent of respondents received guidance/briefing before receiving the hygiene kit, while the rest said no or couldn't remember. This highlights an opportunity to improve briefing consistency to ensure all recipients understand the usage and purpose of the hygiene kit
- 80 per cent of the respondents that received water distribution by MRCS claimed that the quantity was sufficient for their daily needs, while 20 per cent reported insufficient quantity due to the size of their households.

## Lessons Learnt

- Early and multi-level coordination with local and state authorities is critical to prevent administrative bottlenecks and conflicting directives. Future responses would benefit from obtaining written agreements and conducting joint site assessments to ensure clarity on operational responsibilities and permissions.
- The operation also highlighted the importance of contingency planning, particularly in ensuring alternative water supply mechanisms such as pre-arranged water trucking contracts. These options are vital when equipment deployment is delayed due to weather or safety concerns.
- The need for a standardized camp security protocol. Measures such as enhanced lighting, regular patrols, clear communication systems, and equipment checklists should be integrated into all field operations from the outset.
- Community engagement emerged as one of the strongest aspects of this operation. Training community members on the use and maintenance of portable filtration units fostered ownership and strengthened resilience at the local level. This approach ensures that access to safe water can be sustained beyond the emergency phase.

## Challenges

- The operation experienced a two-week start-up delay after the Sabah State Water Department requested additional verification of treated-water quality. While district-level discussions had initially indicated approval, subsequent clarification on formal permissions, amid administrative inconsistencies postponed commencement until documentation and testing requirements were satisfied.
- Heavy rainfall and rising water levels necessitated temporary relocation of the base camp, with pack-down, site transfer, and re-establishment interrupting production and delivery schedules.
- A security incident where an attempted vehicle theft at the base, triggered immediate risk-control measures.



## Protection, Gender And Inclusion

**Budget:** CHF 533

**Targeted Persons:** 7,500

**Assisted Persons:** 19,581

**Targeted Male:** -

**Targeted Female:** -

## Indicators

Title	Target	Actual
Number of staff and volunteers trained in PGI including referrals.	35	18
Number of National Society's Programmes that have completed the IFRC Child Safeguarding Risk Analysis.	1	1



## Narrative description of achievements

### PGI Training for Volunteers

A total of 18 volunteers were trained in Sabah through the PGI in Emergencies Refresher Course held at the MRCS Sabah Chapter, marking a significant step forward in strengthening the state's readiness and capacity for inclusive humanitarian response. The training enhanced participants' understanding of PGI Minimum Standards, referral pathways, and inclusive service delivery, ensuring that all interventions remained safe, accessible, and responsive to the needs of diverse groups within the community.

### Sex, Age, and Disability-disaggregated (SADD) Data Collection and Child Safeguarding Risk Analysis

In parallel, SADD data were systematically collected to identify at-risk groups and tailor assistance accordingly. A Child Safeguarding Risk Analysis was also completed, outlining potential risks in operations and recommending follow-up actions in line with IFRC safeguarding standards.

Importantly, migrant inclusivity was operationalized through adapted targeting and delivery approaches, such as the use of representative banking for undocumented recipients. This ensured that assistance remained impartial and needs-based for all affected communities, regardless of legal status or background.

Overall, MRCS reached a total of 19,581 people through the DREF intervention, delivering assistance that upheld dignity, safety, and inclusion. By applying PGI Minimum Standards, using SADD to inform targeting, and maintaining appropriate referral pathways and safeguarding mechanisms, including Protection from Sexual Exploitation and Abuse (PSEA), MRCS ensured that humanitarian services were accountable and responsive to the diverse needs of the affected population.

## Lessons Learnt

- Keeping SADD data collection concise and linking it to specific programme triggers such as targeting, monitoring, or feedback mechanisms helped teams recognize its immediate relevance.
- Conducting early dialogue with community leaders and establishing clear, transparent eligibility criteria helped manage sensitivities during beneficiary selection. In contexts where cash assistance was not feasible due to verification or banking challenges, in-kind support, services, and referrals were adopted as alternatives to maintain continuity of assistance while upholding do-no-harm principles.
- The DREF intervention in Keningau, Tenom, and Beaufort, Sabah demonstrated the value of localized engagement. Community-based approaches allowed for stronger participation and contextual adaptation, ensuring that activities remained relevant to local needs and capacities.

## Challenges

- SADD data collection proved challenging as some field teams perceived the process as burdensome and were uncertain about its practical value for programme adaptation. This perception led to gaps in data completeness and consistency, limiting its use for real-time decision-making.
- Despite MRCS briefings on impartial, needs-based targeting, some Village Development and Security Committees were reluctant to include the proposed 10 per cent migrant quota, citing contextual sensitivities and community acceptance. In line with Do No Harm and local approvals, MRCS proceeded with partial inclusion, and eight migrant households ultimately received MPCA. This constraint limited equitable access for a subgroup identified as vulnerable.



## Education

**Budget:** CHF 9,585

**Targeted Persons:** 1,500

**Assisted Persons:** 753

**Targeted Male:** 290

**Targeted Female:** 463

## Indicators

Title	Target	Actual
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Number of households receiving any form of education support provided by the National Society.	300	307
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## Narrative description of achievements

### Distribution of Vouchers

The education intervention was implemented to support children from flood-affected households through the distribution of vouchers worth RM150 (CHF 29) per household to 307 households. These households included a total of 753 school-aged children (290 male and 463 female). The initiative aimed to reduce the financial burden of purchasing school supplies and to ensure that affected children could resume their education without disruption.

Early sensitization was conducted with communities through village committees (Jawatankuasa Pembangunan dan Keselamatan Kampung – JPKK) and vendors to explain the voucher system, redemption process, and accountability mechanisms. This preparatory engagement helped build understanding and trust among community members and partners involved in the process.

During the initial implementation, some beneficiaries were unable to attend the designated programme day due to mobility constraints and recurring floods. In response, the MRCS team adapted its delivery strategy to ensure inclusivity and timely support. Vouchers were distributed directly to beneficiaries through two approaches:

- (1) via agreed, designated meeting points coordinated with JPKK leaders, and
- (2) direct delivery to beneficiaries' homes for those unable to travel.

This flexible approach ensured that no eligible household was left behind. As heavy rains caused renewed flooding in several areas, the team also extended the voucher redemption period by two weeks, allowing beneficiaries adequate time to redeem their assistance safely. This adaptive management approach maintained the relevance, accessibility, and accountability of the intervention, reflecting MRCS's commitment to a community-centered response.

### Key PDM Findings

PDM findings revealed that education was the second largest expenditure category among CVA recipients (66 responds) out of 120 respondents that received education assistance. In follow-up queries, beneficiaries reported redeeming assistance primarily at designated local supermarkets, aligned with MRCS's arrangement for education-linked CVA to be redeemed at pre-identified vendors selected through the vendor assessment.

## Lessons Learnt

- Flexibility in delivery methods proved essential to ensuring program continuity under unpredictable environmental conditions. Early community sensitization through local leaders strengthened trust, improved participation, and enhanced accountability.
- Extending redemption deadlines and adopting mixed distribution strategies (centralized and door-to-door) ensured full coverage and equity in access. Future voucher-based interventions should include built-in flexibility clauses in vendor contracts to accommodate such extensions in similar emergencies and through pre-agreed vendor arrangements accelerate school supply support after disasters.

## Challenges

- Intermittent flooding and accessibility issues limited community movement and delayed the initial redemption process. Additionally, the unavailability of some beneficiaries during the scheduled distribution days required operational adjustments and additional field visits, which extended the implementation timeline. Coordinating multiple distribution modalities also required close communication with JPKK and local leaders to ensure transparency and consistency.



## Migration And Displacement

**Budget:** CHF 533

**Targeted Persons:** 500

**Assisted Persons:** 13

**Targeted Male:** -

**Targeted Female:** -



## Indicators

Title	Target	Actual
Number of staff and volunteers trained in Migration & Displacement.	35	18
Number of people reached - Migration	500	13

## Narrative description of achievements

Migration support was mainstreamed primarily through the CVA component to ensure that undocumented migrants affected by the floods were not excluded from humanitarian assistance. MRCS implemented a representative banking mechanism that enabled cash transfers to migrants without formal identification or bank accounts. Funds were channelled through verified community representatives—typically family members or village leaders—based on written consent and beneficiary verification forms, ensuring accountability and protection measures were upheld.

Through this inclusive approach, MRCS successfully assisted eight migrant households under the MPCA and five migrant households under the Back-to-School education support. These efforts demonstrated MRCS's commitment to impartial humanitarian action and reinforced its auxiliary role in addressing the needs of all affected populations, regardless of legal status.

To further strengthen staff and volunteer capacity in delivering inclusive responses, MRCS conducted a refresher training focused on migration-sensitive programming, humanitarian principles, and accountability mechanisms. While 35 participants were initially targeted, 18 representatives from the implementation districts attended the session. The training provided an opportunity to review field lessons, discuss challenges in engaging migrant communities, and enhance understanding of operational procedures for inclusive assistance.

## Lessons Learnt

- Early and continuous sensitization of local authorities is critical to promoting acceptance of inclusive assistance for all affected populations. Establishing clear communication that emphasizes MRCS's neutral and humanitarian mandate helps reduce resistance to migrant inclusion.
- The representative banking mechanism remains an effective model for reaching undocumented migrants while maintaining accountability and transparency. However, it requires strong coordination with community leaders and consistent documentation to ensure compliance.
- The refresher training reinforced the value of sustained learning for staff and volunteers engaged in migration-related interventions. To maximize impact, future capacity-building sessions should include flexible scheduling and decentralized delivery to improve participation rates. Institutionalizing periodic refresher training on inclusive programming will further strengthen MRCS's readiness and operational consistency in addressing migrant needs.

## Challenges

- Initial engagement with local authorities revealed reluctance among some stakeholders to include undocumented migrants in the beneficiary lists. Despite detailed explanations and sensitization on humanitarian principles, certain authorities expressed hesitation due to administrative and legal sensitivities. This required sustained advocacy and negotiation to uphold the principle of inclusivity.
- Verification and documentation of migrants without identification were also time-intensive, requiring validation through JPKK and community intermediaries. Furthermore, turnout for the refresher training was lower than planned, as overlapping operational duties and travel constraints limited attendance from several district representatives. This reduced the opportunity for broader knowledge dissemination across all targeted branches.



## Community Engagement And Accountability

**Budget:** CHF 4,739

**Targeted Persons:** 7,500

**Assisted Persons:** 19,579

**Targeted Male:** -

**Targeted Female:** -



## Indicators

Title	Target	Actual
Number of staff, volunteers and leadership trained on community engagement and accountability.	35	18

## Narrative description of achievements

### CEA Refresher Training and Beneficiaries Sensitization

CEA activities were embedded across all sectors to ensure that affected communities remained informed, engaged, and able to provide feedback throughout the operation. Prior to implementation, 18 Chapter staff and volunteers received a CEA refresher to ensure two-way communication, safe participation, and accountable decision-making throughout the flood response in Beaufort, Keningau, and Tenom. MRCS carried out sensitization sessions on cash assistance, working through community leaders to strengthen understanding of the assistance process, eligibility criteria, and accountability mechanisms. During these sessions, MRCS established verification processes through Village Development and Security Committees to validate beneficiary lists and ensure community participation in decision-making.

### Social Media and Fundraising Campaign

To enhance transparency and public awareness, MRCS also launched social media and fundraising campaigns that shared information on the operation's objectives, progress, and impact. This open communication helped foster public trust and accountability while demonstrating responsible stewardship of resources.

Recognizing that cell phone connectivity was limited in some areas, particularly in Beaufort, the team adapted its approach by conducting village committee visits and engaging in face-to-face or word-of-mouth communication. This ensured that critical information and updates continued to reach communities without disruption.

### Community Feedback Mechanism

At the chapter level, designated personnel were appointed to manage and respond to community feedback, inquiries, and complaints. This structure ensured that community voices were heard and addressed systematically, reinforcing MRCS's commitment to transparency and responsiveness. MRCS received 540 feedback entries from beneficiaries regarding the assistance, all of which were recorded and acted upon as required.

Through two-way communication and accessible feedback channels, MRCS engaged 19,581 people with clear, timely information on eligibility and services, logged and resolved community feedback, and adapted activities based on community input, thereby strengthening trust and accountability.

The Planning, Monitoring, Evaluation, and Reporting (PMER) focal person assisted in overseeing feedback handling and documentation, ensuring that feedback was received, recorded, and escalated appropriately, as MRCS currently has no dedicated CEA focal person.

## Lessons Learnt

- Early investment in dedicated CEA staff and systems significantly improves trust, transparency, and operational efficiency. Assigning clear focal persons exclusively for feedback management ensures continuity and accountability. Combining digital tools such as SMS and social media with in-person community engagement proved essential in maintaining inclusivity, especially in low-connectivity environments.
- Future responses should formalize CEA structures at both national and chapter levels, with predefined protocols for feedback collection, documentation, and response.

## Challenges

- Limited network coverage in rural and flood-affected areas disrupted the flow of information and delayed feedback collection. The reliance on alternative communication methods, while effective, required additional time and field presence from volunteers. Inconsistent feedback documentation across districts also made centralized tracking more complex.





**Budget:** CHF 21,096

**Targeted Persons:** 1

**Assisted Persons:** 1

**Targeted Male:** -

**Targeted Female:** 1

## Indicators

Title	Target	Actual
Number of surge deployed to support the operation	1	1
Number of technical support and monitoring visit conducted	1	1

## Narrative description of achievements

IFRC Secretariat support played a central role in ensuring effective coordination, technical oversight, and operational accountability throughout the DREF operation. In line with the priority actions outlined in the operational update, MRCS Headquarters maintained close coordination with the Sabah Chapter, IFRC APRO, the IFRC Country Cluster Delegation (CCD), and the Singapore Red Cross, ensuring that operational progress remained consistent with established plans and standards.

Regular coordination meetings and structured reporting mechanisms were implemented between the national and chapter levels to track implementation status, address administrative bottlenecks, and provide updates to the IFRC. The MRCS Secretariat, through the Disaster Management and PMER units, ensured that field data and financial expenditures were consolidated and reported accurately within the DREF framework.

Technical and administrative support from the IFRC and deployed surge personnel (Operations Manager) provided continuous guidance on operational procedures, financial compliance, procurement, and data management. These collaborative mechanisms strengthened the capacity of MRCS staff at both national and state levels to manage multi-sector operations more effectively. The Secretariat also facilitated liaison with external partners and national authorities, ensuring alignment with local government coordination structures.

Batches of photo assets:

Photo 1: [https://shared.ifrc.org/collections/\\_13Y0mDG7](https://shared.ifrc.org/collections/_13Y0mDG7)

Photo 2: [https://shared.ifrc.org/collections/\\_VPvOKM5q](https://shared.ifrc.org/collections/_VPvOKM5q)

Advocacy messaging on social media:

<https://x.com/IFRCAsiaPacific/status/1906577720722722906>

<https://x.com/IFRCAsiaPacific/status/1940963002720964929>

## Lessons Learnt

- Strong internal coordination between the Secretariat, chapter teams, and IFRC technical support units ensures consistency and operational discipline. Formalizing routine coordination meetings, maintaining clear task trackers, and designating dedicated liaison officers enhance communication efficiency and accountability.
- Continuous collaboration with IFRC surge and technical delegates also strengthens institutional learning and ensures that Secretariat-level support remains responsive and adaptive to field realities.
- A brief communications strategy (drafted in collaboration with IFRC regional comms) and a clear task-tracker for communications and advocacy actions will ensure strong visibility of National Society's efforts for this (and future) DREF operation.

## Challenges

- The Secretariat team managed multiple simultaneous priorities across different departments, which at times created delays in information flow between headquarters and the field. Communication overlaps and high reporting demands occasionally strained coordination timelines.



**Budget:** CHF 37,344  
**Targeted Persons:** 1  
**Assisted Persons:** 1  
**Targeted Male:** -  
**Targeted Female:** -

## Indicators

Title	Target	Actual
National Society covers health, accident and death compensation for all of its volunteers.	1	1
Number of Lesson learned workshop conducted	1	1

## Narrative description of achievements

The operation contributed significantly to strengthening MRCS's institutional capacity and operational readiness. Through continuous technical support and guidance from the IFRC and deployed surge personnel, MRCS particularly the Sabah Chapter enhanced its capabilities in coordination, technical delivery, and documentation. This peer-to-peer support model fostered practical learning, enabling the team to translate knowledge into effective field application.

A series of refresher trainings was conducted across multiple thematic areas, including Protection, Gender and Inclusion (PGI), Community Engagement and Accountability (CEA), WASH-Hygiene Promotion, and Cash and Voucher Assistance (CVA), with specific focus on the CVA ranger system, vendor engagement, and procurement processes. These sessions strengthened both technical understanding and inter-departmental collaboration at chapter and national levels.

In addition, MRCS received support in communication strategy and data analysis, improving the accuracy of reporting and enabling timely, evidence-based decision-making. The experience reinforced MRCS's institutional capacity for information management and stakeholder communication, supporting greater efficiency and credibility in future response operations.

In early July, MRCS also successfully conducted a Lessons Learned Workshop. The workshop brought together 19 staff and volunteers from the National Headquarters, Chapters, and district volunteers, along with two IFRC personnel (the DREF Coordinator and the Surge Operations Manager) and one PMER representative from the Hong Kong Red Cross, Branch of the Red Cross Society of China.

## Lessons Learnt

- Peer-to-peer technical support between the IFRC, Surge personnel, and MRCS staff proved an effective mechanism for skill transfer and organizational strengthening. Continuous refresher training across key sectors ensured operational consistency and sustained institutional knowledge.
- Moving forward, maintaining a trained roster of surge-ready personnel, supported by standardized refresher training cycles and embedded data analysis capability, will enhance preparedness, cross-sector coordination, and long-term institutional resilience.

## Challenges

- Temporary role reassignments and limited surge capacity placed additional pressure on existing personnel, requiring multitasking and adaptive coordination. While peer-to-peer mentoring accelerated capacity development, balancing training delivery with operational implementation proved demanding within the available timeframe.

# Financial Report

## DREF Operation

Selected Parameters			
Reporting Timeframe	2025/3-9	Operation	MDRMY012
Budget Timeframe	2025/3-7	Budget	APPROVED

Preliminary Final FINANCIAL REPORT

Prepared on 31/Oct/2025

All figures are in Swiss Francs (CHF)

### MDRMY012 - Malaysia - Floods

Operating Timeframe: 28 Mar 2025 to 31 Jul 2025

#### I. Summary

<b>Opening Balance</b>	<b>0</b>
<b>Funds &amp; Other Income</b>	<b>176,654</b>
DREF Response Pillar	176,654
<b>Expenditure</b>	<b>-164,496</b>
<b>Closing Balance</b>	<b>12,158</b>

#### II. Expenditure by planned operations / enabling approaches

Description	Budget	Expenditure	Variance
PO01 - Shelter and Basic Household Items			0
PO02 - Livelihoods			0
PO03 - Multi-purpose Cash			0
PO04 - Health			0
PO05 - Water, Sanitation & Hygiene			0
PO06 - Protection, Gender and Inclusion			0
PO07 - Education			0
PO08 - Migration			0
PO09 - Risk Reduction, Climate Adaptation and Recovery	176,654	164,496	12,159
PO10 - Community Engagement and Accountability			0
PO11 - Environmental Sustainability			0
<b>Planned Operations Total</b>	<b>176,654</b>	<b>164,496</b>	<b>12,159</b>
EA01 - Coordination and Partnerships			0
EA02 - Secretariat Services			0
EA03 - National Society Strengthening			0
<b>Enabling Approaches Total</b>			<b>0</b>
<b>Grand Total</b>	<b>176,654</b>	<b>164,496</b>	<b>12,159</b>

[Click here for the complete financial report](#)

## Please explain variances (if any)

The total allocation for this operation was CHF 176,654, with total expenditure recorded at CHF 164,496, representing 93 per cent utilisation of the allocated budget. The remaining balance of CHF 12,159 will be returned to the DREF fund. For more details, please refer to the attached final financial report.

For relief items, construction and supplies, all activities were implemented as planned. Under medical and first aid, MRCS utilised medical consumables from its existing stock, while the District Health Office (DHO) under the Ministry of Health provided additional materials to support field operations. As these items were drawn from pre-positioned stock and in-kind contributions, no additional expenditure was



recorded under this budget line. Similarly, for other supplies and services, the activities were carried out, but the related expenses were charged under general expenditure and transfers to MRCS, in line with MRCS's financial reporting structure that consolidates certain shared operational costs.

Under logistics, transport and storage, expenditure utilisation stood at approximately 23 per cent of the budget. The lower recorded spending does not reflect a lack of implementation, as transportation and delivery of relief supplies were undertaken as planned. However, much of the associated cost was absorbed under other budget lines, particularly general expenditure and transfers to MRCS. This was due to the integration of transport and handling expenses into broader operational costs at headquarters and branch levels. Additionally, MRCS optimised the use of existing vehicles and logistical resources at state and district branches, reducing the need for additional transport expenditure.

For personnel, no expenditure was recorded under this budget category. The international personnel cost for the SURGE Operations Manager was covered through the Regional Deployment Fund, while national staff support was provided through MRCS's existing structure. As such, all personnel-related activities were implemented, but financed through alternative funding sources rather than this DREF allocation.

Under general expenditure, the operation recorded higher-than-budgeted spending. This variance resulted mainly from increased travel and coordination costs between MRCS Headquarters in Kuala Lumpur and the operational areas in Sabah. The considerable geographical distance required several monitoring and coordination visits by HQ staff, leading to higher costs for travel, accommodation, and related logistics. Additionally, certain shared operational expenses, including office services, utilities, and volunteer-related support, were consolidated under this line as they could not be easily disaggregated into specific activity categories.

For contributions and transfers, the amount transferred exceeded the original budget. This variance reflects both expanded operational reach and reallocation of field-level expenditures under this line. During implementation, the operation assisted 19,580 people, significantly exceeding the initial target of 7,500 people. The expanded response required additional financial transfers to MRCS to cover operational and logistical costs incurred at branch level.

Overall, all planned activities were fully implemented, with some expenditures reclassified under different budget lines due to MRCS's accounting structure and the practical realities of field operations. The operation achieved its objectives effectively, and the remaining balance of CHF 12,159 will be returned to the DREF fund.

Note: This report may be republished should there be a need, specifically to reflect any revisions to the preliminary final financial report.



# Contact Information

For further information, specifically related to this operation please contact:

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